**CLOSED MINUTES OF THE DERBYSHIRE LPC MEETING**

**held on**

**Tuesday 16th November 2021**

**Holiday Inn, South Normanton**

|  |  |  |  |  |  |
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| **MEMBER** | **CATEGORY** | **18.5.21** | **20.07.21** | **21.09.21** | **16.11.21** |
| Andrea Smith, Chair | AIMp |  |  |  | A |
| David Evans, Vice Chair | AIMp |  |  |  |  |
| Darryl Dethick  Treasurer | AIMp |  |  |  |  |
| Peter Cattee | AIMp | \* |  | A | \* |
| Ben Eaton | AIMp | A |  |  |  |
| Garry Myers | Independent | R | R | R | R |
| Nitin Lakhani | Independent |  |  |  |  |
| Matthew Hind | Independent |  | A | A |  |
| Lindsey Fairbrother | Independent |  | A | A |  |
| Baldev Bange | Independent |  |  |  |  |
| Kevin Kiang | CCA |  |  |  | A |
| Jackie Eeles | CCA |  |  |  | A |
| Inderpreet Chohan | CCA |  |  |  | A |
| David Holmes | CCA |  |  |  |  |
| Neelam Sohal | CCA |  |  |  |  |
| Tom Watson | CCA |  | A | R | R |
| Jackie Buxton Chief Officer | Officer |  |  |  |  |
| Katherine Newman (Support Officer) | 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

