

LEICESTERSHIRE & RUTLAND PHARMACEUTICAL COMMITTEE MEETING

Monday 3 February 2020

Holiday Inn Wigston, Leicester Road, Wigston, LE18 1JW

9.00am to 3.00pm

Present:	<p>Sue Hind (SH) – Chair Rita Patel (RP) - Chief Officer Altaf Vaiya (AV) – Vice Chair Mohammed Bharuchi (MB) – Treasurer Satyan Kotecha (SK) Shezad Alimahomed (SA) Jane Lumb (JL) Meyur Patel (MP) Gurikbal Singh (GS) David Evans (DE) Clare Kerr (CK)</p> <p>Vinay Mistry (VM) – Service Development Lead Ailsa Garner (AG)–Administrator</p>	<p>External Guests:</p> <p>NHSE - Mel Burdett, Liz Gundel, Chris Kerry Hayley Moore</p> <p>PSNC Regional Representative – Garry Myers</p> <p>NHS Midlands & Lancashire Commissioning Unit - Jit Parekh</p>
-----------------	--	--

CLOSED SESSION

1.	<p><u>Welcome</u> SH welcomed everyone to the meeting, and the committee introduced themselves to Clare Kerr who has joined the committee whilst Harman Kler (Boots CCA) is away. Domestic from venue – a fire drill to be held at 11.00am but no action required from LPC.</p> <p><u>Apologies for Absence</u> Hasmukh Vyas (HK) sent apologies in advance of the meeting.</p> <p><u>Declarations of interest</u> Forms available for completion at every meeting which are to be circulated for review by individual members of the committee and amended if required. This practice will ensure that there is no opportunity for criticism in the future. Declarations of interest forms have been uploaded to the LPC website. GS and CK need to complete their forms so the website can be updated.</p>	<u>Action</u>
----	---	---------------

2.	<p><u>Matters Arising carried over to the next meeting</u></p> <p>SH had agreed to update the business plan, and this has now been completed <u>Action log updates – carried over to next meeting</u></p>	
3.	<p><u>EGM – cancelled</u></p> <p>The EGM scheduled to take place on Monday 20 January was cancelled and the following email was sent to all independent contractors on Tuesday 7 January 2020</p> <p><i>“It is with regret that we inform you that the LLR LPC EGM scheduled to take place on Monday 20 January at 3.00pm, at the Holiday Inn Wigston is cancelled. Following our email communication sent to all contractors and Company Chemists Association (CCA) Head Office contacts on 16 December 2019, we have received a number of enquiries asking for further details regards to the EGM , and what the change to the constitution meant in practical terms to contractors.</i></p> <p><i>Having taken advice from a number of channels, including the PSNC. We have come to the conclusion that the constitution does not need to be amended to incorporate changes to the way we notify the CCA of our annual accounts. And therefore, in light of this the EGM has been cancelled and we apologise for any inconvenience this may have caused.</i></p> <p><i>Any postal votes received will be destroyed, and individual contractors who have raised concerns directly to the LPC will be contacted personally. A copy of this email will also be sent to the CCA Head Office contacts for clarity.”</i></p>	
4.	<p><u>Amendments to Agenda of meeting today</u></p> <p>RP updated the committee about the content of today’s meeting where the majority of the meeting would be used to complete the LPC Survey; it could not be completed in advance as it had to reflect the views of all the committee. Statements had already been received from the CCA, AiMP and NPA and had been circulated for information. Contractors were also being invited to complete the survey on line, and the outputs would help shape the future of both PSNC and LPCs.</p> <p>Reports from the Chair, Chief Officer and Service Development Lead had been sent out in advance. MB agreed to send his treasurer’s report to AG, for circulation to the committee and for inclusion in the minutes of this meeting.</p>	

<p>5.</p>	<p><u>PSNC/LPC Review</u></p> <p>CK gave a brief overview - PSNC has commissioned an independent review of contractor support and representation. PSNC Chief Executive first announced this at the LPC Conference in the autumn and has already been seeking views from LPC Chief Officers. The purpose of this independent review is to ensure that we are working as effectively together as we possibly can to meet those needs of contractors. The review will help to reduce duplication in the system and increase efficiencies, as well as recommending what models and ways of working will serve us best going forwards</p> <p>SK introduced the survey and explained he attended one of the focus groups on behalf of the LPC and David Evans had also attended at a different location. HV had asked SK to be his proxy for completion of the survey.</p> <p>SK read each question and there was time allowed for discussion around the table, before the agreed answer was noted.</p> <p>RP said it was important for the committee to consider what things that our LPC does that we want to share, examples of this are our collaboration with other LPCs , service improvement role links with Lipco, training, PCN approach / packs, working with industry, CCGs etc as well. There were opportunities within the survey to capture these. The committee agreed that it was important to highlight these things as they would not be elicited from the responses alone.</p> <p>The committee agreed to work through as many questions prior to the lunch break whilst also ensuring there was careful consideration and thoughtful discussion around the table. RP confirmed there was time available later in the day to complete this work before external guests arrived.</p>	
<p>6.</p>	<p><u>Treasurer's Report</u></p> <p>MB provided a financial overview to the committee by email which was circulated to the committee. This confirmed LLR LPC is in a strong financial position; as agreed at a previous LPC Meeting it was agreed money the training for PCN leads (provided by Pharmacy Complete) has been paid from the training budget.</p> <p>Currently formulating a budget to allow for extra expenses surrounding the development of PCNs and contractor support for delivery of New Contract.</p> <p>All invoices until 28th February have been paid.</p>	

