

SOMERSET LOCAL PHARMACEUTICAL COMMITTEE

Minutes of the Meeting of the Somerset Local Pharmaceutical Committee held at Dillington House and via Zoom on Thursday 17th November 2022.

Members present: James Nicholas (Chair); Shital Patel (Treasurer); Peter Whitaker (Vice Chair & PCN Coach Lead); Neil Kyle; Vasileios Alafodimos, Fivos Valagiannopoulos, Louise Larby, Kyle Hepburn

Officers in Attendance: Michael Lennox (CEO), Yvonne Lamb (Engagement Officer), Philippa Hunt (Admin Officer)

Apologies: Ian Colling, Elin Palmer, Nicola McKay

Guests: Julie Fanneran (Boots), Helen Stapleton (Somerset Integration Core System Workforce Team – workforce update/presentation)

Sponsors: Daniel Morahan (Dexcom)

Meeting Notes and Next Steps – documented by Philippa Hunt

1. **CCA Report** – Peter Whitaker

2. **Declarations of Interest** – None

3. **Welcome & Introductions from James Nicholas**

4. **Governance, Budget & Financial Matters.**

- Meeting started with James introducing new committee member, Louise Larby from Day Lewis and confirmation that Ian Colling has left his role at Lloyds and therefore the committee need CCA to advise on replacement.
- Minutes from September Full Committee approved as accurate.
- Minutes from October Executive Committee approved as accurate.
- Peter and Michael to give update re PCN Leads direction of travel and structure.
- Fivos to give PAM update.
- Michael share NPA Collect newsletter.
- End of committee cycle likely to be extended due to TAPR
- CCA reporting – Peter Whitaker

Finances

Shital updated the committee on the budget, we currently have a healthy balance of £266,732.93k in accounts. The committee is in a good financial position.

Income received this month was our contractor levy of £10,100.

- Core fund balance £98,345.57
- Winter Access £120k - fund balance £55,620
- CCG Engagement Funding £40k (2021/22) – fund balance is £5060.11 (used with ongoing work on GPCPCS)
- CCG PCFS £51,400 (2022/23) – fund balance £44,026.25 (used for PCN Lead work)
- CCG Digital £65,000 (2022/23) – fund balance £55,044
- CVD Service Development fund balance £8,636

We have looked at the next few months, particularly from a core point of view and we are likely to be in a similar position at the end of the financial year. We need to have a reserve of at least £60-65k.

The website payment of around £2500 still has not been made. **Action: Philippa to chase this up.** It was agreed that after Christmas Michael's funding will be altered from 2 days core and 2 days CCG to 3 days core and 1 day CCG to end of financial year.

James, Peter and Shital have a date in the diary to look at budget for 2023/24 financial year.

5. TAPR

James gave a recap of where we are re the future of LPCs (RSG vote, etc) and framed the TAPR programme and workstreams. PSNC have provided toolkit and we have progressed with this. We also now know the levy increase, which is not as high as feared (£6k next year, £12k the following year). The working group of James, Peter and Shital have now met 3 times and a lot of progress has been made.

The decisions required by each LPC and the 5 questions that need to be considered are around:

- Current structure – yes, we match our ICS/Health & Wellbeing board
- Whether we are the right size – for discussion in session.
- Effectiveness with finances – for discussion in session.
- What to call ourselves – Community Pharmacy Somerset or something else?
- Committee size – we are 11. Odd number good for voting.

James, Shital and Peter have met 3 times as part of the working group and have discussed:

- Timeline
- Stocktake
- Other South West LPCs
- The pros/cons of the options available:
 - Staying as we are
 - Staying as we are and increasing the contractor levy
 - Merging LPCs
 - Federating – there are various formats for this
- Decision making and next steps

The committee reviewed the regional stocktake document and compared Somerset with the other LPCs in relation to staff costs, office costs, and additional revenue.

James updated the committee on the thoughts of neighbouring LPCs in relation to merging or federation options. There was a full and frank discussion of the various options.

The outcome of the discussions was that the committee felt remaining as a Somerset organisation was preferable at this time and would meet the additional PSNC contributions through efficiency savings without increasing contractor levy. The committee requested an outline budget for 23/24 and 24/25 and the executive agreed to work on this on 5th December.

James summarised the proposal:

- that Somerset LPC remains as the local representative body for contractors
- Its name will formally change to Community Pharmacy Somerset
- It will remain as a committee of 11 representatives.

James proposed this motion and Neil seconded this. All 8 attending committee members voted in favour. James agreed to discuss with Elin and Nicola after their return from annual leave.

Following PSNC guidance on Special General Meetings, there will need to be an SGM planned for January/early February for contractors to vote on the proposals. They will also need to vote on the new model constitution and to increase the committee cycle to end of June 2022 to allow for LPC elections to take place.

