

## Pharmacy Thames Valley Committee Meeting

Wednesday, 10 March 2021

10.00-13.00 Online

### Summary Minutes

#### Item

#### 1 Welcome and Apologies

**Present:** Akin Adeniran (Vice Chair), Ian Dunphy (Treasurer), Rohini Aerry, Ketan Amin, Aron Berry, Andrew Jones, Shelton Magunje, Corrin McParland, Vikash Patel, Olivier Picard, Barrie Prentice, David Dean (Chief Officer), Kevin Barnes (CSO), Amanda Dean (Minutes)

**Welcome & Apologies:** Apologies: Robert Bradshaw, Navjot Chohan,

#### 2 Declarations of Interests

None

#### Introduction

Each attendee was asked what they were looking forward to as lockdown eases, both personally and professionally. Common themes were looking forward to seeing people face-to-face again and the need to take time away from the business.

#### 3 Action Log Review

The Action Log (previously circulated) was reviewed and updated. The following points were raised:

- Resolve outstanding banking issues
- Provide statement on HETV balance by end April
- Software – no current options allow non-employees to put claims in digitally, looking for alternative by end March
- Finance Sub-Committee – hold on levy increase until more details of Wright Review available
- RSG - PSNC have contributed £90k and will be requesting matching funds from LPCs
- Awareness raising – launched Pharmacy Hero Awards, radio campaign, press campaign and MP engagements. Looking to do other press coverage shortly.
- DMS – a lot of progress has been made recently. Royal Berks goes live on 10/3/21 using NHS.net. We have requested details of the pharmacies involved so we can check referrals go smoothly. Frimley & Oxfordshire – convinced to go with NHS.net solution which should be up and running in next week or so. Bucks – been on TCAM for a long time so also on DMS. A couple of DMS referrals on PharmOutcomes from Swindon & Hampshire. DoC needs to be set up first.
- PQS – now complete

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- PCNs – 2 weeks from the end of the financial year and still no advice on next year’s PQS and any PCN funding that will be built in. We have a few PCN Lead vacancies but not sure about recruitment as we don’t know what the funding looks like. PCN Leads need some support. Bucks had provided a Survey Monkey to help PCN Leads gather information, which had worked quite well. LPC should try and get the PCN Leads together, maybe a couple of weeks before each LPC Meeting, to support and facilitate conversations between PCN leads as everyone has done things differently.
- Smoking Cessation – Ice haven’t decided what they want to do and don’t have staff in place yet. They will be working remotely initially. Some CCA members have declined to take up the service as other priorities more viable than what Ice will be offering.
- Investigate asymptomatic Covid Testing Service and contact Surrey CC.
- Supervised Consumption – no feedback.
- East Berks POC – volunteer to attend
- Flu survey complete

## 4 Chief Officer’s Report

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

- Market Entry – quite a few changes in ownership, no recent closures. Current applications: Woodley appeal upheld. Waiting for Didcot. Oxford City has been accepted.
- Training – HEE training for Health Champion, only 10 places taken up. Find out from HEE if we can extend offer to more than one learner per pharmacy and to pharmacies that already have a health champion trained.
- Add more detail about what training involves to the digest.
- PQS Part 2 Training – used Virtual Outcomes, successful event. Scheduled GP CPCS in March and DMS in April. Any ideas for future training let DD know.
- CP Covid Vaccinations – CP sites have been very successful; DD extended his thanks to all involved. More sites have been requested for Oxfordshire and all expressions of interest have gone in. Pursuing both 1,000 and 400 per week sites now. No news yet on boosters.
- Services – struggling as LAs are dealing with funding cuts. Continuing to have those conversations.
- CPCS – 1,400 completed for urgent supply and 2,000 for consultations over the last few months.
- GP CPCS – 4 PCNs going forward (NHS.net mail route initially). PharmOutcomes requires investment from GPs which they are reluctant to make. BOB going live with one Wokingham PCN initially.
- GP CPCS – support where practices aren’t yet ready – needs to be CCG or system led but we are working with the CCGs.
- DMS – see Action Log Review (3 above).
- Hep C – the only Expressions of Interest received were from pharmacies not participating in the needle exchange service.
- Medicines Compliance – policy published. Still having conversations about pharmacies just doing a tray without an assessment.
- Flu – attended evaluation meeting and pitched what we need for the coming year.

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- IPMO ICS restructure – IPMO paused due to the publishing of the commissioning White Paper.
- Pharmacy Heroes – 202 entries, closes 31<sup>st</sup> March. We will then get a small panel to pick winners and arrange physical awards and certificates for all nominees.
- Careers Fair – Successful event.

## 5 Treasurer's Report

ID highlighted the following points:

- Handover almost complete, just waiting for access to the bank account.
- Completed PSNC Treasurer training.
- All to submit expenses in good time so payment can be made before the end of the financial year. (Before end of March)
- Budget drafted. This needs to be submitted to PSNC before the end of the financial year. PSNC trying to get transparency and consistency.
- Current budget contains some historical items such as venues and travel for meeting which will be left in. (Travel also includes CO & CSO visits.) Committee may meet face-to-face once or twice a year in future.
- Any training will to be built into the budget.
- Budget is based on historical spend - if we run with it we won't be in deficit as we have healthy reserves.
- Any queries regarding the budget to be raised ASAP.

