

**MINUTES OF THE LPC MEETING HELD ON 14 MAY 2014
AT THE BRAMPTON PARK GOLF CLUB, BRAMPTON, HUNTINGDON**

PRESENT:	Meb Dattoo, Chair	MD
	Alison Taylor, Vice Chair	AT
	Rita Bali, Executive Development Officer	RB
	Andrew Jones, Treasurer	AJ
	Eve McKenzie, Vice Treasurer	EM
	Amanda Dorkes	AD
	Shabbir Damani	SD
	Leo Falkner	LF
	Tejal Saigal	TS
	Kumar Ladva (<i>left at 1.00 pm</i>)	KL
	Roberta Luzzi	RL
	Hina Patel	HP
	Tushar Patel	TP
 OPEN SESSION:	 Clare Daly, Pharmacy Advisor, NIHR Clinical Research Network, Eastern	 CD
	Nicki Massam, Specialist Pharmacy Technician, Community Pharmacy, Cambridgeshire and Peterborough CCG	NM
 IN ATTENDANCE	 Linda McGeever, Secretary	 LM

CLOSED SESSION:

- 1 **WELCOME:** MD welcomed new members of the Committee.
- 2 **APOLOGIES:** Chris Grahame, (CG) and Anil Sharma (AS).
- 3 **ELECTION OF OFFICERS:** MD was nominated for the post of Chair by TP and seconded by AS and unanimously elected. AT was nominated for the post of Vice Chair by HP and seconded by LF and was unanimously elected. AJ and EM were nominated to continue in their respective roles of Treasurer and Vice Treasurer and elected unanimously.
- 4 **DECLARATION OF INTERESTS:** All current Committee members have completed Declaration of Interest forms and new members were asked to complete the Declarations of Interest.
- 5 **NOMINATION OF CCA MEMBER FOR REPORT TO CCA:** AT to complete report according to the rota. HP advised that the CCA now require reports quarterly, and LM to produce new rota which gives CCA reporting dates. **AT**
- 6 **ACCEPTANCE OF MINUTES OF PREVIOUS MEETING (12 March 2014):** The minutes were agreed as a true record of the meeting and will be signed off by the Chair. **MD**

7 **MATTERS ARISING FROM THE MINUTES:** Due to the number of **RB**
apologies received for the July meeting and AGM it was agreed to
change the date to Wednesday 23 July 2014. RB will investigate getting
a speaker for the AGM. It was suggested that a GPhC inspector be
invited or a speaker on the topic of dementia.

8 **FINANCE:**

7.1 **TREASURER'S REPORT:** AJ gave the following report:

%Current balance . at 11 May 2014	£161,617.88
Cheques to be cleared	£9.90
Payments pending	£3,136.72
Theoretical balance	£158,471.26

The two month period since the last report has seen very limited
financial activity. The only significant transaction was that for the April .
September 2014 PSNC levy payment.

I request that the new Committee ratify the budget for this year . as per
Appendix A.

I can now confirm that all invoices relating to the Flu Vaccination training
last autumn have been cleared.

This week we will pay the first annual premium to Ellis Whittam for the
HR Consultancy service they are providing us with to the sum of £2,430.
Two further annual payments will be made in May 2015 and 2016.

Invoices and Expenses

Please can I request that all claims are made using the proper
paperwork and that they are completed fully with all columns totaled and
receipts attached. Any receipts not attached can get mislaid.

Invoices must be raised for all ~~locum~~ cover or equivalent on headed
notepaper which contains both the Company stamp/logo and address.
The date of claim, reason for claim and amount claimed must be stated
and then signed by the person making the claim. This can then either
by e-mailed/posted or given to me in person.

All claims for other expenses as allowed by the LPC Expenses policy
must be submitted on a fully completed LPC expense claim form . a
copy of which will be available on our website or from me in person.

2013-14 Financial Year

A full report will be given at the AGM in July. However, I can confirm the
following:

Income for financial year 2013-14	£148,072.36
Expenditure for financial year 2013-14	£130,920.28
Income versus expenditure	+ £17,152.08

The accounts will be submitted for auditing by the end of this month.

I invite any questions.+

AJ told the Committee that AS, as the new Eastern PSNC representative, will be seeking clarification about the amount of the PSNC levy for this year.

The Committee then went on to discuss the proposed budget for 2014/15.

AJ confirmed that the budget contained provision for the back dating of pension payments to the Communications Officer. It was agreed that pension provision should be available to all employees and the HR Sub Committee will make a recommendation on how to take this forward.

**HR Sub
Committee**

AD proposed acceptance of the draft budget and this was seconded by AT, the vote was carried unanimously.

