



Minutes of the Meeting held Thursday 15th September 2022
at Washingborough Hall Hotel, Church Hill, Washingborough, Lincoln, LN4 1BE

Chair

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

Marc Brooks	CPL Vice-Chair 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
Christine Stafford	CPL Member CCA rep	CS
Rob Severn	CPL Member CCA rep	RS
Andrea Mudamburi	CPL Member Independent rep	AM
Chris Mulimba	CPL Member Independent rep	CM

In attendance

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

Apologies

Milena Krusinska	CPL Member CCA rep	MK
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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
CPPQ	Community Pharmacy Patient Questionnaire
CPWM	Community Pharmacy West Midlands
CRG	Clinical Reference Group
DMS	Discharge Medicines Service
DOC	Declaration of Competence
DOI	Declaration of Interest

GDPR	General Data Protection Regulation
GP	General Practitioner
GP CPCS	General Practice Community Pharmacist Consultation Service
ICB	Integrated Care Board
ICSs	Integrated Care Systems
IPMO	Integrated Pharmacy and Medicines Optimisation
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
PCAG	Primary Care Advisory Group
PCCC	Primary Care Commissioning Committee
PCSE	Primary Care Support England
PDAF	Pe-Delegation Assessment Framework
PEQ	Patient Experience Questionnaire
PGDs	Patient Group Directions
PhAS	Pharmacy Access Scheme
PMS	Pharmacy Management System
POD	Pharmacy, Optometry and Dentistry
PQS	Pharmacy Quality Scheme
PSNC	Pharmaceutical Services Negotiating Committee
RPS	Royal Pharmaceutical Society
SIP	Systems Improvement Programme
STPs	Sustainability and Transformation Partnerships
ULHT	United Lincolnshire Hospitals NHS Trust
UOL	University of Lincoln

Minutes:

Item	Details	Resp.
15/09/1	Welcome, introductions & apologies	
	<ul style="list-style-type: none"> Apologies passed onto the committee from MK. Welcome and introductions extended to AM by the committee 	
15/09/2	Committee Governance	
	Declarations of Interest (DOI) & Biography <ul style="list-style-type: none"> CS & AM to forward a brief biography to TLG for the website. <ul style="list-style-type: none"> CS & AM completed a DOI and Confidentiality Agreement prior to the meeting. RS completed a revised DOI prior to the start of this meeting. PJ to revise his biography. The committee acknowledged that there were no further changes to be made. 	All CS, AM TLG PJ

	<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. CS & AM were made aware of the Competition Law Guidelines. 	
15/09/3	Notes from the previous meeting	
	<p>Matters Arising</p> <p><i>MP Visits</i></p> <ul style="list-style-type: none"> The committee discussed MP visits. <p><i>Appointment Letters – Chair & Treasurer from April 2023</i></p> <ul style="list-style-type: none"> Letters will be sent out to Chair and Treasurer following vote in April. <p><i>Meeting Schedule and Venue Adjustment proposal</i></p> <ul style="list-style-type: none"> The committee discussed the previously agreed move to using three different venues for the face-to-face committee meetings moving forward, starting from next year. <ul style="list-style-type: none"> The Showroom – Lincoln, for March’s committee meeting. New Life – Sleaford, for May’s committee meeting. Washingborough Hall, for September’s committee meeting & AGM. <ul style="list-style-type: none"> Possibility of holding a virtual AGM in the future was considered. <p><i>Contraceptive Pilot</i></p> <ul style="list-style-type: none"> Meeting with Council Sexual Health Team was to be arranged for September. <ul style="list-style-type: none"> Awaiting follow-up by Sexual Health Team. <ul style="list-style-type: none"> Possibly to be bought up at Four Pillars meeting. A committee discussion followed around the possibility of provision differences. 	PJ, TLG
15/09/4	Update from Chair and Chief Officer	
	<p>Update since last Committee Meeting</p> <p>Integrated Care System (ICS)</p> <p>As noted last meeting, the ICS came into being officially on 1st July. The integrated Care Board will meet 6 times a year in public as will Primary Care Commissioning Committee (PCCC) – yet to be illustrated on a flow chart but we will receive one when available.</p> <p>We are well represented and should have representation on the Clinical and Care Directorate Strategic Board (POD reps) in the second, orange section and under other existing forums in the green, third section, on the Primary Care Advisory Group (PCAG). We also attend a monthly transition operation group and have input to the 3 IPMO groups - JB (Polypharmacy), MB (Mental Health), PJ (Opioids).</p>	

