



Minutes of a meeting of the BLMK and Northants LPC
Wednesday 29th January 2025

Attendees:

Nishil Shah - Chair and Independent LPC Member (Retrolink Ltd) **NS**
Mahesh Shah – Deputy Chair and Independent LPC Member (Sampson AP Ltd) **MS**
Anne-Marie King - Chief Officer **AMK**
Paul Fearon - Treasurer **PF**

Amit Lakhani – Independent LPC Member (Bishopscote Chemist) **AL**
Conor Steele - LPC Member, AIMp representative (Jardines - UK Ltd) **CS**
Has Modi - LPC Member, AIMp representative (Jardines - UK Ltd) **HM**
Gordon Ross - LPC Member, CCA representative (Boots) **GR**
Lakhminder Flora - LPC Member, CCA representative (Boots) **GR**
Rishi Hindocha - Independent LPC Member (Pharmacy Cherry) **RH**
Tahera Dewji– LPC Member CCA Representative (Superdrug Northampton) **TD**
Viren Bhatia - Independent LPC Member (Kalki Health Ltd) **VB**

In attendance:

Ingrid Cruickshank - Services & Development Lead BLMK **IC**
Ann-Marie Carrey - Services & Engagement Lead **AMC**
Rita Patel - Services & Engagement Lead Northants **RP**
Stewart Wade – Stop Smoking Practitioner **SW**
Martin Manly - Public Health Principal **MM**

Number	Agenda Item	Actions
1	Welcome and Introductions (NS) NS welcomed the members, confirmed that the meeting was quorate and made it known that the meeting would be recorded for administrative purposes only.	
3	Apologies for absence (AMK) None received – it was acknowledged that GR and VB were having technical issues joining the meeting.	
4	Declaration of Interests and Governance (all) None declared.	
5	Governance Sub Committee update: (CS) A meeting was held on 28 th January – nothing to update as yet.	

6	<p>Strategy - All</p> <p>NS confirmed with the group that they had all seen the updated Strategy documents, the latest of which had been emailed the day previously.</p> <p>It was agreed that this was a very comprehensive document and a good piece of work. It will help to clarify what the LPC is doing.</p> <p>A discussion was had around the number and measurement of KPIs and the geographical placement of some community pharmacies.</p> <p>NS reminded the group that this is still a working document and can be reviewed and adjusted as deemed necessary.</p> <p>[VB and GR joined the meeting]</p> <p>NS agreed that feedback would be taken on board.</p> <p>Later in the meeting it was agreed that RH will review KPIs and make suggestions for eliminations.</p>	
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Choose You – Stewart Wade and Martin Manly

[Slides were not available but will be distributed]

SW and MM introduced ChooseYou, an integrated behaviour-change service. It has been recognised that a lot of people tend to have more than one health risk, and many have four or more. This tends to result in a lot of different referrals to separate support services.

In place of this, as a starting point, Choose You offers stop smoking support and weight loss support for adults and families alongside health coaching services. These services replace the current commissioned Stop Smoking services and MoreLife.

The service will cover Bedford Borough, Central Bedfordshire and Milton Keynes from 1st April 2025. This will not cover Luton.

Healthy Weight has two programmes:

Adults 16+

This is 12-week group rolling programme delivered face to face or virtually, in response to client feedback requesting being able to make a choice in how to receive that support.

Additional health coaching sessions available for those who are less likely to engage; and there is also postnatal offer delivered 1:1.

The delivery will be a lot more person-centred, allowing a lot more ownership.

Children and families 2- 12 years old

This based on the HENRY model (Health Education Nutrition in the Really Young) and will be delivered face to face in a 1:1 fashion. It is hoped this will encourage engagement. Motivational interviewing will also be used to increase engagement.

The Health Coaching offer is designed to increase preparation and readiness to change and to overcome barriers such as mental health issues. There will also be a strong referral pathway into mental health services with 1:1 follow up.

Stop Smoking Service

This is similar to the current Stop Smoking service. It is 8-12 week 1:1 programme, either face to face or on the phone. It is based on the National Centre for Smoking Cessation training and is a very person-centred approach.

Other elements will include offering virtual support and bringing back stop smoking groups.

In addition, the Alan Carr programme has been commissioned, offering another level of choice.

SW reached out to the Committee to further support their communities, especially any patients who were not doing well on NRT or who weren't able to trust their medication. He advised that there were 118,000 smokers in the commissioning area.

