Minutes of a meeting of the BLMK and Northants LPC
Wednesday 16th September 2026

Attendees:

Nishil Shah - Chair and Independent LPC Member (Retrolink Ltd) **NS**
Mahesh Shah - Vice Chair and Independent LPC Member (Sampson AP Ltd) **MS**
Anne-Marie King - Chief Officer **AMK**
Paul Fearon - Treasurer **PF**
Ingrid Cruickshank - Services & Engagement Lead BLMK **IC**
Ann-Marie Carrey Services & Engagement Lead BLMK **AMC**

Rishi Hindocha - Independent LPC Member (Pharmacy Cherry) **RH**
Amit Lakhani - Independent LPC Member (Bishopscote Chemist) **AL**
Nabeel Amirudin – Independent LPC Member (Regent Pharmacy) **NA**

Gordon Ross - LPC Member, CCA representative (Boots) **GR**
Tahera Dewji- LPC Member, CCA representative (Superdrug) **TD**

Guests: Mohammed Fessal – Director of Pharmacy, CGL **MF**

Apologies :
Rita Patel - Services & Engagement Lead Northants **RP**
Lakhminder Flora - LPC Member, CCA representative (Boots) **LF**
Has Modi - LPC Member, IPA representative (Jardines - UK Ltd) **HM**

Number	Agenda Item	Actions
1	**Welcome and Introductions (NS)** The Chair welcomed members to the meeting and formally welcomed **Dorina Lika , the LPC Administrator**, who was attending the Committee meeting. A round of introductions was undertaken, with Committee members introducing themselves and outlining their roles and representation. The Chair confirmed that the meeting was being recorded.	
2	**Presentation from sponsor**	
3	**Apologies for absence (NS)** As noted above. The meeting was confirmed as quorate and proceeded.	
4	**Declarations of Interest** Members were asked whether there were any new declarations of interest. AMK advised that the declaration from the newly appointed Administrator was completed. No additional declarations of interest were made.	
5	**Minutes of the previous meeting** The previous meeting minutes had been circulated in advance. Members were given the opportunity to raise amendments or comments. No amendments were raised and the minutes were proposed and seconded as an accurate record. **Proposed: TD** **Seconded: AL**	
6	**Treasurer's update – (PF)** The Treasurer presented the management accounts covering the five months to **31 August 2026**. **Income** **Levy income**	

	Levy income was reported as being on budget. **Interest received** Interest received remained within the agreed budget tolerance. However, it was noted that interest income could finish slightly below budget because external funds were reducing and interest rates were lower than previously. **Sponsorship** An outstanding sponsorship payment of **£1,000** remained due in relation to a previous event. The payment had been followed up on several occasions. AMK said that a new contact had been identified following the departure of the original representative who had arranged the sponsorship. The LPC had re-issued the invoice and provided the new contact with the history of the outstanding payment. The Committee agreed that the new contact should initially be given approximately one further week to respond. If payment or a satisfactory response was not received, the matter would be escalated with a clear deadline. Members also discussed the importance of ensuring that the cost of pursuing the outstanding amount remained proportionate to the amount owed. **Future sponsorship arrangements** The Committee agreed that the sponsorship process should be strengthened. It was confirmed that the sponsorship agreement had now been amended so that **50% of the sponsorship payment is required when attendance is confirmed**. The Committee welcomed this change as it provides greater protection for the LPC and reduces the risk of the organisation carrying the full cost of an event where sponsorship is subsequently not paid. **Payroll and meeting costs** Payroll expenditure remained within budget tolerance. Meeting costs were below budget because some meetings had been held online. Meeting fees were also below budget because attendance had not been at the expected level and there were currently Committee vacancies. The Treasurer had revised the annual forecast to reflect the likelihood that meeting expenditure would remain below budget. **Insurance and administration**	

	Insurance expenditure appeared temporarily above budget because the annual **management liability insurance premium of £550** had been paid. This was expected to normalise across the year and remain within the annual forecast. Mobile phone expenditure was below budget and other administration and licence costs were broadly within budget. CPE expenditure was on budget. Audit expenditure was slightly below budget, although the forecast would be adjusted at the next review to reflect the audit fee already paid. IT licence expenditure was expected to remain broadly in line with the annual budget. **Communications and events** The outstanding sponsorship payment remained the main issue affecting the communications/events position. The Committee noted that the lack of payment meant that the LPC was effectively carrying part of the cost of the relevant event until the sponsorship was recovered. **Contractor support** Contractor support expenditure remained below budget at the time the accounts were prepared. Some invoices had subsequently been received and paid and would therefore be reflected in the next set of accounts. **Overall financial position** At the end of August, the LPC was approximately **£17,000 better than budget**. The Treasurer estimated that, based on the current position, the LPC could finish the financial year approximately **£10,000 ahead of budget**, subject to income and expenditure during the remainder of the year. **Bank and external funds** The Treasurer reported approximately: ● **£33,102** in the current account; ● **£226,000** in the 32-day deposit account/accessibly held funds; ● **£148,635** in external funds at the end of August; ● a further **£25,000** of external funds received during September, bringing external funds to approximately **£170,000**.	

