

MINUTES OF COMMUNITY PHARMACY DERBYSHIRE COMMITTEE MEETING

held on

Tuesday 21st November 2023

Peak Pharmacy Head Office, Bolsover

MEMBER	CATEGORY	21.9.23	21.11.23
Andrea Smith, Chair	AIMp	✓	✓
Darryl Dethick Treasurer	AIMp	✓	✓
David Evans Vice Chair	AIMp	✓	✓
Ben Eaton	AIMp	✓	✓
Nitin Lakhani	Independent	A	✓
Matthew Hind	Independent	✓	✓
Lindsey Fairbrother	Independent	A	✓
Yasir Pirmohamed	Independent	✓	✓
David Holmes	CCA	✓	✓
Bethan Chamberlain	CCA	✓	A
Amanda Kelly	CCA	A	✓
Khuram Ahmad	CCA	A	✓
Nick Hunter Chief Officer	Officer	✓	✓
Amanda Alamanos Engagement Lead	Officer	✓	✓
Chris Kerry GPCPCS lead	Officer	✓	✓

✓ Present / A Apologies for absence / Absent X / R Resigned/ S sick/ N/A Not applicable * Member unable to attend all or part of meeting due to attendance at a meeting elsewhere on behalf of the LPC on the same day.

1.	Welcome/Apologies/Introductions/Announcements Guests
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		<ul style="list-style-type: none"> ▪ Shazia Patel, Community Pharmacy Clinical Lead (SP) ▪ Caroline Barraclough, CPPE (CB) ▪ Ben Milton, Medical Director, Derby & Derbyshire LMC (BM)
	<u>1.1</u>	Andrea welcomed everyone to the meeting
	<u>1.2</u>	Apologies received from Bethan Chamberlain. Alison Ellis was in attendance to take minutes due to Katherine Newman absence. Guests attended the meeting for the open agenda.
2.		Declaration of Interests (DoI)
	<u>2.1</u>	<p>No additional declarations were received. All members have completed the declarations and were reminded to update when needed.</p> <p>DE raised that Leicester County Council are tendering for price (smoking cessation, flu, EHC) – think that will come to Derbyshire too - need to be aware as cannot discuss fixing a price in the LPC as could be bidding against each other and considered anticompetitive.</p> <p>Nothing on the agenda that is a governance concern.</p>
3.		Approval of minutes from previous meeting
	<u>3.1</u>	The minutes of the meeting held on Thursday 21 st September 2023 were agreed as a true and accurate record. AS reported that they had also been checked with regards to competition law.
4.		Matters arising from previous meeting
	<u>4.1</u>	<p>AGM Rowlands and Boots raised queries and these were answered by DD and then postal votes sent through. All votes received agreed the accounts. These have now been finalised and closed.</p> <p>Katherine Newman update AS has been in contact with KN and continues to be updated by the family.</p> <p>Clyde and Co re employer advice AA has contacted Clyde & Co and obtained documents and advice that is needed regarding sickness and contracts.</p> <p>Peter Cattee long service and leaving gift DD organised a card and gift and Peter asked for his thanks to be sent to the committee.</p> <p>PharmOutcomes access AA and NH have passwords for PharmOutcomes and can now access the right areas.</p> <p>CPE webinar and vision document Members were asked and reminded to watch the price concessions webinar and read the vision document.</p> <p>Strategy AS sent through the updated strategy document and received some replies – on the agenda.</p>

	<p><u>ARCH</u> Contract closes at end December 2023. Caroline has left so only Matt covering the work at the moment. Asked them if they would be able to add in social media and they said it would be chargeable as extra work. Felt that Priest & Co would offer better value for money and work together more.</p> <p><u>Meeting invites</u> These will be sent out after the meeting today as the dates need to be confirmed.</p> <p><u>Document folders for info and action on meeting agenda</u> Need to look at this for January meeting as there were no documents for information at this meeting – also need to check access as some members were unable to open documents.</p>
5.	Recognition of CPD by ICB
<u>5.1</u>	Finally received confirmation of recognition by the ICB – this has been done at East Midlands level via PODs team.
6.	Agenda items
	<p>Market Entry applications</p> <p><u>6.1</u> Contract amendments From: Lloyds Pharmacy To: LP SD One hundred Twenty One Ltd At: 5 Vernon Street, Derby, DE1 1FR From 24.10.23 Problem is with the PCSE team as they had a separate team to look at the Lloyds change of ownerships.</p> <p><u>6.2</u> Update on market entry from CK / NH / AA Been escalated to Gordon Hockey, CPE and CLOT meeting Asked members to send through any known application changes in their areas that they are notified of so that the LPC can see where they have been missed of the notifications and then can raise specific applications with PCSE. AE / CK will keep chasing contacts at Primary Care Contracts for updated lists to ensure that everything is up to date re contractors. Newsletter article - wondered whether could add something into the newsletter asking for any info on change of ownership but this probably wouldn't reach those that it needed to as would be to the old email.</p> <p>Action: Members asked to let AE/CK know of any contract applications / changes that they receive through so can check if CPD have received too.</p> <p>Action: CK/AE will keep chasing with Primary Care Contracts team re updated contractor lists.</p>

