



COMMITTEE MEETING MINUTES

Wednesday 28th September 2016

2 – 5pm

Venue: The Hilton Collingtree, Watering Lane. NN4 0XW

LPC MEMBERS PRESENT:

- Raja Srikakulapu (RS)
- Chirag Patel (CP)
- Anil Patel (AP)
- Has Modi (HS)
- Veronica Horne (VH)
- Kishor Shah (KS)
- Raju Malde (RM)
- Andrew Kerr (RK)

OTHERS IN ATTENDANCE:

- Sue Snelling – Chair (SSn)
- Carolynne Freeman - Vice Chair (CF)
- Anne Marie King – Chief Officer (AMK)
- Mike King (MK)

APOLOGIES

- Steve Allan (SA)
- Sue Smith (SSm)
- Daljit Poone (DP)
- Richard Knott (RK)
- Rishi Hindocha (RH)
- Garry Newman (GN)

Declarations of interest all complete. There were no declarations of interest reported with the agenda.

The committee welcomed Andrew Kerr and Garry Newman. GN will replace Lakminder Flora who has joined Beds LPC.

Minutes of previous meeting

Minutes of the previous meeting (14th July 2016) were reviewed and approved as an accurate reflection of the meeting and action points. SSn signed the minutes as chair.

Actions set at the previous meeting regarding governance and appraisal of the Chair, Vice Chair and Chief officer will be deferred until the next meeting.

PSNC update – Mike King

MK gave an update on the negotiations relating to the funding cuts. It is expected that the cuts will be implemented by 1st December 2016, with an announcement made in late October.

It is felt that work done by pharmacies in relation to funding cuts has been effective, with a positive rather than a negative campaign being delivered.

LPC conference

Will be held on 2nd November. The agenda is fluid and time will be given to the funding decision due out in October.

Capita

Work is being done to clear up problems A report will be sent to NHSE

X 

Sue Snelling
Chair

Date of signing 17/11/2016

Chief Officer Report

AMK presented her report to the committee (attached)

Services – The committee agreed that the LES should be looked at in the January meeting. There are gaps in certain services which need to be addressed. It was suggested the LES sub-group will need more support and possibly separate teams looking at MK and Northants LES respectively.

It was agreed that AMK will email contractors to warn that LES contracts are often issued without prior approval of the LPC. By signing some contracts, pharmacies may be putting themselves at risk with indemnity.

AMK asked if there were any items that she should add to the agenda for the regional meeting to be held on 5th October 2016

LPC conference – HM expressed an interest in attending.

REPORTS

Sub-groups reports (services/contracts/finance/governance)

- Finance

EXPENDITURE

1250	Aspire
22.5	Currys computer tech protection
465.08	Business credit card
3773.52	HMRC

5532.95	anne wages for may	june
	hune	
273.5	cox and robinson	
147.5	Rishi	
143	sue	
	Smith	
134	Richard	
250	Raja	Honorariah
134	Raja Lpc meeting	
146.6	Has	
152	lak	
134	chirag	
197.1	Sue	
	Snelling	
143	Anil	
134	Dalijit	
0	0	
12.4	Service charge	
125	veronica	
134	Kishore	
13304.15	TOTALS	

RS presented his report which would be presented at the AGM.

RS was asked to investigate how each contractor payment is calculated as this is not clear from the statement.

- Contract applications committee

AMK presented a summary of ongoing and recent applications (attached)

- Governance - Nothing to report

Hospital discharge project

The project is still progressing with AMK and SSm.

Any Other Business

Dates have been set for meetings to the end of December 2017

19th January 2017

16th March 2017

18th May 2017

20th July 2017

26th Sept 2017 + AGM

16th November 2017

Date of next meeting confirmed as 17th November 2016

The meeting was closed at 4.30pm

Services

AGM this evening. We will be well represented by external stakeholders who were extremely generous with their time and more often than not asked me if they could present. This was true of Northamptonshire's First for Wellbeing service which has seen many challenging issues over the summer. The reluctance of pharmacists to complete the necessary NRT Dynamic Purchasing system paperwork was in some way helped by a meeting which was held last week in the Central Library. Celesio are still not in a position to move forward with it for the following reason:

Our issues are with the contractual terms and conditions and the training requirements in the service specification:

1. We are required to provide an indemnity to indemnify people who are not parties to this agreement including other Providers of the service. This indemnity is broader (because it covers third parties) and deeper (because i) the direct third party claims are not limited in any way and ii) the indemnity covers all losses) than anything we usually accept.