	Money had been moved into the 32-day deposit account while retaining sufficient working capital in readily accessible funds. **Committee vacancies** The Committee attendance record was reviewed. Two vacancies were noted, including vacancies arising from members who had left or had not attended meetings. The Finance Committee also had an IPA vacancy but had agreed to continue operating with the vacancy until an appointment was made. **Action / Responsibility** • **AMK:** Continue pursuing the outstanding **£1,000 sponsorship payment**. • **AMK:** Escalate the matter if no satisfactory response is received within approximately one week. • **LPC:** Continue using the revised sponsorship agreement requiring **50% payment when attendance is confirmed for** future events.	
7	**Governance** The Committee discussed current governance arrangements and the requirement for two IPA representatives to provide appropriate representation on the Governance Subgroup. The current governance arrangements are expected to change as the new organisational structures develop. Until those changes take effect, the Committee remains responsible for its existing governance arrangements. It was confirmed that the appointment of the IPA representatives is dependent on IPA making the relevant appointments and is therefore not entirely within the LPC's control. The Committee considered whether an existing member could be co-opted to provide additional perspective. It was noted that officers cannot sit on the relevant subcommittees under the governance arrangements, meaning that an alternative Committee member would be required. The Committee agreed that the existing Governance Subgroup arrangements could continue temporarily with the vacancy. If the existing members are unable to reach agreement on an issue, the matter should be referred back to the full LPC for consideration until the IPA representatives are appointed.	

	The Committee noted that governance work is expected to increase as the focus moves from the boundary realignment process towards elections. Limited election-related work is expected before 31 October, when the relevant national organisation is expected to provide the contractor information required for the new membership arrangements. **Action / Responsibility:** ● **Governance Subcommittee:** Continue operating under the existing arrangements pending IPA appointments. ● **Governance Subcommitee:** Refer any matter on which the subgroup cannot reach agreement back to the full LPC. ● **LPC/IPA:** Progress the appointment of the required IPA representatives when the relevant information/appointments become available.	
8	**Refresher ahead of AGM/SGM - (NS/AMK)** The Committee reviewed arrangements for the forthcoming AGM and SGM. The **AGM will run from 7.00 pm to 8.00 pm**, followed by the **SGM from 8.00 pm to 9.00 pm**, using the same online joining link. The SGM will provide an opportunity to: ● vote on the proposed boundary realignment; ● allow contractors to ask questions; and ● provide clarification on the proposed changes. The AGM agenda will include the Treasurer's report and accounts. Committee members were asked to log into the meeting even if no contractor attendance was expected. This was to ensure that, if a contractor joined or asked a question, Committee members would be available to respond. Members could keep cameras and microphones switched off unless someone joined. The Committee reviewed attendance at recent online drop-in sessions. Attendance from LLR and Northamptonshire had been relatively low. Those who attended tended to be former Committee	

	members with specific questions or contractors who had joined after seeing communications on WhatsApp. The Committee noted that the finance information had generally been well explained during the sessions. The Committee reviewed votes received to date. Votes received so far were in favour of the proposed constitutional changes, boundary alignment and accounts. However, the Committee recognised that the number of organisations represented remained limited and that not all relevant organisations had submitted their votes. The figures discussed included votes from Boots, Rowlands, Well and JDR. There was some uncertainty regarding the number of branches represented by JDR. The Treasurer confirmed that the current figure held was **27 JDR pharmacies within the proposed BLMK boundary**, with a further number potentially located within Northamptonshire. The Committee agreed that this should be checked against the latest IPA information. **Action / Responsibility** ● **AMK:** Verify the number of JDR pharmacies within the proposed BLMK boundary and update the voting figures. ● **AMK:** Confirm any outstanding votes by email so that the voting record can be completed. ● **All Committee members:** Attend the AGM/SGM online, even where contractor attendance is not anticipated.	
9	**Central East LPC Collaborative update – (NS)** The Committee received an update on collaborative work being undertaken by the three LPCs within the East Central area. The Committee noted that there had initially been significant momentum, although progress with the ICB had subsequently slowed. Three proposals had been submitted to the ICB and the LPCs were awaiting further feedback.	

