

**MINUTES OF COMMUNITY PHARMACY DERBYSHIRE COMMITTEE MEETING**

**held on Tuesday 17<sup>th</sup> March 2026**

**Peak Pharmacy HO, Buttermilk Lane, Bolsover, S44 6AE**

MEMBER	CATEGORY	20.05.25	15.07.25	16.09.25	20.11.25	20.01.26	17.03.26
Ben Eaton (BE) Chair	AIMp / IPA	✓	✓	✓	✓	✓	✓
David Holmes (DH) Vice-chair	CCA	✓	✓	✓	✓	✓	✓
Darryl Dethick (DD) Treasurer	AIMp / IPA	✓	✓	✓	✓	✓	✓
David Evans (DE)	AIMp / IPA	A	A	✓ Part	✓ Part	✓	✓ Part
Justin Gilbody	AIMp / IPA	✓	✓ Part	✓	A	✓	✓ Part
Nitin Lakhani (NL)	Independent	A	✓	✓	A	A	✓
Matthew Hind (MH)	Independent	✓	✓	✓	✓	✓ Part	✓
Lindsey Fairbrother (LF)	Independent	✓	✓	A	A	✓	✓
Yasir Pirmohamed (YP)	Independent	✓	✓	✓	✓	✓	✓
Andrea Smith (AS)	AIMp / IPA	✓	✓	✓	✓	R	✓
Amanda Kelly (AK)	CCA	A	✓ Part	✓	✓	✓	✓
Khuram Ahmad (KA)	CCA	✓	✓	✓	✓	✓	✓
Nick Hunter (NH), Chief Officer	Officer	✓	A	✓	✓	✓	✓
Amanda Alamanos (AA) Engagement Lead	Officer	✓	✓	✓	✓	✓	✓
Alison Ellis (AE) Business Support Officer	Minutes	✓	✓	✓	✓	✓	✓

✓ 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.

**Welcome/Apologies/Introductions/Announcements**

Andrea Smith, returned to the LPC but representing Peak Pharmacy / IPA due to change in employment.

Attended

- Shazia Patel, Community Pharmacy Clinical Lead, NHS Derby and Derbyshire ICB (Teams)
- Kirsten Atkinson, Priest & Co (KA)

		<ul style="list-style-type: none"> <li>▪ Dr Lakhvinder Dhamrait, LMC</li> <li>▪ Rebecca Johnson, Healthwatch Derby</li> </ul> <p><b>Apologies for absence</b></p> <ul style="list-style-type: none"> <li>▪ Dr Andrew Mott, NHS Derby and Derbyshire ICB</li> <li>▪ Abi Stott-Marshall, Healthwatch Derbyshire</li> <li>▪ Paula Whitehurst, Community Pharmacy Integration Programme Manager, ICB (PW)</li> <li>▪ Nicki Doherty, Director of Place and Partnerships, NHS Derby and Derbyshire ICB</li> </ul>
		<b>GOVERNANCE</b>
1	1.1	<ul style="list-style-type: none"> <li>▪ <a href="#">Declarations of interest – any changes let AE know</a> <ul style="list-style-type: none"> <li>○ <a href="#">New declarations need to be completed in April 2026.</a></li> </ul> </li> </ul> <p>No changes were raised – AS will complete a new form from April 2026.</p> <ul style="list-style-type: none"> <li>▪ <a href="#">Competition Law check re agenda items</a></li> </ul> <p>Nothing raised by NL or governance committee.</p> <ul style="list-style-type: none"> <li>▪ <a href="#">Governance committee update</a></li> </ul> <p>Governance sub-group met but nothing of concern to discuss.</p> <ul style="list-style-type: none"> <li>▪ <a href="#">Governance documents – review and sign off/adopt</a> <ul style="list-style-type: none"> <li>➤ Governance spreadsheet</li> </ul> </li> </ul> <p>Went through and highlighted documents that need reviewing at the next committee meeting.</p> <ul style="list-style-type: none"> <li>➤ Governance framework (April)</li> </ul> <p>No changes at the moment – will be done later in the year for elections etc Agreed to approve. Code of conduct – no changes. Levy letter – on agenda.</p> <ul style="list-style-type: none"> <li>➤ <a href="#">LPC asset register (March)</a></li> </ul> <p>Added in new items of office equipment for AE – completed.</p> <ul style="list-style-type: none"> <li>➤ <a href="#">Appraisal document (March)</a></li> </ul> <p>No changes in templates from CPE.</p>
	1.2	<p><a href="#">Approval of minutes from 20<sup>th</sup> January 2026</a></p> <p>The minutes were agreed as a true and accurate record of the meeting held on 20<sup>th</sup> January 2026. BE signed the minutes and they will be added to the website.</p>
	1.3	<p><a href="#">Matters arising from previous meeting on 20<sup>th</sup> January 2026 (not on the agenda)</a></p> <ul style="list-style-type: none"> <li>▪ <a href="#">Action tracker</a></li> </ul> <p><a href="#">Committee actions</a></p> <p>59 – chase up Samantha Niblett MP re pharmacy visit. Completed - visit taking place on Friday 15<sup>th</sup> May @ Dean &amp; Smedley Pharmacy in Swadlincote.</p> <p>95 - Medical Director invite – not sure who to invite at the moment with NHS structure changes – Dr Dave Briggs is the Medical Director but maybe more appropriate to invite a director with</p>