7.

Chair's Report Dec 2019 & January 2020– sent out in advance by email

One of the chief things that I have done this session is to present to a groups of practice managers. The training program Kalu approached us via Adam Thomas to give a talk at one of their sessions for practice managers to highlight what pharmacy can do to help GPs and take the pressure off the surgeries. My brief was to highlight what pharmacy can do so I focused on our availability , and our qualifications. Talked about what we can do for minor ailments and also a little on our restrictions for sale to explain why some patients will be referred back to the Dr. I touched on the new contract and Healthy Living Pharmacies and the CPCS. It was a popular discussion and went very well. I had many questions, including stock issues! But the organisers were pleased, and we could be asked back in the near future to repeat the talk.

The power point is available on dropbox for your information.

I met with Neena Lakhani and Marie Thomson from the NHR regarding research possibilities and what pharmacy can do to contribute. There are several areas where pharmacy can become involved and some of them will receive a fee for doing it. What they want the LPC to do is to circulate their quarterly newsletters and help with some comms where appropriate if there are relevant studies going on. On dropbox there is a list of GP surgeries that currently work with the research network so it could be useful to bear in mind if we have any possible trials or studies going on to link up with those surgeries. Pharmalarm has taken off I emailed all the CCA for confirmation whether they needed it or not. Rita has organised the rest.

There has been another issue with Melatonin prescribing that we informed the LMSG and the meds management teams about. The GP's are still not prescribing the appropriate formulation.

There was an enquiry about availability of Testosterone, so I informed the LMSG as requested.

I looked at the business plan and wrote a few notes at the side for all to see on dropbox. I have tried to analyse the rag rating but still waiting for at least 5 to be returned. There are a few points that will need to be considered. I have been concerned about the way the LPC is being run and governance and this will need to be addressed.

I am resigning my post as chair forth with , this will be the last meeting I chair and would like to wish the LPC the best of luck in the future with the changing times ahead.

8.	<p><u>Chief Officer's Report – sent out in advance by email</u></p> <p>Since we last met EGM Cancelled Update on Website Presentation to Tim Sacks and 25 ACDs – 21 January 2020 PQS Gateway</p> <p>Meetings attended- all meeting reports sent out to the committee and filed in dropbox</p> <ul style="list-style-type: none"> • LMSG x 2 • IMNT x 2 • MOOG x 2 • LIN x 1 • MOPB x 1 • Pharmacy Workforce x 2 • DHU x 2 <p>PCN Update Feedback from Dr Garcea & 3 positive CD engagements Clear outlined process for PCN lead applications (election process for tied PCNs) PCN Comms Plan outlined and executed for PQS criteria Training plan for PCN leads in the pipeline Positive Outcomes: 10 active PCNs Positive feedback on comms/template Aegis PCN – third party removal process</p> <p>Challenges Administrative load Additional comms requirements Monitoring compliance Variation in PCN (lead & area) capabilities, journey and engagement</p> <p>DHU Consultation – Problems identified</p> <ul style="list-style-type: none"> • Patient resistance to accepting Pharmacist referral as opposed to GP NHSE will prepare amended guidance to the disposition to support 111 call health advisors • GP Receptionists often refer patients to 111 specifically for GP OOH referrals Work with LMC/GP receptionists to raise awareness of NHS CPCS (SH) • Issues around pharmacists not receiving the NHS CPCS referrals on PO DHU believe this is due to rogue DoS profiles, IT to investigate • DHU main issue around pharmacists not fully understanding the spec Identify regular offenders – RP to follow up on an individual basis <p>Upcoming Initiatives</p> <ul style="list-style-type: none"> • EPS 4 – small no of practices go live in Nov 18th. LLR dates between 01/02/20 – 02/03/20 • Once local dates agreed LPC will work with IT lead on comms/support of implementation 	
----	---	--

- TCAM – UHL (date March 2020 – IT issues)
- PSNC Review (end date April 2020)
- Present to 65 PCN/GP pharmacists, 11th February (evening)

