

**UNADOPTED MINUTES OF THE
COMMUNITY PHARMACY SHEFFIELD MEETING
20 APRIL 2021**

VIRTUAL MEETING VIA MS TEAMS SOFTWARE

7.15 pm to 10.15 pm

MEMBER	11.2.2020 Day	30.06.20 Eve	18.08.20 Eve	15.09.20 Eve	24.11.20 Eve	12.01.21 Eve	09.02.21 Eve	20.04.21 Eve
<i>Nominated/ Appointed Contractors</i>								
David Russell (Well) (Chair)	+	+	+	+	+	+	+	+
Crispin Bliss (Vice Chair)	+	+	A	+	+	+	+	+
Claire Thomas (Chief Officer)	Mat leave	Mat leave	Mat leave	+	+	+	+	+
Greg Campbell (Treasurer) (Apt 4/16)	+ (part)	+	+	A	+	+	+	+
Ellie Bennett (Wicker) (Appointed 03/21)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	+
Vikas Kumar (G&A) (Appointed 03/21)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	+
<i>Company Chemist Reps</i>								
Emilia Stelmach (Boots)	A	+	+	+	+	+	+	+
Matthew Watters (Boots) (Apt 11/17)	A	+	+	+	+	+	+	+
Jamil Ahmad (Well) (Apt 01/2017)	+	+	A	+	+	A	A	A
Luke Downs (Lloyds)	+	+	+	+	+	+	+	+
Joel Blakemore (Weldrick's) (Apt 10/20)	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	+	+
Garry Myers (PSNC Rep)	A	+	N/A	N/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						
Steve Freedman (NHSSCCG)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Charlotte Hastie (NHSS CCG)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	+
Phil Scott, Andrea Cheetham, Ian Clucas (YHCR)	N/A	N/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:</p> <p>David welcomed the two new independent members (Ellie Bennett, Wicker Pharmacy) and Vikas Kumar (Gilbert & Armstrong, Mosborough) who replaced Andrew Hartley & Simon Hay who resigned at the end of December. All members introduced themselves virtually.</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>YHCR Presentation</p> <p>Phil Scott, Andrea Cheetham and Ian Clucas jointly gave a virtual outline of their work on the development of the Yorkshire and Humber Region Care Record. To take the project forward and ensure the common platform portal maximised the benefits, they needed to understand what access routes were most important to be included for Community Pharmacy. They had bid to secure funds for this work and Community Pharmacy was viewed as a priority, linking them to information from multiple settings (ie GP practice records, mental health, ambulance and hospitals). They currently have a technical prototype which has been co-designed and tested for clinical safety. They need to test usability and accessibility using case studies and pilots. The aim is to improve the current limitations of the SCR etc.</p> <p>The representatives ran through a virtual tour of the portal showing what had already been incorporated (ie appointments, encounters, allergies, medicines prescribed, obs and results – BP, social care input) and CPS members were given the opportunity to state what would be useful to include from their individual perspective which included suggestion of accessing as much as possible / allowed as it was hard for pharmacists to know what they needed to help a patient, until a given situation arose. However, pathology results, acute results especially INR & Lithium levels, would be particularly useful over the weekends. The current SCR is dependent on individual input. There is an enhanced version in operation during COVID-19, which it was understood, would be withdrawn.</p> <p>It was clarified that information is gathered from various 'feeds' such as SystemOne and Emis websites but to include the data held by the Sheffield 'ICE' facility at STH would be invaluable. Information on hospital admissions as well as discharges would be really helpful to Community Pharmacy. Information relating to a patient's health and wellbeing as well as medicines, would also help build a picture, placing pharmacy in a much improved position to help individuals. It was confirmed that IG is already in place (see YHCR IG Statement) with consent implied. Information would be pulled in 'real time' so as accurate as the input made. Access would be granted via ICS Leads; it is a federated model which relies on individual responsibility as to who could view in each establishment. David explained that many CCAs have tight firewalls which might not allow access but it was not considered insurmountable issue. Claire confirmed Sheffield was representing SYB LPCs in this matter and she would be feeding back to the other two Chief Officers of Barnsley, Doncaster, Rotherham & Bassetlaw.</p> <p>Two members volunteered to test the YHCR system and Claire agreed to share their details and give the other LPCs opportunity to look for volunteers a little later down the line – Andrea would confirm.</p> <p>It was confirmed that the system is paid for via the 3 ICS' in the Region, so no cost to Community Pharmacy. There is a lot of 'on-boarding' yet to take place before the benefits would be a reality to go live. Claire confirmed that his work had been discussed for many years and was now backed by new funding, so has a better chance of implementation.</p>	CT AC

