

Minutes of the Meeting held Tuesday 20th July 2021 via Microsoft Teams platform

Chairman

Paul Jenks CPL Chairman and LPC Member CCA rep		
LPC Members present		
Marc Brooks Chris Kenny Blazej Jasnowski John Broomhead Jon Norman Rob Severn Chris Mulimba	CPL Vice-Chairman and LPC Member AIMp rep CPL Treasurer and Member AIMp rep CPL Member AIMp rep CPL Member AIMp Rep CPL Member CCA rep CPL Member CCA rep CPL Member Independent rep	MB CK BJ JB JN RS CN
In attendance		
Tracey Latham-Green Hazel Sisson	CPL Chief Officer CPL Admin Support Officer	TL(HS
Apologies		
Chirag Ahir	CPL Member Independent rep	CA

Abbreviations

CCG	Clinical Commissioning Group
CP	Community Pharmacy
CPL	Community Pharmacy Lincolnshire
CPPE	Centre for Pharmacy Postgraduate Education
DMS	Discharge Medicines Service
DOC	Declaration of Competence
GDPR	General Data Protection Regulation
GP	General Practitioner
GP CPCS	General Practice Community Pharmacist Consultation Service
ICSs	Integrated Care Systems
LDC	Local Dental Committee
LMC	Local Medical Committee
LOC	Local Optical Committee
LPC	Local Pharmaceutical Committee

MYS Manage Your Service NIHR National Institute for Health Research National Health Service England NHSE NRF Non-Recurrent Funding Prescribing and Clinical Effectiveness Forum **PACEF** Primary Care Network PCN PQS Pharmacy Quality Scheme Pharmaceutical Services Negotiating Committee **PSNC** Sustainability and Transformation Partnerships STPs United Lincolnshire Hospitals NHS Trust ULHT UOL University of Lincoln

Minutes:

Item	Details	Resp.
20/7/1	Welcome, introductions & apologies	
	 Apologies from Chirag, who was unable to attend were passed onto the committee as he was unable to attend. PJ commented on the issues all are facing around Locum Cover at the moment. PJ informed the committee that there had been no further contact or apologies from Milena (new CCA rep to replace Enrico). 	
20/7/2	Committee Governance	
	Declarations of Interest (DOI)	All
	 PJ commented that he had uploaded an updated copy of his DOI to the CPL website. RS informed the committee that he does not sit on the LPC Support Group at present. From August he will become LPC Support Manager. TLG requested that RS update his DOI and forward it to her to upload the redacted version to the CPL website. 	RS, TLG
	Competition Law Guidelines	
	 The committee acknowledged that there was no change to our stance on this matter. 	
20/7/3	Notes from the previous meeting	
	 Matters Arising CCA Member Vacancies PJ has spoken to CCA about current CCA vacancies on the committee and informed the committee that CCA are struggling to recruit LPC members at present.	
	Committee feedback	

 The committee was reminded on the importance of their feedback to get wider perspective to feedback into CPL responses.

20/7/4 Update from Chair and Chief Officer

- PJ advised the committee that it had been busy lately and he had spent the 6 hours per week of Chair time engaging across the system.
 - o Lots of relationship building meetings.
 - Building strong foundations.

Four Pillars of Primary Care

- PJ commented that a lot of work had been undertaken to pull together a meeting with CCG and key roles which was led by CPL.
 - This has put us in a really good position.
 - A stronger position with ICS than in other areas.
 - Discussions have been had at CCG level around commissioning Medicine Use Reviews for pharmacy.
 - Work undertaken to derive longer term gains.

GPCPCS

- CPL continue to support.
 - o Slow progress but ongoing.