		<p>commissioning responsibility. Review again in May 2026. Morale in the ICB is understandably very low at the moment due to the uncertainty of the structure changes.</p> <p>97 - H&amp;S working from home review – completed and ordered monitor, keyboard and mouse. Review again March 2027.</p> <p><b>Exec meeting actions</b></p> <p>8 - Team building session – do members think this would be useful? Members to be involved in certain topics – videos, etc. Already working on the getting to know the committee part of the action with the 5-minute talks.</p> <p>11 – Setting up governance meetings from May - work pressures make difficult organising a time to suit everyone. MH has a WhatsApp group set up and will sort out future dates.</p> <p>12 - Tom Watson, Dev Lead @ South Hardwick has been invited to LPC committee meetings by AA.</p> <p>14 – MP letter re Pharmacy First – KA has created and ready to be sent out – asked members if they wish to send to their MP to get in touch with Kirsten directly.</p>
2	2.1	<p><b>Contract applications</b></p> <p>2.1.1 Application for relocation By: United Healthcare 4U Ltd From: 28 Maises Way, South Normanton, DE55 2DS To: Unit 15 Calverton Bus Park, Hoyle Road, Calverton, NG14 6QL Response sent 15.03.26</p> <p><b>2.2 Decisions</b></p> <p>2.2.1 Application for change of ownership By: BJ Wilson Ltd To: K D Kataria Ltd At: 39 Linton Road, Swadlincote, DE11 9HS <b>Approved 19.02.26</b></p> <p>2.2.2 Application for change of ownership By: BJ Wilson Ltd To: LAKMED Ltd At: 2-3 Oakwood Shopping Centre, Oakwood, DE21 2HT <b>Approved 19.02.26</b></p> <p><b>2.3 Responses received</b></p> <p>2.3.1 Application for a consolidation By: PCT Healthcare Ltd Staying: 9-11 Patchwork Row, Shirebrook, NG20 8AL Closing: 18 Main Street, Shirebrook, NG20 8DG <b>Awaiting decision still</b></p>

