

**Community Pharmacy Sandwell Committee Meeting - Agenda**

<b>Members Present:</b> Dev Dalvair (DD) IND      Ali Din (AD) IND Emily Crabbe (EC) CCA (virtual) Bhupinder Malhi (BM)      Sardar Shabir (SS) IND Alison Crompton (AC) AIM <b>Officers in attendance:</b> Pete Shergill (PS)      Peter Prokopa (PP) Lawrence Hancox (LH)	<b>2. Apologies</b> Rebecca Butterworth CCA Sukhjot Gill IND Dan Attry (BC ICB) Jas Heer (CPE) <b>Guests:</b> James Wood (Community Pharmacy England - JW) - part
--	---

Item	Detail	Actions
1123.1 Introduction, Apologies	Standing item & call for AOB Apologies as noted above.	
1123.2 Welcome & Governance	a) Declarations of Interest relevant to the agenda – none b) Approval of new Independent Member – Sardar Hassan Shabir – approved unanimously	
1123.3 Minutes	To approve minutes of the meeting held on Wednesday 6/9/2023 – approved unanimously. Proposed by BM, seconded by DD.	
1123.4 Matters Arising	None	
1123.5 ICB Update	<ul style="list-style-type: none"> <li>• DA unable to attend, so provided Powerpoint update by email:               <ul style="list-style-type: none"> <li>○ Extended Care 32 providers of UTI service in Sandwell</li> <li>○ Oral Contraception 36 providers in Sandwell; 35 provisions recorded across BC between April-July; changes coming 1<sup>st</sup> December</li> <li>○ CPCS 1700+ referrals from BC GPs in October, 113 practices in total referring.</li> <li>○ DMS – PP &amp; DA met with Jiten Vyas from SWB Trust, to commence referrals in January.</li> <li>○ BP case finding almost 19000 clinic checks in BC to July; 1300 ambulatory checks. BP Project (facilitated by CHS) – 15 pharmacies taking part, 290 referrals for clinic checks in Sandwell, generated 16 ambulatory checks. Updated service spec from 1<sup>st</sup> December for national service – increased focus on utilising more members of pharmacy team to provide the service, also on increased numbers of ambulatory checks. Concern expressed that withing constraints of ambulatory machine availability and security that expectations may not be achievable.</li> <li>○ Pharmacy First – brief description of service – most of resources available now, PGDs expected by end of week. CPPE have been commissioned to provide a number of regional training events to support implementation especially with ENT elements/otoscope operation – West Midlands on 14<sup>th</sup> January 2024 at Holiday Inn J7 M6, 120 places available in total.</li> <li>○ IP Pathfinder Programme – 4 BC sites chosen, 1 in each Place. Sandwell – Masters (Oldbury); working through implementation check list; awaiting availability of prescribing software which should be going through final testing very soon. Expecting programme to start mid-January.</li> </ul> </li> <li>• BC ICB Pharmacy Leadership Awayday – PP updated members with details of awayday on 26<sup>th</sup> October, including on Primary Care, PCARP, Patient comms; discussion on workforce, in particular</li> </ul>	

