



COMMUNITY PHARMACY Lincolnshire

Minutes of the Meeting held Tuesday 18th May 2021 via Microsoft Teams platform

Chairman

Paul Jenks	CPL Chairman and LPC Member CCA rep	PJ
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LPC Members present

Marc Brooks	CPL Vice-Chairman and LPC Member AIMp rep	MB
Blazej Jasnowski	CPL Member AIMp rep	BJ
John Broomhead	CPL Member AIMp Rep	JB
Jon Norman	CPL Member CCA rep	JN
Chris Mulimba	CPL Member Independent rep	CM

In attendance

Tracey Latham-Green	CPL Chief Officer	TLG
Hazel Sisson	CPL Admin Support Officer	HS

Apologies

Chris Kenny	CPL Treasurer and Member AIMp rep	CK
Chirag Ahir	CPL Member Independent rep	CA
Les Guiblin	CPL Member CCA rep	LG
Rob Severn	CPL Member CCA rep	RS
Sai Koneru	CPL Member CCA rep	SK

Abbreviations

CCG	Clinical Commissioning Group
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
NHSE	National Health Service England
NRF	Non-Recurrent Funding
PACEF	Prescribing and Clinical Effectiveness Forum
PCN	Primary Care Network
PQS	Pharmacy Quality Scheme
PSNC	Pharmaceutical Services Negotiating Committee
STPs	Sustainability and Transformation Partnerships
ULHT	United Lincolnshire Hospitals NHS Trust

Minutes:

Item	Details	Resp.
18/5/1	Welcome, introductions & apologies	
	<ul style="list-style-type: none"> • Apologies from those committee member's unable to attend were passed onto the committee. • PJ informed the committee that LG has retired from the committee and Boots. • PJ informed the committee that there had been no further contact or apologies from Milena (new CCA rep to replace Enrico). <ul style="list-style-type: none"> ○ Might have to follow up with CCA. • PJ commented that SK was unable to attend due to attending a LPC Cambridgeshire meeting scheduled for the same time. <ul style="list-style-type: none"> ○ CCA to be chased for a replacement. • PJ informed the committee that Garry Myers, had stepped down from PSNC yesterday. <ul style="list-style-type: none"> ○ Therefore, we no longer have a PSNC East Midland & South Yorkshire Regional Representative. 	<p>PJ</p> <p>PJ</p>
18/5/2	Committee Governance	
	<p>Declarations of Interest (DOI)</p> <ul style="list-style-type: none"> • PJ informed the committee that he was now: <ul style="list-style-type: none"> ○ Chair of the Declaration of Competency Group. ○ Member of the Council of the East Midlands Clinical Senate. • PJ commented that he had uploaded an updated copy of his DOI to the CPL website. <p>Competition Law Guidelines</p> <ul style="list-style-type: none"> • The committee acknowledged that there was no change to our stance on this matter. 	All
18/5/3	Notes from the previous meeting	
	<p>Matters Arising</p> <p><i>Committee Roles</i></p>	