As a side issue the training requirements associated with the NRT dispensing service are onerous and significantly above and beyond the training requirements of other providers.

I am still in contact with FFW around DPS because I am now hearing of further issues. Some have filled the form and it looks to have been successful online but then their account cannot be found.

Such issues are extremely worrying at a time when we are trying to encourage pharmacies to increase their levels of engagement in services. I found when I was phoning around trying to encourage Know your CO campaign pharmacists were apathetic and indeed one did say that her mind was made up and she would no longer be willing to offer smoking cessation. There are some new dates available for smoking cessation training.

The sexual health service for Northants has also been problematic and the PGD became long over due. On the positive side a joint PH/CPPE training date has been organised for 6th November which will cover all 3 topics required to be completed for pharmacies wishing to offer this enhanced service.

Still on smoking but in MK we have been working with Julia Banham of Smokefree MK to finalise the PGD for Varenline. Just about there and ready to sign. Just adding a couple of clauses as per request from Janet Corbett of CCG and to update wording to reflect removal of the black triangle.

FLU SERVICE

Problem with reporting the Seqirus vaccine on PharmOutcomes has now been solved. Pfizer has launched two vaccines for this season, Enzira split virion inactivated virus and Influenza vaccine split virion inactivated virus (generic). Both vaccines are equivalent and share the same product licence number.

The generic version has been labelled with the Seqirus name on the packaging and this vaccine, along with Enzira split virion inactivated virus vaccine, are both suitable for the 2016/17 influenza season.

There has been an issue identified with the PharmOutcomes reporting system that it does not list the generic Enzira vaccine; this has been raised with PharmOutcomes and NHS England. We will update you once we receive a response from them.

Question from pharmacist...could pneumococcal and flu be administered simultaneously?

Point raised around communication at the NHSE flu planning meeting this month concerning MK.

Pharmacists not informing GP of their intention to administer the vac to care home residents. GP already ordered the stock etc. It does actually say in the spec that GP must be advised prior to administration in care home setting. Communicated this across the patch after confirming details with Marianne.

HIV POCT

Meeting Cass with Carolynne to have a look at what is involved in the test. October 12th

Falls Prevention

Hospital xfer is losing momentum. PharmOutcomes have launched the following which could hinder

PharmOutcomes has a new functionality supporting hospital referral to community pharmacies following patient discharge. The solution also allows the ability to send admission notifications.

The functionality has been developed to link directly with hospital PAS and or electronic dispensing systems and allows the hospital team to select appropriate fields from one or both systems to make up a discharge referral that is automatically sent to a selected community pharmacy when the discharge letter is published.

The hospital still dragging its feet with regard to a cohort but meantime I met with the Falls prevention team. Asked to sit in on their NCC Falls implementation group (Oct 19th). Hospital partners and ourselves to meet ahead of this on 11th October to ascertain if there might be a possibility of working together.

PSNC levy

The levy is collected 6 monthly and is £27,662 and states that this is payable : in respect of administration expenses of Pharmaceutical Services Negotiating Committee and Pricing Audit Centre for the year 2016/17. I spoke to Helen and Gerald and it would seem that none of the 3 of us know how we are being charged. It would seem not to be per contractor because I know what Helen pays for her 251 contractors and it does not equate using that formula! Gerald was also under the impression that his levy would represent a price per contractor. I have written to Yulia at PSNC and received the following in response...The levy is calculated not on the number of pharmacies that the LPC has, but by the proportion of national items that the LPC's pharmacies' dispense.

For example, if the LPC's pharmacies' dispensed 3% of all national items, then the LPC would be charged 3% of the total levy budget.

The total levy budget is set each year by the PSNC RDF sub committee. For the calculation of the 16/17 levies, the RDF subcommittee decided PSNC would have 0% increase in total levy budget.