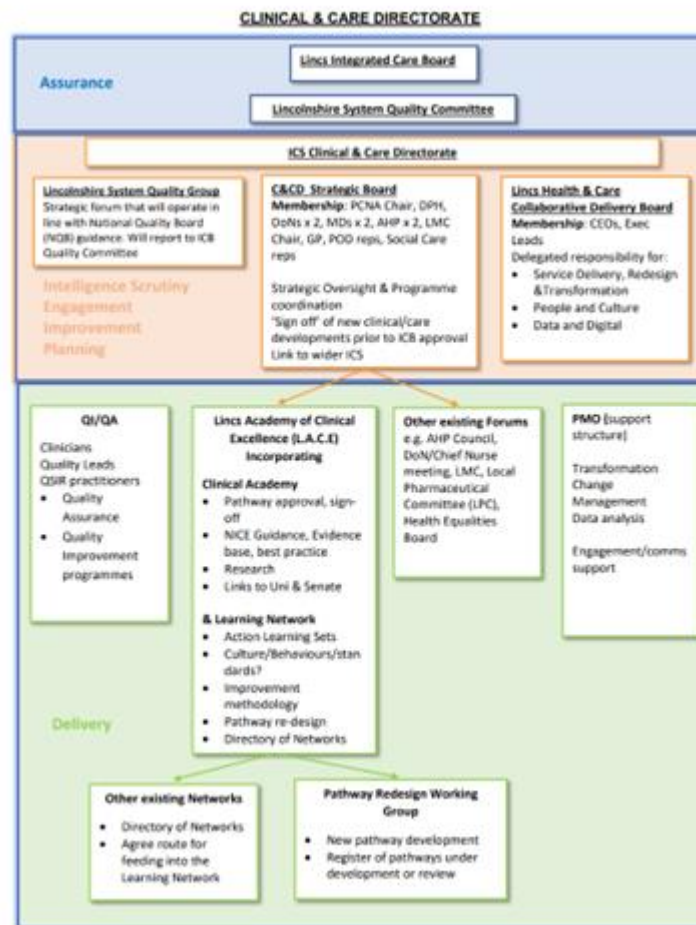


Figure 1.0 Clinical and Care Directorate Structure

CO (TLG) and Chair (PJ) met with the Four Pillars of Primary Care on 13th September where we received an update from John Turner, Chief Executive and Sandra Williamson, Director for Health Inequalities, Prevention and Regional Collaboration, on progress around both transitional, practical arrangements and the strategic representation.

The strategic representation is being finalised and at the 13th September meeting PJ made clear the importance of being invited to all meetings rather than just as decided by the ICS, so an integrated approach to care can be developed, illustrated with key examples. This view was supported by the LMC Clinical Director. This has therefore been agreed invites and paperwork will be sent so that agendas, papers etc can be commented on even if attendance would not be needed. We continue to meet bi-monthly with dates in the diary until the end of March 2023. The Four Pillars of Primary Care had written to the ICS expressing concerns about the level of clinical representation across all four pillars at meetings, particularly around decision making. This correspondence was sent on behalf of the four pillars by the LMC. John Turner has advised that he will respond in writing to the concerns expressed in the letter, as will Andrew Cash, Chair of the ICB, from whom we had received a holding reply.

The CCG failed to appoint a primary care member to the ICB an interim solution is in place with Dave Baker GP sitting on the ICB and likely chairing the Primary Care Advisory Group (PCAG) on which we sit, so there is linkage between the two forums. It is envisaged that the PCAG will also feed into the PCCC and the

operational group linked to implementation of things discussed at the PCAG (yet to be given a title). The PCAG will also act as an advisory committee for strategic decisions being made in the PCCC. The first PCAG meeting has been tentatively scheduled for Thursday 29th September and will be held monthly thereafter. CPL has an invite.