<p>5.</p>	<p>Appointment of Officers:</p> <p>As required under the CPS Constitution from 1 April Officer positions required fresh appointments and after offering members the opportunity to put themselves forward to be Chaiman, Vice Chairman or Treasurer, the following appointments were confirmed with grateful thanks to the current Officers for agreeing to continue in post for another year:</p> <p>Chairman: David Russell Vice Chairman: Crispin Bliss Treasurer: Greg Campbell</p>	
<p>6.</p>	<p>Minutes of the Meetings held on 9 February 2021</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>	
<p>7.</p>	<p>Matters Arising:</p> <p>CCG MARRCh Pilot in Care Homes – Claire thanked Susie for her support in taking this pilot forward by following up with potential pharmacy providers with a view to commencing the service in May. There remained some issues regarding Boots agreeing to participate and Louise was to refer back on this. Susie highlighted that Boots covered the largest bed occupancy Care Home on the list provided by the CCG, so it would be really helpful to have them on board as part of the pilot.</p> <p>SYB Joint Funding – David explained that due to Claire’s and Susie’s current workload, he had discussed with Tom Bisset, CO for Barnsley LPC about the benefits of jointly funding a support role for engagement on GP-CPCS, DMS & PCN Lead needs work. Doncaster and Rotherham were not keen to join at the current time. Members agreed to look at the costs involved, but agreed in principal that the idea would be useful to take forward. Claire drew members’ attention to an additional item she had placed with the papers for the meeting, which was a spreadsheet setting out the current priorities being taken forward. It was acknowledged that in Sheffield, STH were not yet in a position to take forward DMS referrals, so noted that priority would initially be given to GP-CPCS and PCN Leads support.</p> <p>POL - Claire advised that she had heard nothing further on the potential for the POL being rolled out further in the City.</p> <p>NOMADS – It was confirmed that the CCG had called a Stakeholder event to look at the on-going concerns about the supply of NOMADS. Reference was being made to the service in Barnsley. Luke highlighted that the next Medicines Steering Group would be considering this again but that the mixed concerns about issuing 7-day or 28-day scripts was more down to how much the practices understood how to operate the 7-day issue on their computer systems via ETP. It was agreed to discuss further outside of the meeting.</p>	<p>LG</p> <p>DR/CT/ LD</p>
<p>8.</p>	<p>Chief Officer Report: Claire had circulated her Chief Officer report to members in advance of the meeting and members had been asked to consider this in advance and raise any pertinent questions that might need clarification. However, members were satisfied with the detailed updates provided on current priorities. David confirmed that his work as Chair matched closely with the items detailed in Claire’s report.</p>	
<p>9.</p>	<p>PSNC Member Days: Susie explained she had asked PSNC if there were any planned new Member Days for CPS’ two new independent members and had been advised that James Wood was now leading on this work and had asked Chief Officers for feedback on any particular topics members would like to see included to improve their skills. Joel, as the previous newest member, who had attended a new Member Day last, stated the responsibilities had sounded quite onerous, particularly regarding checking CPS finances.</p>	

	<p>David suggested that the main issues for new members to be conscious of, was to recognise they represented all Sheffield Community Pharmacies not just their own interests; their role in governance requirements and considering the financial statements shared; their responsibility to flag any concerns. Ellie as a new member said it was difficult to know what she needed until she had been part of the Committee for a few months. Susie would share these comments with James Wood at PSNC for their planning purposes.</p>	<p>sc</p>
<p>10.</p>	<p>Finances: Greg as Treasurer, had shared his updated Financial Spreadsheet which was in the revised format as suggested by PSNC for consistency across LPCs. He referred to the various monies being held separately for individual project spends, which are all accounted for individually and monitored. He had submitted a draft proposal for how best to use the additional PCN monies which had been allocated by NHSE&I which was discussed and agreed that there be a two pronged approach, whereby PCN Leads had a set budget but could apply for additional funds for any specific work they were taking forward; this recognised how the PCN Leads varied in what they were able to offer to the pharmacies on their individual patches and acknowledged that those perhaps more experienced, could act as mentors to others or share work, from the experience they had gained, and that this should therefore be reimbursed appropriately as benefitted all. It was recognised that the previous mention of jointly employing (with Barnsley) someone to support, could include the less experienced PCN Leads. It was also confirmed that a new monthly reporting platform had been agreed which would be shared and made reporting back to NHSE&I consistent from all LPCs. It was agreed to try this method of sharing the finances for four months, to see if working effectively and agree at six months.</p> <p>Greg and Susie were to look at the new format which formed the Accounts / Financial Statements for the Annual Report as there were new requirements for inclusion. Greg recommended that members look at the new documents PSNC had placed in the Members area of their website. Greg was to update and share the latest Expenses Claim Form if required, once any changes finalised by PSNC; again for consistency between LPCs.</p> <p>Greg / David emphasised again for all CPS Members to submit their claims promptly, noting that the Expenses Policy stated old claims would not be paid.</p>	<p>CT</p> <p>GC</p> <p>ALL</p>
<p>11.</p>	<p>Current Priorities:</p> <p>Strategic Planning & AGM Sessions – Claire advised that she had been in discussion with Jack Davies from Community Pharmacy North Yorkshire who had assisted with the last face to face AGM in 2019 which had been a great success with total cost covered by sponsorships, with very positive feedback. Jack was happy to support CPS, working with Claire and David, with both their AGM in September (anticipating this would be face to face again) using the Slido facility which had been well received previously and any Strategic Planning Day for CPS Members. The reporting from using such technology would also help with formulating the final Strategy and would save a huge amount of valuable time for both Claire and Susie.</p> <p>It was agreed to engage Jack to help with a day Strategy Event in July and the evening AGM Event in September which would form some useful and relevant presentations then a more informal networking opportunity to celebrate all the work Community Pharmacies over the past 18 months.</p> <p>GP-CPCS – Claire confirmed that Seven Hills PCN is all set to launch their referral process on Monday 26 April with linked practices hopefully going live within a couple of weeks including City Centre Mulberry Street.</p>	

