

MINUTES OF ESSEX LPC PRIVATE COMMITTEE MEETING
Held on
Wednesday 27th March 2019
Channels, Little Waltham, Nr Chelmsford, CM3 3PT

Present	Bina Patel (BP) Jon Lake (JL) Rajiv Sharma (RS)	Simon Moul (SM) Penny Skellern (PS) Tunde Sokoya (TS)	Chirag Patel (CP) Ashley Agwuncha (AA)
In attendance	Karen Samuel-Smith (KSS)	Angela Culleton (AC)	Bharat Patel (BPatel)
Apologies	Ashok Pattani (APat) Sanjay Patel (SP)	Amarjit Nandhra (AN)	Hamish Borno (HB)

BP welcomed BPatel to the meeting

Declarations of Interest

Details for those present are currently all up to date. Any changes must be notified to the LPC Office.

Section 1

Contract Issues

- a) Contract Change updates

Nothing to report back.

BPatel noticed that there were a considerable amount of pharmacies changing their supplementary hours, he would like to receive the details in future.

Stock shortages are still a major problem, BPatel would urge all Community Pharmacists to notify the PSNC. The link has been included onto the Essex LPC website.

Section 2

Minutes and Committee Issues

- a) Minutes from 23rd January and Action Points

The Minutes from 23rd January 2019 were confirmed as an accurate record of the meeting.

Action points were updated, see attached.

- b) GSOC meeting,

PS shared the Minutes from the GSOC meeting held on 19th February 2019, which proposed some financial changes.

GSOC recommend the LPC Meetings are altered from 6 full days to 3 full days (of which will include Conference and Contractors Development Day) and 3 evening meetings. The evening meetings will be task focussed, with a newer and smarter way approach of achieving results for Contractors. RS proposed and TS seconded – Agreed

GSOC also proposed forum meetings should be reduced to 3 meetings per area per year, with consideration to be given to future webinars too. The current format captures the same audience, many contractors do not or cannot attend forum meetings, and most areas have had at least one forum cancelled in the last year due to poor attendance. The LPC needs to engage with all community pharmacy teams and look at alternative methods of communication which could assist with this. LPC would also promote other clinical and development meetings in localities. This could be reviewed after one year. BP proposed and SM seconded - Agreed

The current HR contract with Peninsula is a rolling contract with a 6 month notice to terminate, it was agreed this will continue for the foreseeable future.

Pension contributions are increasing in April 2019; therefore, no wage rises this year for Office staff.

c) Treasurers report

PS reported back on the Treasurers report in APat absence, the LPC reserve continues to be below PSNC recommended safety levels. PSNC advice on safety levels is likely to change in light of expected reduction in levy income.

Section 3

BPatel provided the members with a verbal PSNC update.

Section 4

The afternoon session was dedicated to looking at the Strategy for Primary Care Networks, see following notes and ideas;

- Intelligence gathering locally

Footprints of the networks: this should be an office function.
Heads up from CCGs? NE, BB, Thurrock

Local representative Local contractors working with local GPs- identify pharmacies within networks once we know the footprint.

Who is go to person in each network? (not pharmacist)

Evidence build from more mature networks. i.e. those at 2 or above. This may provide framework for other networks as they evolve.

- How do we take contractors with us?

First webinar topic! Map out and show them where they are and who we need to speak to.

Skills etc

Can PSNC do some "being a PCN rep" training?

Would need to include taking items to PCN and ensuring cascade out.

Forum meetings

Pertinent open questions to start the convo

Specific worked examples.

Can we show what good looks like? May not be able to at this stage but need to bear in mind

- How do we fund this as an LPC

Can we try and find resources? e.g. STP transformation money.

DATE RAISED	ACTION DETAILS	ACTION BY
22.11.17	Boots Contracts for Stop Smoking Service/Sexual Health Service still not resolved. SP has authorised the Contract to be signed (2.11.18). HLPartnership resolving 1 point around the indemnity amount. Outstanding payments have all been paid to Boots (£69,785.36)	AP/SP
23.1.19	Electronic Medicines Optimisation Pathway (EMOP) – Broomfield to go live 7 th May 2019. Carol is contacting outstanding referrals. Target of 70% to be achieved over 3 consecutive months to secure the money from EASHN (this is for Princess Alexandra Hospital, Colchester and Broomfield. Excludes Southend and Basildon Hospitals as they feature under the UCL Partnership.	LPC Office
18.7.18	GSOC – The outstanding invoice from Fenn Wright of £1466.60 (maintenance charged) to be put onto the GSOC risk register	
18.7.18	“Walk in my shoes” - KSS suggested it could be a good project for the communication or horizon scanning lead to progress. SM agreed to take this forward. Awaiting details from Simon Williams	SM/KSS
14.11.18	MP Engagement – Committee member’s contact their local MP’s, invite to Forum Meetings. AP to draft template PSNC letter – but must be adapted to include key topics that MP’s have referred to in social media or recent meetings. AP to share his draft letter with Members. Rajiv not seen template – send a copy.	Members/AP
23.1.19 27.3.18	Essex LPC Finance - Formally approach PSNC regarding fair shares from distance selling pharmacies BPatel agreed to take this back to PSNC	KSS BPatel
23.1.19	Stock shortages – not got any better, Contractors “getting use to it”. Contractors MUST report issues to PSNC, AC to put link onto Essex LPC website	AC
23.1.19	Qrisk Cancer - AP to prepare proposal and criteria for a pilot programme to be set up in Mid and South Essex in readiness for next meeting (March 2019)	AP
23..1.19	Social Prescribing - Invite Sian Brand (Mid Essex Social Prescribing Project) to next meeting	LPC Office
23.1.19	LIN - Put onto agenda next meeting (May 2019)– Jon Lake actively working on it.	LPC Office