



Minutes of the Meeting held Thursday 23rd September 2021
at Washingborough Hall Hotel, Church Hill, Washingborough, Lincoln, LN4 1BE

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
Chris Kenny	CPL Treasurer and Member AIMp rep	CK
Blazej Jasnowski	CPL Member AIMp rep	BJ
John Broomhead	CPL Member AIMp Rep	JB
Jon Norman	CPL Member CCA rep	JN
Rob Severn	CPL Member CCA rep	RS
Chris Mulimba	CPL Member Independent rep	CM

In attendance

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

Apologies

Chirag Ahir	CPL Member Independent rep	CA
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Abbreviations

4PPC	Four Pillars of Primary Care
CO	Chief Officer
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
NHSE	National Health Service England
NRF	Non-Recurrent Funding
PACEF	Prescribing and Clinical Effectiveness Forum
PCN	Primary Care Network
PhAS	Pharmacy Access Scheme
PMS	Pharmacy Management System
PQS	Pharmacy Quality Scheme
PSNC	Pharmaceutical Services Negotiating Committee
RPS	Royal Pharmaceutical Society
STPs	Sustainability and Transformation Partnerships
ULHT	United Lincolnshire Hospitals NHS Trust
UOL	University of Lincoln

Minutes:

Item	Details	Resp.
23/9/1	Welcome, introductions & apologies	
	<ul style="list-style-type: none"> Apologies from Chirag, who was unable to attend due to lack of locum availability was passed onto the committee. <ul style="list-style-type: none"> PJ commented that it had been acknowledged that CA had not attended the last three meetings and that he had spoken with CA to discuss. <ul style="list-style-type: none"> However, allowances have been made due to the current difficulties in obtaining locums. PJ informed the committee that there had been no further contact or apologies from Milena (new CCA rep to replace Enrico). 	
23/9/2	Committee Governance	
	<p>Declarations of Interest (DOI)</p> <ul style="list-style-type: none"> PJ commented that he needed to upload an updated copy of his DOI to the CPL website to include: <ul style="list-style-type: none"> MEP Advisory Committee RS informed the committee that he still needs to update his DOI. <ul style="list-style-type: none"> TLG requested that RS update his DOI and forward it to her to upload the redacted version 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. 	<p>All</p> <p>PJ</p> <p>RS, TLG</p>
23/9/3	Notes from the previous meeting	
	Matters Arising	

	<p><i>CCA Member Vacancies</i></p> <ul style="list-style-type: none"> The committee was informed that CCA are really struggling to recruit LPC reps at present. <ul style="list-style-type: none"> They are continuing to seek replacement CCA Committee Members to fill the current vacancies. <ul style="list-style-type: none"> RS commented that he was aware of a nomination from Rowlands which is currently going through the internal CCA process. RS informed the committee that CCA are aware of the issue around Milena and contact had been attempted. The committee undertook a discussion around quorum. <p><i>Flu Vaccination training</i></p> <ul style="list-style-type: none"> CK commented that he and PJ can sort out paperwork to withdraw money from PayPal. PJ commented that Flu Vaccination training would be discussed in January's meeting. <ul style="list-style-type: none"> Do we follow the same process or advice Contractors to make their own arrangements? <p><i>Communication to MP's</i></p> <ul style="list-style-type: none"> TLG informed the committee that she was planning to write to MP's in October/November. <p><i>Increasing enquires from Media</i></p> <ul style="list-style-type: none"> PJ commented on an increase in requests for comments by CPL on radio shows. <ul style="list-style-type: none"> Not all are appropriate. TLG commented that she had referred one to the Lincolnshire CCG Press Office for comment. The committee discussed the potential of some form of media training. <ul style="list-style-type: none"> Two or Three committee members would be appropriate. Radio volunteers: <ul style="list-style-type: none"> RS CK MB PJ TLG to contact PSNC to enquire about media training. <p><i>Contraception Service</i></p> <ul style="list-style-type: none"> MB queried what was happening with this service? The committee was informed that this was still on the CCG's agenda, but relevant staff are all currently focused on COVID 19 activities. 	<p>CK, PJ</p> <p>All</p> <p>TLG</p> <p>TLG</p>
23/9/4	Update from Chair and Chief Officer	
	<p>TLG updated the committee on key work since the last meeting:</p> <p><i>GPCPCS</i></p> <ul style="list-style-type: none"> A contractor toolkit has been added to the website and circulated via the newsletter. It was also shared directly with PCN community pharmacy leads. 	

