

TIME: 20.30- 21.45

LOCATION: Zoom

ATTENDANCE TABLE			
Member Name	Initials	Attendance A= Absent, Aa= Apologies sent.	Attendance this financial year
Yogin Patel (Chair)	YP	Present	1 of 1
Anar Tejani	AT	Present	1 of 1
Priti Chohan	PC	Present	1 of 1
Shiraz Mohamed	SM	Present until 21.00	1 of 1
Beneeta Shah	BS	Present	1 of 1
Amish Patel	AP	Aa	0 of 1
Ronak Patel	RP	Aa	0 of 1
Anisa Mulla	AM	Present	1 of 1
In Attendance			
Hitesh Patel (CEO)	HP	Present	
Stuart Brown (Minutes)	SB	Present	

1. WELCOME AND DECLARATIONS - DOIs

YP welcomed the members to the meeting.
AM would be scribe for today.

**2. MINUTES OF MEETING ON 270223
ACCURACY**

The future of Pharmacy London

AM stated that she had recalled asking the question re. why the committee would not consider backing OPTION 2 – and she stated that this had not been reflected in the minutes.

AM also questioned whether a formal vote on the PL options had taken place. YP and HP stated that most of the members had been in favour of option 3. AM stated that she was happy with this addition here.

Open and Closed Minute format

There were no issues from the members wrt. the new “open and closed” minute format.

ACTION POINTS AND MATTERS ARISING

Previous Action points

- HP To talk to James Wood (PSNC) about contractor engagement from Think Tanks wrt. TAPR agenda:

HP stated that lots of LPCs had raised this same issue.

HP added that the engagement with the think tanks had not taken place as yet, therefore the PSNC’s TAPR work is now running a couple of months behind schedule.

- HP To find out what the policy is in KCW area wrt. GPs selectively allowing CPs to request repeat prescriptions for patients.

HP stated that the current policy takes the form of a guidance letter in Westminster, and in K&C a guidance document had been sent to him.

The guidance currently states that patients should be the only ones requesting repeat prescriptions and not CPs.

HP stated that CPs should only request repeat prescriptions for patients who would need help with the process.

HP stated that the LPC would stay alert for any complaints wrt. this process.

- HP To ask SONAR for granular data for services carried out in KCW area.

HP stated that SONAR can only give the LPC CPCS data, because the LPC are not the commissioners.

HP asked the members whether it would be the LPC’s job to analyze granular service data – to then contact and encourage contractors to improve on their performances.

YP suggested that contractors should only be chased up if they would be working counter to their terms of service.

- HP To find out how much the LA is willing to invest in a CP weight management service.

HP stated that he had had a discussion with Kate (Westminster lead for Weight Management). HP added that the LA would not invest in a weight management service, but Kate would be looking at funding for a Weight Management referral service. HP asked the members what sort of remuneration CP staff would be expecting for such a service.

BS stated that pharmacy staff had been trained up to measure and calculate BMI values as part of the PQS, and this service would be more appealing if pharmacy technicians would be allowed to carry it out.

HP stated that he would ask for a fee of £15 for this referral service.

Action no.	Description	Who to action
1	Look into the granular data for BP checks made by KCW pharmacies.	HP

Action no.	Description	Who to action
2	To add to the dissemination points the information that only pharmacists can be responsible for conducting BP checks – until the service specs change.	AM

3. MINUTES OF MEETING ON 270223 TRANSFORMING PHARMACY REPRESENTATION (TAPR) PROGRAMME

ELECTIONS

HP stated that the process for voting in a new committee would have to be started, and the actions to do this would be:

- April 2023 – application forms would be sent out to current members.
 - o *PC stated that she would be stepping down.*
- CCA reps would be nominated by CCA central office.
 - o The LPC would not need to perform any actions to aid this process.
- May 2023 – application forms would be sent out to all contractors.
- If there is competition for LPC member places, then an election would take place.

4. NHS LONDON LIAISON MEETING 2ND MARCH 2023
BANK HOLIDAY ROTA PAYMENTS

HP stated that the current payment of £450 for a 2-hour work period for a CP during a Bank Holiday is being renegotiated between NHS E and PL.