7.	7.1	<p>Finance and Audit</p> <ul style="list-style-type: none"> ▪ <u>September / October 2023 accounts</u> <p>Account 1 = £118,614.40 Account 2 = £161,748.75 Account 3 = £53,166.01</p> <p>Levy holiday November and December 2023 Expenses – only had 2 or 3 members claim for September 2023</p> <p>Budget for next 2024/25 – needs to be shared with ICB a month before the start of financial year. Use the Zero-based budget every 3 years. Budget will be reviewed at the audit committee at the beginning of January and then approved at January 2024 meeting.</p> <table border="1" data-bbox="279 817 1516 929"> <tr> <td>Action Budget to be discussed and approved at the January 2024 committee meeting</td> </tr> <tr> <td>Action: Members asked to ensure send through expenses for attending meetings asap</td> </tr> </table> <p>Balance may be a concern as holding more than should be – have 9-10 months reserve and should be 6 months at most. Will be clarified in the governance guidance and self-assessment – CPE have on agenda for their November meeting.</p>	Action Budget to be discussed and approved at the January 2024 committee meeting	Action: Members asked to ensure send through expenses for attending meetings asap
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	7.2	<ul style="list-style-type: none"> ▪ <u>Finance briefing and guidance update</u> <p>All members have received the link to the finance briefing documents. There are not many changes</p> <ul style="list-style-type: none"> - Budget going to ICB month before financial year - Brand user agreement – all completed - Already use the model template for annual accounts and also wording from the expense form. - LPC finance survey – coming soon. Will then share benchmarking for LPCs to see where fitted within - Risk Register – very little but need to complete – need to add in employees and contracted staff. 		
	7.3	<ul style="list-style-type: none"> - Asset Register – 2 x laptops – only items have purchased ▪ <u>data governance – including 365, antivirus and Teams</u> <p>need to buy a new Microsoft 365 license and Antivirus package. Purchase licences etc before the January 2024 committee meeting. Need someone to pick up the accounts admin side of Darryl's role – discuss in audit meeting and decide who think should take that on. Have to individually send payments to contractors when they send through claim forms. Could PharmOutcomes be used?? Guide – nothing specified about timings of payments – currently do ad hoc when receive but could do once or twice a month so that can plan the workload. All agreed that twice a month would work best for the LPC – 10th and 25th.</p> <p>Don't have a bank card for the account so payments need to be made by expenses and then paid back.</p>		