9 PEOPLE:

Committee Matters: MD gave the following update:

9.1 Sub Groups: The Committee agreed membership of sub groups as follows:

Strategy Group:

Alison Taylor, Chair
Shabbir Damani
Amanda Dorkes
Meb Datoo
Leo Falkner
Andrew Jones
Roberta Luzzi
Eve McKenzie
Rita Bali, Executive Development Officer
Jayne Leckie, Communications Officer

Contracts Group:

Shabbir Damani, Chair
Eve McKenzie, Vice Chair
Kumar Ladva
Anil Sharma
Meb Datoo
Leo Falkner
Tejal Gorecha
Rita Bali, Executive Development Officer

Finance Sub Group

Andrew Jones, Chair
Eve McKenzie, Vice Chair
Meb Datoo
Kumar Ladva
Tushar Patel

Service Development Sub Group

Chris Grahame, Chair
Amanda Dorkes
Leo Falkner
Tejal Gorecha
Roberta Luzzi
Hina Patel
Tushar Patel
Rita Bali, Executive Development Officer
Jayne Leckie, Communications Officer

Cluster Groups Sub Group

Tushar Patel, Chair
Meb Dato
Chris Grahame
Hina Patel
Anil Sharma
Roberta Luzzi
Jayne Leckie, Communications Officer

HR Sub Group

Amanda Dorkes, Chair
Meb Dato
Shabbir Damani
Andrew Jones
Tushar Patel
Alison Taylor

It was agreed that LM should email each group asking them to complete notes on a preformatted template and send a copy of the notes taken at each meeting back to her for secure storage and retrieval if necessary.

9.2 Review of 'What We Do' and Strategy: Both documents will be reviewed at the next Strategy Group and proposals brought back to the Committee. **Strategy Group**

9.3 LPC Evaluation: This will also be reviewed at the next Strategy Group and proposals discussed at the next Committee meeting. **Strategy Group**

10 RELATIONSHIPS: RB gave the following report:

10.1 Older People's Programme: All four remaining bidders have been contacted, and engagement has been variable and dependent on the bidder.

10.2 NHS 111: The LPC requested a direct line to the out-of-hours GP service for repeat prescription queries only. RB has attended two meetings and numbers have been made available which will bypass the NHS111 switchboard. It is important that these numbers are not given to patients or used for any other purpose. It was agreed that these numbers will be disseminated to pharmacies through the Cluster Groups. The NHS111 locally is in the upper quartile of the 28 other NHS111 services. Over the Easter weekend it dealt with 18000 calls. NHS111 is actively looking for feedback from patients and healthcare professionals both positive and negative to assess its service and make **Cluster Group Sub Group**

improvements.

- 10.3 NHS England Area Team:** Three members of the Area Team attended the recent LPC GPhC events and have requested a slot at the September meeting. They would also like to be invited to local meetings of pharmacists, .e.g. cluster group meetings, company area meetings and independent pharmacist meetings.
- 10.4 TOC Respiratory Project:** This project in Peterborough indicates we need communication links with hospitals. The hospitals are having a new electronic communication system in October which will allow them access to GP records. For community pharmacies to develop NHS email is essential. NSC LPCs are going to jointly progress this issue. RB has already discussed this issue with the CCG and the AT. She is also working with Pfizer and Addenbrooke's to set up a TOC service where community pharmacists can do MURs/NMS on discharged patients and one meeting has taken place.
- 10.5 CPPE:** Rachel Rose, Tutor, is keen to offering training which reflects the local agenda. RB asked for suggestions which should be sent to her or directly to Rachel.
- 10.6 Healthy Living Pharmacies:** This concept has not been taken up in our area. About 10% of pharmacies nationally are HLPs. An option is for the LPC to support the training of our HCAs to RSPH standard level to become Healthy Living Champions. Chas Ryan has a trainer in his team. There would be a cost for this training but relationships could develop with Public Health in Peterborough. Buttercup also do similar training, and Napp are offering to look at training, e.g. provision of Belbin training, NLP, presenting with impact, stress management, insights discover . colour workshop. RB will ask Napp to sponsor RSPH level 2 training.
- 10.7** RB reported that she has attended the Multi-Disciplinary Team Steering Group Meeting in Peterborough.

11 SERVICES: RB gave the following report:

- 11.1** RB reported that Cambridgeshire supervised Methadone/Buprenorphine and NEX schemes SLAs are now on the LPC website.
- 11.2 Cambridgeshire Public Health Services:** The new contract has been accepted by the LPC. We cannot offer legal advice to our contractors. Help was requested from PSNC, CCA and another LPC who went through a similar process last year. The LMC is in a similar position and RB is working with Tony Lacey to clarify the schedules. RB told the Committee we should aim to increase the uptake of sexual health services across Cambridgeshire.
- 11.3 Minor Ailments Services:** RB has put a proposal to MMT based on the PSNC model. At a meeting with the CCG they requested further information, i.e. cost of PharmOutcomes, national service specifications, examples of other SLAs etc and this has been given to them.

