

Pharmacy Thames Valley Committee Meeting

Wednesday, 18th November 2020

10.00-13.00 Online

Summary Minutes

Item

1 Welcome and Apologies

Present: Robert Bradshaw (Chairman), Akin Adeniran (Vice Chair), Ian Dunphy (Treasurer), Rohini Aerry, Ketan Amin, Raj Bhamra, Navjot Chohan, Andrew Jones, Shelton Magunje, Corrin McParland, Vikash Patel, Oliver Picard, Barrie Prentice, David Dean (Chief Officer), Kevin Barnes (CSO), Amanda Dean (Minutes)

Welcome & Apologies: RB welcomed new Independent Member Vikash Patel from Henley Pharmacy. RBh confirmed this will be his last meeting – RB thanked him for his contribution. DD to contact CCA regarding a replacement.

2 Declarations of Interests

None

3 Action Log Review

The Action Log (previously circulated) was reviewed and updated.

The following points were raised:

- Banking details – banking to be transferred to new Treasurer
- Finance Sub-Committee – to be arranged
- 5 Year Forward Plan – Circulated
- Covid Cost Line – categorised under HETV funding but needs to be split out
- HETV balance in savings account
- Berks West EPS – ongoing
- Flu Joint Letter with LMC – no further response but main issues now resolved
- 28 Day Prescribing – ongoing, any issues to be raised for follow up
- Face coverings – complete
- Lithium Carbonate – complete
- CGL/Swanswell/TP awareness raising – ongoing
- Antiviral Commissioning in Oxfordshire – advised that separate service is required
- Private flu jab communication with GPs – not mandatory
- Hep C – some of those registered are not ideally located and/or don't offer needle exchange. Current workload/timing makes engagement very difficult. CSO supporting relevant pharmacies to apply.
- Phenazine – issue resolved. Other pharmacies identified and PSNC/CCG advised.

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- Unlicensed drugs – details to be emailed to CSO for investigation.
- Committee change - complete

4 Chief Officer's Report

DD highlighted the following points from his report (previously circulated):

- IPMO – Integration of Pharmacy and Medicines Optimisation. LPC actively involved with CCGs on developing plans. Potentially Frimley CCGs and CCGs in our patch will merge. This should result in closer working with CP in terms of OTC, prevention, co-commissioning, and formulary changes, and will accelerate shared care records work. Final drafts of IPMO documents to be shared when available (expected shortly).

The documents circulated had been reviewed and there were a few opportunities for services. Workforce mapping and the importance of PCNs are key. Suggestion that a contribution could be made from HETV money. Because funding is directed at GPs, this is where the opportunities will evolve. Is there was an interest in introducing pre-reg placements in PCNs and surgeries? CCA have asked that this be a standing agenda item.

- TCAM – this will go live very soon but, given the current work pressures, there will be a phased launch of only the frailest patients initially.
- Wright Review – a steering group is being put together representing all stakeholders to look at recommendations. No deadlines have been set but they are expected to finalise the details by March 2022.
- CPCS – number of referrals doubled since April.
- GP CPCS – This went live on 1st November but different PCNs are in different positions. A few of our PCNs are looking to progress now and we will gradually get more PCNs switched on. It is potentially a good service but the challenge will be ensuring practices do the referrals. A recent pilot showed it was beneficial to get someone with practice experience to go in and demonstrate the benefits to the surgery. Agreed we would use some of the HETV money to pay someone to undertake this role for, say, a day a week. It was felt this would be good value and that the engagement of practices is a good idea. Any suggestions for candidates requested. Concerns raised about using NHS mail and suggestion that PharmOutcomes may be preferable. Soft launch offers a good implementation period.
- Covid Vaccination – Frimley have been proactive and involved CP in planning, however, the specification has now been changed from a system to a PCN-led campaign. Priority has been to the protection of pharmacy teams (not just pharmacists, splitting teams, etc). BOB have employed a project manager and are looking at directly employing locums. In terms of CP involvement there is the possibility of a Local Enhanced Service for the room temperature vaccination. No news yet on payment. There are serious concerns about workload. Some felt pharmacies would struggle to engage and deliver Covid but the opportunity may lie with flu. Others felt, whilst there were logistical challenges with Covid, CP risk setting a precedent if flu is delivered for little return and an opportunity is missed with Covid.