		<p>Action: Review accounts admin at the audit committee and then bring back for discussion and approval at the January committee meeting</p> <p>Action: Microsoft 365 office licence and antivirus package to be purchased and set up prior to the January 2024 committee meeting.</p>
8.	8.1	<p>Reports (Items not included elsewhere on the agenda)</p> <ul style="list-style-type: none"> ▪ <u>Chairs Report</u> <p>Not attended any meetings since the last meeting that need feeding back on.</p> <ul style="list-style-type: none"> ▪ <u>Chief Officers update</u> <ul style="list-style-type: none"> ○ Medicines Ordering Process ○ VirtualOutcomes – HLP training fund <p>LPC historically bought licence for HLP training on VirtualOutcomes – still have funds in the trust account. Technically has a 6-year statute but trust is forever - £164,000 in trust fund.</p> <p>Use the money to cover training costs if put in claims – ??</p> <p>Options available are</p> <ol style="list-style-type: none"> 1) Virtual outcomes – agreed that not funding for all Derbyshire contractors 2) Send through an amount per contractor for training that they need 3) Put on some Face-to-face training 4) Payment for employment of AA and CK <p>The agreement was not to use for Virtual Outcomes but spend on the training of some description so in line with what was originally set up. The admin to process these claims will be claimed back from the trust funds too.</p> <ul style="list-style-type: none"> ○ EMAS referrals into CPCS <p>Nothing further to discuss – this has started.</p> <ul style="list-style-type: none"> ▪ <u>Engagement Lead update</u> - Website – updating weekly <p>Need bio's from members to be added into the committee members page. Anything that see that needs changing then let either AA or AE know.</p> <ul style="list-style-type: none"> - Newsletters – these are being sent out monthly. - Kirsten is working on LinkedIn page, Facebook and Twitter posts. <ul style="list-style-type: none"> ▪ <u>Clive Newman, Director of Primary care @ ICB</u> <p>Met to ask for confirmation of commissioning decision process and how going to liaise with LPC.</p> <ul style="list-style-type: none"> - Need to have comms with commissioners. - Raki – lead for pharmacy in ICB - AA is working with. - Hypertension case finding pop ups happened in September – all signpost to pharmacies but not had any info re actual numbers who attended. - Winter pressures toolkit being created - Pharmacy Cell – escalated that not receiving data from DMS in Chesterfield. <ul style="list-style-type: none"> ▪ <u>Services update</u> <ul style="list-style-type: none"> ○ <u>Hypertension</u> <p>Mike Jones and AA have been meeting with CPCLs</p>

	<p>ABPM's – have been talking with Well</p> <ul style="list-style-type: none"> ▪ <u>Ops Team update report</u> Only data that could get is Quarter 1 ▪ <u>GP-CPCS</u> Slight increase in practices being involved Maintaining activity at 553 referrals. Keep pushing for ITK referrals and then less NHS Mail – increasing constantly. Feel that need to be less proactive at the moment and focus on the new Pharmacy First service and the referral pathway. Chris Kerry to circulate figures by locality for GP-CPCS referrals to members <p>Lowest volume pharmacies dispense to the oldest population – 31% over 70+ - need to be aware of the risk for pharmacies.</p> <ul style="list-style-type: none"> ▪ <u>Flu</u> 169 pharmacies signed up. ▪ <u>DMS</u> Large number not actioned from UHDB and rejected – main reason is due to readmission or death of patients. Referrals come from 11 Trusts in Derbyshire and surrounding areas to pharmacies, so a lot more than previously thought – as wide as Doncaster. Claimed £16,334 out of £20,00 possible income. <p>Need to push back to CPE and NHSE that there are too many parts that are not managed by Pharmacy. Very un-joined up service. Lots of the problems regarding GDPR that stops some of the trusts should have been done at national level. Consent seems to be a problem for community trust sites.</p> <ul style="list-style-type: none"> ▪ <u>NMS</u> There has been an increase in numbers claimed. ▪ <u>BPs</u> 181 pharmacies signed up in November 2023. Dental practice been asked to take BP reading and then signpost high BP to CP. Continued complaints that community pharmacies are doing checks and then referring to GPs rather than managing in pharmacy – need to look at why?? Post payment verification checks are happening now. ▪ <u>Extended care</u> Low figures for QT1 and QT2. 2 pharmacies signed up for all services but not provided any consultations this year. UTI – inactive pharmacies in QT1 34 and QT2 – 32
	<p>OPEN MEETING</p>
	<p>Guests</p> <ul style="list-style-type: none"> ▪ Caroline Barraclough, CPPE <ul style="list-style-type: none"> ○ CPPE update including technicians training

Pharmacy first

Links are to existing programmes until receive the specification through from NHSE.
Clinical factsheets are a particular resource that was highlighted.

ENT training

Providing face to face event across the country – one per region
Leicester venue – M1 Junction 21 – 4th Feb am and pm session – 120 places.

Newsletter article – when receive the booking details AE will add to the newsletter and send out to all contractors.

CPPE can be commissioned to provide additional training sessions.

- Process and cost ? go through Caroline and main things are timeframe and number of attendees.
- Venue is the biggest cost – Peak Pharmacy have a large room which may be able to be used.
- Also includes paediatric consultations.
- There was an online module for refresher training – **Caroline will check still available**

If not, then can we re-establish this and what the costs are to the LPC?

Pharmacy technicians – advancing role

New course - Sept 2023 to March 2024.