Green Agenda - Potential impact on CP

- The potential impact on CP is:
 - Inhalers move to propellant free prescribing.
 - Recycling schemes for inhalers are on the increase.
 - Mindful of what is stocked by contractors.
 - Any significant changes need significant lead times.
 - o Disposables.
- Green Agenda is becoming a bigger consideration in clinical decision making.
- MB gueried whether this is been driven locally?
 - PJ commented that there is some national drive but local input via priorities.
- RS commented that dry powder are propellant free and could be used in NMS by contractors.
- Inhaler technique via virtual platform is this something CPL can support contractors with.
 - The committee acknowledged that this was something to be considered.
- MB commented on COPD patients. This potential switch needs to be a person-centred approach.
- A committee discussion followed.
 - Workload of pharmacy needs to be considered.

MB – temporarily left the meeting at 10am.

TLG updated the committee on key work since the last meeting:

Flu Vaccination training

 All three dates now completed. Surplus of just over £300 which went towards our administration costs so break even. Only 4 were non-Co-op pharmacists. MP Visit - 9th July

- Went well, Mr Davies is engaged and keen to focus on local issues. CK & TLG sent a briefing to him in preparation for the ICS development related white paper debate on Wednesday 14th July.
- CK had asked about National Protocol.
 - PJ commented that they are planning on using upskilled techs, but this has not been confirmed.
- RS commented that when other MP's are invited, they are sent details of the publicity gained by MP who had undertaken a visit. This might encourage others to take part.
- CK suggested inviting the Shadow Labour candidate from Lincoln.
- PJ commented that this would be kept on the agenda.
 - Local drive upwards.

ICS meetings overview

- Tues 13th we attended four pillars meeting virtually The meeting was very positive, and we will be working with our other primary care pillar colleagues and the ICS to develop the long term, primary care strategy. The Finance Director was keen on potentially commissioning a Medicines Use Review Service and exploring other service options with a view to invest to save (e.g. healthy lives, reducing inequalities, potential commissioning of services post UOL Lifeguard project). We are setting up a regular 1:1 with the ICS lead in this area Sandra Williamson (SW). Date of 17th August for next meeting to look at local service development. The CCG will be looking at local commissioning of the four primary care pillar services as a first step from April 2022, with the first year operating in a joint 'shadow' form with NHSE before full local commissioning transfer.
- Quarterly meetings and regular contact outside of these formal meeting dates is planned. CPL are acting as the liaison contact for all four pillars. The ICS Lead SW will be providing CPL with details of the extent of delegated commissioning envisaged in relation to pharmacy services shortly.

Virtual Outcomes (supplementary data)

- No survey responses received. Data shows only one pharmacy use a large amount. Not justifiable to fund with £2,000 (80 hours of Chair/Officer time) in future. The Committee discussed and agreed to cease funding after this year, HS to check any notice period required and renewal date.
- PJ advised contact to be made with three highest users.
 - Advising them that they can subscribe themselves.
- Committee reminded of request to send details of any free training resources to TLG so they can be added to the website.

New PCN

- New PCN 'Meridian' being created with a Woodhall Spa practice and two Louth Practices in shadow now and confirmed as from April 2022.
- A committee discussion followed around PCN's.

Phase 3 Covid Vaccinations

Existing sites will have to submit a new EOI. Sites will be allocated on a first come first served basis with no preference

TLG

HS

TLG

ΑII

for any area of primary care. Deadline for EOIs is 28th July as advised in letter from NHSE on 14th July.

Lifeguard project funding

- Josie Solomon has asked if we may be able to cover some of the research costs as she may be £4,000 short due to funding requirements for grant spend. TLG advised that CPL could look at contributing, co-funding with LCC ideally, from the nonrecurrent HLP Monies.
- A committee discussion followed.
 - It was acknowledged that hopefully this would not be required as they are investigating other possible funding options.

Further updates

- Further updates are provided in key agenda papers regarding the AGM/SGM update, delays to elections for LPCs, GPCPCS, Wright Review and Future Meetings.
- PJ informed the committee that Pinchbeck Pharmacy has applied to close.
 - Application was submitted last week to close on 31st July 2021.
 - The committee was informed that they had applied to close earlier but had been advised that they couldn't close during a pandemic.