ICB CP integration leads

HP stated that NW London still doesn't have a designated lead.

NMS pilot - Depression

HP stated that a pilot is currently running in Brent and Harrow, where "depression" has been added to the list of ailments for the NMS.

HP reminded that it was a good thing to add to the list of deliverable CP services – however, at present, all the services were being funded from the Global Sum, which is a finite resource.

HP stated that the **PSNC** are making the strong stance to the Government – that CP will not undertake any new services, unless they would be funded from outside the Global Sum.

Offsite Hypertension case finding

HP stated that the process to apply for such a service seems to be too onerous – and thus prohibitive to lots of CPs. HP added that applications would have to be made to NHS E – and only one application has met the criteria.

HP stated that any contractors providing this offsite service would get paid via the advanced service process.

GP CPCS

HP stated that NHS E have formed a group to promote CPCS and GP CPCS, and this group currently meets every two months – the next meeting is next week.

5. PL UPDATE

WRES – Workforce & Race Equality Standards framework

HP stated that PL has been working on this framework for the last two years – London wide and the work has been managed by HEE.

HP stated that the idea is for all Primary and Secondary healthcare providers to follow the guidance in this framework.

HP stated that the document is long and verbose – and condensed, simplified guidance docs. would be required for CPs to action effectively.

YP asked HP if the NPA had produced an executive summary on this framework.

HP stated that there was indeed such a summary – but he added that the CPs would need materials with simple messaging and instructions written on them.

Flu vaccine underwriting scheme

HP stated that PL had circulated reminders to contractors about the existence of this facility.

Action no.	Description	Who to action
6	To find out the details of how contractors could apply for the Flu vaccine underwriting scheme.	HP

Virtual Outcomes

HP stated that PL had decided to continue to buy VO's services.

Action no.	Description	Who to action
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7	To add to the dissemination points the reminder for contractors to fully utilise the virtual outcomes service – as the LPC is currently paying for the facility.	AM
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Future of PL

HP stated that he had made presentations at several LPCs to inform them of the different options for PL going forward.

HP stated that NEL LPC have absorbed C&H LPC – and this would happen formally in July 2023.

HP stated that Yogendra Parmar would be stepping down as C&H LPC CEO – to become the ICB NEL CP integration lead (in a job share).

HP stated that he has not been able to talk to the Middlesex group LPCs about this subject – because their four LPCs are undergoing elections – and thus have not had LPC meetings scheduled as yet.

HP stated that he would present the PL options to the Middlesex Group LPC meetings in the next few months.

6. NWL ICS

NWL Primary Care Board Meeting

HP stated that CP now have seats on this board – himself and Michael Levitan will be attending, and their presence will help to influence the ICB.

HP stated that a strategy is being devised for NW London.

NWL Hypertension Board

HP stated that he sits on this board – and wondered how the service could be better promoted.

YP stated that banners advertising the service would be useful.

ICS - Clinical Pharmacist Lead recruitment

HP stated that he had chaired the interview panel for this recruitment process – and five applicants had been interviewed.

ICS Chief Pharmacist

HP stated that he had sat on the interview panel for the recruitment of this position.

HP added that the candidate has not yet been chosen.

CMD (COVID MEDICINES DELIVERY) service

HP stated that COVID medicines (oral antivirals) are currently supplied to infected patients mostly by hospitals.

HP stated that the NHS now want this facility normalized and delivered via Primary care, i.e., GP prescribing for the medicines and CP supplying them.

HP stated that there are conversations being had locally and nationally to work out the pathway for this.

HP stated that there have been discussions within the London regions whether the medicines could be dispensed using an FP10.

HP stated that special fees for advice and delivery of these medicines are being discussed.

HP stated that it wouldn't be preferable for patients with COVID to have to visit pharmacies to receive this treatment – hence the need for the delivery element.

HP stated that a CP site in London is currently piloting this service and stated that only 10 patients could be delivered to in a day.

HP stated that he is currently in negotiations wrt. the fees for this service.

The members agreed that this service could not just be remunerated only via a simple FP10 method – a fee for advice and delivery would also need to be added.

7. **CEO UPDATES**

CPCS

HP stated that SONAR had stated that it would be a free system until April 2025.