Work in Progress

- PQS support and compliance chase 3rd Feb – 29th Feb
- CPCS – local issues
- Increase utilisation of virtual outcomes
- Implementation of Pharm Alarm

LPC Specific

- Look at process for reactive work
- Support required:
- Pharm Alarm implementation

- HLP – PQS

Outstanding work:

- CPCS Package
- App

9.	<p><u>Service Development Lead - Update sent out in advance of meeting by email</u></p> <p><u>CPCF – Readiness for LLRLPC</u></p> <p>New Contract Key deadlines to meet before the service goes live. MYS registration no later than 15th October</p> <p>CPCS registration by 29th Oct 2019 LLRLPC deadline 29th October for CPCS – service goes live 29th October Read service spec. Self-assessment for the team Signpost training CPPE/ VO <ul style="list-style-type: none"> ▶ PQS deadlines Gateway criteria Audits <u>CPCS – registration</u> <ul style="list-style-type: none"> ▶ <u>Targeted Approach</u> MYS - Data via NHS England . On - 55% (9/9/19) Now 96% as of 15/11. <ul style="list-style-type: none"> ▶ <u>Targeted Approach</u> <u>CPCS Data via NHS England</u> <u>On 24% (9/9/19)</u> <u>92% (15/11)</u> <u>98% (3/2/2020)</u> <u>4 contractors not registered</u></p> <p><u>PQS</u></p> <p>Data via NHS England – gateway criteria and DoS. On 52% as of 14/11/2019 Now 97% as of 03/02/2020 <ul style="list-style-type: none"> ▶ <u>Gateway Failed (9/12/2019)</u>☹ 20 contractors failed gateway Overtuned 17/20 = 85% SCR resolved 20 log in issues before submissions starts <u>Focus for 2020</u> <u>CPCS – bedding down support</u> <ul style="list-style-type: none"> • NHS111 • TCAM • Training for contractors • Hep C prep. • PCN Support </p>	
	<u>LUNCH</u>	

10.	<p>Continuing discussion by committee on LPC Survey to complete remainder of questions.</p> <p>RP confirmed that AG would type up the notes from the discussions today and these would be amalgamated into one document, which would then be circulated to the whole committee for comment. RP stressed the committee should take time to consider the document and out forward any changes to ensure the LLR LPC response fully represented the view of the committee and had captured the discussion which had taken place.</p> <p>In closing on this matter SH thanked the committee for their input to the discussions</p>	
OPEN SESSION – Guests invited to LPC Meeting joined		
11.	<p><u>NHSE Update- Mel Burdett</u></p> <p><u>Early May Bank Holiday – Friday 8th May 2020</u></p> <p>Please be reminded that the Early May Bank Holiday in 2020 has moved from Monday 4th May to Friday 8th May to mark the 75th anniversary of VE Day. NHS England & Improvement has recently received a number of requests from contractors to close on Monday 4th May, which is now a normal working day and core opening hours should be fully operational.</p> <p>Contractors are requested to review their opening hours as soon as possible for Monday 4th and Friday 8th May, and to ensure that correct opening hours are available on the DoS profile, NHS.uk profile, pharmacy website and within the pharmacy. Please notify england.llrprimarycare@nhs.net if you are intending to open over these bank holidays</p> <p>NHSE&I Internal Restructure</p> <p>Mel introduced her colleagues to the committee and provided a general update on the new contracts team (following the restructure) and the role of the new Primary Care Transformation Team</p> <p>Liz Gundel – Senior Commissioning Manager (Pharmacy/Optomety/Eye Health) Chris Kerry – Commissioning Manager (Pharmacy/Optomety/Eye Health) Hayley Moore – Primary Care Transformation Programme Manager</p> <p>Mel confirmed CPCS data for January 2020 would be circulated.</p> <p>JL asked about planning for Christmas 2020 due to Boxing Day on a Saturday and bank holiday moved to the Monday, there had been problems in the past with pharmacy cover and was seeking assurance that planning was being made a priority, and also applications would be looked at in a timely way. Mel confirmed this was being looked at.</p> <p>SK asked about accessible palliative care for patients within LLR</p> <p>Other areas of discussion around</p> <ul style="list-style-type: none"> • Prescribing guidelines to GPs-evidence of inappropriate prescribing • Challenge of OOO expenses • 56-day prescribing • Advanced UTI pilot ended, evaluation still ongoing and GPs unaware pilot ended and continuing to refer to community pharmacy 	