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5 Treasurer's Report

The Treasurer highlighted the following points:

- The current balance was confirmed.
- Forecast – The 5-year cash projection is based on 3% inflation. The first projection assumes that there is no increase in contractor levy. Between 2022 and 2023 the LPC would drop below recommended reserves. In 2025 there would be a deficit position. The second projection is based on a levy increase of £14 per contractor per annum. This would leave the LPC with the recommended cash reserve at the end of 2025.
- Staff left the meeting for discussion of CSO role, team costs and the Reserve/Levy Balance.
- The committee agreed to increase the levy so we can continue to employ a CSO. This will be under a Fixed Term 2 Year + 1 Contract. It was agreed a gradual increase in levy now was preferable to a sharp increase later. It is important we ensure contractors are aware that we are putting the funds to good use. Any annual pay rises will be based on reviews as before.

6 Contractor Support Officer's Report

The CSO highlighted the following points from his report (previously circulated):

- EPS – there has been good progress in East Berks but less so elsewhere.
- PCNs – PCN engagement has been reviewed. Communication is improving but there is some way to go.
- Flu – fantastic year. 49k vaccinations delivered. Around 70% over 65s.
- Services – Supervised consumption may see some increase, no plans to move to 14 days. RBWM EHC new contract due. Hep C – starting to work on this but limited by workload. Oxfordshire had gone out to tender on Smoking Cessation without advising us which was disappointing as previous engagement had been good. CSO to attend Bicester PCN meeting on behalf of Chair to discuss MCAs.

7 PSNC/NPA/CCA Updates

NPA:

- The NPA has introduced a monthly newsletter for LPC CEOs. It was agreed this should be shared in the digest
- Hub & spoke – NPA still sceptical of this approach for independents
- Conferences – recordings available
- Covid vaccination – An NPA-commissioned survey showed 73% of respondents would or might use CP for a vaccine. 19% don't intend to be vaccinated
- Ask Your Pharmacist Week – this has worked well in terms of raising awareness
- Coronacast – useful journalist-led series of recorded interview-style webcasts about the work that CP does

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- CP Financials – NPA still highlighting the EY report results
- Patient Safety – NPA is MSO for all independents with less than 50 branches. There has been a drop in reports during Covid, contractors are asked to ensure they report. Reporting is being simplified and results made easier to share.

CCA:

- There have been 4 newsletters since the last meeting. The most pertinent issue is about transparency.
- Every quarter the CCA set a number of questions and the suggestion is that the CCA member liaises with the CEO and Chair and incorporates those into the agenda. Most of the current questions have been covered elsewhere.
- One priority is for LPCs to facilitate discussion between PCN Leads and Clinical Directors. CCA want LPCs to be actively involved in bringing parties together and addressing the business continuity element.
- IPMO – CCA feel this should be a standing agenda item

8 AOB

The Chair thanked DD for media activity undertaken over the past few months. The Chair thanked the outgoing Treasurer and committee member for their contributions.

MP Engagement – PSNC have arranged a series of virtual meetings with MP groupings. Volunteers were requested for a committee rep from each sector (CCA/AIMp/Independent) to attend as the voice of the contractor in Thames Valley. Dates to be shared and volunteers to confirm by the end of the week.

Market Entry – One application has been approved subject to appeal. 2 further applications have been received in an area already well served, LPC to object in the usual way.

PPE Portal – the lack of registrations is a concern. Even if PPE is not currently required, pharmacies need to ensure they register. Highlight again in the digest. CCA members need to register branches individually. CSO to ask PCN Leads to follow up.

APPG Survey – all to complete; linked has been shared in current digest.

Next Meeting – 10.00-13.00, Wednesday 27th January 2021, Online