<p>2.4</p>	<p><b>Litigation</b></p> <p>2.4.1 Application offering unforeseen benefits SHA 26750 By: Prescription Hub Ltd At: Breckland Rd, Chesterfield, S40 3DD, S40 3LJ <b>Appeal refused – 22.01.26</b></p> <p>2.4.2 Application for distance selling pharmacy SHA 26804 By: Getglo Aesthetics UK Ltd At: 1<sup>st</sup> and 2<sup>nd</sup> Floor, Bath Street, Ilkeston, DE7 8AH <b>Responses received – awaiting decision</b></p> <p>2.4.3 Application for distance selling pharmacy SHA 26827 By: Connect AF Pharma Ltd SHA At: Room4, 3 Stand Road, Whittington Moor, Chesterfield, D41 8SW <b>Responses received – awaiting decision</b></p> <p>2.4.4 Application for distance selling pharmacy SHA By: NH Pharm Ltd At: 91 Victoria Road, Pinxton, NG16 6NH <b>Responses received – awaiting decision</b></p> <p>2.4.5 Application for distance selling pharmacy SHA By: The Castleward Clinics Ltd At: Unit 3 St Peters Mall, Derby, DE1 2NR <b>Closing date for comments – 26.03.26</b> Discussed at the committee meeting and main points were The proposed site is a town centre retail unit and not the usual site for a DSP. Applicant has to convince the ICB that they are not going to provide face to face consultations due to the proximity of their clinic next door which clearly has a f2f footfall.</p> <p>2.4.6 Application for Distance Selling Pharmacy SHA By: Anthus Pharma Ltd At: 12 Toton Close, Unit E2, NG10 3TP <b>Responses received – awaiting decision</b></p> <p>2.4.7 Application for Distance Selling Pharmacy - SHA By: Meds Direct Ltd At: Unit 37 Derwent Business Centre, Clarke St, Derby, DE1 2BU <b>Responses received - awaiting decision</b></p>
<p>2.5</p>	<p><b>Amendments to contractor list</b></p> <p>2.5.1 Application for Change of Ownership From: Bestway National T/A Well To: Pharma Choice Pilsley Ltd At: Bridge Street, Chesterfield, S45 8HE <b>From 28.02.26</b></p> <p>2.5.2 Application for Change of Ownership From: Bestway National T/A Well To: Wellcare Partnership Ltd At: 40 Nottingham Road, Somercoates, Alfreton, Derbyshire, DE55 4JJ</p>

		<p><b>From 26.02.26</b></p> <p>2.5.3 Application for change of ownership From: Jhoots Chemist Ltd To: LP SD Five Ltd At: 53-55 Bridge Street, Belper, Derbys, DE56 1AY <b>Approved 09.02.26 – changed from 12.03.26</b></p> <p>2.6 <a href="#">Amendment to hours</a> Nothing received.</p>		
<b>3</b>		<b>Finance and Audit</b>		
	<p>3.1</p> <p>3.2</p> <p>3.3</p>	<p><a href="#">Budget and spend update – January / February 2026</a> DD reminded members and staff that need all claims through by 31/03/26 so he can do final accounts for 2025/26. AE will check who has claimed and send reminder.</p> <p>Expenditure for 11 months – £193,000 = forecast £215,000 for full year £117,000 in account – slightly over 6 months reserve. Jackie Buxton agreed that a number of the outstanding MOUs can be used for other projects – need to send through plan of what the funding is being spent on. Accepted all the employment allowance claims for 4 years – credit £18,111. No employer national insurance to pay until used up the credit with HMRC.</p> <table border="1" data-bbox="213 1160 1452 1294"> <tr> <td><b>Action: AA need to send through plan for Jackie for what future projects using the £25,000 MOU funding for</b></td> </tr> <tr> <td><b>Action: AE to check who has claimed for meeting attendance and send reminder before 31.03.26</b></td> </tr> </table> <p><a href="#">CPE levy 2026/27</a> 1% increase from last year – DD has updated the budget. Other LPCs have increased significantly – LLR in East Midlands had 6% increase. Still think it is the fairest way of working out the levy payment per contractor.</p> <p><a href="#">Final Budget 2026/27</a> Only change was CPE levy amount and bank charges have been added on to the monthly costs. Bank charges have also been raised by other LPCs with CPE – looking at other accounts for better deals. We have now got access for 4 people and system is working well. £234,000 income £239,000 – expenditure Does not take account of the £18000 Employment allowance in credit. Asset log – nothing really of any value – write off straight away.</p>	<b>Action: AA need to send through plan for Jackie for what future projects using the £25,000 MOU funding for</b>	<b>Action: AE to check who has claimed for meeting attendance and send reminder before 31.03.26</b>
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<b>4</b>		<b>CPE update</b>		