ICS - Local commissioning of Pharmacy, Optometry and Dentistry (PODs)

In terms of the wider delegated commissioning and the system, this will be done on a regional basis. The five systems (Northamptonshire, Leicestershire, Nottinghamshire, Derbyshire and Lincolnshire) are meeting biweekly to co-produce the transition to POD commissioning.

The ICS is due to take over commissioning of 'POD' as from 1st April 2023. They submitted their self-assessment to NHS England in the form of the Pre-Delegation Assessment Framework (PDAF), completed on an East Midlands basis. There are four domains assessed: Transformation, Leadership, Finances and Workforce. The Finance domain is not yet finalised. All PODs asked for clarification around funding parameters when available as this is an area of concern. CPL shared details of the real terms funding cut to Community Pharmacy in the form of the MP briefing to ensure full understanding of the challenging financial circumstances contractors are facing. PJ highlighted that contractors are increasingly reducing supplementary hours to ensure their costs remain at a sustainable level.

New Chief Pharmacist/Head of Integrated Medicines & Prescribing Services at ICS – Yinka Soetan.

Will meet at provider meeting on Thursday 22nd September. Note only one of PJ/TLG will attend this meeting as the other will be in the LPC online conference discussion around finances which clashes with this meeting. CPL has one more space at LPC conference, following discussion CK will attend virtually.

ENT focussed Minor Illness Training

Three training dates have been booked for a maximum of 20 candidates each (60 in total) as follows:

Tuesday 15th November – LINCOLN,
The Showroom, Tritton Road, Lincoln, LN6 7QY
Free parking on site
<http://www.lincsymca.co.uk/the-showroom-lincoln/>

Monday 5th December - SLEAFORD
New Life Centre, Mareham Lane, Sleaford Lincolnshire, NG34 7JP
Free parking on site
<https://newlifeconferencecentre.co.uk/>

Saturday 10th December - SLEAFORD
The Source at Riverside Church, Southgate, Sleaford, NG34 7RY
There is a public Car Park next door to the centre
<https://source.riversidesleaford.org.uk/index.php>
<https://www.riversidesleaford.org.uk/index.php/about-riverside/finding-us>

	<p>This has been funded from the MOU funding. Otoscopes, batteries and specula have been purchased – some of this cost may need to come from the HLP reserves (as agreed at last committee meeting), as we have been asked to set aside some monies for Tier 3 NHSE training venue costs (budgeted up to £1264 incl, cost for first venue £205 so this may be available for otoscope costs). The shortfall is estimated at around £2,000 and there is £24,280 in the HLP reserves. TLG will book up the final places then send confirmation emails to participants, noting let us know well in advance if cannot attend</p> <p>As at 12th September there were 6 places remaining on Saturday 10th December. All other places had been filled. An independent contractor expressed an interest in a second place if available, so this will be offered to them leaving 5 spots to fill.</p>	
15/09/5	Finance Update	
	<p>Finance report (including payments list)</p> <p><i>Finance report</i></p> <ul style="list-style-type: none"> • CK briefed the committee around the background of meeting paper 5. • CK commented that we had not received the expected PSNC levy invoice. <ul style="list-style-type: none"> ○ It was acknowledged that the levy will increase as the portion for PSNC is going up. ○ PSNC levy calculations are currently being re-calculated. <p><i>Payments list</i></p> <ul style="list-style-type: none"> • CK talked the committee through the accounts spreadsheets. <ul style="list-style-type: none"> ○ Payments made for otoscopes, specula and batteries have been made using NRF monies. • The committee approved the payments list for July-August. 	
15/09/6	LPN Funding	
	<p>Discussion and decisions</p> <ul style="list-style-type: none"> • PJ briefed the committee around the background of meeting paper 6. <ul style="list-style-type: none"> ○ Cross pharmacy working funding. ○ The committee was informed that there were four streams within our original bid. <ul style="list-style-type: none"> ▪ Following a meeting with all LPCs it became apparent that the CPL proposal was too strategic. ○ The CPL proposal has been revaluated and has been resubmitted as a new bid solely for a contraceptive pilot in Lincoln. • Following discussion, the committee agreed to support the Executive position of not accepting funding linked to KPI achievement over which we do not have full control as the financial exposure risk would be too great. • The four PCN community pharmacy leads/representatives would be supported for four hours per week to develop the contraceptive pilot building relationships with GP surgeries. <ul style="list-style-type: none"> ○ They would have certain tasks to undertake managing their own time. <p>We would also look to work with the university of Lincoln to ensure maximum awareness of the service to relevant patient groups</p> 	
15/09/7	PSNC – New Model Constitution	
	Update	

