

Minutes of the Meeting held Thursday 26th September 2024 Washingborough Hall, Lincolnshire

Chair		
Paul Jenks	CPL Chair and LPC Member CCA rep	PJ
LPC Members present		
Nicole Murdock	CPL Member AIMp rep	NM
Chris Kenny	CPL Treasurer and Member AIMp rep	CK
John Broomhead	CPL Member AIMp Rep	JB
Christine Stafford	CPL Member CCA rep	CS
Chris Mulimba	CPL Member Independent rep	CM
Blazej Jasnowski	CPL Member Independent rep	BJ
Jevon Khakh	CPL Member AIMp rep	JK
Rob Severn	CPL Member CCA rep	RS
In attendance		
Tracey Latham-Green	CPL Chief Officer	TLG
Natalie Kenny	CPL Administrator	NK
In attendance via Teams	s between 11:30pm- 1230pm	
Lindsey Fairbrother	CPE Regional Representative	LF

Apologies

None received



Abbreviations

4PPC	Four Pillars of Primary Care	LDC	Local Dental Committee
СО	Chief Officer	LMC	Local Medical Committee
CCG	Clinical Commissioning Group	LOC	Local Optical Committee
СР	Community Pharmacy	LPC	Local Pharmaceutical Committee
CPAF	Community Pharmacy Assurance	MYS	Manage Your Service
	Framework		
CPCL	Community Pharmacy Clinical Lead	NIHR	National Institute for Health Research
CPE	Community Pharmacy England	NHSE	National Health Service England
CPL	Community Pharmacy Lincolnshire	NRF	Non-Recurrent Funding
CPPE	Centre for Pharmacy Postgraduate	PACEF	Prescribing and Clinical Effectiveness
	Education		Forum
CPPQ	Community Pharmacy Patient	PCN	Primary Care Network
	Questionnaire		
CPWM	Community Pharmacy West Midlands	PCAG	Primary Care Advisory Group
CRG	Clinical Reference Group	PCCC	Primary Care Commissioning
			Committee
DMS	Discharge Medicines Service	PCSE	Primary Care Support England
DOC	Declaration of Competence	PCTOG	Primary Care Transitional Oversight
			Group
DOI	Declaration of Interest	PEQ	Patient Experience Questionnaire
GDPR	General Data Protection Regulation	PGDs	Patient Group Directions
GP	General Practitioner	PhAS	Pharmacy Access Scheme
GP	General Practice Community	PMS	Pharmacy Management System
CPCS	Pharmacist Consultation Service		
HW	Healthwatch	POD	Pharmacy, Optometry and Dentistry
HWB	Health and Wellbeing Board	PQS	Pharmacy Quality Scheme



ICB	Integrated Care Board	RPS	Royal Pharmaceutical Society
ICSs	Integrated Care Systems	SIP	Systems Improvement Programme
IP	Independent Prescriber	STPs	Sustainability & Transformation
			Partnerships
IPMO	Integrated Pharmacy & Medicines	ULHT	United Lincolnshire Hospitals NHS
	Optimisation		Trust
LiSH	Lincolnshire Sexual Health	UOL	University of Lincoln



Minutes:

Item	Details	Resp.
2609/1	Welcome, introductions & apologies	
	 No apologies were received The committee welcomed Nicole Murdock as the new IPA member 	
2609/2	Committee Governance	
	Declarations of Interest (DOI) & Biography	
	 The committee acknowledged that there are no changes to be made to DOI's PJ reminded the committee to check and update their biographies if necessary. Competition Law Guidelines The committee acknowledged that there was no change to our stance on this matter. Earlier this month the CO circulated an email to all committee members linking to the relevance guidance on the Community Pharmacy England website. 	All
2609/3	Notes from the previous meeting	
	 Minutes The committee agreed that they accepted the minutes from the previous meeting. The committee considered the Action Log. Matters Arising No matters arising from last minutes. 	