E-course - 6 units

Clinical assessment skills.

Are there any concerns ?

6 months length – although if sign up in March (when funding stops) then will only have 4 months to complete.

840 places – 240 signed up so far.

Only 1 day out of pharmacy and rest in own time.

Send through info on Pharmacy Technician training that have previously received but because of change in circumstances with the new Pharmacy First Service think should send again.
Also with the BP service being technician lead and also can be part of the triage in contraception service this may be helpful to contractors.

Action: Newsletter article – explain why Pharmacy Technician Training is important and works for the new services coming in and using skill mix.

Preparing to train in prescribing e-course

Lots of peer support and also help with the application for IP training.

Newly qualified – next module March 2024.

Over 18 months now.

This may be helpful to some of the newly qualified and create a support network in Derbyshire – need to focus comms on this.

- Rebecca Cousin, Medicines Orderline
 - Christmas and comms

Couldn't attend due to other commitments so DD will send the report sent by Rebcca Cousin to members after the meeting.

Extending the window for prescriptions 14 days before Christmas – if due on 24th December then will accept request from 11th December. Previously agreed this process 18 months ago. Should be moving across to the online process via NHS app.
LMC are very positive re the use of MOL – saves time.
MOL ordering claim form – maybe need to advertise this to those that do not do the NHS App.

- Ben Milton, Medical Director, LMC
 - General update

Future of general practice – Fuller stocktake review.

Claire Fuller is now Medical Director at NHSE so this will be the document that they are working to.

Common Conditions service – 7 conditions – how do gp's view this?

There has been no feedback to LMC – personal view is that it is good to help with workload. Feel it's going to be a positive service.

What is the best way to tell colleagues about the new services – LMC newsletter and also work with ICB comms re GP update and also Clinical Governance leads (each practice has one) – meet every 2 months so could present there.

LMC only send newsletter to levy paying practices – 8 practices that don't receive.

PCNs - Budgets and people in place but not the structure due to Covid.

Needs to be system-based push for the service.

Pharmacy First should be a priority as helps GP practices and focus on Primary Care Recovery Plan and not the other little requests that they send through at least for 6 months.

Acute is being prioritised but then this is pushing back to GP's and then long-term conditions are not met and end up at hospital!!

NL raised that when pharmacies need to contact GP's regarding queries on prescriptions etc they have to join the normal phone line to GP's as have no direct number or email that can use to send these through and cannot see the patient records – these are not planned into new services that have all come out.

GP Connect is coming out for pathfinder so this will be able to be used.

It is on the radar now and featured in the Pharmacy First service and on NHS Digital agenda.

Also, DD and DE are on the CP IT group and this is on the agenda but this will take time to get this in place.

- Shazia Patel, Community Pharmacy Clinical Lead, ICB
 - IP pathfinder

4 Sites - Hatton Pharmacy, Breaston Pharmacy, Pear Tree Pharmacy, Medicines Stop Alfreton

- 1) CPCS+
- 2) Hypertension – optimisation of medication + may add Lipids
- 3) Contraception
- 4) Menopause – only 2 sites in the country

- 5) Acne management – increase in online providers during covid and risks, new set of resources for acne and antibiotic prescribing – only system doing.

Currently writing specifications

Project Manager @ DHU – 3 days a week to support set up

Cleo is not ready until January 2024 so not starting until January 2024

Doing engagement with practices around the pharmacies involved

○ Expansion of Contraception service - 1st December

- Expecting specification this week
- Opt into the service even if pilot site then need to redo
- Additional funding for this service
- Tier 1 and 2 are now moving to one service
- Given 3 months grace for completing training and transferring over to the new service
- May be an issue in rural areas with dispensing doctors
- Need to manage patient expectations – may need to be an appointment system for this as cannot put in extra pharmacists if not knowing about the numbers. Need to get contractors talking about their own processes and get them to do this asap so they can receive the payment and invest in upskilling staff.
- Need to group services together and LPC need to ensure contractors are aware of this as a business model.
- Whole profession needs to be on board with the services – need all pharmacies to be doing all services – business as usual.
- Locums need to be engaged
- Dispensing income is going to carry on downward trend and so need to ensure contractors are aware of this.

Pharmacy Faculty – need Community Pharmacy to engage in this. The LPC is engaged, but not solving the current workforce issues in community pharmacy.

