

COMMITTEE MEETING MINUTES + AGM

Thursday 29th September

12.30pm – 4pm

Venue : Virtual meeting

LPC MEMBERS PRESENT:

Anil Patel (AP)
Matthew Armstrong (MA)
Veronica Horne (VH)
Adeola Adekunle (AA)
Karan Pankhania (KP)
Hansa Bi (HB)
Raju Malde (RM)
Aimee Mulhern (AMu)
Bobby Arora (BA)

OTHERS IN ATTENDANCE:

Anne Marie King – Chief Officer (AMK)
Amrit Minhas (AM)
Carolynne Freeman - Chair (CF)
Jasdeep Sidhu – Midlands and Lancs CSU – (AGM only)
Robbie Turner (LPC TAPR session only)

APOLOGIES

Has Modi (HS)
Daljit Poone (DP)
Lakhminder Flora (LF)
Rishi Hindocha (RH)

There were no declarations of interest reported with the agenda.

AGM

CF opened the AGM and thanked contractors for attending and thanked the committee for the last year of supporting the LPC

AM shared the annual accounts and financial report, the accounts were accepted by contractors.

Jasdeep Sidhu of Midlands and Lancs CSU presented to the AGM attendees the smoking service being introduced as part of the Community Pharmacy Contractual Framework.

JS shared that Champix would be added to the service spec in future once stock was available and reg techs will be able to deliver the service in future once changes to VAT were enacted.

JS shared that referrals will be received via PharmOutcomes rather than NHSmail which was welcomed by the committee.

Minutes of previous meeting

Minutes of the previous meeting (Thursday 14th July 2022) were reviewed and approved as an accurate reflection of the meeting and action points. CF signed the minutes as Chair.

Reports

Governance report

No report to share with the committee

AMK emailed the governance committee a copy of the new draft constitution which is being reviewed shortly

Finance

AM presented his report to the committee (attached)

Levies have now been increased in line with monthly costs, should remain stable and maintain a 4-month buffer.

The committee discussed getting a new accountant after the annual accounts being late for second year in a row. Further work is underway to look at appropriate options.

The committee discussed and agreed remuneration rates for LPC attendance:

- Face to face full day meeting - £250 + mileage
- Virtual LPC meeting standard 2 hour duration - £60
- Half day virtual meeting (e.g. LPC meeting + AGM) - £125

Market entry committee

AMK shared the contracts update (attached)

Strategy committee

MA presented the updated strategy report attached – the committee agreed with current strategy report and areas of focus

It was agreed that the PCN workstream be closed and remain a watching brief as there is no current focus on PCN leads through the contractual framework. AMK will send comms to current PCN leads and be in touch in future if any new PCN lead work is announced.

CCA quarterly questions were discussed and completed with a focus on current status of the DMS service from hospital trusts in the geography.

Chief Officer Report

AMK shared report (attached)

Any Other Business

Discussion on Transforming Pharmacy Representation Programme (TAPR)

TAPR was discussed by the committee based and was attended by Robbie Turner from PSNC.

Actions and next steps were agreed to review the following through formation of a sub group as per guidance from the PSNC TAPR LPC transformation toolkit:

- Current LPC geography size (number of contractors)
- Alignment to ICSs
- Name of committee
- Size of committee
- Current financial efficiency

Chief officer pay review was raised based on previous commitment to review after previous 6 months. A follow up meeting was requested and planned in to discuss this in detail and agree a proposal

Date of next meeting confirmed as Thursday 24th Nov face to face at Grange Park from 12pm

The meeting was closed at 4pm

Signed



24th November 2022

Carolynne Freeman (Chair)

Reports

Finance

Treasurer Report for July August 2022						
INCOMINGS						
	July	£	13,999.95			
	August	£	13,999.93			
	Levys Total	£	27,999.88			
TOTAL IN THE ACCOUNT AS OF	01/07/2022		£ 291,718.24			
TOTAL INS			£ 27,999.88			
TOTAL			£ 319,718.12			
TOTAL OUTS			£ 13,022.89			
			£ 306,695.23			
TOTAL AS OF	28/09/2022		£ 287,176.82			
			£ 6,785.43	Pharmacy Integration fund		
			£ 6,000.00	MK council		
			£ 18,994.00	Northamptonshire council	£ 13,152.30	£ 5,841.70
			£ 48,551.99	Nottinghamshire LPC		
			£ 154,574.82	NHS Northamptonshire		
		TOTAL	£ 52,270.58			
				Monthly running cost £11600		
				Therefore currently 4 month buffer		