	<ul style="list-style-type: none"> • We have seen a rise in enquiries from GP practices recently. PCNs have just had their incentive scheme announced for 2021-22 and 2022-23. In it are specific targets to engage with community pharmacies and to use the CPCS service, so numbers should rise steeply in the second half of the year. • Enquiries have been responded to with key information from our toolkit, already shared with PCN Clinical Directors and their admin teams and links to the recorded webinars we delivered for GPs, along with the FAQ document. This has been shared with the CCG (in particular the primary care Project Lead who worked with our existing contacts Emily Topham and Vic Townshend). The CCG and the NHSE representative for the East Midlands (Kirsty Kelly) are now taking the lead on roll-out in the county and dealing with GP queries. The latest information on referrals held by the CCG is from August 13 which shows some, albeit limited uptake, mainly in Nettleham and Bassingham, but we know from other sources that Market Deeping and Spalding practices are beginning to refer. <ul style="list-style-type: none"> ○ The committee discussed. <ul style="list-style-type: none"> ▪ TLG requested that the committee feedback with any intelligence around GPCPCS. ▪ PJ commented on the need for all to access NHSmail. • Earache has been identified as a potential 'green' condition for referral that may result in higher onward or return referral, due to the lack of equipment and expertise in pharmacies which we have been unable to impact through face to face training due to the COVID pandemic. This information has been fed back to the CCG, suggesting a local enhanced service for these types of condition could be considered in future once they are in charge of pharmacy commissioning locally. <p><i>PCN Community Pharmacy Leads</i></p> <ul style="list-style-type: none"> • We now have a full house of CP PCN Leads for the county, which is excellent news. Early contact has been made with key guidance and tool links relating to PQS to CP Leads. This will continue. <p><i>General Pharmaceutical Council Engagement</i></p> <ul style="list-style-type: none"> • CO is now having monthly LPC-GPhC information sharing meeting. Last month shared Valproate guidance in newsletter. GPhC will share information with us that may be of use to contractors, reminders, key news article. They noted they are back visiting again, starting with new premises inspections and intelligence led visits. CO will keep them updated on ICS development, the situation with regard to Locum cover/staff availability etc as they are gathering information about challenges for pharmacies in the region. <p><i>LPC Member Day and Committee Governance</i></p> <ul style="list-style-type: none"> • The CO attended the member day on Monday 20th September. Reasonably useful but would have been more so earlier on in the year. CPL meet the recommended governance requirements such as accrual-based accounts, zero based 	All
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	<p>budget every few years, internal controls on certain payments, conflicts of interest e.g. for Market Entry applications. However, this is not formally noted in a policy. CO will put this together with the Executive. It may be useful to develop a formal business plan as we move forward from Covid-19 pressures.</p> <ul style="list-style-type: none"> • There are updates on the agenda for ICS, CPCF and PQS webinar proposals for CP PCN leads. <p>PJ updated the committee on key work since the last meeting:</p> <p><i>Regional LPNs</i></p> <ul style="list-style-type: none"> • Engagement events - applied for funding held by Notts LPC. <ul style="list-style-type: none"> ◦ How we deal with conflict. <p><i>Connected Pharmacy</i></p> <ul style="list-style-type: none"> • Community Pharmacy – doubtful of attendance due to timings at moment, lots of other things ongoing. • Level of misunderstandings about pharmacy timings and workforce pressure. <ul style="list-style-type: none"> ◦ Concern over locum cover. <p><i>Medicines Optimisation Work</i></p> <ul style="list-style-type: none"> • PJ commented on the workforce issues in hospital. • Inhaler swop – Activity and stock complexities we need to be involved in. 	
23/9/5	Finance Update	
	<p>Finance report and budget</p> <ul style="list-style-type: none"> • CK talked the committee through the Finance spreadsheet. <ul style="list-style-type: none"> ◦ Currently running under budget. • CK asked the committee whether we should have a levy holiday? <ul style="list-style-type: none"> ◦ CK commented that he does not recommend having one. ◦ Following a committee discussion, CK proposed that we do not have a levy holiday. This was seconded by RS. The committee agreed. • TLG commented on a freelance or fixed-term post to undertake a piece of work. <ul style="list-style-type: none"> ◦ The committee discussed. ◦ CK commented that he would rather spend than give a levy holiday. ◦ PJ commented that we currently have the lowest levy possible so this could possibly be increased. ◦ RS commented on the possibility of co-funding. • CK commented that as of today the balance was £74,882.34. • TLG and CK to write Business Plan. 	TLG, CK
23/9/6	CPCS Training Offer	
	<p>Discussion/Decision</p> <ul style="list-style-type: none"> • PJ briefed the committee around the background of meeting paper 6. 	