	A further meeting with neighbourhood directors had been requested and was expected to take place either the following week or during October. **PCN / neighbourhood engagement** The Committee discussed continuation of the previous PCN engagement lead model. The proposed work would involve community pharmacy representatives attending neighbourhood meetings and ensuring that community pharmacy remained represented in local discussions. The scale of the work was highlighted. The BLMK area is expected to have four locations, each containing multiple neighbourhoods, resulting in a significant number of meetings where community pharmacy representation could be required. The Committee discussed the difficulty of providing sufficient representation without dedicated funding. Two proposals had been submitted to the ICB reflecting different levels of funding and therefore different levels of activity that could be delivered. A response regarding available funding had not yet been received. **Importance of the engagement role** Members shared their experiences of the previous PCN engagement arrangements. Members noted that the loss of these roles had resulted in a reduction in collaboration and referrals in some areas. Particular concern was expressed that community pharmacy could become an "add-on" rather than being involved in service planning from the outset. **Neighbourhood arrangements** The Committee discussed the fact that neighbourhood structures remain relatively new and are developing at different speeds across the area. Many neighbourhood arrangements are still undergoing maturity assessments and are at different stages of development. Members considered it important that community pharmacy establish a presence early rather than attempting to become involved once decisions have already been made. **November meeting** It was agreed that the **November LPC meeting should have a strong focus on neighbourhoods**. Relevant people will be invited to provide further information and enable the Committee to better understand the emerging structures and opportunities for community pharmacy involvement.	

	Action / Responsibility ● **LPC/Collaborative LPCs:** Continue discussions with the ICB regarding funding for neighbourhood/PCN engagement. ● **LPC/Collaborative LPCs:** Develop a clear approach to ensuring community pharmacy representation across neighbourhood meetings. ● **AMK:** Include neighbourhoods as a major agenda item for the November LPC meeting and invite relevant stakeholders.	
10	**CCA Quarterly Questions (if required)** The Committee worked through the questions required for the CCA quarterly return. **Support for CPCS changes** The Committee confirmed that support for contractors had been provided through multiple communication channels, including: ● email; ● website communications; ● WhatsApp; and ● information and guidance materials. The Committee clarified that its role is primarily to support and communicate, rather than formally monitor contractor performance. **Engagement with MPs and local stakeholders** The Committee discussed its engagement with MPs and other local stakeholders regarding the financial pressures facing community pharmacy. Meetings had already taken place with MPs and additional meetings were scheduled. Members had also undertaken engagement with local stakeholders to ensure that they were aware of the pressures affecting community pharmacy. **Electronic referrals from Pharmacy First** The Committee discussed work undertaken to encourage GP practices to use electronic referrals from Pharmacy First. It was acknowledged that the LPC can provide information, resources and tools, but that GP practice engagement ultimately also depends on the willingness of individual practices to participate. The Committee noted that engagement work had previously resulted in improvements in GP referrals.	

	The LPC had also provided a surgery toolkit and relevant resources to GP practices. **Hypertension and contraception** The Committee confirmed that it had undertaken engagement to support increased uptake of hypertension and contraception services through community pharmacy. Relevant resources had been included within the surgery toolkit. The Committee also referenced CPE resources and guidance relating to hypertension discussions with GP practices. **Locally commissioned services** The Committee highlighted the substantial work undertaken in relation to locally commissioned services, including significant engagement around drug and alcohol services. Members felt that the level of work undertaken should be reflected in the quarterly response. **Action / Responsibility** ● **LPC Team:** Complete and submit the CCA quarterly response, ensuring that the LPC's work and achievements are fully reflected. ● **AMK**: Continue engagement with MPs and local stakeholders. ● **Service Engagements Leads:** Continue supporting GP engagement around Pharmacy First electronic referrals. ● **LPC Team:** Continue communications and resources supporting hypertension and contraception services**.**	
12	**Services Updates** The Committee discussed the LPC's work supporting awareness and implementation of the MenB vaccination service. Members had attended vaccination meetings and engaged with public health colleagues. Following discussions with public health, the LPC had supplied posters and leaflets for use during university freshers' activities to encourage students to access participating community pharmacies. A significant number of pharmacies were participating in the MenB service. The Committee reviewed recent MenB activity data. The Committee recognised the substantial work previously undertaken by Rita Patel in relation to the MenB service. Issues raised had included: ● stock; ● booking systems;	