	undergraduate placements and trainee foundation pharmacist programme, and impact of move to consistent funding across all sectors meaning hospital trusts having more limited resources to support trainees. Challenges on operation aspects, particularly around cross-sector experience. All placements in community pharmacy must be managed via Oriol for 2025 intake onwards, registration must take place by contractors by March 2024.	
1123.6 Stakeholder Updates	CPM – RB attended the last meeting, to update members at next Committee. Sandwell MBC – no update CPE – Jas Heer sent apologies for this meeting – PP to forward autumn CPE update slides. PP also shared that local MPs had been emailed re Winter Pressures, as per CPE request – no feedback received yet. NHSE – Christmas & New Year rotas have been circulated, although still a few contractors yet to accept directed opening notifications. PP has been making a few calls to facilitate this. Extended Care funding – aim to utilize this funding for other PGDs or services once Pharmacy First launches.	
<b>CLOSED MEETING</b>		
1123.7 Confidential Minutes	To approve Confidential Minutes of the meeting held on Wednesday 6/9/2023 – approved unanimously, as per open minutes.	
1123.8 Matters Arising	Matters arising from Confidential minutes – none	
1123.9 Finance	a) Current Financial position – business account holding just over £32689, and secondary account with NHSE’s MoU funding holding £52447. LH updated members on the extended process of getting the draft accounts agreed, following the identification that the repayment of the LPC loan made to CHS as part of the provider company set-up had not been recorded correctly. LH also confirmed that the business address for the Committee had also now been updated to his address, rather than that of AD’s business. Question re member attendance remuneration for today’s two meetings - PS confirmed that committee meeting would be classed as daytime attendance, and AGM would generate payment of evening fee. Noted that Expenses policy was to be shared with new members. b) Budget planning 2024-25 – PP confirmed the Exec team would meet early in January to consider workplan and budget for 2024-25, prior to presenting at next committee meeting (17/1/2024).	a) LH to share Expenses policy with new members.
1123.10 Administration	Conference of LPC Representatives – 12/10/2023 – report – AD & PP summarised content of meeting: CPE update on current negotiations and plans for negotiation of next contract; Primary Care and Integrated Care System, what next for Community Pharmacy; Vision for Community Pharmacy – discussion on how to engage with this on a local level; Primary Care Recovery Plan & Digital developments; update on TaPR national work on Governance; Q&A session. a) Discussion on CPE Vision for Community Pharmacy – JW joined meeting; discussion started with description of involvement of King’s Fund and Nuffield, with their potential to improve advocacy for the sector at all levels. The Vision was wholly their work, however accepted by CPE Committee. There was a clear role for LPCs in taking the Vision to local stakeholders. Polling of contractors showed over 90% had a positive outlook on the vision, if implemented. Different views between multiples and independents on where their focus might be – prevention agenda being more prevalent in multiples, living well with medicines for independents. Question from PP on bundling of services in the Pharmacy First agreement? This had been a “red line” for the commissioners and	a) Remind contractors of CPE contractor surveys b) PP to forward Exec meeting notes & actions to members.

	<p>government – although CPE did try to argue against this. AD questioned need to provide Pharmacy First across all opening hours? JW confirmed commissioners seeking consistency of availability, and the fact that the public expectation will be of consistent availability hence the inclusion of this in the specification.</p> <p>In terms of Independent Prescribing, NHS is gearing up to upskill the existing workforce along with those who will register as IPs in 2026; anticipated that prescribing will eventually replace the need for PGDs in services like Pharmacy First.</p> <p>b) Exec Meeting report – 10/10/2023 – PP unable to locate details during the meeting &amp; will forward notes &amp; actions to members afterwards.</p> <p>c) CCA Questions Q4 – members discussed and agreed responses, recorded by EC.</p>	
1123.11 Pharmacy First Service	<p>Discussion on CP Sandwell Support for implementation of the Pharmacy First Service – PP has had an approach from previous Implementation Lead to consider engaging them almost full-time in the role; members considered their experience in practice work valuable, however were concerned that having one person working full-time might leave contractors without support in the event of further sick leave or ending the role; therefore in agreement to utilize a number of Service Implementation Leads – probably 2-3 individuals working one to four sessions per week.</p>	<p>PP to make EoI form live on LPC website and advise contractors.</p>
1123.12 EPS Nomination Complaints	<p>To consider complaints against Sandwell contractors regarding inappropriate EPS nominations – PP advised that a number of contractors across the BC ICB had been contacted first to advise that they appeared to be making significant numbers of nomination changes not agreed by patients; subsequently a number of complaints had been received from patients and formal notice of these complaints had now been sent to the relevant contractors. PP advised that he would be visiting those contractors to discuss the complaints and advise that the impact of the actions was to make relations with ICB more difficult and reduce confidence in all pharmacy contractors.</p>	<p>PP to visit contractors concerned; also to remind all contractors to follow SOPs and keep audit trail of changes.</p>
1123.13 BC LPC Merger Working Group	<p>BC LPC Merger update – working group populating tracker document used during the Birmingham/Solihull merger and adding further elements as necessary when identified. The most significant element still appears to be financial, as each of the four committees has different levels of contractor levy and reserves. JW mentioned that South Yorkshire had a very similar profile to BC merger, and suggests approaching them for insight.</p>	<p>PP to check on next meeting date. PP to contact CPSY re insight into their merger process.</p>
1123.14 Regulation & Market Entry	<p>a) No Significant Change Relocation – Superdrug, West Bromwich – PP explained he had made a site visit and could see no reason for refusal; response submitted as circulated.</p>	
1123.15 AOB	<p>None</p>	
1123.16 Next meeting & close	<p>Wednesday 17<sup>th</sup> January 2024 – 19.30 via Teams</p>	