- Need to vote on 2 things at Special AGM:
 - Agreement to extend committee lifetime by 3 months to end of June.

- Proposal for LPC.
- Final version draft constitution is being voted on by PSNC on 24/11. Peter gave an overview that this brings things into line. **He will send out draft** so this can be read before exec meeting in December and any questions raised. (The final guidance will not be out in time for this meeting.)
- James/Peter – questions on CCA – can do at end.

Observer - Julie Fanneran from Boots – joined meeting for Core Delivery and Service Update.

6. CORE DELIVERY UPDATE

- PCN Leads:
 - Michael gave an update on PCN Leads progress. We were early adopters with Somerset participation at the top end of this. Now we are half way through the programme we will need to micro-engage and need others to lead to upscale confidence and competency capacity to make a difference. There have been difficulties in releasing PCN Leads for development days due to ongoing pressures.
 - Peter updated further. In June there was a big conference which 11/13 PCN Leads attended (1 x vac and 1 x mat leave). Most attended the meeting in September and November virtual half day meetings are taking place now, with the 4 unable to attend receiving a recording of it. PCN Leads are being paid for their time by NHS England so there is an obligation to get involved. The WhatsApp groups work well, there is good comms and there are a number of proactive PCN Leads. Systems will take accountability for process and invest in 23/24.
 - The committee discussed needing to keep PCN Leads in the role to ensure stability and to help share good work practice and build relationships. There is a commitment from the committee to keep on and to continue to build the case nationally.
- Peter updated on locality boards.
 - Peter shared a full and useful update on his experiences as a Locality Board Lead, allowing the committee to better understand our likely opportunity in having each Somerset Locality covered with community pharmacy board representation. **Action for Peter to find a way forward with board.** Potentially we could ask PCN Leads to move into locality board role.
 - To discuss at next Exec meeting to identify potential candidates for nomination to other locality boards as they form. Michael can then connect with other 3 people getting board together.
- Michael gave an update on the Community Pharmacy Integration Lead appointment. There is no formal announcement yet. There were great candidates to select from and a decision has been made but this cannot be confirmed until it's announced.

7. SERVICE UPDATE

- DMS in Yeovil is up and running. Yvonne had a meeting with DMS team in Yeovil last week. MPH should be live in January but apparently the Chief Pharmacist at MPH has said it won't be ready so will be put back. No confirmed date yet.
- There is still a real problem with pharmacies not claiming on PharmOutcomes. E.g. Turning Point approached Yvonne as PharmOutcomes figure was not matching their scripts and needle exchange claims have been non-existent from some. There is potentially an issue with not claiming when it is not the only service involved. There also seems to be issues with claiming for; GPCPS (and if not claiming for this then they are probably not claiming for MAS,) and supervised consumption. Often the responsibility to claim does not lie with whoever is dispensing, teams in shops need to be involved and understand the process, particularly as pharmacists move about.

This is resulting on a lot of money being missed. **Action for Michael/Yvonne to quantify amounts not being claimed so that comms can go out about this.**

- 42,000 flu vaccines have been administered so far (500 less than this time last year). Maternity has really improved as well as learning disability and carer uptake. Of patients previously reported as having been given the wrong vaccine, in Somerset only 6 pharmacies were involved and only 9 patients received the wrong vaccine. The National team are contacting these patients. Reports that flu vaccines are in short supply although Louise informs that Day Lewis have a lot of flu vaccine stock.

8. SPONSOR PRESENTATION FROM DANIEL MORAHAN, DEXCOM

9. OPS

Please note: This section was split in two due to timing required of Workforce Update from Helen Stapleton but for purposes of minuting this has been included in one section.