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| **1.** |  | **Welcome/Apologies/Introductions/Announcements** |
|  | 1.1  1.2  1.3 | Apologies received from Andrea, Kevin, Peter and Inderpreet. Jackie E is hoping to join the meeting virtually. David E is chairing the meeting in Andrea’s absence.  Emma Anderson (CPPE) will be joining the meeting.  No additional declarations of interest were received. |
| **2.** |  | **Minutes of the last meeting** |
|  |  | Two corrections were identified, other than this the minutes were accepted as an accurate record. |
| **3.** |  | **Review of action points (By exception)** |
|  |  | Outstanding actions   * Jackie E to develop a template to capture ‘good news’ stories from Contractors to support our Social Media * Jackie to circulate the Lincoln Paracetamol in Care Homes paper. * Exec to review the CPCS buying guide to see what actions are needed. * Jackie to check PharmOutcomes for local urgent medicine scheme activity. * Jackie to chase the application for a relocation for Vision Pharmacy to Park Surgery. |
| **4.** |  | **Matters arising from the minutes** |
|  |  | None raised |
| **5.** |  | **Meetings attended by Officers and Members** |
|  | 5.1  5.2 | Key points included.  Jackie chairs the MAPCOG meeting and finds it helpful to get updates from Graeme Hood.  The pharmacy department at Chesterfield Royal Hospital are not going to renew their Local Pharmaceutical Services (LPS) Contract which ends on 31st October 2021. One option is to offer the service to local Community Pharmacy Palliative Care Providers. CRH have agreed to continue provision from their IPU while a longer-term solution is agreed. |
| **6.** |  | **National and Regional Updates.**  **PSNC. CDAO, LPN, NHSE&I** |
|  | 6.1  6.2  6.3  6.4  6.5  6.6  6.7 | PSNC  No formal PSNC report received.  Several Committee Members attended the recent PSNC conference with key messages captured in Jackie’s report.  David E asked whether any Contractors had been approached for a PPV, none had.  NHSE&I  Jackie shared a Pharmacy Integration Fund update, the main aim is to Transform and Integrate Clinical Services through Community Pharmacy.  Early in 2022 NHS Digital are looking to streamline automatically to MYS and newly developed API’s should provide consistent processes and back end reporting of data. NL commented that it would be helpful if certain modules could be password protected  Workforce development remains the biggest challenge, particularly the Pharmacy Technician career pathway. Several contractors have declined training technicians as once their training is complete, they choose to work in PCN’s or GP practices. Jackie asked whether PCN Pharmacists should begin offering support to Community Pharmacists as they are all part of Primary Care. Whilst there would be practical issues to overcome it was agreed that Jackie should begin raising this as a possibility. Lindsey commented that more money was needed from Government to allow a level playing field in terms of offering CP staff the same terms and conditions as those employed by PCN’s.  Extended Care is now called Level 3 Care and an EOI should have gone out to all Contractors. Those who were previous providers of the service will be prioritised. Those that need training will be in the next co-hort. Jackie to explore any fast-track options for delivery of the new level 3 extended care service. |
| **7.** |  | **NHS Greener Agenda – what is our role as LPC?** |
|  |  | Following a full discussion which generated lots of possibilities for Community Pharmacists to become greener it was agreed that Jackie would write a ‘Top 10’ step guide for becoming greener and consideration would be given to a competition to celebrate ‘greener pharmacy’ of the month. |
| **8.** |  | **PQS – how can the LPC support contractors?** |
|  |  | General consensus is that our role is to ensure that all available resources are collated and uploaded onto our website and signpost contractors through social media and the newsletter. |
| **9.** |  | **New items:**  **• Antibiotic amnesty health campaign**  **• Inclisiran – PAPER G**  **• Winter access**  **• Patient Safety** |
|  | 9.1  9.2  9.3  9.4 | Jackie reminded the committee that the two-week mandated campaign around antibiotic amnesty has begun, although nobody is expecting high numbers.  Inclisiran is an injection for CVD prevention. It can be delivered by CP’s, £45 cost and a £10 fee for giving the injection. Monitoring requirements will remain the responsibility of the GP.  Winter Access. It is anticipated that there 136k GP appointments short resulting in an increased interest in GP CPCS. There was an opportunity to bid for funding and all three bids Jackie submitted have been successful. The three areas supported by this time limited funding are.   * DMS to work with all hospitals * Develop and implement GP CPCS and hypertension case finding * Increasing ERD through the MOL.   David E, BB and Lindsey to support Jackie with this work.  Patient Safety. We do not currently have a regular focus on patient safety and Andrea is keen to explore further. Agreed to discuss at our next meeting. |
| **10.** |  | **GP referral to CPCS – Progress and Implementation and Support Lead post** |
|  |  | GPs are now firmly supportive of this scheme. Jackie attended a Clinical Directors meeting where over sixty attended and generated a lot of interest. The jointly funded Implementation Lead post is now out to advert, an application and expression of interest have already been received. It was noted that there is some confusion between GPCPCS and extended care. Ben stated that the GP’s in Swadlincote had stopped referring patients and were just telling them to go to the Pharmacy, Jackie to explore. Serious concerns were raised about the real possibility of missing important emails due to the sheer volume of emails being sent to NHS mailboxes. It was agreed that Jackie would hold regular webinar sessions for GP’s. |
| **11.** |  | **COVID boosters and flu vaccinations (update and feedback from LPC members)** |