12.	<p>Jit Parekh - Jit gave an update on the winter campaign, Help us Help you, Stay Well this Winter.</p> <p>Challenges</p> <ul style="list-style-type: none"> • Activity is rising across the whole urgent care system nationally and in LLR. • Interventions are needed to manage and contain growth, in particular growth in ambulance activity and Emergency Department (ED) attendances. • UHL ED attendances have risen year on year by 4.7%. • Primary care is continuing to see a rise in the numbers of attendances in 18/19 there has been a 40% increase in the number of patients referred to ED compared to 17/18. • Rising attendances cause increased pressure on UHL and result in reduced flow, longer waiting times and poor patient experience. <p>Similar to last year we will be supporting 'Help Us Help You' national campaign as this brings together a family of campaigns incorporating messages about flu, staying well in winter, NHS 111, pharmacy and extended GP hours.</p> <p>It aims to help people understand how to navigate the NHS and get the right help and advice they need in the most timely and appropriate way. It encourages people to take appropriate actions – whether that's getting the flu vaccination or accessing the most appropriate service – to better enable the NHS to help them</p> <p>Pharmacies</p> <ul style="list-style-type: none"> • Pharmacists are experts in medicines, and use their clinical expertise, together with their practical knowledge, to advise you on minor health concerns, such as coughs, colds, aches and pains, as well as healthy eating • Pharmacists can also help you decide whether you need to see a medical health professional <p>Pharmacy pack in detail</p> <p>All Community Pharmacies in England will automatically receive a pack containing the following resources:</p> <p>Help Us Help You:</p> <ul style="list-style-type: none"> • A4 Briefing sheet - updated file 11 Oct 19 • Stay Well This Winter A5 leaflets • Stay Well This Winter A5 leaflet dispenser • Help Us Help You Treat Your Infection – Respiratory Tract Infection pad • NHS 111 – A4 posters • Winter preparedness – A4 posters <p>Flu vaccinations</p> <ul style="list-style-type: none"> • Flu vaccination for pregnant women A4 poster • Flu vaccination for people with Long Term Health Conditions (LTHC) A4 poster <p>Prescription Exemption Checking</p> <ul style="list-style-type: none"> • Briefing sheet • Poster • Leaflets/ ring bound booklet • Wobblers • Strut card • A4 Briefing sheet • A4 Poster - Itchy eye • A4 Poster - Sore throat 	
-----	---	--

Pharmacy Advice (Help Us Help You – Get it seen to)

The primary audience for this phase of the campaign is all adults who are suffering minor health conditions that do not require a GP appointment.

However, research indicates that parents and guardians of children have a lower risk threshold for their children and are more likely to book a GP appointment for them than for themselves.

The media channels will ensure that parents and carers of children aged 5 to 12 years are reached as part of the all adult audience

Key messages

- Pharmacists are experts in medicines, and use their clinical expertise, together with their practical knowledge, to advise you on minor health concerns, such as coughs, colds, aches and pains, as well as healthy eating
- Pharmacists can also help you decide whether you need to see a medical health professional

Timeline

Jan – March 2020

Activities

Toolkit supporting Pharmacy

Working with partner organisations to amplify what a pharmacy offers

Partners and organisation to engage with target audiences

Collaterals

National collaterals , Social media tool kit, localised press release

NHS 111 -If you want to access services quickly NHS 111 (24/7) should be your first call, unless it is a serious or life-threatening emergency

- If you need to speak to a clinician they will transfer you to one, so you get the help you need
- If you need to be seen in person then they will book you an appointment with the service you need, meaning you will be seen quicker than if you attend without calling first

NHS App

The NHS App enables you to:

- check their symptoms using the health A-Z on the NHS website
- find out what to do when they need help urgently using NHS 111 online
- If their GP practice is connected to the app, they can register and verify their identity so they can:
 - book and manage appointments at their GP practice
 - order their repeat prescriptions
 - securely view their GP medical record
 - register as an organ donor
 - choose whether the NHS uses their data for research and planning

The NHS App is now available to the public on [Google Play](#) and [Apple app stores](#).

How you can help

- Make sure long-term condition patients get flu jab
- Get your patients to Download the NHS App to check symptoms, book appointments online and order repeat prescriptions
- Get your patients to familiarize with local NHS services and how to use them

13.	<p>PSNC – Garry Myers (Regional Representative)</p> <p>Garry gave a confidential presentation summary to the committee and answered the questions raised.</p>	
14.	<p>Presentation to outgoing chair, Sue Hind, by Altaf Vaiya (vice- chair) on behalf of the committee, thanking Sue for all her hard work as chair and her many years of service to the LPC as a committee member.</p> <p>Meeting closed at 3.50pm</p> <p>Following the main LPC Meeting, the Executive Committee met for a brief time to discuss and agree priorities and workload in the absence of a Chair</p>	

Date of next meeting is Monday 20 April 2020
Location – Holiday Inn Wigston, start time to be confirmed

Signed (Chair)

Name

Date.....