

# Draft Minutes

## Gloucestershire LPC Meeting

Thursday 12<sup>th</sup> May 2016

Cheltenham Regency Hotel, Gloucester Road, Cheltenham GL51 0ST

<b>Item</b>	<b>Actions</b>	
1.	<p><b>Present:</b> Philip Lewis, Mike Powis, Pat Quinn, Aitzol Calleja, Wayne Ryan, Lis Jardine (notes), Andrew Lane, Sian Williams, Fiona Castle, Peter Badham</p> <p><b>Apologies:</b> Gary Barber, Magdalena Bogdan (until approx. 11.30am), Pete Arthur</p> <p><b>Absent:</b> Iqbal Topia</p> <p>Andrew Lane applied for independent vacancy; the committee unanimously chose to co-opt AL as the new member.</p>	
2.	<p><b>Minutes of previous meeting</b></p> <p><i>Accuracy</i></p> <p>The minutes were accepted as a true record.</p> <p>AL asked for clarification re provider company (potential to work with Avon): FC was asked to invite Richard Brown to next meeting.</p> <p><i>Items for redaction from publically published minutes</i></p> <p>None</p> <p><i>Matters Arising</i></p> <p>First SCR training session went well. Lloyds are training in June. Smartcards taking longer to process than hoped.</p> <p>ONPOS – PL reported that this was not a financially viable proposal.</p>	FC
3.	<p><b>Treasurer's report</b></p> <p><i>Budget 2016-17</i></p> <p>Committee voted on proposed budget: this was agreed unanimously.</p> <p>LPC currently has surplus, so there may be room for new budget lines.</p> <p>AC to request fixed monthly payment from June 2016; newsletter article for contractors.</p> <p>AC to work with Sharon Hodges to check he has the correct list of 113 contractors and that all contractors have relevant "box ticked" to ensure they are paying levy.</p> <p>AL suggested an opportunity for cross LPC work across South West on service development, provider company – possible opportunities working with Mike Lennox, ex-Lloyds. For future discussion.</p> <p>PB queried cost of PharmOutcomes (PO); we will be reimbursed by commissioners for PO licence. Correct to have both income and expenditure described in the budget. Other costs are for ongoing admin.</p> <p>PSNC levy – PSNC will allocate some for 'fighting fund'.</p>	AC

4.	<p><b>Chief Officer report and update</b></p> <p><u>PNA steering group</u>: how encourage meaningful input? Ask the right questions. FC/LJ to survey contractors via PO / Survey Monkey.</p> <p><u>Sharps proposal</u>: end June County Council taking over contract, will add to PH contracts 'bundle' as an annual retainer, with no data collection (FC working with GCC).</p> <p><u>Stop Smoking</u>: Glos Care keen for electronic referrals/vouchers. Need for patient education/expectation management; onward referral would become a paper referral/paper claim (if originally designated pharmacy unable to supply). No decision was made, pending clarity on future of service. Some advisers are not recording quits appropriately and therefore not getting paid; FC working to resolve.</p> <p><u>MAS</u>: perceived lack of engagement with multiples – slower due to need for central office signatures. PQ willing to chase up where DoCs are missing etc. Referrals patchy – need better relationships with GPs.</p> <p><u>Support officer</u>: and FC and LJ interviewing three candidates.</p> <p><u>Contractual framework</u>: AL reported. Government have rejected PSNC counter-proposal. Recognises that pharmacy is part of the solution, but not willing to back down on proposed funding cut - services review chaired by Richard Murray now in progress. Threat of MUR decommissioning. PSNC focus on local conversations e.g. influential backbench MPs; patient advocates and groups; mapping to show effect on constituencies etc; good media stories to counteract national media attacks. PQ suggested making our LPC web site a good news story. FC/LJ to explore</p>	<p>FC/LJ</p> <p>PQ</p>
5.	<p><b>Committee Development Session – facilitated by Kevin Holt and Michaela Cozens, GEL</b></p> <p><i>Presentation</i> – how DISC reports can be used to transform performance of committee and leadership skills of the group</p> <p><i>Facilitated discussion chair role and responsibilities:</i></p> <ul style="list-style-type: none"> <li>• Committee discussed the attributes of an ideal Chair: a figurehead/face of the committee, engaging in the bigger picture; an ambassador building networks, finding champions and advocates; a communicator, with a strong personality and known reputation; exploiting press and publicity.</li> <li>• An ideal Vice Chair would provide direction and decision; ensure discipline of meetings; test weakness of ideas; make sure the committee creates a plan and delivers it; support the Chair in managing change.</li> </ul>	
6.	<p><b>Election of Officers</b></p> <p><i>Chairman</i> AL and MP agreed to stand; AL was duly elected as chair</p> <p><i>Vice-Chair</i> MP and PL agreed to stand; PL was duly elected as vice-chair</p> <p><i>Treasurer</i> AC agreed to remain in post with the unanimous support of the committee.</p>	
7.	<p><b>Public Health Intentions</b></p> <p>Pre-guest briefing from FC: PH budget will be slashed from next year. Services like Substance Misuse are coming to tender; Stop Smoking will be rolled into healthy lifestyles; Sexual Health will become a specialist service.</p>	

	<p>Sexual Health: pharmacy needs to place itself as reliable, easy and cost effective to commission. Accessibility with control. HLCs could be trained (DBS check? Training provider?) to provide consistent signposting/safeguarding element disassociated from medicine supply – allows potential remove PGD requirement. Dudley is a good example of a frontline service.</p> <p><i>Guest – Sarah Scott; Director of Public Health, Gloucestershire County Council</i></p> <p>£19.5m budget left after £2m+ cuts. Necessitates re-modelling various systems.</p> <p>Will direct to renew PHE contracts for next financial year - except Substance Misuse: new provider will be expected to subcontract to primary care, 5 year contract. PH did what they could in tender to specify preference for community pharmacy and ringfence current budget.</p> <p>By end of 17/18 will have planned changes/improvements to models for other services. PharmOutcomes is paid for via CCG/HLP. FC and SS to discuss maintaining robust system for claiming / data collection.</p> <p>HLPs – possible for them to be commissioned to provide Healthchecks in priority areas.</p> <p>Alcohol – brief intervention service?</p> <p>LPC members suggested a pharmacy app to add to GCC portfolio – local services and opening hours.</p> <p>Health and Care Overview and Scrutiny Committee chair Ian Dobie may be interested in a pharmacy briefing (FC to pursue).</p>	<p>FC</p> <p>FC</p>
8.	<p><b>Any Other Business</b></p> <p>AC requested that members wait to submit expense claims until new claim form is available. Also requested flu tally payment details from multiples.</p> <p>PQ suggested AL compose an introductory letter to go out to contractors. FC/LJ/AL to work together on this.</p> <p>LJ to create Whatsapp group(s) for Glos pharmacies, and committee.</p> <p>Interviews for LPC Support officer – PL and PQ suggested a shorter term contract than advertised and gave feedback on specific candidates.</p> <p>The LPC agreed that Executive Committee will henceforth be made up of only Chair, Vice Chair and Treasurer plus CEO.</p>	<p>Lloyds/Bo ots AMs FC/LJ/AL LJ</p>