Regional meeting 5th October

Topics will include CPFV, negs announcement, campaign, flu and other PSNC items on the agenda. Any other items you would like included? Herts have suggested the following

- PSNC levies (instalments and calculation)
- Department of Health (DH) inviting PSNC to re-enter negotiations on community pharmacy in 2016/17 and beyond not notified to LPCs (other than twitter)
- PSNC support to LPCs – ie MP engagement

PSNC conference

Chairs and Chiefs in on November 1st and the conference on the day after. Last year Sue and I attended both days and Reshma joined us at conference. In hindsight we have realised that this was not useful enough to justify repeating this year. We propose attending only the conference. Our next committee meeting falls after this date so we should think now perhaps about suggested 3 topics which I can then put forward with our neighbours. The format of the LPC Conference in the last few years will be suspended this year; this is to allow flexibility in the format as a result of the current uncertainty (90% of LPCs agreed to this). The proposal for proxy voting was approved by LPCs (80%). LPCs would like external speakers invited (90%), with many LPCs suggesting the new health minister. The format of the Conference for 2017 and beyond will be reviewed (90%). These percentages from an LPC survey

Also is this the time to re-open the possibility of the LPC's Leics, Beds, Herts, ourselves writing a joint letter to PSNC?

MP engagement

Post Brexit a new round of engagement with MP's is underway. Some did not offer to communicate with David Mowat, others did and will keep me informed of progress and when they get a reply from the new Minister. I also contacted David Mowat and invited him to our AGM. He politely declined and so I wrote back asking if he would consider speaking to us and addressing our concerns at a time of his choosing. He did not offer to meet but did offer a reply... The Minister would like to reassure you and the 180 pharmacy contractors that you represent that he shares the view of the many people who value community pharmacies. As you will be aware, he announced that the changes that were due to take place from 1 October will not now take place on that date. The Department is continuing to consider the responses to the consultation very carefully and the Minister would like to assure you that pharmacy contractors will be given sufficient notice of any changes.

Thank you for your very kind invitation to visit your Local Pharmaceutical Committee. I am sure you will appreciate the Minister's diary is exceptionally busy so a visit will not be possible at this moment. After the PWC study was published I contacted all the MP's again and had a response from 3. Two out of the 3 offered to write to Minister and I am meeting Tom Pursglove in November in his surgery at Tower Street.

All were invited to promote the National flu vaccination service via community pharmacy. Mark Lancaster, Iain Stewart, Tom Pursglove and Chris Heaton-Harris are all willing. Tom is visiting Boots, Lakeside in November and Iain Stewart in going to Beanhill. I have yet to place Mark and Chris. I have asked 2 pharmacies in Daventry to host Chris.

Medicines optimisation in MK and Northamptonshire

MKCCG MEDICINES OPTIMISATION SERVICE

Helping patients to make the most of medicines

What is this service? We are piloting a Medicines Optimisation Service as part of the CCG Pharmacy Advisors Team.

We will provide medicine optimisation support to patients who are registered with a Milton Keynes GP and their carers; to include domiciliary visits and visits to care homes. We will work across primary and secondary care, liaising with community and hospital pharmacies and community health services. The service is available from 9am-5pm - Monday to Friday each week.

What do we offer? Our aim is to offer support in the following areas: Repeat Prescribing issues Safe use of medication Compliance issues Medicine review Waste Management Signposting to other services

Who can refer? GP Practice (e.g. GP, Practice Nurse, Repeat Prescribing Clerk etc.) Neighbourhood/In-house Pharmacists District Nurses Community Pharmacy (e.g. Pharmacists, dispensary staff) Social Care (e.g. Telecare) Voluntary organisations (e.g. Age UK) Care Homes Hospital Pharmacy Hospital clinicians (e.g. Respiratory Advanced Nurse Practitioners)

How to refer? Please use the attached referral form and email to our secure email address:

MKCCGPharmacy@nhs.net

Who are we?

Steph Deane/Medicines Management Technician/ Tel: 01908 278744

Sue Marshall/Medicines Management Technician/ Tel: 01908 278744

In Nene CCG a pharmacist, Arti Chauhan has been employed to tackle the problem of escalating waste costs.

I also had a meeting with

Dr Naomi Caldwell

Clinical Executive Director for Primary Care and Localities, Nene CCG