	<ul style="list-style-type: none"> PJ commented that he had spoken to CK following the last meeting who had confirmed that he was happy to continue as Treasurer. 	
18/5/4	Update from Chair and Chief Officer	
	<p>PJ advised the committee that:</p> <ul style="list-style-type: none"> CPL continue to build relationships, including work around GPCS and STP/ICS. STPs are migrating to ICS from April 2022. <ul style="list-style-type: none"> It is likely that local Pharmacy Services will be commissioned through ICS. <ul style="list-style-type: none"> It is important to ensure that pharmacy is part of ICS. TLG has worked with LMC, LOC and LDC to formulate a joint letter which was sent to Lincolnshire CCG. <ul style="list-style-type: none"> To be discussed further in Item 9. NHSE Regulatory Team are mainly concentrating on COVID vaccinations at the present, but do have funding to promote work of pharmacies. <p>TLG updated the committee on key work since the last meeting:</p> <ul style="list-style-type: none"> Public Website: The public facing website is now live, with an active pop-up from the pharmacylincolnshire.org site diverting the public to it, along with a Facebook page, that also diverts members of the public to the public facing website. Pharmacy Resources: The textbook resources from non-recurrent funding to support pharmacies delivering patient services including the GPCPCS roll out have been sent out to all pharmacies, along with a contact card to be pinned on the noticeboard and a reminder to subscribe to the newsletter and check the short pharmacy nhs.net email regularly. The Chief Officer would like to thank HS for her assistance in completing this task so quickly. TLG has been asked to join and agreed to become a member of the Clinical Pharmacy and Practice Research Group at University of Lincoln, which will provide opportunities for CPL to be engaged in and influence research and developments in pharmacist training at UOL. The School is planning to hold a face to face pharmacy-based research event on 21st June 2021. Further details will be shared when available. Flu training facilitation: A survey has been circulated to assess flu training facilitation appetite and the responses have been analysed. Item under AOB ICS: We have received a response from John Turner at the CCG and PJ and TLG will meet with him and relevant STP/CCG contacts to ensure community pharmacy is embedded in the ICS development plans, along with the other three pillars of primary care (optometry, dentistry and general practice). Item 9 on the agenda covers discussing and agreeing priorities for community pharmacy that should be highlighted in our meeting with the CCG. TLG has now met with 3 PCN leads in addition to committee members. Item 8 on the agenda is a discussion on how better to support them and develop the role. 	TLG

	<ul style="list-style-type: none"> • GPCPCS roll out is progressing, as covered in agenda item 7. • An additional paper around the Wright review and its potential impact in Lincolnshire, including actions we could take to improve efficiency and effectiveness as a member organisation, will be circulated for the committee to review and think about between now and the July meeting, when an hour will be allocated to discuss the future. 	
18/5/5	Finance Update	
	<p>Finance report and budget</p> <ul style="list-style-type: none"> • TLG talked the committee through the Finance: Budget vs Actual 2020/21 (see meeting paper 5). <ul style="list-style-type: none"> ○ Reserves are sitting about right. ○ No face-to-face meetings. ○ Additional back-fill. ○ Travel claim from previous CO. ○ No training money spent. • This year is a zero-based budget. <ul style="list-style-type: none"> ○ Committee accepted. • PJ commented on the need to follow up with the Accountants to provide accounts in time for the AGM. <ul style="list-style-type: none"> ○ TLG to speak to CK. 	TLG, CK
18/5/6	AGM Planning	
	<p>Location and Format</p> <ul style="list-style-type: none"> • PJ briefed the committee around the background of meeting paper 6. • PJ commented that it was good to re-connect with Contractors and the element of Guest Speakers offers something more to Contractors. • The committee was asked to consider possible venues, sponsorship options and guest speakers. <ul style="list-style-type: none"> ○ A committee discussion was undertaken around venue, points discussed included: <ul style="list-style-type: none"> ▪ TLG advised the committee that currently Washingborough Hall is not open on a Tuesday but is open on a Thursday. <ul style="list-style-type: none"> • Assume this will change with further relaxations of restrictions. • Plan for a Tuesday. ▪ JN commented that Washingborough Hall works well. ▪ TLG commented that it was easy to get to know with the new road. ▪ PJ commented that it is always well received on previous attendance. ▪ The committee agreed that we should try to book with Washingborough Hall. ○ A committee discussion was undertaken around speaker options: <ul style="list-style-type: none"> ▪ PJ commented that previous speakers had presented on: 	HS