	Action Log	
	PJ confirmed that the review of SLAs is almost complete. Palliative care is being reviewed on an East Mids. footprint. EHC SLA improved but there are some areas where pharmacies may find interpretation around age limits and Special Educational Needs and Disabilities (SEND) patient classification difficult.	
	Harm Reduction/Substance misuse. Naloxone service being considered.	
	Louth rota has been discontinued. CO to inform Humber LPC that Louth rota has been discontinued, as some patients may travel from locations on country border to Louth.	TLG
	Directed Rota appeals discussed; lack of proof of need has been successful at some appeals. CO and Chair need to discuss actual need versus perceived need for directed Rotas including evidence available.	PJ/ TLG
	CO to request data around rota activity across the county for the last 4 years for directed opening and for the enhanced service rota to determine uptake and use of Louth Rota. Tracey to email Luke. Committee agreed this would help us to inform future planning and support contractors with any queries.	TLG
	CK to speak to Asda about the cost of opening the pharmacy/store if directed to open to support ongoing discussions about contractors not being out of pocket for directed opening.	СК
	PJ – discussed general concerns around market entry process	NK
	Paypal – committee agreed to remove from action log as not economically viable to pursue.	
2609/4	Appointment of Vice Chair	
	Following the resignation of the Vice Chair upon leaving Lincolnshire Coop in July, committee members were asked to consider putting themselves forward for the position.	



	Blazej put himself forward as Vice Chair. CK nominated, JB seconded. (candidate was asked to leave the room) A vote was held and BJ was elected unopposed.	TLG
	CO to update website accordingly and liaise with BJ regarding Executive Meetings.	
2609/5	Update from Chair and Chief Officer	
	Chief Officer	
	Health Scrutiny Committee – 4th December	
	PJ and TLG have been asked to present to Health Scrutiny Committee on 4th December and will produce a report as requested (currently in progress) by 18th November.	
	Potential Visit to Hub and Spoke site	
	Lindsey the regional rep is trying to organise a visit in Nov/Dec which CO hopes to attend.	
	PNA	
	As agreed, we have circulated the questionnaire in our newsletter and have provided contacts for the larger groups to enable head office completion.	
	CK expressed disappointment that centralised returns from Head Offices are not supported despite TLG asking for this from the Council, leading to concerns about completion and validity of data.	
	PNA process is time-bound, but local elections have delayed the process further. PJ has a meeting next week where concerns will be raised.	
	 CPE & MP Engagement MP letters were sent – hand signed, after election. Sir John Hayes responded, and CO met with him on 21st August – he will be writing to the Health Secretary and tabling questions based on the CPE briefing. 	



- Invited all MPs to the 10th September event in London, but none attended. Reminded re visiting a pharmacy and sent CPE animation link.
- Another letter planned in a few months. Will continue to support CPE MP engagement and have updated George Foote at CPE of current contacts.

CPAF Questionnaires

All Lincolnshire pharmacies completed the short CPAF – only area in the East Mids with 100% completion. CO and SISL had chased all to complete prior to final deadline.

ICS/CCG Update

- ICS still restructuring to save 30% of running costs.
- CO attended PCCC where it was confirmed that the Louth Rota would be decommissioned. CO noted to the ICS that it would be disappointing if the £46k funding from this service was not ringfenced to support community pharmacy but we believe it is unlikely this will happen – we await a response. We had previously made clear that this would be extremely difficult to reinstate if decommissioned. It was also confirmed to the CO that the restructuring of PCCC will still include PODs invites to each meeting.
- IT issues remain in terms of interconnectivity between pharmacy and other primary care providers, particularly GPs. We have given written support for digital funding bid to expand capacity at the ICS.
- Gerry McSorley, ICS chair visited community pharmacy on 4th July. Thanks go to Blazej for hosting. Positive visit gave him a greater understanding of the issues in pharmacy and its complexities.
- The ICS are receiving £1040 per PCN (around £14,460 in total) to create a post to support PCN integration, provide support and co-ordination for the community pharmacies in their PCNs to help them collaboratively develop and implement an approach to engagement with the PCNs for 8 hours per Quarter per PCN. Split by Lincs



