

6.2	<p>(ICS), the NHSE Regional Teams will be changing roles. The CCG Medicines Optimisation Team have become more positive towards community pharmacy over the course of the pandemic and are recognising that we can do more. Joint working with other LPCs – as the area covered by the Regional Team has expanded situations are arising where the opinion of the local LPCs is not aligned. This difference in opinion can cause problems for NHSE. RB makes a decision based on whether it improves patient care and is a service our contractors can deliver profitably. A recent example is the insect bite PGD. After discussion with AH, RB was happy to go ahead with a paper-based system with minimal admin. Other LPCs have taken a different approach and refused as an electronic recording system was not in place. RB has already contacted the local system to say this is a simple PGD but as others are introduced, they should consider funding an electronic system such as PharmOutcomes. AS suggested that if the system will not fund this the LPC could consider funding a multi user license.</p>	
6.3	Covid vaccination service, phase three – 50 of our pharmacies expressed interest, most in delivering the lowest number of weekly vaccines. So far 12 have had their site assurance. This is a lower number than other areas. The local system is confident that the PCN sites will be able to deliver.	
6.4	Flu vaccinations – RB has recently attended an event for GP practices and presented with a local GP on why collaboration is important. The attendees seemed positive.	No 55- ALL
6.5	Blood Glucose Monitor Switching – RB has been approached to find out if pharmacies would be interested in handing out new monitors to patients being switched. The committee agreed in principle but will need more details.	No 56 – RB
6.6	PCN leads – There are currently four vacancies. One of these is potentially filled.	No 57 - KC
6.7	Meetings attended by LPC members – other LPCs have implemented a system where if a committee member attends a meeting for part of a day but needs to book a locum for a full day, the full cost of this is reimbursed but the member then spends the rest of the day visiting pharmacy contractors or on other LPC work. SK proposed that we adopt this policy and AH seconded. The committee voted unanimously in favour.	
6.8	<p>LPC website upgrade – JL continues to attend meetings every two weeks. We will go live in phase one and should start migrating our content next month. JL anticipates this will take a lot of time.</p> <p>Health champion network events – the first two events have been poorly attended. JL has been speaking to Sion James to tailor the event topics around PQS.</p>	
7	Paul Pescud – CGL Cambridgeshire	
7.1	PP thanked pharmacies for their hard work and flexibility (often at short notice) during the pandemic. CGL recognises that many service users have a good connection with the pharmacy teams and this is appreciated. The recent issues with pharmacist shortages were discussed. PP pointed out the key is for pharmacy teams to contact CGL asap so they can make arrangements. SK suggested that in some cases a Monday-Friday pick up could be considered to reduce issues at the weekends. PP agreed this could help in some cases but is a clinical decision.	
7.2	Supervised consumption – This reduced during Covid and service users responded well. It continues to be an important intervention for the most at-risk service users, and numbers have increased again recently. RB reminded PP that if there are gaps in service provision the LPC can support.	
7.3	Naloxone service – the figures are very low. Only one kit has been given out in	No 58 – JL

	2021.	No 59 - ALL
8	Contracts Update	
	KC gave an update according to Appendix B. There has been reduced activity around Contracts but sales of companies are taking place. The LPC is not usually notified in these instances as the contractor remains the same.	
9	PSNC Update	
	AS updated the committee on the work of PSNC. A replacement for Simon Dukes is being sought as he will leave at the end of September. In the interim Sue Killen and the executive team will cover.	
10	Treasurers Report	
10.1	AJ gave the following report: Balance at 31/08/2021 £117488.29 Points to note. 1. Currently there are no invoices outstanding and so the account balance is an accurate figure. Since the last report I can confirm that I have now implemented the requirement for two people to approve all payments made from the LPC account. 2. At the last meeting it was agreed to invest in the HR package offered by Clyde and Co choosing to invest in Option 2a. I can confirm that the payment of £1320 has been made and that this cover is now in place. 3. We have now reached the end of month 5 of this financial year and our expenditure against budget shows an underspend of £6105 whilst income against budget shows an excess of £3210. The underspend against budget is driven primarily by the Meeting Cost(low locum and travel costs) and Communication(no events/training) budgets. 4. Following on from the AGM this month and I will start the process of preparation to hand over the role of Treasurer as agreed at the July meeting so that there will be a new fully upskilled Treasurer in role from April 1 2022.	
10.2	AJ has received an invoice from PSNC which covers our levy for the second half of the year and our contribution to the RSG steering group. Our Contribution will be £1175.50. The LPC would be entitled to claim this back from our contractors or it can cover the cost. This is already in the budget. AH proposed we cover the cost and this was seconded by SK. The committee voted unanimously in favour.	
10.3	JL informed the committee her sim contract was up for renewal. She has continued on the same plan as it is adequate for her needs.	
10.4	An unexpected payment of £500 was received in the account from EAHSN. KC and RB were aware of this, it is to fund pharmacist involvement in rolling out DMS from the mental health trust.	No 60 – KC No 61 - KC
11	Any Other Business	
	RB reminded the committee she now has more regular meetings with many stakeholders. Any issues should be communicated to her as they come up so she can raise them as appropriate.	
12	Next Steps	
	The action log and minutes will be circulated.	

12	Close of Meeting	
	There being no further business the meeting closed at 5.21pm. The next meeting will be held on Tuesday 16 th November 2021 at Brampton Park Golf Club.	



Signed

Date 16/11/2021