4.1	<p><b>Lindsey Fairbrother, CPE Regional Representative</b></p> <ul style="list-style-type: none"> <li>▪ CPE update <ul style="list-style-type: none"> <li>○ Negotiations</li> </ul> </li> </ul> <p>Have started so a lot of additional work - 3 evening meetings last week and also met prior to the negotiations meeting. Pressures survey – highlight that need to complete to help with negotiations.</p> <ul style="list-style-type: none"> <li>○ Full committee</li> </ul> <p>BE and NH were invited to observe the meeting along with other colleagues in East Midlands LPCs. Sub-Committees meet during the day but surrounded by the whole committee who can comment and question. Lindsey and other colleagues have asked if this can be changed so can meet separately and then report back to avoid a lot of duplication</p> <ul style="list-style-type: none"> <li>○ Cat H</li> </ul> <p>CPE’s negotiations reduced the number of items.</p> <ul style="list-style-type: none"> <li>○ Cat M – potential changes</li> </ul> <p>Not reasonable to have to provide a drug and not know if going to be reimbursed what it cost.</p> <ul style="list-style-type: none"> <li>○ Abuse letter around support that pharmacy should receive from the police to be sent to the Police Commissioner</li> </ul> <p>KA put together the letter – Lindsey will chase up with Vicky and James to see if being sent out to LPCs for them to use. Need to raise locally and nationally with Police and Crime Commissioners.</p> <ul style="list-style-type: none"> <li>○ Regional meetings</li> </ul> <p>June dates to avoid school holidays.</p> <ul style="list-style-type: none"> <li>○ Altered constitution – from 24 to 26 members</li> </ul> <p>New independent member joined the Regs subcommittee.</p> <ul style="list-style-type: none"> <li>○ Public Affairs tender</li> </ul> <p>Now awarded. New provider to start in April.</p> <ul style="list-style-type: none"> <li>○ CPE levy uplift</li> </ul> <p>Only covered the increases – no more extra money.</p> <ul style="list-style-type: none"> <li>○ 75,000 less pharmacy opening hours per week since 2023</li> </ul> <p>mainly late evening and weekend provision that has been lost.</p> <ul style="list-style-type: none"> <li>○ Upcoming budget changes expected to add significant extra costs to contractors from April 2026</li> </ul> <p>Supply is still the main income with the way pharmacy is funded. Need to stabilise the sector for 2026/27.</p> <ul style="list-style-type: none"> <li>○ Recent polls</li> </ul> <p>Pressures survey – highlight that contractors need to complete to help with negotiations 51% losing money 80% supply issues</p> <p>Positive about Emergency Contraception being part of contraception service.</p>
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		<p>LPCs are reducing hours and staff.</p> <ul style="list-style-type: none"> <li>○ TAPR review – agenda item</li> <li>○ Prescription for success – agenda item</li> <li>○ Neighbourhoods</li> </ul> <p>Not ICB led – provider led.</p> <ul style="list-style-type: none"> <li>○ Elections – independent regional reps</li> </ul> <p>Would like each committee to have someone nominated to take over from Lindsey. Lindsey finishes with CPE at the end April 2026. End April 2026 will finish for CPE but from 1<sup>st</sup> April 2026 will no longer be a pharmacy owner so cannot be on the LPC. Thank you was given to Lindsey for all the work she has done for Community Pharmacy Derbyshire over the years.</p> <div style="border: 1px solid black; padding: 5px;"> <p><b>Action: AE will write out to all independent pharmacies asking for nominations for the member vacancy.</b></p> </div>
5		<p><b>Reports</b></p>
5.1		<p><b>Chairs update</b> <u>CPE committee meeting observer</u> Useful to see how the committee works and speak to staff that do not get to see very often. Very impressed with Jenny Harries, Chair – challenges the committee members. Network event in the evening was very useful.</p> <p><u>LPC chairs forum</u></p> <ul style="list-style-type: none"> <li>- Good event</li> <li>- Have a few things that need to go through with AA and NH.</li> </ul> <p>5.2 <b>Chief Officer update – see email</b></p> <ul style="list-style-type: none"> <li>▪ Funding for Community Pharmacy to support training of a pre-registration trainee pharmacy technician – Suki Tagger NHSE workforce trainer.</li> </ul> <p>Running some conversations around how to get this up and running and ensure the funding is used.</p> <ul style="list-style-type: none"> <li>▪ House of Lords Medicines supply fragility report <a href="https://committees.parliament.uk/committee/430/public-services-committee/news/208874/lords-committee-looks-at-medicines-security-prediction-and-prevention-of-medicine-supply/">https://committees.parliament.uk/committee/430/public-services-committee/news/208874/lords-committee-looks-at-medicines-security-prediction-and-prevention-of-medicine-supply/</a> (For noting and for members to use) Government report.</li> <li>▪ Branded Generics – Clot meeting (not included in the folder – confidential)</li> </ul> <p>James Davies, is doing some work around margin distribution and how prescribing distorts equitable delivery.</p>