Chief Officer Report September 2022

CCA quarterly questions to be submitted to Rob Severn (covers LPC meetings July, Aug, Sept. (July absent AMu, MA).

Northamptonshire ICB and BLMK recruitment

Community Pharmacist Clinical Lead F/T role (equivalent already recruited by Fiona Garnett for BLMK).
Person specification was national band 8A Funding til 31/3/24
Northamptonshire interviews 17/10. 9 applicants

Successful applicants will work under Ade Abimbole (East of England) for BLMK and Jackie Buxton for East Mids.

Community Pharmacy link...Project Manager Band 7 to support implementation of DMS and SCS. Small number of hours...0.2 f/t equivalent til 31/3/24

Northamptonshire ICB also accessed £53k funding and will use to employ a Transformation Manager who will be responsible for rolling out actions from the Northamptonshire Faculty Group (previously New Models of Care). 1 year post.

Inhaler recycling

Awaiting approval from Richard Seal on proposed use of c£25k LPN funding.
Intend to work with Chief Pharmacist NGH, Maxine Foster and Giles Owen on a project to support Greener NHS by building on work done in 2021/22 PQS whereby patients were encouraged to return inhalers to CP. The gold standard would be to offer a complete recycle but at the moment budget unlikely to stretch to that so to keep inhalers out of landfill we propose to send them for incineration. Working with BSOL and Dudley LPCs on this one.

Medicines Compliance Assessment

The joint primary and secondary care policy on MCAs was last reviewed in 2013! ICB have very helpfully issued tablet press extra editions to tackle the issue but are also considering if it might be worth reviewing the policy given it is almost 10 years out of date.

For example a form to help with carrying out DDA assessments for MCAs. Perhaps looking to develop a local tool to ensure consistency across the county. What would we like to see in any tool devised?

GPCPCS

I've met with Ade Abimbole, Regional Senior Pharmacy Integration Lead East of England NHSE to discuss the barriers encountered with engagement in MK.

In Northants, referrals were down by 30 but this was expected due to the reporting period falling over the summer holiday period. The number of practices engaged continues to increase in line with targets.

The next to focus on/Sara (PCC) to focus on will be: East Northants (Harborough Field, Higham, Marshalls Road, Nene Valley, Parklands, Rushden Medical, Spinney Brook, The Cottons and The Meadows), then Wellingborough (Abbey Medical, Albany house, Dr Pasquali, Queensway, Summerlee, Redwell)

Natalie: Daventry (Abbey House and Danetre), then Northamptonshire Rural (Byfield, Crick, Greens Norton & Weedon, Long Buckby, Saxon Spires)

PharmAlarms are on the way and will be hand delivered by AMK, Arti, Natalie and Olivia.

CPCF years 4 and 5

Contractors are reminded that the [arrangements for the Community Pharmacy Contractual Framework \(CPCF\) in 2022/23 and 2023/24](#) have now been agreed. To help contractors to understand the detail of what has been agreed, PSNC has published a short summary briefing. PSNC also plans to hold an online contractor webinar on the CPCF for 2022/23 and 2023/24 on Tuesday 4th October at 7.30pm.

PQS

Making a start on the new Pharmacy Quality Scheme 2022/23
Initial details of the new Pharmacy Quality Scheme (PQS) for this year have also been released as part of the arrangements for the CPCF in 2022/23 and 2023/24.

PSNC's Services Team has produced a summary briefing outlining the training requirements for the 2022/23 Scheme. Contractors are recommended to make a start on PQS where capacity allows.