- Yvonne reports that closures are an issue all over Somerset. Latest figures show ad hoc closure increase so that we have lost 5% of total opening hours, i.e. we are now typically 95% open. Compared to other LPCS we have had higher closure increases and this impacts in a number of ways. Contractors with a high level of closures impact others more and it undermines our standing in the system and the ability to deliver. Whilst sympathetic to contractors, closures not being reported continues to be an issue. This is unfair to those following the process.
- The committee discussed that from 1st April ICB will be adopting NHS commissioned services and closely monitoring, fines will come. Not reporting closures is not just a communication issue, it also impacts patient safety. The committee also discussed whether there is anything else that the LPC should be doing. We have done a lot to make it easier and offered support, communicated with pharmacies and area managers, laid out what they should be doing. It was agreed to address this in the new year and look at possibly sending a 'letter of enquiry' to key brands who have closures to ask about their plans to deal with this, and to understand what their policy is for closing (dealt with by branch or centrally). **Action for Michael to pick up with exec to implement in Jan.**
- PQS bulletin went out a couple of editions ago. There is a lot to work through and it takes up a lot of time, the amount of training is immense. The committee discussed further and how different companies are approaching this in terms of support and guidance.
- GP practice issues; 7 day script requests. It is not clear whether this is coming from GP surgeries or pharmacies but only clinically vulnerable should receive 7 day scripts. Yvonne has asked system to remind all surgeries that they need the same approach and there is one process for all, needs to be approached sensitively.
- Fivos gave PAM update. New contraceptive service:
 - o Spec is not out yet and this goes live on 13th January. Advice/guidance once spec is out.
 - o We need service spec to understand what pharmacies will over, e.g. process if patient fails BP check?
- Walk-in CPCS spec has landed. **Action for Michael/Fivos/Yvonne – feedback by end of month.**
- Independent Prescriber Pathfinder development. Michael expressed the opportunities and risks of not fully leveraging IP development across the contractor base in Somerset and if we don't find a way to generate participation in IP program and pathfinder pilots, it will hamper our case for clinical service change and growth.
 - o Anne is currently doing a survey to find out how many IPs we have.
 - o The committee discussed the lack of framework of what do in community pharmacy with IP, meaning often we train people to go elsewhere such as PCN. We need a robust framework, managing chronic and acute conditions.
 - o Committee agree that doing nothing is not an option.

10. WORKFORCE UPDATE

Helen Stapleton, member of Somerset Integration Core System Workforce Team joined the meeting via Zoom to present to the committee.

- Helen has been working closely with ICS and with Michael re pharmacy workforce.
- In September 2021 Helen, Michael & others hosted workforce summit. Had support from HEE regionally. Everyone has workforce challenges and a system wide collaborative solution is needed with ideas to tackle this. Registered roles are a particular problem.
- Funding; HEE & Local People Board
- Relationship building – reputation as collaborative
- Key wins:
 - o Established workforce forum regionally/nationally recognised
 - o Rapid expansion community/hospital
 - o Trainee places – need to train and retain in Somerset
 - o Partnerships between primary care and community pharmacy to train/apprenticeships
- By early next year 10/13 will be involved in cross-sector pre-reg pharmacy tech training.
- Lead pharmacist & LP technician appointed to provide support to all partners for trainee expansion.
- Collaborative approach to attract to pharmacy – careers and work experience.
- “Teach & Treat” funding from HEE to set up independent prescribing training.
- Plan is very ambitious, needs longer term commitment and more capacity.
- Objectives for rest of year:
 - o Priorities: infrastructure
 - o Trainee expansion secured
 - o Prepare capacity for practice placements
 - o IP training clinics
 - o Campaigns to attract
- Beyond March 2023 – agree funding for capacity
- Specific challenges; worsening staff shortage, difficulties releasing people to build skills, limited capacity to support trainees, limited capacity to collaborate.
- Committee thoughts:
 - o Committee discussed that it is good to see joint working, what LPC can do, priorities and how we make pharmacy an attractive profession across all staff levels.
- Helen to share slides.
- Helen happy to take questions via Michael or email.

11. STRATEGY DEVELOPMENT

Michael led an introductory discussion around national community pharmacy strategy. Key points included:

- Need to look at 2 things; national and local work.
- Nationally PSNC is working out Kings fund and Nuffield national vision for June next year.
- Strategic review for primary care in Somerset is coming by end of March with the vision for community pharmacy not until June.
- Michael reached out to PSNC and is invited onto PSNC vision group – advisory and service development to pick ideas for Somerset. Strategy plan currently delivery not development.
- The committee had a flipchart brainstorming/thinking exercise session.
- This needs more discussion and thought as the process is gearing up and will need further input in the exec meeting on 13/12.

12. AOB

- The committee had no other business so the meeting concluded.

Date and Place of Future Meetings – Full Committee Meetings: 2022

Full committee

Wednesday 18th January 2022 via Zoom

Wednesday 22nd March via Zoom

Wednesday 17th May via Zoom (tbc)

Exec Meetings

Tuesday 13th December 2022 (evening) via Zoom

Wednesday 22nd Feb via Zoom

Wednesday 19th April via Zoom

Next Steps.

- 1) Philippa to add ratified full committee and exec committee minutes to website.**
- 2) Philippa to chase up website payment**
- 3) Draft constitution to be shared by Peter**
- 4) Peter to find a way forward with locality board and report back**
- 5) Michael/Yvonne to quantify amounts not being claimed so that comms can go out about this.**
- 6) Michael/Exec to come up with 'letter of enquiry' around persistent unreported closures.**
- 7) Michael/Fivos/Yvonne to feedback on CPCS spec**
- 8) James to confirm if there will be another guest member for next Exec meeting**
- 9) James, Peter and Shital to meet to discuss budget for 23/24 and 24/25**
- 10) Executive to discuss plans for SGM following PSNC guidance at 13th December Exec Meeting**