Branding generic – trying to find a definition that can be used.  
 Distribution is not even across England – average model does not work now that income very affected by prescribing practices.  
 Local patient demographics and prescribing impacts margin available to pharmacy owners due to medicines costs and reimbursement.  
 CPE committee are split on views around margin.  
 Pressure on pharmacies when cannot get the medication.  
 James is providing the evidence for CPE to include in negotiations.

### 5.3 Engagement Lead update

- Meetings attended report – for information  
 Attended quite a few meetings – deputising for NH too.

- Sophie Mayer and Rebecca Spencer – Sexual health  
 Shared data re EC and CPD screening information.  
 Consultant is taking through the business case for screening (Gonorrhoea and Chlamydia).  
 Rebecca Spencer – outreach pop-ups – using pharmacy space – particularly in Boots and Peak who are high for EC.  
 Confident that there will be something for screening – pilot in county – Boots, Peak and Tesco in Chesterfield. Bolt on to the EC consultation.

- Neighbourhoods  
 CPD are now formally part of the Living Well, Dying Well group – every two months – feed into the executive group. LMC are also on the group.  
 Section added to the website for neighbourhoods – guidance and documents.

- Media Training – AA attending 31<sup>st</sup> March
- 12<sup>th</sup> March 2026 – PF threshold challenge webinar  
 Numbers have been disappointing – high number sign up but only a few actually join the webinar.

- 16<sup>th</sup> April 2026 - Social media (Kirsten)
- 11<sup>th</sup> June 2026 – DMS – ensuring compliance and supporting your patients

- Derbyshire County PharmOutcomes MOU 2026-2029.  
 Agreed – AA has attended various meetings and filled in the MOU documentation.

- Contractor event – May 2026  
 Money matters – How do you get your income? – presented by David Broome.  
 7.30pm – 9.30pm – in person event.

- Spring / Summer Covid vaccination campaign  
 National protocol – non-registered staff – VGD – from 1<sup>st</sup> April 2026.  
 Vaccinations – GPs not doing COVID clinics or home visits.  
 SVOC said that all areas are covered now.  
 Discussed with Ben Milton and Andy Mott – want to show that pharmacy can do but should we also be making a stance about not providing home visits with no payments? There is a lot of work to undertake doing home visits, but some pharmacies have signed up to do to do them.  
 Surprised at the number of PCNs who have signed up.  
 Not seen any PGDs through yet. Hopefully will be done on a regional basis the same as flu last year rather than signing up each individual pharmacy if part of a group.

5.4

#### Services update

- Services data pack

Pharmacy First – now have all information including MA and urgent supply – increased consultations in December and drop in January.  
Above the Midlands Region average for threshold challenge.

#### Transformation fund

£33million - across DLN footprint

Scoping to see if can get pathways embedded in the UECs across Derbyshire – may involve supplying licences and referrals.

Also look at NHS111.