- 11.4 Flu Service:** It was agreed that NHS England would send a message to all pharmacies that a flu service would definitely be commissioned this season by the end of April. This has not happened yet. AJ made the comment that we should have a plan in place and once the service is commissioned the plan could be implemented. The Committee discussed how to support contractors this year. RB is working with Norfolk and Suffolk on communications and the production of posters and stickers for prescription bags for pharmacies. RB will contact training providers as contractors will have to update training, although this is dependent on how many injections were given. Those not reaching the target will have to do the training again. RB assured the group that there is a definite market for these vaccinations. One of the contracted health promotion campaigns in Peterborough is flu vaccination, but not in Cambridgeshire.
- 11.5 Stop Smoking SLA:** The Peterborough Stop Smoking SLA now includes NRT supply for up to 12 weeks. The amendment is now on the LPC website.
- 11.6 Cambridgeshire Camquit** would like more quitters from pharmacies. There has been a decrease in the number of smokers accessing Camquit services. The LPC's view was that the low fees discourage contractors.
- 11.7 Peterborough NHS Health Checks Pilot:** Six pharmacies local to the Westgate GP practice were contacted and five expressed an interest at this stage. Chas Ryan is looking for community pharmacies to do 150 NHS Health Checks, and RB has sent him the PSNC generic service specification, and sample SLAs.
- 11.8 EPS2:** RB reported a steady increase in GP practices wishing to go live. Chris Roberts will continue to contact the pharmacies that dispense most of the repeat prescriptions from the practice, and we have a list of EPS2 GP practices on our website.
- 11.9 MURs** completed in this GGC area are available on the PSNC website. At January about 75% were done.
- 11.10 NHS England Area Team/Norfolk, Suffolk, Cambridgeshire and Peterborough LPCs Update:**
- The new LPCs have been formally recognized for 2014/15 by the Area Team.
 - The AT continues to receive queries from pharmacy contractors for non AT queries. They will direct them to the LPCs.
 - The AT would like to see an increased uptake of the flu vaccination service.
 - The AT has confirmed there will be no CPAF monitoring for 2014/15 but visits will still take place (about 10%) to provide assurance.
 - Community Pharmacy Patient Questionnaire (CPPQ) for distance selling pharmacies agreed at the meeting.
 - A simple 100 hour pharmacy monitoring form was agreed.
 - Near miss/dispensing error audit report will be put on our website. It was suggested that the AT does a webinar as the intervention before

the re-audit.

- IG . no report was available as yet from the AT.

12 COMMUNICATIONS: RB gave the following update:

12.1 Events: RB reported that the two recent GPhC inspection events were oversubscribed and well received.

12.2 RB asked for newsletter items to be sent to her for the next Newsletter, including items for ~~top tips~~

12.3 RB asked the Committee if the LPC should carry out requests to send out details of meetings/events for other organisations many of which she felt were ~~sales pitches~~ by drug companies. After discussion it was agreed that when appropriate these invitations could be forwarded to our contractors but these should carry a disclaimer.

12.4 A suggestion was made that dementia could be a suitable topic for cluster group meetings as some of the Committee had already been trained as ~~Dementia Friends~~

13 CONTRACTS UPDATE: SD gave an update according to Appendix B:

Two LPC representatives will attend the oral hearing relative to the appeal from **Medicines Plus Limited** as observers.

Relocation of Rowlands Westgate to the new Primary Care Centre, Craig Street Peterborough: the LPC has recently been notified that this application has been approved. As yet it is not know if an appeal will be lodged by contractors adversely affected by this move.

OPEN SESSION:

14 Clare Daly, Pharmacy Advisor, NIHR Clinical Research Network, Eastern, gave a presentation on the support and promotion of the role of community pharmacies involvement in research. The presentation will be put on the LPC website.

15 Nicki Massam, Specialist Pharmacy Technician, Community Pharmacy, Cambridgeshire and Peterborough CCG gave the following update:

- TOC Project Peterborough . she will take back the need for pharmacies to have nhs.net email accounts in order to take the project forward.
- Fortisip . a report has been received of a pharmacist asking a patient to get this on prescription rather than buying the product. However it is not normally supplied on prescription unless the patient has been referred to a dietician.
- Minor Ailments Scheme . NM reported that due to many factors the scheme will remain ~~sticking along~~ at the moment, but asked RB to present a business case with all the facts and figures for a new scheme. NM and RB will meet so the facts and figures can be made available.
- In discussion between an unknown pharmacy and patient, the

patient was asked to sign a managed repeat form on four or five occasions. It was agreed that the LPC could do nothing as the parties concerned wished to remain anonymous but pointed out that the counter assistant serving this particular patient on each occasion was probably unaware that they had been asked to sign the form before. SD commented that he did not know of any pharmacy that had systems to record negative consent and that the pharmacists' professional body has guidelines for managed repeats.

16 ANY OTHER BUSINESS:

- 16.1 Premises:** RB reported progress on looking for office accommodation/storage for the LPC. Unfortunately all suitable premises in the central Cambridgeshire area were far too expensive, so she is now investigating small office space with storage in the Peterborough area which will be affordable and convenient and will report back at the next meeting.
- 16.2** HP gave the Committee a brief report on difficulties between a pharmacy and GP practice in Wisbech where, as an LPC representative, she has been trying to mediate to resolve the situation.
- 16.3** It was agreed that CCA representatives will meet briefly following main Committee meetings to go through the new quarterly reports required.

The meeting closed at 4.10 pm.

The next meeting will be held on Wednesday 23 July 2014 at the Brampton Park Golf Club, Brampton, Huntingdon at 10.00 am. Note the meeting will be followed by the AGM at 6.45 pm.