	<ul style="list-style-type: none"> • Dermatology • Palliative Care Support ▪ Committee was asked for thoughts and ideas. <ul style="list-style-type: none"> • MB suggested next step extended training service. • JN suggested linking in with GPCPCS. • PJ suggested Red Flags for Cancer, with an Oncologist as a speaker. <ul style="list-style-type: none"> ○ TLG commented that this was very topical. • JN commented would it be useful to have a pro GPCPCS GP as a speaker. To see how they see Pharmacists helping GP's from their perspective. <ul style="list-style-type: none"> ○ TLG commented that two Clinical Directors are keen on GPCPCS. ○ PJ commented that they would need to be engaging speakers. ▪ In conclusion the committee agreed to investigate something around GPCPCS. <ul style="list-style-type: none"> • TLG to investigate the potential of funding around Red Flags for Cancer. <ul style="list-style-type: none"> ○ PJ suggested Lincs Educational Hub. • TLG and PJ to investigate possible speaker options and industry sponsorship. 	<p>TLG</p> <p>TLG, PJ</p>
18/5/7	GPCPCS Update	
	<ul style="list-style-type: none"> • PJ briefed the committee around the background of meeting paper 7. <ul style="list-style-type: none"> ○ The committee was informed that GPCPCS was live in Marisco Practice – Mablethorpe. <ul style="list-style-type: none"> ▪ Blazej commented that everything is working and live, but they had not received any referrals. <ul style="list-style-type: none"> • PJ commented that maybe they need to speak to the Surgery. ▪ PJ informed the committee that the Clinical Director was based at Marisco Practice. <ul style="list-style-type: none"> • Blazej commented that he would mention it during his next meeting with the Practice. ○ The committee was informed that in theory Swineshead Practice went live yesterday. <ul style="list-style-type: none"> ▪ TLG to follow-up with them later in the week. • The committee was informed that PJ and TLG have worked with Lincolnshire LMC to develop a GP Practice toolkit. • TLG commented that she has emailed PCN Clinical Directors giving basic details of the service and that they would be contacted when roll-out occurs in their area. <ul style="list-style-type: none"> ○ TLG commented on positive feedback. • TLG commented that a FAQ sheet is been created to answer GP questions. • The committee was informed that a Zoom webinar was to be formed and shared. 	<p>PJ, TLG</p> <p>BJ</p> <p>TLG</p>

	<ul style="list-style-type: none"> ○ MB commented that Apex PCN have pharmacists and these should be involved so they know the system and can promote and challenge. <ul style="list-style-type: none"> ▪ Webinar will be open to anyone who wishes to join. • TLG informed the committee that decisions are needed around roll-out, including who and when. <ul style="list-style-type: none"> ○ Following discussion, the committee agreed that they were happy for TLG and PJ to make decisions about roll-out and for them to move forward with the roll-out plan. <ul style="list-style-type: none"> ▪ Lincoln area next in roll-out plan. ○ PJ requested that the committee feed-back with local intelligence as this is vital. 	TLG, PJ
18/5/8	PCN Lead Engagements	
	<p>Update</p> <ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 8. <ul style="list-style-type: none"> ○ TLG informed the committee that she is trying to meet up with PCN Leads for a virtual coffee. <ul style="list-style-type: none"> ▪ So far, she has met four PCN Leads virtually. ○ Key issues are engagement with GP's. <ul style="list-style-type: none"> ▪ Relationships need to be built from here. ○ Job role was seen as a tick box for PQS. • TLG commented that there is no funding to develop role. <ul style="list-style-type: none"> ○ How do we do this? ○ Funding opportunities? • TLG asked for thoughts from the committee. <ul style="list-style-type: none"> ○ MB commented that it was right to be seen as a tick box exercise. <ul style="list-style-type: none"> ▪ MB queried what can CPL do? <ul style="list-style-type: none"> • Happy to support people. • Try to align ourselves with local PCN leads. • Is funding via ICS available or an option ○ PJ collaboration is more than just gathering data and sending to PCN. <ul style="list-style-type: none"> ▪ Support concept of PCN Leads and support them to challenge back. <ul style="list-style-type: none"> • TLG commented that we should sent out supporting documents to provide standard responses to some queries. • JN commented on the need for the same vocabulary to be used by all PCN Leads. <ul style="list-style-type: none"> ○ PJ commented that the template reply to Astra Zeneca could be included in the shared PCN area. ○ TLG commented that there is no proper job description or reward. <ul style="list-style-type: none"> ▪ This needs to be established. ▪ PJ commented that the expectations of a PCN Lead could change with PQS requirements. 	PJ