Activity – self referral mainly. GPs staying static – affected by what their capacity is - utilise the fund to get that implemented.

MH reported that he has seen an increase in referrals since rapid health implemented.

Anema – not useful – going through NHS.net.

Don't have to tell ICBs what system they are using or when they go live.

GP Connect – GPs now have to have an email available for pharmacy to send through referrals if not working.

Posters and leaflets – sent out to opticians and Dentists and already had a request for more.

Pocket flyer – chase up with Paula Whitehurst to see if the ICB are willing to commission these being produced otherwise look at producing as an LPC.

#### Contraception

Initiation not growing as quick as thought it would.

EC - High numbers in a few pharmacies and think this is mainly down to geography and student population.

ARRS funding criteria has changed and can use to employ GPs now – so may not carry on with employing paramedics etc so may change the workforce.

#### HCFS

ABPM – doing well but not at the national percentage conversion rate – around 8%.

Been invited to CVD meeting – 28<sup>th</sup> April to talk about HCFS – **asked member if they will attend – volunteers to contact AA.**

#### DMS

Issues with information that is being sent through – quality is not good.

AA asked members to send through any issues that they are having so can raise at next meeting

**Action: Members to send through any DMS issues to AA so she can raise at the next meeting**

**Action: Members to contact AA if interested in attending CVD meeting on 28<sup>th</sup> April 2026 to talk about HCFS**

5.5

#### Communications update

- Communications plan Jan-June 2026

Posts on social media have included

- DPP funding expansion –
- PF 2 years collage on socials

- Khuram provided PF top tips – 4000 impressions
- Sore Throat graphic
- DD and YP profiles – 5000 impressions

PF Derbyshire website

Impressions are going up and being used more.

Contraception, NHS11 and Earache trending.

Post regarding the trends to go out on socials so contractors are aware.

PF Derby, PF Chesterfield, PF near me are main searches – public are now aware of the service and are searching for their nearest pharmacy.

PCS mandatory campaign – problem with reporting back in via the form – new link has been sent out to all contractors.

PF data – focusing on sinusitis, insect bites over next few months

AS profile post – delayed this and Kirsten going to send through to AS to check and then will add to LinkedIn.

Meningitis – is there anything that we need to do?? Will add in socials, newsletter re how to spot symptoms etc

Meningitis – reminder for those that missed vaccine during Covid

**Action: Include meningitis symptoms reminder in socials and also a NHS are sending out comms to those who missed out on meningitis vaccine during Covid.**

**6 National and Regional updates**

6.1 NHSE National/Regional

- Bank Holiday update

Problems with not sending out the direction letters to pharmacies – don't have to open if not directed.

Main issue is lack of people support and experience in EMPCT resulting in delays.

- Midlands Regional Pharmacy First Oversight Group

Data that have already shared – not been any further meeting.

- East Midlands Primary Care Team meeting

Nothing further to update.

- East Midlands Community Pharmacy Strategy

Commissioning strategy been sent through for DLN.

- DLN Prescribing Outcomes Scheme 2026-27

Members noted.

- Controlled Drugs Team newsletter – Feb 2026

<https://sway.cloud.microsoft/yhgM3DiTH80RxK6t?ref=Link>

Highlighted to members for them to read.

6.2

### CPE

- CPE events
  - Media training for LPC Chairs and CO – 31.03.26 – AA attending
  - Forum of Chairs – 11.03.26 – discussed earlier
  - CPE regional event – 10<sup>th</sup> June 2026 – [asked members to sign up asap for evening session](#)
- [CPE newsletters received \(link to CPE website\) - Newsletter archive - Community Pharmacy England \(cpe.org.uk\)](#)
- [CPE audit results April 2025](#)

For information

- [A PRESCRIPTION FOR SUCCESS](#)
  - [Template letter to send to ICB](#)  
[A Prescription for Success \(Executive Summary\)](#)

**Action: Prescription for success template letter - Send out to MPs, Healthwatch, ICB – over the next quarter and use in meetings attending.**

6.3

### Derbyshire ICB

- [ICB structure – wave 2](#)

Community pharmacy sits under Maria Principe – Primary Care – Medicines optimisation sits under Dave Briggs

Director of Strategic and Specialist commissioning is Caroline Goulding.