	<p>David highlighted that there was pressure from some Contractors to meet the GP-CPCS engagement requirements by 30 June ready for the extended MYS deadline of 5 July.</p> <p>Claire agreed to prepare a support pack of the key elements and examples of engagement and encourage PCN Leads to set up their own engagement meetings and where necessary for CPS to hold a mop up, virtual event for those who needed it. Claire said it was important to encourage regular contact. There was an option to out-source the support (ie via Liam Stapleton at £600 for an evening event). Claire also mentioned that Adam Clark in Barnsley had recently been hugely enthusiastic about how GP-CPCS had improved the working life of he and his staff and that the practice was fully engaged and grateful for the difference being able to refer appropriate patients, had made to their daily workload. Adam had offered to speak at events to highlight his success and key tips. Ellie offered to help with any zoom set up required as they used regularly at work. This basic approach would meet requirements, then further work could be considered with those needing more individual support. Claire also highlighted the need to engage with general practice, which she intended to undertake via their locality meetings, but needed some data to share from services already established, such as at Grenoside and Basegreen / Charnock.</p> <p>It was agreed to arrange a zoom / MS Teams, basic, briefing session for those who want it, to demonstrate the success of the Clover Group work. Later for more support on how to engage with practices could be provided. David confirmed all practices have access to Microsoft Teams via their nhs.mail.</p> <p>Workforce – Claire outlined that in Network North the practices were concerned they did not have sufficient pharmacist support from Primary Care Sheffield to make full use of the funding available to them through the Advanced Roles Reimbursement Scheme (ARRS) and that they have some funding available which could be used for pharmacist or technician time (along the lines of the Prime Minister’s Challenge Fund – PMCF) which indicated a need for more training of ACTs. Talks were on-going.</p> <p>PharmAlarm – in acknowledging that PharmAlarm was of great benefit to pharmacies in identifying when referrals such as GP-CPCS had been received, the cost of supplying this to all Sheffield pharmacies was disproportionate to what it would be for individual pharmacies buying their own, taking into account many pharmacies had already invested in these. It was agreed it was a Company decision on whether to invest in this technology.</p>	<p>CT</p> <p>CT</p>
<p>12.</p>	<p>Independent Prescriber Backfil Funding – Claire reported that due to the large number of EOIs received, it had been necessary to draw up some additional criterion to help decide who warranted the funding. There were sufficient funds to offer four places (with potential six if two already previously approved, were not going forward). Many had experienced huge difficulties in securing a DMP. These applicants need to secure a University place for September at the latest as it was important to arrange the evaluation to demonstrate the value of the funding which had been secured for this project from HEE. It was suggested the potentially successful applicants be asked to provide the DMP form as evidence to confirm their funding would be allocated.</p>	
<p>13.</p>	<p>Market Entry – Susie had shared the latest Market Entry spreadsheet – it was noted the change of ownership of Boots at Asline Road had been withdrawn and it was understood the pharmacy would now close rather than transfer ownership.</p>	
<p>14.</p>	<p>Dates of Future Meetings:</p> <p>8 June – still virtual but streamlined to avoid lengthy evening meeting 21 September – AGM – face to face as discussed above 23 November – hopefully face to face returning to previous arrangements</p>	

