

**UNADOPTED MINUTES OF THE
COMMUNITY PHARMACY SHEFFIELD MEETING
12 JANUARY 2021**

VIRTUAL MEETING VIA MS TEAMS SOFTWARE

7.00 pm to 8.30 pm

MEMBER	24.09.19 Day	19.11.19 Day	11.2.2020 Day	30.06.20 Eve	18.08.20 Eve	15.09.20 Eve	24.11.20 Eve	12.01.21 Eve
<i>Nominated/ Appointed Contractors</i>								
David Russell (Well) (Chair)	+	+ (part)	+	+	+	+	+	+
Crispin Bliss (Vice Chair)	+	+	+	+	A	+	+	+
Claire Thomas (Chief Officer)	+	+	Mat leave	Mat leave	Mat leave	+	+	+
Greg Campbell (Treasurer) (Apt 4/16)	+	+ (part)	+ (part)	+	+	A	+	+
Andrew Hartley (Appointed 10/16)	+	+	+	+	+	+	+	R
Simon Hay (Appointed 4/18)	A	+	+	+	A	A	+	R
<i>Company Chemist Reps</i>								
Emilia Stelmach (Boots)	+	A	A	+	+	+	+	+
Matthew Watters (Boots) (Apt 11/17)	+	+	A	+	+	+	+	+
Jamil Ahmad (Well) (Apt 01/2017)	+	+	+	+	A	+	+	A
Luke Downs (Lloyds)	+	+	+	+	+	+	+	+
Joel Blakemore (Weldrick's) (Apt 10/20)	N/A	N/A	N/A	N/A	N/A	N/A	+	+
Dougie Mistry (Day Lewis) (Apt 4/18)	+	+	A	A	+	+	+	+
Louise Gurney (Boots) (Apt 5/19)	+	A	A	+	A	+	+	A
Garry Myers (PSNC Rep)	N/A	N/A	A	+	N/A	N/A	N/A	N/A
Susie Coates (LPC Support Manager) Apt November 2012	+	+	+	+	+	+	+	+
<i>Observers</i>								
Jo Tsoneva (NHSSCCG)	N/A	N/A	+	N/A	N/A	N/A	N/A	N/A
Steve Freedman (NHSSCCG)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Peter Magirr (NHSSCCG)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Steven Haigh / Neil Heslop / Yvonne Elliott / Andy Hilton (PCS)	N/A	N/A	A	N/A	N/A	N/A	N/A	N/A