The 2022/23 scheme will officially begin on 10th October 2022. As with previous schemes, it has £75m funding available and contractors will be able to claim an Aspiration payment if they wish to, later this year. In our negotiations on the scheme, PSNC has managed to reduce the scope of this year's PQS so that the estimated contractor costs and time required to complete the criteria will be below those associated with the original NHS proposals for the scheme. A further reduction in scope has also been agreed due to the delayed start of the 2022/23 PQS.

Draft Model Constitution

The draft constitution is rough, but perhaps more easily shows you what we're doing. Please do not worry about any typos, as these will be picked up later.

First, the idea is to have a shorter Constitution, with Rules and (later) Approved Governance both of which can be revised by LPCs.

Second, I have added to the transitional provision a mechanism by which further RSG related changes can be made to the Constitution without going back for a second contractor vote.

Third, what the Constitution does **not** do – it does not make any boundary changes, you need to agree these.

The date by which it would be helpful to have additional comments is the **12th of October**

I will need Lak, Raju, Karan and Bobby to consider the changes and submit their feedback. I have emailed the details to them.

Strategy

NNMK LPC Strategy sub-committee PINS report (Progress Issues Next Steps) – Sept 22

Work stream	Progress	Issues	Next Steps	Timescale	RAG
Pharmacy Quality Scheme	<ul style="list-style-type: none"> PQS Y4 and Y5 now announced 	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Plan appropriate comms and plan for upcoming PQS 	TBC	Green
Stakeholder relationships	<ul style="list-style-type: none"> Ongoing engagement for CPCF services 	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> Watching brief on contracts and roles as ICS formalises 	Ongoing	Green
Integrated care systems (ICS)	<ul style="list-style-type: none"> IPMO submitted in NN ICS formation from July 2022 – further local plans to be shared in coming months on priorities 	<ul style="list-style-type: none"> None 	<ul style="list-style-type: none"> How does LPC best engage in ICS? Understand digital maturity of ICS and CP access to LHRC (where appropriate) Clarity as CCGs move into ICS from June/July 22 and associated stakeholders and local agenda 	Ongoing	Green
Primary Care Networks	<ul style="list-style-type: none"> LPC needs to understand how CP can work within a PCN and optimal engagement with stakeholders 	<ul style="list-style-type: none"> Future role and funding model for PCN leads unclear 	<ul style="list-style-type: none"> Ongoing engagement to understand current local integration/engagement with PCNs Understand future plan for PCN leads and associated recruitment where there are vacancies 	Ongoing	Red
Delivery of new services as part of CPCF and local services	<ul style="list-style-type: none"> GP CPCS rollout continues – progress on implementation using recent funding to facilitate progress? DMS live in NGH (NHSE funding announced to support electronic referrals in hospitals) Progress on CPCF services <ul style="list-style-type: none"> Hypertension, smoking Y4/5 announced services: CMS, UEC CPCS and NMS expansion Discussion of LPN funding to support inhaler recycling scheme 	<ul style="list-style-type: none"> Need to be at the forefront of ICS integration 	<ul style="list-style-type: none"> Continue to monitor GPCPCS roll out as re-emerge from C19 Understand insights and progress from recent GPCPCS implementation activity Communications to contractors re new services Engage with secondary care on referral processes into pharmacy (DMS/Smoking) Plan for upcoming CMS service, UEC CPCS and NMS expansion 	Ongoing	Yellow
LPC review	<ul style="list-style-type: none"> TAPR to be discussed at Sept LPC 		<ul style="list-style-type: none"> Agree next steps from TAPR discussion 	Ongoing	Yellow
Winter pressures	<ul style="list-style-type: none"> Winter pressures workstream now underway for 22/23 			Ongoing	Green

Market Entry

Current Need application EXL Pharmacy Ltd – Application for inclusion in a pharmaceutical list offering to meet a Current Need at Unit 10, The Ridings, Northampton, NN4 9ET (Northamptonshire).

Though the applicant has offered additional services and cited the PNA as a reason for these services the PNA does not identify any gaps within the area for either pharmaceutical provision or pharmaceutical services in the area. The application was refused.

Application Change of Ownership for Prospect Pharmacy, Kettering by Health Corner Ltd, approved.