	• messaging; • incorrect information on webpages; and • other implementation problems. These issues had been repeatedly raised with CPE and followed up until corrections were made. The Committee noted that CPE had subsequently acknowledged the issues raised and thanked Rita for identifying them. **Action / Responsibility:** • **LPC Team:** Continue engagement with public health and relevant organisations regarding MenB implementation. • **Rita Patel /LPC Team**: Continue to raise and follow up any outstanding implementation issues with CPE as required. The Committee reviewed Pharmacy First activity. Data available through the members' area showed a 28% increase in Pharmacy First activity between May 2025 and May 2026 for Unity Pharmacy. Northamptonshire continued to perform strongly in comparison with other areas. The Committee recognised the contribution of LPC communications, engagement and support in increasing awareness and uptake. **Action / Responsibility** • **LPC Team**: Continue contractor communications and support relating to Pharmacy First. • **LPC/Service Team:** Continue engagement with GP practices to support electronic referrals. The Committee returned to the issue of Neighbourhood Health Teams. Members highlighted that neighbourhood structures are still developing and vary considerably between locations. A particular concern was whether all community pharmacists are sufficiently aware of the changes taking place. Members agreed that further communication would be needed to ensure contractors understand: • what neighbourhoods are; • how neighbourhood teams operate; • where community pharmacy fits within the new structure; • how pharmacies can become involved; and • how local decisions may affect community pharmacy. **Action / Responsibility**: • **LPC Team**: Develop further communications to improve contractor awareness of Neighbourhood Health Teams.	

	• **LPC/Collaborative LPCs:** Continue seeking early involvement of community pharmacy in neighbourhood planning. • **LPC Team:** Prepare the substantive neighbourhood discussion for the November LPC meeting. The Committee discussed a number of issues affecting substance misuse services. ARC / Milton Keynes Members reported ongoing difficulties with ARC, the provider of substance misuse services in Milton Keynes. The Committee had been seeking improved remuneration and contractual arrangements for a significant period, with discussions having taken place with the provider and public health since March 2025. A revised offer had eventually been received. However, members remained concerned that the proposed uplift did not adequately reflect the length of time since fees had previously been reviewed. The Committee discussed the proposed contract period and the importance of ensuring that contractors were not locked into an unsatisfactory rate for several years without a meaningful review mechanism. The Committee's preferred position was for the arrangement to run only until 31 March 2027, with a clear provision requiring negotiations to commence in January 2027 for the contract commencing on 1 April 2027. If the provider insisted on a longer contract, the Committee considered that the agreement should include an automatic annual uplift mechanism, potentially linked to inflation or another agreed index. Members were concerned that simply including a review clause without an agreed uplift mechanism could result in a review taking place without an actual increase. The Committee agreed that the LPC should continue negotiating on this basis.The Committee also agreed to investigate comparable rates paid in other areas, including services in London, to provide further evidence for negotiations. Action / Responsibility	

	• **Relevant LPC leads**: Continue negotiations with ARC regarding the substance misuse service contract and remuneration. • **LPC leads:** Obtain comparative service specifications and remuneration information from other areas. • **LPC leads:** Seek to ensure that any longer-term contract contains a clear and meaningful annual review/uplift mechanism. The Committee received an update regarding the CoreMat service, which is due to commence in North Northamptonshire from 1 October 2026. A webinar had already been held for contractors, although attendance was relatively low.New contracts were being issued and would come to the LPC for review before being distributed more widely. The Committee discussed implementation and contractor engagement. **Action / Responsibility:** • **LPC Team:** Review the CoreMat contract documentation when received. • **LPC Team**: Continue monitoring contractor engagement and raise any implementation concerns with the provider. An update was provided on the new health check service. Contractors had received an email on 1 September regarding the service.The agreed fee discussed by the Committee was £35. There had been a significant number of expressions of interest, with more than 50 pharmacies initially expressing interest. The application process was subsequently opened more widely across BLMK. Members discussed the application process and noted that some elements of the initial form had been unclear, particularly the requirement to insert a fee. The LPC had provided clarification to contractors. Action / Responsibility • LPC Team: Await the outcome of the health check application process. • LPC Team: Communicate the outcome and next steps to contractors once confirmed. • LPC Team: Continue to raise any issues identified with the application process with the relevant commissioner.	