+ = PRESENT A = APOLOGIES FOR ABSENCE R = RESIGNED N/A = NOT APPLICABLE

		Action
1.	<p>Welcome / Apologies / Membership:</p> <p>David welcomed everyone to the virtual meeting and thanked all for giving up part of their evening after busy days at work; he confirmed this was an extra CPS meeting, to keep everyone in the loop on current priorities, but only intended as a short meeting to allow the Finance Sub-Committee to meet virtually straight afterwards. It was noted Louise was on leave from work this week and Jamil had apologised. David also advised that Simon Hay (independent member) had resigned from CPS as is now concentrating his work in the Midlands on CPCS. He had kindly offered to share learnings and Claire reported appreciation for his help already. David acknowledged the valuable contributions Simon had made to the Committee with grateful thanks.</p>	
2.	<p>Committee Corporate Governance</p> <p>David referred to the usual Governance requirements and highlighted that although members were not face to face to access the Governance folder, the detail was available if required and members should declare / register any relevant interests as necessary.</p>	
3.	<p>CCA Reporting</p> <p>Luke kindly agreed to continue to report on the Committee Meetings.</p>	LD
4.	<p>Minutes of the Meetings held on 24 November 2020</p> <p>Further to circulation of the Minutes with the Agenda papers, it was noted matters arising were already on the Agenda. The minutes were accepted as an accurate record of proceedings.</p>	
5.	<p>Matters Arising:</p> <p>MP Engagement / DYB PSNC Event – Claire advised that she was working with PSNC to arrange a joint event across SYB which was likely to be mid to late February. Some already held elsewhere have been reportedly as very successful.</p> <p>Vaccination and Immunisation Meetings / CPS Member – Claire thanked Luke for agreeing to cover these meetings following Andrew H's resignation; with Claire deputising as necessary. Luke would assist Claire with other items of work to cover a full day's locum cover for Luke's time. Query was raised about accessing flu data and it was agreed to check with Steve Freedman and Kathy Wakefield.</p> <p>DACT - Supervised Consumption Service – Claire advised that she had established a Sub-Group with Luke and Emily to consider the future of the Supervised Service due to the removal of patients from the supervised list during the pandemic, which had severely affected pharmacy income despite there remaining considerable support demands for this client group. The temporary top up payments had been stopped from September, but following further discussions the Commissioner agreed to reinstate and backdate these payments, until a revised service specification is in place. The Commissioner is aiming for a Contract Variation being issued and the revised Service Specification in place by 1 April 2021. The Commissioner will set out a time line for working on this.</p> <p>MARRCh Pilot in Care Homes – Claire outlined an update on proposals for a pilot scheme to use funds up to the end of the financial year. This had been delayed due to COVID-19 and seeking to draw up a list of 200 patients in Care Homes who might benefit. The CCG had agreed a £1,500 fund for admin support for payments from CPS, which would be invoiced for shortly. The fee for the service was £50 per patient set up, with a £10 monthly fee for 6 months from 4 pharmacies. This would be detailed appropriately for in the CPS accounts.</p>	<p>CT</p> <p>GC</p>

	<p>Microsoft Teams / Zoom – Members were canvassed on preferences for setting up MS Team Meetings or via Zoom. There was a general preference for MS Teams. Claire would research further and email round the cost options, but it was agreed that this should be budgeted for in the next financial year then reassessed.</p>	CT
6.	<p>Current Priorities:</p> <p>Virtual Outcomes Licence – Claire confirmed this had been commissioned for the last two years and had received good feedback from independents, but the activity reports demonstrated much less uptake from multiples. The latest CPCS pack had received excellent feedback and was a very useful resource in seeking to move the service forward. The recommendations of the Wright Review moved away from LPCs giving training support but until work on implementing recommendations of the Review is complete, members agreed this should be commissioned for a further year. Greg confirmed it had already been allowed for in the budget. Claire would advise Richard Brown accordingly, who had kindly let the licence roll on since November; the cost would be slightly less as there had been a reduction in contracts to 123.</p> <p>GP-CPCS – Claire referred to a meeting earlier in the day, which had been co-ordinated by Jo Tsoneva at the CCG, for those who had expressed an interest in this service, to discuss a productive way forward. It had been a good starting point with the EOIs from Sevenhills / The Foundry & University PCNs being taken forward in the first instance. David, Claire and Susie would discuss outside the meeting how best to support the start in Sevenhills, which involved 4 GP practices. Things which need consideration include: the model of support; template for referrals; options for referral; and how outcome data could be captured. This could then aid further roll out. It was hoped individual Pharmacy PCN Leads would then be able to take this forward in other areas, if backfill was available. Claire confirmed there was some local funding available from NHSE&I which could ultimately be used to gain support from Tom and Laura from Barnsley LPC (as per the pilot arrangements). Claire was checking which IT systems each practice had to identify who could best provide guidance. It was acknowledged that the service had gone live from November 2020 but there was resistance from GP practices as they did not see the benefits in creating a referral process when they currently verbally referred patients to pharmacy where appropriate. PSNC are undertaking a further audit to capture the number of patients who come to pharmacy having been referred by their GP practice, to demonstrate ‘soft’ data. Claire agreed to produce a briefing which demonstrated the benefits which could be shared appropriately.</p> <p>Carer Support - Claire outlined some conversations which had taken place with the CCG & Sheffield City Council about how Community Pharmacy could support carers. Jo Tsoneva had put forward some suggested support packages but it was noted there was no funding attached. Members highlighted that informal (unrecorded) support is regularly provided for carers and that in the current climate it was not possible to commit to something more formal without funding. They would be happy to signpost people to resources that were available via information booklets or a website and to display materials for a HLP campaign. Claire would refer back to Jo.</p> <p>SYB Joint Funding / Backfill – Claire referred to the recent SYB Joint LPC meeting (5 Jan) which was still discussing appropriate funding / backfill of the contributions made by individual LPC representatives to issues of mutual benefit. Claire outlined the work she / CPS had already committed to at SYB level. Members felt that as Claire had returned to work and was trying to become more involved with supporting work at a SYB level, then previous arrangements should continue (i.e. we all try to contribute to meetings and work that have benefit/impact on all SYB LPCs but don't claim backfill for this). If this is not supported by the other SYB LPCs then the preferred option by CPS members is that a central funding pot is held (CPS happy to hold this) which all SYB LPCs contribute to and money is drawn from to fund meeting attendance and joint working such as contractor events (however it was felt that this would be quite time consuming). Members wished to seek the views of the other Committees and were happy to go with the SYB majority on this. Claire / David would liaise and report back to the other LPCs.</p>	<p>CT</p> <p>CT/DR/SC</p> <p>CT</p> <p>CT</p> <p>CT</p> <p>CT/DR</p>