○ Relaunch of hypertension service – 1st December 2023

- Opt in
- Pharmacy skill mix
- Outside of global sum funding
- Encourage those that are not signed up to do so – need to wait until specification is out
- Encouraging ABPMs – think it will be 20% conversion target and will be checked.
- Investment in equipment is needed.
- Counter staff need training to take a blood pressure check – **LPC to focus on this as a help to contractors**

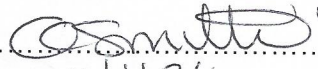
○ Pharmacy First 31.01.24 subject to IT

- 1) Clinical pathway
 - 2) Urgent repeat med supply
 - 3) Minor illness
- Contractors will need to provide all 3 parts of the service
 - DoS profile need to be updated
 - Think it will be PharmOutcomes but moving across to using the PMR provider.
 - 7 day follow up is not a requirement
 - Also need to educate public

		<p>Extended care service</p> <ul style="list-style-type: none"> - 4 conditions will be transitioned across - money for this to be kept for extended care – hoping for either more conditions to be added or more scope on the existing services that are left.
		<p>National and regional updates</p>
9.	<u>9.1</u>	<ul style="list-style-type: none"> ▪ NHSE <ul style="list-style-type: none"> ○ Flu / Covid vaccines ○ Regional Pharmacy Leadership Board 25.10.23 ○ Primary Care Access Recovery Plan ○ CCS / Pharmacy First service starting 31st January 2024 – launch events etc ○ Contraception service extended Tier 2 – starts 1st December 2023 ○ Hypertension service relaunch with focus on ABPMs – starts 1st December 2023 <p>Members to read through the information on CPE website - <u>Pharmacy First service and other changes agreed as Recovery Plan negotiations conclude - Community Pharmacy England (cpe.org.uk)</u></p> <ul style="list-style-type: none"> ▪ Derbyshire ICB <ul style="list-style-type: none"> ○ IPMO ○ Bank holiday rota <p>Nothing further to update.</p> ▪ CPE <ul style="list-style-type: none"> ○ Conference feedback (12.09.23) ○ Rural Regulations briefing <p>Nothing further to update.</p> ▪ Derbyshire City Public Health <ul style="list-style-type: none"> ○ Supervised consumption / Needle exchange ○ EHC <p>Nothing further to update.</p> ▪ Derbyshire County Public Health <ul style="list-style-type: none"> ○ Supervised consumption / Needle exchange ○ <u>Naloxone service</u> <p>Paying more than Derby City – contractors need to look at what is a priority - there will be no change in fee. £13 per transaction and signup fee to put service in place.</p> <p>Client group – pharmacies do not let them in if they are under the influence so not likely to see many ODs. More likely to be in city centre and first aid responders, ambulances and some police are starting to hold Naloxone. Pharmacies have a better relationship with the clients though so may provide opportunities. All members agreed that the LPC should support send the information out to contractors for their individual decision.</p>
10.	<u>10.1</u>	<p><u>CCA Questions</u> CCA members reported that all questions had been covered.</p>
11.		<p>Strategy update 2023-2027</p>

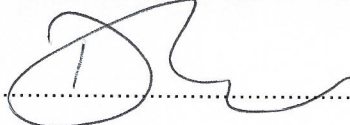

11.1	<p>It was agreed that the strategy plan discussion should be moved to the January / March 2024</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Action: Strategy plan to be added to the January / March 2024 meeting for discussion and sign off.</p> </div>
12.	<p>AOB Nothing raised with the chair.</p>
13.	<p>Date of next meeting.</p> <p>Currently meet on 3rd Tuesday of odd months</p> <p>9th January 2024</p> <p>12th or 26th March 2024</p> <p>Look at days, weeks and times for future meetings in 2024</p> <p><i>Post meeting note</i> <i>Meeting dates were agreed by exec team as below</i></p> <p><i>Thursday 11th January 2024 – 12pm – 6pm</i></p> <p><i>Tuesday 12th March 2024 – 9am – 5pm</i></p>

These minutes are signed as being a true record of the meeting, subject to any necessary amendments being made, which will, if any, is recorded in the following meeting's minutes.

Signed:  Position:.....CHAIR.....
Date:.....11/1/24.....

Signed:  Position:.....CEO..... Date:.....

During this meeting, along with these minutes, there was a constant check to ensure no discussions could constitute to breaking competition law.

Signed:  position.....  Date