20/7/5 Finance Update

Finance report and budget

- CK talked the committee through the Finance spreadsheet.
 - Currently running £9.92 within budget.
 - "Miscellaneous Debtors and accrued income" comprise of an outstanding invoice for Lincolnshire Coop for flu training and £400 currently siting in PayPal account.
 - CK queried with the committee were this should be placed? Possibly contingency?
 - Committee discussed and agreed that this should be placed in contingency.
- CK asked the committee whether we should have a levy holiday?
 - CK commented that he does not recommend having one.
 - Following a committee discussion, JN proposed that we do not have a levy holiday. This was seconded by JB. The committee agreed.
 - TLG commented that the budget does not allow for levy holidays, but it was agreed that this still needs to be kept as a standing item and discussed at each meeting as good governance.
- CK asked the committee if they had any questions?
 - RS queried the "Reserves Receipts from Acc 2".
 - CK explained that these where the non-recurrent funding monies.
- CK commented that as of today the balance was £56,328.76.

	 CK talked the committee through the previously circulated Draft Accounts. 	
	 Other Expenses – refer to severance payment and travel expenses. 	
	CK informed the committee that he was happy for the Accounts	
	to be circulated in Draft with contractors.	
	 PJ commented that these would stay as Draft until they are approved at the AGM. 	
	The committee was informed that the previous accounts would	
	be signed by the following:	PJ, MB,
	PJ – ChairMB – Vice-Chair	CK
	MB – Vice-ChairCK - Treasurer	
20/7/6	Voting to approve SGM	
	For Approval	
	PJ briefed the committee around the background of meeting	
	paper 6.	
	TLG informed the committee that 'Yes' proxy votes had been TLG informed the committee that 'Yes' proxy votes had been	
	placed by MB and CA.The committee members present where asked to vote and all	
	unanimously voted 'Yes'.	
	 SGM will be held at the same time as the AGM on 23rd 	
	September 2021.	
20/7/7	Wright Review	
	Discussion	
	TLG briefed the committee around the background of meeting	
	paper 7.	
	The committee discussed the contents of the paper.	
	 The committee acknowledged that there had been a huge move to local since the Wright Review was undertaken at a 	
	National Level.	
	 CPL is clinically engaged with GPCPCS. 	
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Possibly at the AGM in September 2022, it could be proposed that from 2023 there is a reduction in committee size. JN commented that committee turnover is natural, and we should try to recruit for this year. The committee agreed that meeting paper 7 should be reviewed again after the Review Steering Group publishes. 20/7/8 AGM planning update Update TLG briefed the committee around the background of meeting paper 8. TLG informed the committee that Washingborough Hall Hotel had been booked as the venue for Thursday 23 rd September. The budget covers for 100 people to attend. TLG informed the committee that it was almost certain that a speaker had been located to deliver a Red Flags presentation. The speaker was happy to attend at no cost to CPL but would arrive in time to partake of the buffet. The committee was advised that various conversations had been undertaken with various potential guest speakers TLG and HS to undertake preparations for the invites. The committee agreed that they had no objections to the proposed plans. BJ left the meeting at 11am. 20/7/9 GPCPCS Roll-out Update PJ briefed the committee around the background of meeting paper 9. PJ commented that CPL has done as much as can be done without investing costs. TLG and Hall all GP's have the process and in theory are live. However, in practice not all have switched on. The committee was informed that all GP's have the process and in theory are live. However, in practice not all have switched on. Two engagement events where reasonably attended. GP Practices were invited to attend. Encouragement is needed. PJ commented that we knew it would be a slow start but maybe it has been slower than we had hoped. TLG commented that he had had no referrals and no communication from local surgeries. JB commented that he had had no referrals and no communication from local surgeries. JB commented that he was not aware of any but had sent an email out to see what the response was from Lincolnshire Coop pharmacies.			1
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TLG informed the committee that three Clinical Directors in Lincoln have made contact. CM commented that it had been mentioned in a recent meeting with the local Practice Manager but had received no referrals JN gueried whether CPL had any access to any data. o PJ commented that data is 3 months in arrears but at some point, it might come through, JN commented that this was a good income stream for contractors, and should CPL be using funds to encourage uptake? TLG commented that she had spent considerable CPL time to engage and support. A committee discussion followed. Resources for Contractors to be added to website and possibly **TLG** a special newsletter. MB re-joined the meeting at 11.15am PJ queried whether we need conversation starters with Practice Managers? o JN commented that this would be useful, it would be good to speak to Practice Managers about the lack of GPCPCS referrals. MB queried whether there was any idea of the number of GPCPCS referrals? JB commented that he had looked on MYS and could only see a couple of Lincolnshire Co-op branches had received referrals. TLG suggested asking the question at the AGM. PJ commented that CPL has resource support from CCG, some LPC's do not have this. JN commented that we should be working at CCG level, local contractors should contact local surgeries. MB commented that contractors could phone the number for healthcare professionals. CK commented that this was available to find if you had a NHSmail account. Details on how to locate these shared with the committee. PJ queried whether CPL should create a pharmacy engagement toolkit? Following discussion, it was agreed that this should be TI G worked on over next few weeks. 20/7/10 **Future Meetings** Etiquette Policy; Room cost; WH opening TLG briefed the committee around the background of meeting paper 10. The committee was asked to read and consider the 'Meeting Etiquette for Virtual Meetings' document. The committee was informed that research had been undertaken into potential alternative venues as it was uncertain