	<ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 7. <ul style="list-style-type: none"> ○ The committee was informed that this was just for information as an LPC we generally work within the parameters of the new model constitution. 	
15/09/8	Tier 3 Service and ENT Training	
	<p>Update</p> <ul style="list-style-type: none"> • TLG briefed the committee around arrangements made regarding ENT Training. • The committee was shown a sample of the Otoscopes and Specula purchased with MOU funding for the CPL Training events. <ul style="list-style-type: none"> ○ Each attendee at the training will be provided with a bag containing an Otoscope, a pack of paediatric specula, a pack of adult specula and a pack of AA batteries. <ul style="list-style-type: none"> ▪ TLG to provide HS with a list of those attending each training event to enable training packs to be labelled to prevent any confusion. • A letter will also be written and enclosed detailing what the attendee can find in the pack and highlighting that this was to be kept in pharmacy but should be taken home to practice with before being returned to keep at the pharmacy. It should also be highlighted that this is an initial allocation, and no further supplies would be provided. • Following discussion, it was agreed that stickers previously used on the Minor Ailments books would be applied to the boxes containing the Otoscopes – labels advise that “for use in the pharmacy only – not to be removed from the pharmacy” and shows the CPL logo. • The committee discussed the need for a committee member to be present as the Responsible Person at each event, to greet the trainers and attendees. <ul style="list-style-type: none"> ○ Tuesday 15th November – Lincoln <ul style="list-style-type: none"> ▪ MB – Responsible Person ○ Monday 5th December – Sleaford <ul style="list-style-type: none"> ▪ CK – Responsible Person ○ Saturday 10th December – Sleaford <ul style="list-style-type: none"> ▪ PJ – Responsible Person 	<p>TLG, HS</p> <p>TLG, HS</p> <p>HS</p>
15/09/9	Independent Pharmacy Awards	
	<p>For information</p> <ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 9. • PJ commented on the significant strides CPL has taken in representing contractors. • The committee was informed that CPL has made the shortlist for Best Supporting LPC 2022 award. • A committee discussion followed. 	
15/10/10	University of Lincoln small business training	
	<p>Discussion</p> <ul style="list-style-type: none"> • TLG briefed the committee around the background of meeting paper 10 <ul style="list-style-type: none"> ○ University of Lincoln have approached CPL regarding funding to deliver business training for small businesses (under 250 staff) in the health sector under the GLLEP programme. <ul style="list-style-type: none"> ▪ Smaller contractors have the possibility to access. 	