## 6 Business Plan

DD highlighted the following points from the Business Plan (previously circulated):

- Bucks Merger – hold unless we are approached or if Wright Review requires a change.
- Committee – depending on Wright Review may need to review committee size.
- Governance issues – complete a training needs analysis.
- Budget – training and PR budget dependent.
- Contractor Engagement – CSO, Signal, Webinars, awards.
- PR – major part for this year, raising profile.
- Stakeholder Development – some fine-tuning, NHSE&I relationship improving, PCNs a major opportunity this year (training, support, etc. AB to support). CCGs/ICS - ensuring we have a voice.
- Services – ensuring we keep pharmacy top of mind. Possible minor ailments and clinical pathways going forward.
- Training – HEE funding but more we can do to upskill teams.

Need to set Smart Targets so the HR Team can measure performance. DD to add extra page with KPIs.

All agreed happy to adopt plan.

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### 7 Contractor Support Officer's Report

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

- PQS – 4/5 pharmacies did not submit Part 1. Only one pharmacy did not submit Part 2 as they decided it wasn't cost-effective to complete.
- PCNs – 100% submissions. Big challenges around domains 4 and 5; staff turnover issues. Some PCN Leads unhappy, around 15% looking to resign. Issues: lack of financial benefit, problems engaging contractors, frustrations around being ignored by Clinical Directors, etc. Currently have 5 vacancies plus one stand-in and one PCN division. Unsure what format/renumeration will look like in 21/22 so holding back on recruitment. Set up regular meetings/training. Share list of vacancies by end of the month.
- MDS – a few responses, mostly positive.
- Drones – one pharmacy to trial in the summer where there is a park next to the local care home.
- Services – Supervised Consumption - Slough and RBWM trying to do a second year extension, issue raised but it will be up to contractors to decide. Berkshire trying to align contracts.
- Ice have taken over Smoking Cessation in Oxfordshire. Every pharmacy has been contacted; one pharmacy has expressed an interest. CCA member declined. They will be running two training sessions in March; advised that they need to be working with us.
- Oxfordshire Solutions4Health finishing at the end of the month, claims need to be up to date by the end of the month.
- Letter has gone out saying EHC will be recommissioned until 2022 but no training mentioned; offering this might increase contractor engagement.

### 8 PSNC/NPA/CCA Updates

**PSNC** – No update available.

**NPA** – LPC Connect Newsletter will be available shortly. Topics include:

- NPA supporting PSNC with regard to Covid costs (they don't endorse strike action).
- Supporting those expressing an interest in setting up Covid vaccination centres.
- Changes on PCR testing – pressure on GPhC to change stance.
- Future NHS – looking for LPC input on the future of NHS services. MSO for independents – access to resources, LPC to share with independents.
- Training reshaped - Kickstart Scheme – NPA working with applicants, and L2 retail apprenticeships and L3 for Pharmacy Technicians (big update); Pre-reg transition work ongoing.
- Regional Connect Meetings – several done and more planned.
- Future of pharmacy – another area where LPCs can feed in their views on pharmacy development to help shape the future from an independent point of view.

**CCA** – topics in the February newsletter were:

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- finance guide on the PSNC web site;
- CCA-published articles in hospital magazines about DMS;
- article on relieving pressure on the NHS and encouraging less localised commissioning;
- encouraging data sharing; patient safety group.

## 9 POC

- Berkshire - meeting cancelled
- Oxfordshire – little of relevance to pharmacy apart from changes to heart medications – non-diabetic patients treating heart failure. Policy being awaited.

## 10 AOB

- Self-Evaluation completed - felt the LPC was outstanding, and that everything was over and above the recommendations. All targets are met and everything is done well. The only thing that came through was lack of training due to Covid issues. This is the one area where we have fallen behind.
- Pharmacy2U – Looking to sell.
- NHS Covid Vaccination Letter – incorrectly worded. Next batch will be corrected.
- Covid Vaccination Booking – There are 2 different systems - PCN sites have access to patient records; mass vaccination centres (including pharmacy) do not, so appointments have to be booked via the central booking system. Previously there was duplication but now Group 6 will not be invited by PCNs, only via the central booking system.
- Covid Vaccination – put a note in the digest with a link to the National Booking Centre reminding all 18's and over to book their vaccinations.
- Employee Remuneration – employees were asked to leave the meeting whilst the committee discussed the outcome of the earlier HR Committee Meeting. Post meeting update: HR Committee had not agreed any salary increases but instead awarded LPC staff a one-off 3% bonus to recognise their efforts during the pandemic.

**Next Meeting** – 10.00-13.00, Wednesday 19<sup>th</sup> May 2021, Online