	 into 3 posts. Closing date was 31st August – of four applications received only one passed first clearing so will be going out for advert again imminently. Dental/Optometry referral for Hypertension Case Finding into CP – ICS pilots – we await news of whether these will go ahead.
	Chair Update
	 CPE Forum of Chairs The first CPE Forum of Chairs took place on 25th September 2024 in London. PJ attended, and RS attended in his role of Chair for Nottinghamshire LPC. IPA's concern about proportionality on the CPE committee was one of the topics discussed at length. PJ gave the CPL committee a general update on delayed contract negotiations between CPE, NHSE and DHSC. Progress is being made between CPE and the new Pharmacy Minister, and bimonthly meetings are now scheduled. The role of Vice Chair role for the Forum of Chairs is currently vacant- nominations are due soon.
2609/6	Finance update
	Finance Report (including recent payments list) CK briefed the committee around the background of previously circulated meeting papers Management report, accounts spreadsheet and bank statements included in meeting papers. Bank accounts have been reconciled to end of August 2024 Movement in Number 2 Account is true to running costs. Running at underspend of £6,335 YTD. At this run rate, the committee accounts are predicted to close on c.£100k. This is £20k over the position we have aimed for (50% of annual running costs in reserves at FYE).





	The committee were notified of the intention for a contractor appeal, but at the time of the meeting this has yet to be communicated.	
	CAS-289580-Y7S2Q4- D&B Healthcare Limited DSP Relocation outside of HWB area	
	This has been granted and the decision was shared with the committee.	
2609/9	Update from regional representative	
	Lindsey Fairbrother attended via MS Teams.	
	Feedback was given about the current negotiations between CPE and DHSC, but the explicit detail of this remains confidential. Lindsey shared that a good relationship is being built between CPE, the new pharmacy minister and government to highlight the very difficult situation in community pharmacy and explain the changes that are needed, including evidence provision, analysis and engagement. All powers being used to illustrate difficulties in the sector.	
	Lindsey shared comments about the following subjects:	
	 CPE Forum of Chairs Proportionality of CPE due to recent changes to proportionality of ownership in England of Community Pharmacies Pharmacy First Targets Hub and Spoke models 	
	 A visit to a Hub and Spoke setup is to be arranged and CPL committee members will be welcome to attend. More details to follow. TLG will collate a list of names of interested individuals for this visit. CPE will be inviting observers from LPCs for their committee meetings. Midlands will be approached by CPE in due course. PJ noted that the LPC and CPE Regional Roadshow meeting in Nottingham was very useful, due to the presence of key CPE representatives including Janet and 	TLG



	Alastair. PJ also noted it is difficult to encourage contractors to attend evening events due to current pressures	
2609/10	CDAO feedback	
	CK shared the following information	
	CD Accountable Officer	
	 Amit Dawda has moved into a different role within the CDAO function. The committee thank Amit for his support of our contractors and wish him well in his new role. Sam Travis has been named as the new CDAO for our region. We welcome this news, and members of the committee have a strong working relationship with Sam anyway so look forward to working with her in the future. 	
	Feedback from CDAO regarding MSO Lincs Meeting	
	 Feedback was received by CK at a recent MSO meeting that contractors were still providing more than 5 days' worth of Schedule 4 and 5 Controlled Drugs through Pharmacy First Urgent Supply mechanisms (and previously, CPCS) CK challenged back, asking for CDAO to provide information and work with CK on a potential strategy to reduce this CDAO found only one instance of this happening over the past six months, and that no further action is needed at this time. This was welcomed by the committee. 	
2609/11	Factors impacting pharmacy	
	Aggressive Patients	



	 CK shared concerns around the lack of regulatory support for banning of patients. Whilst a patient can be prospectively banned from a private premises, the NHS Regulations do not allow prospective exclusion, meaning a patient could access services via a proxy. GP Practices have much more structured support and have robust and enforceable aggressive patient protocols. It is believed that despite the difference, ICB have been supportive of pharmacy against an uptick in aggressive patient exclusions. TLG will take an action to discuss with Healthwatch about any support we can share with contractors when dealing with aggressive patients. 	TLG
2609/12	Stock Shortages	
	 PERT Medicines (Pancreatic Enzyme Replacement Therapy) The ongoing supply issues with PERT medicines continues to be a challenge throughout primary care Complex strategy to switch patients between PERT medicines or reduce doses is very hard to manage for pharmacy and GP Practice. Supplies chains are more reliable in secondary care, but there lacks a straightforward legal pathway for pharmacy and/or GPs to access this stock Discussions between Clinical Leads, CPL and Trust Chief Pharmacists are ongoing 	
2609/13	Pathfinder update from BJ/CM	
	BJ updated the committee on pathfinder still awaiting IT signoff. Being visited tomorrow. Will keep LPC updated. He is covering minor conditions and Hypertension. It was noted that he will need to work on finding patients but a patient doesn't need to be registered in the local PCN.	