	<ul style="list-style-type: none"> ○ RPS have approached us regarding providing free of charge training related to CPCS. • MB queried whether it is the same training that has previously been offered. <ul style="list-style-type: none"> ○ PJ commented that it is similar to CPPE Training. • A committee discussion followed. <ul style="list-style-type: none"> ○ No requirement to do training to undertake CPCS, but training helps with consultation skills and techniques. • The committee was asked whether we work with RPS to promote this? <ul style="list-style-type: none"> ○ The committee discussed and agreed it was worth promoting to refresh skills but not to pressure attendance. • TLG queried dates? <ul style="list-style-type: none"> ○ The committee discussed and agreed mid-February. <ul style="list-style-type: none"> ▪ TLG to liaise with RPS. • RS commented that the Red Flag section of this training was particularly helpful. <ul style="list-style-type: none"> ○ To be fed back to RPS. 	TLG
23/9/7	ICS Update	
	<p>Update since last Committee Meeting</p> <ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 7. <ul style="list-style-type: none"> ○ DMS has been dealt with. ○ Workforce – limited pool. ○ Upskilling Independent Prescribers has been raised. ○ ‘Parity of esteem’ funding. ○ Health inequalities – keen to focus on. ○ PCN cluster groups will not always work. • TLG commented that she is cautiously optimistic. • PJ commented that TLG is leading the representation of 4PCC. • PJ commented on the good position we are in with ongoing LPC meetings with Sandra Williamson. <ul style="list-style-type: none"> ○ Pharmacy is ahead of the curve. • Committee discussions followed. 	
23/9/8	Website Upgrade	
	<p>Update</p> <ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 8. • The committee was informed that we would be part of Phase One and had chosen the “Self-Setup: Free” option. • TLG to attend workshop on October 13th, 2021. • The committee was informed that the website content would be refreshed as part of this process. • The committee discussed website usage. • The committee acknowledged that we are in a good place with our website. 	
23/9/9	CPCF	
	Discussion	