	<ul style="list-style-type: none"> ○ JN commented that as a PCN Lead he would benefit with increases communication with Clinical Directors. ○ PJ commented that once PQS communication has been realised CPL could potentially bring Metaphor in again to provide training for PCN Leads. <ul style="list-style-type: none"> ▪ TLG commented that it was important to gain funding. ○ JN commented on the possibility of involving PCN leads during GPCPSC roll-out. <ul style="list-style-type: none"> ▪ TLG will copy PCN Leads into correspondence with Clinical Directors as way of introduction. <ul style="list-style-type: none"> • JN commented that it is about building relationships. • PJ informed the committee that there was potentially two new PCN Leads: <ul style="list-style-type: none"> ○ Market Deeping and Spalding <ul style="list-style-type: none"> ▪ A few approval responses have been received ○ Four Counties <ul style="list-style-type: none"> ▪ Awaiting approval. <ul style="list-style-type: none"> • To be followed up 	PJ
18/5/9	ICS Development in Lincs – CCG contact	
	<p>Discussion and suggestions</p> <ul style="list-style-type: none"> • PJ briefed the committee around the background of meeting paper 9. <ul style="list-style-type: none"> ○ Currently ICS have option for a Lead Chief Pharmacy Role. <ul style="list-style-type: none"> ▪ However, Lincolnshire STP Pharmacy and Prescribing Group/Board have agreed that the Board should take on the role of Chief Pharmacist. <ul style="list-style-type: none"> • PJ informed the committee that he sits on this group as a representative of CPL. ○ Key work of Lincolnshire STP Pharmacy and Prescribing Group/Board is Medicines Optimisation Plan feeding into ICS. ○ PJ queried what other areas are providing and whether this would work for Lincolnshire? <ul style="list-style-type: none"> ▪ A committee discussion followed. <ul style="list-style-type: none"> • Minor Ailments Scheme. ▪ MB commented on MDS, Notts have a technician who is employed by the CCG who goes to people's houses to a undertake an assessment to see if an MDS tray would be suitable or whether they are better suited with other aids. <ul style="list-style-type: none"> • Trays should be last resort. ▪ TLG commented that a basic income was a good idea to cover a number of services. <ul style="list-style-type: none"> • Needs to be economic and worthwhile. ○ PJ commented that Pharmacy is an integral part and not an add-on. ○ TLG commented on the need to highlight what pharmacy does which is not necessarily funded. 	

	<ul style="list-style-type: none"> • TLG informed the committee that CCG want to arrange a face-to-face meeting in Sleaford to discuss things further. <ul style="list-style-type: none"> ○ Vital for feed-in from committee to take to this meeting. <ul style="list-style-type: none"> ▪ PJ and TLG can take their ideas but it is vital for others to feed in to. ○ Committee asked to consider “How the best model of community pharmacy in Lincolnshire can be achieved working with the CCG?” <ul style="list-style-type: none"> ▪ Responses required to be sent to TLG by 14th June. <ul style="list-style-type: none"> • MB commented that he will ask all Lincolnshire Co-op pharmacies to feedback as well. 	<p>All</p> <p>MB</p>
18/5/10	AOB	
	<p><i>Prep. For Wright Review Session July 21</i></p> <ul style="list-style-type: none"> • The committee was asked to consider in preparation for a discussion during July’s committee meeting: <ul style="list-style-type: none"> ○ Positive – we are aligned with ICS ○ Negative – relative number of contractors in ICS ○ Positive – our low cost ○ The size of the committee. <ul style="list-style-type: none"> ▪ CCA Member – SK is stepping down ▪ CCA Member – LG has stepped down. ▪ The Wright Review suggests a committee size of 10. ▪ Should the committee be reduced to 9 or 10? ▪ Would we still manage to be quorum? • TLG to circulate a meeting paper following this meeting for review prior to a discussion at the next committee meeting in July. <p><i>PSNC update suggested July 21</i></p> <ul style="list-style-type: none"> • The committee acknowledged that this would not be happening following the resignation of Garry Myers. <p>Members to consider possible contractor support events to discuss at next meeting</p> <ul style="list-style-type: none"> • Committee asked to consider between now and the next committee meeting in July possible contractor support events. <p><i>Flu Training Facilitation</i></p> <ul style="list-style-type: none"> • TLG informed the committee received 60 responses to the survey. <ul style="list-style-type: none"> ○ Tuesday in Lincoln ○ Saturday in Lincoln ○ Wednesday in Sleaford ○ Most of the people that responded where Lincolnshire Co-op Pharmacists. 	<p>TLG</p> <p>All</p> <p>All</p>