	<ul style="list-style-type: none"> The committee was asked to think about potential training needs for the committee. <ul style="list-style-type: none"> Media training Influencing Skills Diversity The committee was asked what do Independents or smaller companies want? <ul style="list-style-type: none"> Delegation/time management. Managing conflict in pharmacy Committee was asked to feedback to TLG by the end of next week. 	All
15/09/11	Flu training requirements	
	<p>Information & Discussion</p> <ul style="list-style-type: none"> PJ commented that nationally training requirements have changed. <ul style="list-style-type: none"> Face to Face is now required periodically. <ul style="list-style-type: none"> How is this managed? <ul style="list-style-type: none"> A committee discussion followed. <ul style="list-style-type: none"> Is it down to Contractors to decide? How competent are we in life-support? PJ commented that a vague statement should be formulated for contractors which can be included in newsletter. 	PJ/TLG
15/09/12	GPCPCS Update	
	<p>Information and discussion</p> <ul style="list-style-type: none"> TLG briefed the committee around the background of meeting paper 12. Background information was given to the committee. <ul style="list-style-type: none"> nhs.net is complicated for pharmacy. EMIS web – only 15 GP's use PharmRefer – includes triage tool <ul style="list-style-type: none"> Provides less downtime for both GP and Pharmacist. Funding for this has been extended to end of March, paid by Central Service at the moment. Less bounce back than nhs.net. Allows information to be sent back to GP's. The committee was informed of a change in Stuart Hellon's (SH) job title to: <ul style="list-style-type: none"> Services Implementation and Support Lead. SH has signed a further 6-month contract until 31st March 2023 A committee discussion followed around PCN engagement. 	
15/09/13	AOB	
	<p><i>CPPE Update</i></p> <ul style="list-style-type: none"> PJ provided the committee with an update regarding CPPE. <ul style="list-style-type: none"> Requirement for pharmacy professionals is to undertake Level 2 Safeguarding training every 2 years. <ul style="list-style-type: none"> CPPE training for this was removed on 1st September. <ul style="list-style-type: none"> Learning record will still show in history. CPPE now links to Electronic Learning for Health for Level 2 Safeguarding. Level 2 case studies are available on CPPE website, these are not compulsory but might be of benefit. A committee discussion followed. Other CPPE training available is: <ul style="list-style-type: none"> Resistance to vaccines. 	

	<ul style="list-style-type: none"> ▪ Diabetes. ▪ Face-to-face consultation skills – (coming next year) <p><i>Parliamentary drop in 19th Oct pm</i></p> <ul style="list-style-type: none"> • TLG informed the committee that this had been cancelled. <p><i>Encouraging AGM attendance</i></p> <ul style="list-style-type: none"> • The committee was asked attendance at future AGM's could be encouraged? <ul style="list-style-type: none"> ○ Need for a good hook. ○ Workforce crisis – will not get full engagement. ○ Geographical challenges acknowledged. ○ CK commented on playing the long game – interactions (use of stickers on Otoscopes) and arranging a good speaker. • Need to start thinking about options for a speaker for next year's AGM. <ul style="list-style-type: none"> ○ Good idea to arrange either focused training or a speaker relevant to service provision. ○ To be kept on agenda. <p><i>7 Day prescribing</i></p> <ul style="list-style-type: none"> • East Midlands Pharmacy had circulated an email regarding 7 Day prescribing. <ul style="list-style-type: none"> ○ 7 Day prescriptions should only be issued if the prescriber has made the decision on clinical grounds. ○ A 28 day prescription can be provided as 4 x 7 Day blister packs. • A committee discussion followed about the email. • The committee was asked to feedback any issues experienced. • The committee discussed what was reasonable adjustment and issues with MDS. • PJ to pull together points discussed to compose an CPL statement to be published on the website. <p><i>Bank Holiday Directions</i></p> <ul style="list-style-type: none"> • Monday 19th September – expressions of interest had been requested. <ul style="list-style-type: none"> ○ Details of those opening was expected earlier today. <ul style="list-style-type: none"> ▪ A committee discussion followed. • Christmas and Easter Bank Holiday opening <ul style="list-style-type: none"> ○ Issues where pharmacy is co-located was discussed. <ul style="list-style-type: none"> ▪ Fees only cover security and pharmacist. ○ Correspondence via email to be written to NHSE to discuss provision. <p><i>Transitioning Pharmacy Representation</i></p> <ul style="list-style-type: none"> • RS commented that Toolkit has been provided by PSNC. <ul style="list-style-type: none"> ○ RSG proposal includes changes to constitution and levy. ○ It was acknowledged the CPL maps to the ICS footprint. ○ RSG suggests 200 contractors, CPL has 117 so we need to look at justification for this lower number. ○ Budgeting – existing money does balance. 	<p>All</p> <p>PJ</p> <p>TLG</p>
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	<ul style="list-style-type: none"> ▪ Based on inflationary increases. • To be included as an agenda item for November's committee meeting. <ul style="list-style-type: none"> ○ Strategy discussion 	TLG
	Meeting closed at 5.00pm	
	Date of Next full meeting	
	Thursday 17 th November – Full-Day face-to-face meeting – Washingborough Hall Hotel	All