- [Medicines Optimisation Regionwide Advisory Group](#)

Not met lately.

- [Derbyshire Primary Care Providers meeting](#)

- [Integrated neighbourhoods – YP](#)

Cancelled the next meeting and nothing planned.

- [IPMO Strategy 2026 – 2028](#)

Shared and feel that nothing to add

6.4

### Public Health Services

Nothing new.

6.5

### Derbyshire LOC

Not heard anything – Liz attended Primary Care meetings

6.6

### East Midlands Exec Team

Meeting held 12<sup>th</sup> March 2026.

Nothing further to update – discussed items already.

7	<p><b>OPEN MEETING – chaired by DH</b></p>
7.1	<ul style="list-style-type: none"> <li>▪ <a href="#">Shazia Patel, Community Pharmacy Clinical Lead, NHS Derby and Derbyshire ICB – via teams</a></li> </ul> <p><u>IP pathfinder</u> 3400 consultations across 4 sites. Gathering patient and GP feedback to help with business case for continuing from April 2026. Conversations around what LIPID consultations look like. Funding Cleo for sites. Celebration event on 24.03.26. Hosted by LLR – invitations have been sent out to all IP sites and chief officers – will deliver certificates to the sites that cannot attend. Invited Henry Gregg NPA Chief Exec – visited Goodlife and Evans@ Breaston</p> <p><u>ICB / cluster restructure</u> Significant cut to teams. Next level has been appointed – Caroline Goulding, Director of Strategic and Specialist commissioning.</p> <p><u>DPP / IP opportunities</u> Form sent out and shared 1 - Current IPs and understanding where gaps 2 – DPP availability Clear that there is an East / West divide re IPs so will target those in west about IP and DPP opportunity. If have more than 20 apply how will allocate? – will be done through scoring and will include an element for geography. Had some applications through already. Does not have the answer as still waiting on national negotiations. Vision would be to have one IP service commissioned in each neighbourhood. There are some in the sector that do not agree that IP is the future. April 2026 – there is a continuation of the service but with 30 consultations cap and reduced funding to £25 per consultation. Some pharmacy owners are considering if it is worth continuing now remuneration has been cut.</p>
7.2	<ul style="list-style-type: none"> <li>▪ <a href="#">Rebecca Johnson, Healthwatch Derby</a></li> </ul> <p>10 comments through re pharmacy query: 8 of those are positive responses. Is there any opportunity to work with the Healthwatch re surveys - AA will email Rebecca.</p>
7.3	<ul style="list-style-type: none"> <li>▪ <a href="#">Dr Lakhvinder Dhamrait, LMC</a></li> </ul> <p>Lipid IP – created by St Barts. Onsite point of care testing – Finger prick test, lifestyle chat, BP. Set of results to guide through public health. Results sent through to the GP practice. Referrals from GP's. Speak to those in criteria and ask if wish to be checked. Been running for 1 month and done 20 consultations – 3 that referred back to surgery with issues. Should be that do the pathology, get results and then IP prescribe – Derbyshire do not have the pathology pathway for pharmacy so cannot do the full service. Trying to get funding to be able to run this alongside the IP pathfinder pilot from April 2026.</p>