	<ul style="list-style-type: none"> ▪ MB commented that he could maybe manage to cover 6 pharmacists per session from Lincolnshire Co-op depending on diary. ▪ Would need other contractors to fill other places. <ul style="list-style-type: none"> ○ 38 pharmacists needed to break-even. ○ £105 per person seems reasonable. • TLG to look at spreadsheet with MB when in the office tomorrow. • Committee confirmed that they would be happy in principle to underwrite the training costs. <ul style="list-style-type: none"> ○ 3 x ½ days or under our reserves. <p><i>Funding for training</i></p> <ul style="list-style-type: none"> • MB queried previously discussed ENT and Eye training provision. • PJ responded that there was scope for training provision, but we should wait for PQS to be released. • Work is ongoing around training provision. 	TLG, MB
	Meeting closed at 11.45am	
	Date of Next full meeting	
	Tuesday 20 th July – details to be confirmed	All

Action Log from May 2021 Meeting

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.
18/5/1	PJ to speak to CCA regarding a replacement for SK.	ASAP	PJ	PJ emailed CCA – update on 20th July meeting
18/5/5	TLG to speak to CK regarding following up with Accountants to ensure draft accounts are available in time for the AGM.	ASAP	TLG	CK has chased accountants – update this meeting on agenda
18/5/6	HS to contact Washingborough Hall to enquire about booking for afternoon committee meeting and AGM in September.	ASAP	HS	19.05.21 – email sent to enquire. 20.05.21 – following confirmation that Washingborough Hall will not be open on a Tuesday, PJ confirmed that the meeting & AGM could be re-scheduled for the Thursday of the same week. 21.05.21 – HS confirmed booking.
18/5/6	TLG to investigate possible funding options for AGM.	ASAP	TLG	Funding options limited and not viable. Will investigate further if applicable once speaker identified. Resource available in budget
18/5/6	PJ to look at identifying possible speakers potentially around Red Flags for Cancer.	ASAP	PJ	PJ and TLG emailed LMC to try and find Red Flags speaker. – await response, KS from LMC on leave until 15 June. TLG and PJ meeting LMC 22 nd June will raise then.
18/5/7	TLG and PJ to speak to Marisco Surgery to follow up regarding GPCPCS.	ASAP	TLG & PJ	PJ spoken with Marisco, system issues now solved.
18/5/7	BJ to mention GPCPCS referrals at next meeting with Marisco Practice.		BJ	Complete.

18/5/7	TLG to follow up with Swineshead Practice regarding GPCPCS.	End of w/c 17.05.21	TLG	Complete. GPCPCS wider roll out now progressing-unable to get response directly but intelligent suggests referrals coming through from Swineshead.
18/5/7	TLG and PJ to continue with GPCPCS roll-out	Ongoing	TLG & PJ	Ongoing
18/5/8	PJ to include a copy of the Template Response in the shared PCN area	ASAP	PJ	Complete
18/5/8	PJ to follow up with contractors in Four Counties PCN to chase up a response to the proposed PCN Lead	ASAP	PJ	Complete
18/5/9	Committee asked to feedback with responses to the question of "How the best model of community pharmacy in Lincolnshire can be achieved working with the CCG?"	14.06.21	All	None received
18/5/9	MB to request feedback from all Lincolnshire Co-op Pharmacies on "How the best model of community pharmacy in Lincolnshire can be achieved working with the CCG?"	14.06.21	MB	None received
18/5/10	Committee to consider possible contractor support events to discuss at July's meeting	20.07.21	All	Contractor webinar being held for GPCPCS in June x 2
18/5/10	TLG to circulate additional paper around the Wright review and its potential impact in Lincolnshire. Committee to review and think about and discuss at the July meeting.	20.07.21	TLG All	Completed – paper sent following committee meeting.
18/5/10	TLG to look at flu training response spreadsheet with MB when in office 19.05.21	19.05.21	TLG, MB	Completed 19.05.21

Actions carried over from previous meetings.

Min No.	Action	Deadline	Resp.	Completion Notes
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.
16/3/5	Consider how to spend reserves and feedback		All	Reserves allocated so far to <ul style="list-style-type: none"> • 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.
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.