	The Committee reviewed a new NRT service specification received from Bedfordshire. The Committee had only received the specification recently and had not yet had sufficient time to fully review it. The main proposed changes included: ● a £5 administration fee per invoice, reduced from £10; ● a proposed dispensing fee of £1.46 per product supplied; ● reimbursement arrangements for NRT products; and ● use of PharmOutcomes for administration and claims. Members raised concerns about the reduction in the administration fee, particularly where the reason given was increased efficiency through PharmOutcomes. The Committee recognised that PharmOutcomes may reduce administrative work, but questioned why contractors should bear the financial impact of that change when the system also provides valuable data to the commissioner. The Committee also discussed the proposed change allowing pharmacies to supply up to four weeks at a time, rather than two weeks. There was also discussion regarding whether the £1.46 fee was payable per week or per product and how this would operate alongside existing dispensing remuneration. The Committee agreed that the LPC would provide feedback on the proposed remuneration arrangements. The general consensus was that the LPC would not support the reduction of the administration fee from £10 to £5 without further justification and would seek clarification regarding the dispensing fee and four-week supply arrangements. The Committee was informed that revised remuneration had already been agreed for the relevant service. The revised figures discussed included: ● £2.20 for supervised consumption; and ● £2.40 for buprenorphine. The Committee noted that this represented an improvement in remuneration.	
13	**One Team in Action debrief**	

	The Committee reviewed feedback from the recent One Team in Action event. Feedback forms had been collected and analysed, with overall feedback reported as very positive. The Committee discussed the lower-than-expected attendance from some stakeholders. Turning Point was the main stakeholder organisation that attended from the service-related organisations invited. The Committee considered whether there should be more targeted engagement with stakeholders for future events. It was also suggested that CPE and other national organisations should be encouraged to attend future LPC events. The breakout rooms were generally viewed positively, although some feedback indicated that one individual could dominate a session. For future events, the Committee agreed that each breakout room should have a clearly identified chair or Committee/team member responsible for managing the discussion and ensuring everyone has an opportunity to contribute. Committee members should have clearly allocated responsibilities before the event. The Committee discussed whether CPD could form part of future events. Suggestions included short educational or training sessions involving organisations such as CPPE, relevant Royal College representatives, local tutors or other appropriate educational providers. The Committee noted that CPD could provide an additional reason for contractors to attend. The Committee agreed that future events should be planned further in advance. A longer-term event strategy should be developed with tentative dates rather than planning events at short notice. The Committee discussed avoiding the busiest periods of the pharmacy year, particularly autumn and winter when vaccination activity increases. Potential timing discussed included May, June and September. The possibility of incorporating the AGM into a larger networking event was also discussed. September 2027 was considered as a potential opportunity for a future AGM/event, particularly if the boundary changes have been implemented by then.	

14	**Mohammed Fessal CLG - (MF)** The Committee welcomed Mohammed, Director of CGL, who joined the meeting remotely to discuss the CoreMat service and CGL's wider approach to working with community pharmacies**.** The Committee discussed remuneration associated with the model and the importance of ensuring that contractors are appropriately remunerated for the work undertaken. Mohammed also highlighted changes to guidance relating to buprenorphine and methadone, including changes around titration and supervised/unsupervised supply. The Committee noted the importance of contractors being aware of relevant guidance changes.	
15	**NHS Optimising prescribing- proposal - (NS)** The Committee began reviewing the Central East ICB consultation concerning Neighbourhood Health Team mobilisation and the draft service specification. The consultation response will be submitted as a combined Central East response following consideration by the relevant LPC committees. The proposed response will address: 1. whether the draft service specification meets the needs of local people; 2. whether anything is missing from the draft specification; and 3. anything else the LPC wishes to highlight, including examples of successful work that could be built upon. The Committee expressed concern that, although community pharmacy was mentioned within the draft documentation, there was insufficient detail regarding the specific role community pharmacy would play. Members questioned whether community pharmacy was being treated as an integral part of the pathway or simply being added after the main service model had already been designed. The Committee highlighted the existing contribution of community pharmacy, particularly around: ● medicines optimisation; ● polypharmacy; ● frailty;	

	• medication reviews; and • supporting people in the community. Members felt that the consultation should recognise the contribution pharmacies are already making and provide opportunities for community pharmacy to participate in service planning from the outset. The Committee agreed that these concerns should be reflected in the formal response. Action / Responsibility • **LPC Administrator** : Consolidate the Committee's comments and incorporate them into the Central East consultation response. • **Relevant LPC leads:** Discuss the response with the other relevant LPCs. **Central East LPCs:** Submit a unified response within the consultation deadline.	
16	**AOB** **Conference of LPC Representatives/dates 2027** **LPC**	
17	**Conducting Comments** There being no other items, The Chair declared the meeting closed.	
18	**Close of Meeting** The chair thanked all those present for attending and for participating in the meeting.	
19	**Next meeting will be : November 18th 2026**	

Approved
Chair:
Date:



18.11.26