	Yuen Toh has been in contact with TLG about how can they practically refer in and build relationships between GPs and Pharmacies within PCNs, and facilitate referrals. This may be helpful. TLG to liaise with BJ Re GP Pilots and linking in with Kaval Patel, pilot lead in LHP PCN.	TLG
2609/14	Post Event Messaging	
	PJ noted that there were still issues with the system, leading to additional work for contractors. Some general practices haven't got the emails switched on. Concerns are this could continue we do all the work and then must do all remedial work again.	
	Future fix could be made mandatory in GP contract, however this will take time.	
	There are no standardised email addresses for GPs like there are for pharmacy which complicates the issue.	
	Noted the burden on contractors. PharmOutcomes fee charged but if information not transferred to GP automatically, extra time and printing cost etc. are all unfunded and not accounted for in the £15 service fee.	
	TLG noted that the ICS don't have the capacity to chase practices to re-verify their emails every quarter, which we understand maybe a requirement. PJ noted backlog needs to be cleared but accumulation needs to be prevented in the future.	
	RS supported the LPC continuing to work with the ICS to remind GPs to ensure an update email is registered on the systems.	
	RS noted it's important that we brief contractors on when a message is not able to be sent electronically. TLG has added the updated deadline to the newsletter this week.	
	The committee discussed post payment verification and variation in practices across different NHSE regions related to PEMS. PJ noted the LPC need to be aware and ready to support contractors where appropriate.	



2609/15	Pharmacy Services Update	
	The CO gave an overview of the current work around Pharmacy First service support.	
	There remain IT issues in the interface between GPs and pharmacies, but these are being worked through with the ICS. Collective action by GPs has negatively impacted referrals but a recent presentation at the LMC Practice Manager conference facilitated by the SISL and CO and delivered by Cliffe House staff appears to be having a positive impact on referral interest.	
	The SISL continues to support and we are hopeful that we will have access to usage data soon which will assist in targeting support.	
	TLG updated the committee with some data she received from Theresa (Lincolnshire CPCL), noting referral from UEC into Pharmacy First was being explored. Overall PF referrals were higher than the equivalent CPCS referrals last year. Minor ailments are reducing but clinical conditions are on an upward trajectory, as expected due to promotional and integration work completed by CO and SISL.	
	The CO has submitted a plan for LPN funding which will allow us to complete more work around contraception and hypertension service promotion and integration, and extend the contract of the SISL to facilitate this.	
2609/16	Hard Copy Paperwork Storage and Disposal	
	The committee discussed the disposal and retention of paperwork.	
	HR Paperwork including disciplinary paperwork – To be retained for 10 years from date of production. To be transferred to Notts LPC Office in a sealed and labelled box.	
	Meeting papers	
	Minutes and agendas from January 2019 are on the website. All papers for meetings since January 2021 are on the shared drive.	



	Documentation to be retained for six years. To be stored electronically moving forward.	TLG/NK
	Accounts	
	Retain hard copy accounts paperwork or electronic versions as applicable for six years. Review and dispose of existing paper accounts as required.	
	Committee Paperwork	
	Action: Historic hard copy Confidentiality Agreements: retain for six years from date of completion	
	Action: Historic hard copy Declarations of Interest: retain for six years from date of completion	
	Miscellaneous Paperwork	
	Review anything that is six years old or younger, destroy if older than six years.	
	HS notebooks and other miscellaneous paperwork – Review and destroy if applicable	
	 All above proposed by BJ; CM seconded Committee agreed unanimously 	
	CO and Administrator will remove LPC archived hard copy paperwork away from Coop premises, review and order confidential waste collection and disposal from the new location.	TLG/NK
	CO will write a document retention and disposal policy for the LPC.	TLG
	Hard copy papers can be stored in the Nottingham office if required, in a sealed box with a disposal date.	
2609/17	AOB	