	<ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 9. • PJ commented that PQS is optional, but NHS expect participation. • The committee was informed that PSNC argued down the level of additional training. <ul style="list-style-type: none"> ○ A new pharmacist might not have done some of the training. • CPL need to encourage PQS, but what support should CPL offer? <ul style="list-style-type: none"> ○ A committee discussion followed. <ul style="list-style-type: none"> ▪ Teams/Zoom meeting to support PCN leads. ▪ Survey to contractors querying what are you doing for flu? • The committee was informed that a lot of learning is front loading. • PJ briefed the committee. <ul style="list-style-type: none"> ○ The committee was made aware of the importance of undertaking training early to catch opportunities and achieving claims. ○ Advice to arrange pre-reg pharmacists to undertake all gateway requirements. ○ CPPE are amending training so Pharmacy Technicians can undertake appropriate training. ○ Activity and capture maintaining digital evidence. • <i>Hypertension</i> <ul style="list-style-type: none"> ○ Service spec still awaited. <ul style="list-style-type: none"> ▪ Expected start date 1st October. ○ Will involve giving equipment to patients. <ul style="list-style-type: none"> ▪ Contractor Risk in outlay of purchase – cost of blood pressure monitor. ○ Need to find enough patients. ○ Committee discussion followed. <ul style="list-style-type: none"> ▪ Service needs to be undertaken properly. ▪ Advanced service – so not all pharmacies will be offering this service. ▪ Advised to think carefully whether to offer this service, as must be delivered well. • <i>NMS Advanced Service</i> <ul style="list-style-type: none"> ○ There is a list of 800+ medicines that could be on new list. <ul style="list-style-type: none"> ▪ Rely on PMS ○ Encourage Contractors to get behind. <ul style="list-style-type: none"> ▪ Need to deliver and prove. ○ Discussion over the phone is helpful. ○ CK commented on the way the question to patient needs to be asked e.g. ‘can we call you?’ rather than ‘will you sign up to this?’ • <i>Smoking Cessation Advanced Service</i> <ul style="list-style-type: none"> ○ Due in January 2022. ○ Referrals from secondary care. ○ One You. ○ Fewer pharmacies offering smoking cessation. <ul style="list-style-type: none"> ▪ Opportunity is not there. 	
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	<ul style="list-style-type: none"> ▪ Not getting referrals. <ul style="list-style-type: none"> ○ PJ commented that this was one to watch but don't expect a lot of activity. • <i>Pharmacy Access Scheme (PhAS)</i> MB commented that those contractors affected would have received a letter from NHSE. <ul style="list-style-type: none"> ○ Physical barriers can be checked and highlighted to appeal decisions – deprivation is considered. ○ The committee undertook a discussion around how pharmacy closures and consolidations will have affected figures. • <i>Transitional Payment</i> <ul style="list-style-type: none"> ○ Agreed to continue in year 3. ○ No real shift. ○ The committee discussed. • <i>Monitoring and Evaluation</i> <ul style="list-style-type: none"> ○ Core dataset for clinical services. ○ Affinity Groups can be formed. <ul style="list-style-type: none"> ▪ Lobbying from buying groups. ○ Pay PharmOutcomes or others a fee for managing service. ○ A committee discussion included: <ul style="list-style-type: none"> ▪ Signposting possible needs for Independents. • <i>Clinical Fee Setting</i> <ul style="list-style-type: none"> ○ Bringing consultation rooms up to standard. ○ Checking NHSmail. ○ The committee was made aware that Contractors have been reminded in newsletters. 	
23/9/10	Support for PQS	
	<p>Webinar for PCN CP Leads Proposal</p> <ul style="list-style-type: none"> • A committee discussion was undertaken following a briefing. 	
23/9/11	Zoom Renewal	
	<p>Discussion & Decision (£119.90 Nov21)</p> <ul style="list-style-type: none"> • The committee was informed that the Zoom licence was due to expire in November 2021. • The committee discussed and agreed that that the cost was worthwhile. • The committee approved the renewal of the Zoom licence. 	
23/9/12	AOB	
	<p>Items for next meeting</p> <ul style="list-style-type: none"> • The committee was asked for details of anything which needs to be included in the next meeting. <ul style="list-style-type: none"> ○ CK – Lifeguard Project ○ TLG – Discuss CO post • Both items to be included in November's Agenda. 	TLG
	Meeting closed at 4.35pm	
	Date of Next full meeting	
	Thursday 25 th November – Full-Day face-to-face meeting – Washingborough Hall Hotel	All

Action Log from September 2021 Meeting

Min No.	Action	Deadline	Resp.	Completion Notes
23/9/2	PJ & RS to update their DOI and forward to TLG for a redacted version to be uploaded to the website	ASAP	PJ, RS, TLG	
23/9/3	Complete paperwork to withdraw money from PayPal	ASAP	CK, PJ	
23/9/3	Discuss arrangements for next year's Flu Vaccination training – to be included in January's agenda.	20.01.22	All	
23/9/3	TLG to write letter to MP's	End of Oct/Nov	TLG	
23/9/3	TLG to contact PSNC regarding media training	ASAP	TLG	
23/9/4	Feedback any intelligence to TLG regarding GPCPCS	Ongoing	All	
23/9/6	TLG to liaise with RPS regarding free of charge training related to CPCS – Ideally to be arrange for mid-February.	ASAP	TLG	
23/9/12	Lifeguard project & CO Post to be included in November's agenda for discussion	25.11.21	TLG	

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.		PJ	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 <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. 20.07.21 – ongoing consideration 23.09.21 – ongoing consideration
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