whether Washingborough Hall would be open on a Tuesday and the factor that their costs had increased. Research had shown that alternative venues where charging similar prices. In addition, when factoring in the potential of increased travel costs and travel time it was concluded that Washingborough Hall remains the best option. The committee considered the options proposed in meeting paper 10. The committee agreed that Washingborough Hall is the best venue. o The committee agreed to stay as previously agreed with four face-to-face meetings a year. The committee discussed meeting dates for 2021 and the possibility of moving to the third Thursday due to the venue. There was overall agreement to move meetings to Thursdays for the coming financial year. HS to book Washingborough Hall for the third Thursday, next meeting after AGM which will be Thursday 18th November rather than Tuesday 16th November. o It was acknowledged that the next committee meeting HS was scheduled for the afternoon of Thursday 23rd September following by an evening AGM/SGM. HS to circulate an updated list of meeting dates to the committee. HS 20/7/11 **AOB** Engagement with Contractors PJ asked the committee how do we continue engagement with contractors? Possible suggestions: Quarterly webinar Evening quarterly update The committee discussed and considered offering a webinar at lunchtime/evening. Making it more accessible by offering different timings. Recording webinar might make it more inclusive. PJ, TLG The committee agreed to investigate offering webinar's in the future. Contraceptive Service The committee discussed an email which TLG had circulated the committee about a Contraceptive Service. The committee was informed that they wanted bids at PCN level, CPL have pushed back for a local level service. PJ informed the committee that inserting an implant would require a little training. But would increase accessibility in Lincolnshire. OTC Progesterone now available.

The committee was asked whether CPL should enter a bid for	
this service?	
 A committee discussion followed; points discussed 	
included:	
 Needs to be on a County wide basis. 	
Often people do not work local to the	
surgery they are registered with.	
 Linking to PCN increases inequalities. 	
 The committee agreed to continue to engage with the 	
CCG in development of the service.	
The committee discussed PCN's.	
 MB commented should push back on PCN level. 	
 JN commented that patients don't recognise PCN 	
borders.	
 PJ commented that postcode approach is wrong. 	
 PJ suggested pushing for a Lincolnshire wide approach. 	
 PJ commented that patients don't recognise PCN's. 	
MB working at a PCN level means 15 times the work. THOUSE THE PONT OF TH	All
TLG requested views on PCN's good or bad are	All
emailed over so that these can be woven into the ICS	MB
paper which is been formulated. TLG requested MB	IVID
send her a quick email detailing his comment.	
Meeting closed at 11.45am	
Date of Next full meeting	AII
Thursday 23 rd September – Afternoon face-to-face meeting & Evening	All
AGM – Washingborough Hall Hotel	