GP CPCS

HP stated that a message had been sent out to all contractors reminding them that if they had not designated “Pharmoutcomes” as their provider pays it platform choice, then their GP CPCS referrals would be coming to them from an EMIS GP surgery via NHS Mail, and not via Pharmoutcomes – and then the reporting would then have to be made back to GPs using the provider pays IT platform of choice.

HP stated that KCW contractors would not be affected by this, as CPCS referrals do not come into Pharmoutcomes.

HP stated that he would be sending out guidance to contractors in any event.

The members stated that GP CPCS referrals are currently coming into CPs via NHS Mail.

AM stated that Boots branches are currently receiving GP CPCS referrals via NHS Mail – and they are claiming using SONAR.

Action no.	Description	Who to action
8	To send out an information table to contractors – to explain the changes in GP CPCS referral electronic delivery.	HP

Flu & PPV

HP stated that the organization of the Flu webinar is still dependent on the NHS Flu letter being published – which has still not happened yet.

HP stated that the webinar would be provisionally booked for the end of May 2023.

HP stated that Seqirus would be sponsoring the webinar – and would provide an expert speaker.

Smoking Cessation advanced service

HP stated that he is currently working with Chelsea and Westminster Hospital to improve referral numbers. HP added that about a 1/3 of KCW contractors have signed up to the service, but he doesn't know if they are ready to deliver – i.e., be trained and have the relevant CO monitors.

AT stated that a local Stop Smoking Service is still operating in KCW, but it has been transformed into just a supply service for the CPs.

Action no.	Description	Who to action
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9	To send an email to introduce HP to Kick it https://kick-it.org.uk reps.	AT
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AT stated that a refresher training session could be organized for contractors.

Action no.	Description	Who to action
10	To set up a stop smoking refresher training webinar for KCW contractors.	HP

COVID 19 vaccination service

HP stated that no new sites would be activated to provide this service.

DMS referrals

HP stated that he is currently working with the acute trusts to make sure that this service runs smoothly.

HP stated that he has no local data to check the activity of KCW contractors.

8. FINANCE UPDATE

There was nothing to report.

9. MARKET ENTRY

HP stated that there had been 3 changes of ownership in March 2023 – 2 where in Camden and one had been in Lambeth.

HP stated that a Boots branch had closed in Camden.

HP stated that in Feb 2023, the Earls Court pharmacy had completed a relocation.

10. AOB

LPC lunch

HP updated on the planning for this occasion.

11. FUTURE MEETING DATES

22nd May - F2F
 3rd July - Virtual
 4th September - F2F
 16th October - Virtual
 27th November - AGM F2F

YP brought the meeting to a close.

Glossary of Acronyms

ABPMs –	Ambulatory Blood Pressure Monitors
AIMp –	Association of Independent Multiple pharmacists
APPG	All Party Parliamentary Group
CCA –	Company Chemists Association
CCG –	Clinical Commissioning Group
CP –	Community Pharmacy
CPCF -	Community Pharmacy Contractual Framework
CPCS –	Community Pharmacy Consultation service
DMS –	Discharge Medicines Service
DOP	Dentists Optometrists and Pharmacy
DSP –	Distance Selling Pharmacy
ELPR –	East London Patient Record
EOLC –	End of Life Care Service
ERD –	Electronic Repeat Dispensing
F2F -	Face to Face
FAC –	Financial Audit Committee
HEE -	Health Education England
ICS –	Integrated care system
IP	Independent Prescriber
IPMO –	Integrated NHS pharmacy and Medicines optimisation work program.
LA –	Local Authority
LPC –	Local Pharmaceutical Committee
LCS –	Locally Commissioned Service
PCN –	Primary Care Network
PL –	Pharmacy London
PLOT -	PSNC AND LPC OPERATIONS TEAMS
PNA –	Pharmaceutical needs assessment
PQS –	Pharmacy Quality Scheme
PSNC –	Pharmaceutical Services Negotiation Committee
RSG –	Review Steering Group
SCS -	Smoking Cessation Adv, service.
SGM	Special General Meeting.
STP –	Sustainability transformation plan
TAPR -	Transforming Pharmacy Representation