|  | 11.1  11.2 | Covid. Pfizer appears to be in short supply, suggestion that it is being held back to vaccinate 16–17-year-olds.  Darryl reported problems with short notice change of vaccine, which is causing issues with the calendar, others agreed with this. Ongoing problems with Q Flow. Ben mentioned that you cannot search for a patient by name, but Neelam said that if you use their email or mobile you can find them that way. PCN’s have given notice to stop their provision of vaccinations (although the recent announcement of boosters for those over forty may change that) and so they are looking for capacity in Community Pharmacy, demand for vaccines remains but there is just no capacity to deliver staff wise. Jackie to raise all the concerns and also to request a list of people who have been volunteering at the PCN sites to see if they are willing to support Community Pharmacy moving forward.  Flu. There has been excellent CP delivery of flu vaccines but there are still lots of under 65’s at risk who need vaccinating, stock remains a problem. |
| **12.** |  | **Performance review update** |
|  |  | As Andrea is not here there was nothing to feedback, but Jackie confirmed that they had taken place. |
| **13.** |  | **Discharge Medicine Service** |
|  |  | It seems from the data that numbers overall are increasing although there are still some that are not being completed. It was agreed that it would be better to wait for the new person to be appointed to work across all hospitals to better understand what the actual numbers are. |
| **14.** |  | **Service delivery review**  **• NHS CPCS (111, GP and pilots for ED/UTC)**  **• Extended Care**  **• NMS**  **• NHS Hypertension Case-Finding Advanced Service**   * **Update on supporting contractors to deliver services (including potential for short videos)** |
|  | 14.1  14.2 | First three services already discussed.  Hypertension. 50% of Contractors are signed up to deliver, although this will rise as Boots and Lloyds support offices are still approving the SLA. Lindsey commented that she is not proactively promoting the service as she is just snowed under with Covid and flu, a fact agreed by all present. David E and Lindsey agreed to let Jackie have some patient quotes. Bal queried how he can find an email for a GP Practice, and it was suggested he try Service Finder.  Jackie provided some data from the PSNC dashboard, David E disagreed with the data so Jackie and David will meet to explore where the data is drawn from and exactly what data we should be looking at reporting on. Also, important to remember it is not the role of the LPC to performance manage contractors, but data can be used to highlight and share best practice. |
| **15** |  | **JUCD: Integrating Pharmacy and Medicines Optimisation – updates from subgroups**  **•Safety and quality**  **•Effective Interventions**  **•Workforce**  **•Medicines Value** |
|  | 15.1  15.2  15.3  15.4 | Safety and quality. Nothing to report.  Effective interventions. Looking at frequent fliers and the green agenda.  Workforce. A report has been written but not certain of relevance to Community Pharmacy.  Medicines Value. A plan is being developed. |
| **16.** |  | **Updates.** |
|  | 16.1  16,2  16.3  16.4  16,5  16.6 | Glossop pharmacies aligned to JUCD. Jackie has had discussions over what needs to be done before 1st April 2022.  Connected to Pharmacy Programme. Launch event tonight.  MOL. No meetings recently, they have been given more funding to expand.  Sexual Health. Very little response to Katherine’s email to Contractors so she suggests the funding is used to commission two videos from ARCH, one public facing to promote service on social media (both LPC and Contractors) and the other a short education one for Contractors to encourage uptake.  Wellbeing. Andrea had attended a meeting yesterday, encouraging that they are looking at the whole of Primary Care.  Paracetamol in care homes. David on holiday for last meeting.  (Pre-pregnancy folic acid for diabetic patients)  (Midlands region community pharmacy strategy) |
| **17.** |  | **Support to help contractors deliver services and prepare for the future from CPPE** |
|  |  | Emma Anderson (CPPE) gave a presentation on how we can support contractors to engage in new services by enabling them to use clinical education smartly, give them the skills to look up information quickly. Two key areas to support this are the New Medicine Service Page and the CPPE Fact sheets. Doing an e-assessment for doing the training is also a useful tool as it highlights the areas, they need to focus on rather than doing the whole module. CPPE also offer a free coaching service and a mentoring guide. Darryl said it is important that any services like these are seen as supportive rather than being used for performance management. David E thanked Emma for her presentation. |
| **18.** |  | **Treasurer report** |
|  | 18.1  18.2 | PSNC part two levy has been paid.  Four-month levy holiday has been processed. |
| **19.** |  | **Reports.** |
|  | 19.1  19.2  19.3  19.4  19.5 | Chairs. Andrea not here.  Governance Sub Committee. Kevin not here.  Communications Subgroup. Jackie not here  Chief Officer. Nothing further to add.  Support Officer. Paper shared for information. |
| **20.** |  | **Application Update.** |
|  | 20.1  20.2 | Jackie has been invited to join the PNA group.  Jackie had shared the documents relating to a recent application. David E queried whether it provided enough cover, Jackie to check before responding. |
| **21.** |  | **AOB** |
|  |  | Jackie asked for permission to move the January and March meetings back one week. This was agreed. |
| **22.** |  | **Summary of Actions** |
|  |  | Katherine provided a summary of all actions agreed. |
|  |  | **Date of Next Meeting**  LPC Committee Tuesday **25th January** 2022 face-to-face. 9am – 1pm (followed by lunch and any subcommittee meetings)  LPC Exec continue to meet fortnightly |

Signed…………………………………………………… Dated……………