1	AGM Meeting Start Time	
	 It was proposed that we start our committee meeting later for the next AGM to minimise waiting time between meetings. We will look to start the committee meeting in September 2025 at 11am instead of 9:30. 	
	CK MSc Thesis	
	 CK is currently participating in research which looks at determinants of role satisfaction for pharmacists participating in quality schemes. He asked for individuals to be interviewed, or for suggestions of potential participants. 	
	Pharmacy Technician Apprenticeship EOI	
	 Expressions of Interest are open for accessing NHSE funding for provision of Pre-Registration Pharmacy Technician training. Webinars are available for contractors to find out more detail. 	
1	Meeting closed at 3.15pm	
1	Date of Next meeting	
-	Thursday 12 th December – Dower House Woodhall Spa	



Action Log from September 2024 Meeting

Min No.	Action	Deadline	Resp.	Completion Notes
2609/3	Louth rota discontinued has been discontinued. Action CO to inform Humber LPC that Louth rota has been discontinued.	ASAP	TLG	Completed
2609/3	CO and Chair need to discuss actual need versus perceived need for directed Rotas including evidence available, once rota activity received from NHSE.	ASAP	PJ/TLG	
2609/3	CO to Request data around rota activity across the county for the last 4 years.	ASAP	TLG	Completed
2609/3	CK to speak to Asda about the cost of opening the pharmacy/store if directed to open	ASAP	СК	Completed
2609/3	Paypal – committee agreed to remove from action log as not economically viable to pursue.	ASAP	NK	Completed
2609/4	CO to update website accordingly and liaise with BJ regarding Executive Meetings.	ASAP	TLG	Completed
2609/7	Organise a Chair appraisal with the governance committee.	Dec 2024	PJ/RS/CS/CM	
2609/9	A visit to a Hub and Spoke setup is to be arranged. TLG will collate a list of names of interested individuals for this visit. TLG awaits more details from LF	ASAP	TLG	



2609/11	TLG will take an action to discuss with Healthwatch about any support we can share with contractors when dealing with aggressive patients	ASAP	TLG	Completed -also shared pressures survey data at October catch-up
2609/13	TLG to liaise with BJ Re GP Pilots and linking in with Kaval Patel pilot lead in LHP PCN.	ASAP	TLG	Completed
2609/16	HR Paperwork including disciplinary paperwork – To be retained for 10 years from date of production. To be transferred to Notts LPC Office in a sealed and labelled box.	31/01/25	TLG/NK	Completed
2609/16	CO and Administrator will remove LPC archived hard copy paperwork away from Coop premises, review and order confidential waste collection and disposal from the new location.	31/01/25	TLG/NK	Completed
2609/16	CO will write a document retention and disposal policy for the LPC.	Dec 2024	TLG	Completed

Actions carried over from previous meetings.

Min No.	Action	Deadline	Resp.	Completion Notes
2006/07	NK will book venues as agreed.	ASAP	NK	Booked Dower House Dec 2024 and
				Washingborough March 2025. Next FY
				Dower House pending following Dec



				meeting (IT). Sept 25 AGM & ctte booked Washingborough. Carry over.
2006/12	Each committee member would produce a short video biography – CK will do his first and share with TLG. The rest of the committee will also do one and share with TLG	31/1/25	ALL	Carried Over
1403/4	Review all SLAs for Local Commissioned services to find out which services needed to be fulfilled in a consultation room, or in a consultation space.	When time allows	TLG/SH	Completed
1403/13	TLG and CK to raise concerns about incorrect interpretation of the regulations as seen in the notification decision of recent DSP Market Entry decision.	ASAP	CK/TLG	Completed. Raised with Luke Clarkson at Stakeholder Group meeting
23/9/3	Complete paperwork to withdraw money from PayPal	ASAP	CK, PJ	Has been ongoing since Nov 2021. TLG & CK to finalise when time available
16/03/10	Forward any key communications to TLG for inclusion in the newsletter to remind contractors of information which might otherwise be missed.	Ongoing	All	15.06.23 – Committee reminded. RS has sent a couple f key comms which was very helpful.