	<p>COVID-19 Vaccination of Staff / C-19 Vaccination of Patients – Claire referred to the strong feelings about the apparent under-valued view in prioritising Community Pharmacy staff for vaccination; with a recent communication from the CCG indicating they would be included in the cohort that would be vaccinated by late Spring. There were numerous reports from Community Pharmacy of patients refusing to wear masks entering premises and latterly confirming they had been diagnosed C-19 positive and the fact that pharmacies had remained open when GP doors were closed and were quite clearly at risk as front line staff. NHSE&I had confirmed primary care staff, including Community Pharmacy, were included in the cohort for vaccination by mid February. Claire had been trying to find out more about local staff vaccination plans over the previous two weeks as it was clear other LPC areas had been approached to help in the planning. The NHSE&I Area Team had been extremely helpful in facilitating our inclusion in local plans.</p> <p>Data was being collated of staff needing vaccination in Sheffield Pharmacies to be able to assist the new Vaccination Site being set up in Sheffield. PSNC had now issued some Guidance.</p> <p>David and Claire had contributed to an article in the Sheffield Star Newspaper regarding Community Pharmacy involvement in delivering Covid vaccinations.</p> <p>Post Meeting Note: Claire had also provided a teatime interview on BBC Radio Sheffield on 13 January confirming Community Pharmacies are well placed to offer the C-19 vaccine along similar lines of the flu vaccination service which was so successful, particularly this year. However, much relied on vaccine availability and alternations to the Service Specification requirements.</p> <p>NHSE&I were to revisit the EOIs of pharmacies wishing to offer a vaccination service in order to increase the provision across the country. Peter Magirr had also offered the support of members of the Medicines Management Team to support pharmacies with service provision where useful.</p> <p>Members discussed that given the current LES requirements and vaccine availability, wider provision of vaccinations from the Community Pharmacy network may be some months away yet.</p>	
<p>7.</p>	<p>Market Entry – Susie ran through the Sheffield changes which had been circulated with the Agenda and Papers for the meeting, noting that Firvale Pharmacy had now moved into new premises, that Abbeydale Pharmacy and London Road pharmacies had changed ownership. There are currently 123 pharmacies in Sheffield.</p>	
<p>8.</p>	<p>CPS Meeting Dates for 2021:</p> <p>9 February 20 April 8 June 21 September (AGM) 23 November</p> <p>Whilst the meetings continue to be held in the evenings, it was hoped to keep these to approximately 2 hours in acknowledging everyone was already tired from a full working day.</p>	

NB THESE MINUTES REMAIN IN DRAFT FORMAT UNTIL APPROVED BY THE FOLLOWING MEETING OF THE COMMITTEE