		Graduate IP's – nothing been sorted for them yet and qualify in July 2026. A lot of the problems is to do with national model rather than local.
		<ul style="list-style-type: none"> <li>▪ <b>CPE / LPC structure</b></li> </ul>
		<ul style="list-style-type: none"> <li>▪ RSG/TAPR LPC survey</li> </ul> <p>Discussed the questions on the survey as a committee and AA completed the online form live.</p> <p><b>1 - Strengthened independent Governance of LPCs and CPE</b> There now evidentially more structure and consistency across LPC's. There is greater evidence of governance processes in place and evidence that they are being adhered to. Outlier LPC's appear to be in the minority.</p> <p><b>2 - Appropriately resource CPE to improve negotiating outcomes and carry out its full range of functions for contractors.</b> LPC's have restructured to become more efficient and cost effective for contractors allowing more of the levy to go to the centre.</p> <p><b>3 - Develop a new national vision and strategy for community pharmacy</b> Vision and strategy commissioned and in place. Effectiveness is yet to be measured as it is in early stages.</p> <p><b>4 – Listen better to contractors so their voices are better heard at all levels</b> CPE has good dialogue with contractors evidenced via events and the attendance at the CPE roadshow event held in Summer 2025. There are a lot of opportunities for the LPC to engage with CPE, via Chairs Forums for example. Representation has also been varied to incorporate independent rep and increase in IPA reps.</p> <p><b>5 – Reduce variation between LPCs, improve their efficiency and focus their activities</b> Variation has decreased however there is still work to be done. Nationally some benchmarking and sharing of good practice would support those that still struggle to engage with their contractors. Succession planning is an area to consider and scope for those LPC's where it is identified as a need or where there will be mergers. Greater informal/formal collaboration across LPC's would support.</p> <p><b>6 – Improve the efficiency, size and shape of the LPC network</b> Greater working with our neighbouring LPCs. We have started to work at an ICB cluster level. Number of LPC's have been reduced. Proportional representation on committee. CPD Committee size reduced from 15 to 12 members.</p>
		<b>CCA / NPA</b>
<b>8</b>	8.1	<p><b>CCA Questions Quarter 4</b> No new questions</p> <p><b>CCA matters newsletter – February 2026</b> For information</p>
		<p><b>NPA connect newsletter</b> Nothing received</p>

9		<b>DEVELOPMENT SESSION</b>
9.1		<b>Update on Neighbourhood Integration</b>
9.2		<p>➤ <a href="#">CPE Community Pharmacy Offer guides</a></p> <p>AE to add neighbourhood integration as a standard agenda item for committee meetings. AA has created specific page on the website and will keep this updated when receive information.</p> <p>Need to get foot in the door at the moment so not left behind. Need members to have conversations and use the resources that CPE have created – PowerPoint, and one page info doc.</p> <p>If get asked to do anything locally – ask for support from AA if needed. Get involved in any opportunity.</p> <p>Every cluster have had to create a commissioning strategy. Lots of potential opportunities for community pharmacy across DLN when the medium-term framework and 10-year plan are considered.</p> <p>Commissioning will likely be done at neighbourhood level in the future.</p> <p>Provider company – do we need to consider yet? Probably best to use an existing one due to trading history.</p> <p>➤ <a href="#">What Pharmacy Needs to Know about INT's - BSOL Webinar 4<sup>th</sup> March 2026</a></p> <p>Very good webinar.</p> <p>Lots of touch points for community pharmacy to be involved - Health hubs, provider care space.</p> <p>➤ <a href="#">Integrated Neighbourhoods Group Development Session update Notes and Draft ToR</a></p> <p>For information.</p>
9.3		<p>➤ <b>Knowledge Sharing</b> <a href="#">5 minutes to talk about job role and what expertise / interest you have.</a></p> <p>Lindsey Fairbrother and David Holmes gave a quick outline of their work and personal background – thanks given and KirstenA will type up the stories and send to DH and LF for approval before including on LinkedIn as part of Get to Know your LPC members</p> <p><b>Ben Eaton and David Evans will give update at the May meeting.</b></p>
10		<b>AOB</b>
10.1		<p><u>Sub-committee members</u></p> <p>Due to LF resignation need to have replacement for the communications and finance sub committees.</p>
11		<b>Next Meeting</b>
		<ul style="list-style-type: none"> <li>▪ 19<sup>th</sup> May 2026, Peak Pharmacy, Buttermilk Lane, Bolsover, Chesterfield, S44 6AE 10am - 4pm</li> </ul>
12.		<b>Close</b>

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

Signed: .......... Position: .....CHAIR.....

Date: .....19.05.26.....