Action Log from September 2022 Meeting

Min No.	Action	Deadline	Resp.	Completion Notes
15/09/2	CS and AM to send a brief bio for website to TLG.	ASAP	CS, AM, TLG	Completed
15/09/2	PJ to revise his biography on the website.	ASAP	PJ	Completed
15/09/3	Contraceptive Pilot – Meeting with Sexual Health Team to be followed up	ASAP	PJ, TLG	Completed
15/09/8	Letter to be written to enclose with ENT training packs	End of October	TLG, HS	21.09.22 - Completed
15/09/8	Attach 'for use in pharmacy only' labels to Otoscope boxes and create ENT training packs for those contractors attending the training events.	End of October	HS, TLG	Completed
15/09/8	TLG to provide HS with a list of those attending each ENT training event to enable training packs to be labelled to prevent any confusion.	End of October	TLG, HS	Completed
15/09/10	Feedback to TLG about possible training needs which could be provided via the funding obtained by University of Lincoln for small businesses in the health sector.	23.09.22	All	Completed
15/09/11	Vague statement to be written regarding flu training requirements to be included in newsletter	ASAP	PJ/TLG	Completed
15/09/13	Committee asked to feedback any issues regarding 7 Day prescribing	Ongoing	All	
15/09/13	Statement to be written regarding response to email concerning 7 Day prescribing – to be published on CPL website.	ASAP	PJ	
15/09/13	Letter/email to be written to NHSE to discuss Bank Holiday provision.	ASAP	TLG	Completed
15/09/13	Include in November's agenda – strategy discussion around Transitioning Pharmacy Representation.	End of October	TLG	On Agenda

Actions carried over from previous meetings.

Min No.	Action	Deadline	Resp.	Completion Notes
16/3/5	Consider how to spend reserves and feedback		All	<p>Reserves allocated so far to</p> <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). <p>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 25.11.21 – Working on training. MB can we potentially use for backfill to attend NHS training? 20.01.22 – ongoing conversations. 19.05.22 – ongoing. 21.07.22 – ongoing – on agenda. 15.09.22 – ongoing.</p>
23/9/3	Complete paperwork to withdraw money from PayPal	ASAP	CK, PJ	<p>25.11.21 – potential of using as a spend was discussed. Paperwork still to be completed. 20.01.22 – paperwork has been completed. 17.03.22 – CK commented that this was ongoing. 19.05.22 – Balance with PayPal to be used to pay travel expenses for Chair & CO. Chair & CO to provide details for PayPal payments.</p>

				21.07.22 – CK will follow up again, currently struggling to withdraw or use the funds in any way. CK & TLG to meet and attempt to resolve on 10.08.22. 15.09.22 – ongoing.
25/11/10	CK to investigate payroll management	ASAP	CK	20.01.22 – on budget update 17.03.22 – CK commented that this was ongoing. 19.05.22 – CK advised that he had looked into this, commenting that it was easy to do as done now but would not involve a massive cost to use payroll management. The committee discussed the possible benefits and agreed that this should be adopted. CK to arrange. 21.07.22 – CK suggested we wait until after the Wright Review but suggested the need for another person to access basic payroll tools. JB to be shown. RS commented on the importance of another committee member knowing the process as a matter of governance and oversight. To be kept on agenda.
25/11/12	PJ to go back to Warwick Healthcare about possibility of becoming South Lincolnshire PCN Lead	ASAP	PJ	20.01.22 – MB has been temporarily appointed. Warwick Healthcare at Crowland had expressed an interest. 17.03.22 – carried over. 19.05.22 – carried over. 21.07.22 – PJ commented that this would be left until next round of PQS. Watching brief at this point.
17/03/9	TLG will speak to Josie Solomon regarding appraisal of any training.		TLG	19.05.22 – ongoing 15.09.22 - ongoing
19/05/3	Website PCN information to be updated to reflect merger of Newark Road Surgery with Portland Medical Practice.	ASAP	PJ, TLG	Completed

19/05/14	TLG & CK to meet up to discuss data from EMAS and write a business case for potential Naloxone Service.		TLG, CK	Met with EMAS. Naloxone business case development is still on to do list when capacity allows. 21.07.22 - TLG commented that no one has used in Norfolk.
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