There are ongoing discussions with PharmaOutcomes, but this is subject to engagement with IT at the Councils, and it is not anticipated that this will be ready in time to coincide with a 1st April launch. It was acknowledged that the letter of recommendations that is currently used has limitations and is sitting with the Councils for them to review.

Treasurer's update and Finance Sub-Committee report – (PF)

The Management Accounts had previously been circulated. They are calculated up to the end of December 2024.

1. Management accounts:

Income:

- All is in line with expectations.
- December figure does include January Contractor levy.
- Interest rates £4,800 - £5,000.
- No sponsorship received but nor hugely material.
- No other income.

Expenditure:

- Payroll: have been put in in line with budget, however they are slightly below budget. – Change in employer's NI will be to the LPC's benefit as the employer allowance has gone up and no Employer NI is expected.
- Meeting costs: probably underbudgeted due to extra use of Rufus Centre.
- Meeting fees: budget forecast reduced due to attendance and vacancies, as will Travel and Subsistence.
- Insurance and Admin – overspent but allowances were not made for liability insurance or mobile phone or broadband.
- Levies and license fees: in line with budget.
- Audit fee: in line with budget.
- Communication: forecast for Contractor Support has been reduced. Value for money is crucial.

Surplus looks to be around £32,000. This may be used in Contractor Support and more importantly, Activity in 2025/26.

2. Bank Balances:

Current account: slightly inflated due to early payment of levy from NHSBSA

Deposit Account: £161,000

Instant access (external funds): as reported

3. External Funds:

- As stated; income £26,000 outgoings £55,000
- Balance is £ 199, 381.
- No further funds from East Midlands LPN – expected £50,000

AMK advised that there is now a PO number available to send an invoice to claim the £50,000. This is an external fund that is to be used in conjunction with Northamptonshire ICB, possibly to provide further support for Rita and Natalie in Northampton.

MS advised that implementation of CRM may take up some of the surplus.

PF advised that he is happy to make any accruals provided he has the documents to support them.

PF will bring the final budget to March meeting for approval, allowing for the Finance Committee review. He requested more information on Contractor Support and Events. NS advised this will be available before PF prepares the budget for 25/26.

9	<p>Contractor Support</p> <p>[Presentations will be emailed after the meeting]</p> <p>Other notes:</p> <p><u>Governance:</u> Details for SLAs (CGL are about to release SLAs for substance abuse) will now be coming to LPC rather than straight to the contractors.</p> <p><u>Stakeholder relationships:</u> A lot of work has been done in this area, with some challenges encountered. The definition of a “good” referral to Pharmacy First was discussed – IC advised that she was collaborating with HUC and NHS111 to support this.</p> <p><u>Local Services and Pharmacy Issues:</u> Work has been done with Hertfordshire re HUC, Thames Valley and Northants and Norfolk in relation to CGL – query over different amounts paid.</p> <p><u>Training and events:</u> The team’s recent survey results show that training and support has been requested for contraception and mental health services – awaiting contact from Public Health.</p> <p><u>PharmacyFirst:</u> RP gave an update specifically around her work with Pharmacy First in Northants. Success has been well received by the ICB. The success of the total triage system was discussed. Use of a training video filmed by a receptionist around using Pharmacy First and access to a shared dashboard has also improved referrals.</p> <p>IC updated the meeting on Pharmacy First in BLMK. There have been increases in referrals there as well, although some discussion was had around challenges like the vaccination programs, and delay in the coaches starting work. She agreed that the Community Pharmacy PCN leads have made a noticeable difference. There was some concern around the accuracy of the data, which will be discussed with Funmi at the ICB.</p> <p><u>Future Workstreams:</u> The final slide of the presentation showed future workstreams for the support team. It was agreed that this complements the KPIs in the Committee’s strategy. IC has put together a document for discussion about events. The importance of face-to-face networking was discussed.</p>	I C / A M C / RP
12	<p>Any Other Business</p> <ul style="list-style-type: none"> • IC to be sending out CGL documents for SLAs. NS asked that the members respond to the document ASAP. 	

13	2025 meeting schedule: May 14th - online July 23rd - f2f Venue tbc Sept and AGM 17 th - online November 12th - f2f Venue tbc	
14.	Concluding Comments NS thanked those present for attending today.	NS
15	Next meeting Wednesday March 19th – F2F <i>Please submit Agenda items to AMK in a timely fashion.</i>	

Approved
Chair:
Date:




20.2.25