Action Log from July 2021 Meeting

Min No.	Action	Deadline	Resp.	Completion Notes
20/7/4	Contact with MP's – pharmacy visits	Ongoing	TLG	Noted for next contact letter planned for the autumn/early winter
20/7/4	HS to investigate whether any notice period is required and renewal date for Virtual Outcomes	ASAP	HS	TLG – informed contractors in Newsletter that this would not be renewed on 29 th July 2021.
20/7/4	TLG to make contact with three top users of Virtual Outcomes advising them that this would not be renewed and that they can subscribe themselves.		TLG	The following ODS coded pharmacies were contacted directly on 25 th August 2021. pharmacy.fd243@nhs.net; Pharmacy.FWH94@NHS.net; pharmacy.fy179@nhs.net; pharmacy.fcm80@nhs.net; pharmacy.FHN60@nhs.net; pharmacy.FD434@nhs.net Item included in Newsletter 29 th July 2021
20/7/4	Committee Members to forward details of any free training resources to TLG.	Ongoing	All	Ongoing – as noted on actions from previous meetings
20/7/6	Annual Accounts to be signed for 2019-20.	ASAP	PJ, MB, CK	Draft accounts ready for approval at AGM. Circulated as required in constitution
20/7/7	Meeting Paper 7 to be reviewed again following Review Steering Group publication.		All	Review in January 2022 – add to actions carried over in next minutes
20/7/8	Preparation for AGM/SGM invites.	ASAP	TLG, HS	22.07.21 - Completed – Invites sent out to all contractors.
20/7/9	GPCPCS Contractor Support Page to be added to CPL website and newsletter to be circulated.		TLG	Completed
20/7/9	GPCPCS Pharmacy Engagement toolkit to be created.		TLG	Completed. Link on website and circulated
20/7/10	Make arrangements with Washingborough Hall for November's face-to-face committee meeting.	ASAP	HS	20.07.21 – HS emailed committee asking for confirmation that moving the date to Thursday 25 th November instead of 18 th November as previously agreed.

20/7/10	Make arrangements with Washingborough Hall for face-to-	ASAP	HS	29.07.21 - Completed. Meetings to be held
	face meetings and AGM in 2022			on the third Thursday of the month.
20/7/10	Circulate updated meeting dates to committee	ASAP	HS	Complete – circulated by HS 29/07/21
20/7/11	Contractor engagement webinar's – to be investigated in the	Ongoing	PJ, TLG	Ongoing – add to actions carried over in
	future.			next minutes
20/7/11	Send views on PCN's good or bad to TLG to be woven into	ASAP	All	Complete – scoping document sent to
	ICS paper.			CCG 25 th August
20/7/11		ASAP	MB	Complete
	operating this service at a PCN level would mean 15 times the			
	work.			

Actions carried over from previous meetings.

Min No.	Action	Deadline	Resp.	Completion Notes
18/5/1	PJ to speak to CCA replacement for Enrico.	ASAP	PJ	Contact made 15 th April 2021 – email address provided by CCA was incorrect. Contact details have been updated and welcome extended to Milena. No further response received from Milena following welcome email or apologies regarding attendance at today's meeting. 20.07.21 – No further response received. CCA are struggling to get LPC members.
16/3/5	Job description for Chair role to be formulated.			Draft Chair role with PJ for review as at 20.04.21. 18.05.21 – PJ working on draft job description which needs amending. 20.07.21 – PJ continuing to work on in the background.
16/3/5	Consider how to spend reserves and feedback		All	Reserves allocated so far to • Virtual Outcomes licence for 21/22 (£2,000)

				 Additional PSNC payment for Wright review work (circa £747) Potential underwriting of flu training if demand is found (£2,000). Additional suggestions welcome. 18.05.21 – ongoing consideration. 18.05.21 - TLG to send out Virtual Outcomes survey next week. 20.07.21 – ongoing consideration
16/3/10	Forward details of any free training resources to TLG for a list of resources to be compiled.	ongoing	All	No details received 18.05.21 – Committee reminded to forward details to TLG. Update July: None received since May meeting. 20.07.21 – committee reminded to forward details to TLG.