

## Pharmacy Thames Valley Committee Meeting

Wednesday, 18<sup>th</sup> January 2023

10.00-13.00 Online

### Summary Minutes

#### Item

#### 1 Welcome and Apologies

**Present:** Robert Bradshaw (Chair), Akin Adeniran (Vice Chair), Ian Dunphy (Treasurer), Ketan Amin, Andrew Jones, Corrin McParland, Vikash Patel, Olivier Picard, Barrie Prentice, David Dean (Chief Officer), Kevin Barnes (CSO), Amanda Dean (Minutes)

**Apologies:** Shelton Magunje

#### 2 Declarations of Interests

None

#### 3 Action Log Review

Banking arrangements and potential tax and NI liability are dependent on whether we merge. A Clyde & Co subscription has been paid for one year.

PCN Lead Funding – this has been raised with every ICS in the South East. We have presented a proposal to the ICS's for backfill costs for 1 day per month for each PCN lead and an admin fee for the LPC. Awaiting response.

HMRC – the disputed amount has been paid and a refund will be processed if necessary. Request that the accountant complete the accounts early in the financial year.

MOG – papers will be sent to KA in advance of meetings for comment. DD and the other two Chief Officers will attend.

MP contact – DD asked the committee members to write to their local MPs as they will only respond to constituents. PSNC are organising events in the next few months.

School leavers – we are working with HEE, looking at vocational guidance and raising awareness of pharmacy.

#### 4 Chief Officer Update

See slides attached.

##### ICBs

- We are attending formal POD meetings in BOB but structure is under review. We will get representation at the oversight group but they are only allowing one profession at a time.
- Currently in transition between NHS and ICS's.
- New Community Pharmacy Integration Leads (CPILs) tasked with cascading information back to LPCs.

## Item

### Local Services

- **Uncomplicated UTIs** – service live in Frimley, ensure all staff are aware
- **Slough Substance Misuse** – negotiating new service starting 1<sup>st</sup> April
- **Palliative Care** – new service from 1<sup>st</sup> April. Each pharmacy will receive £500 x 2 for setup and admin and will be paid full costs of meds upfront on submission of invoice.
- **Flu Antivirals** – current Tamiflu service proved insufficient for recent large Care Home outbreak. Possible new service in BOB with a few pharmacies holding larger stocks.
- **NMS Antidepressant Extension** – out for EoI's from pharmacies in Bracknell and RBWM. Only 2 pharmacies have registered an interest so far.
- **Cancer Diagnosis Pilot** – EoI going out in Oxfordshire first. Sticking point with LMC as they are insisting referrals go to them. Compromise may be that they are copied in. NHS are re-evaluating the setup fee.
- **MAS** – awaiting proposal for Frimley. Will probably be piloted in Slough first, linked into CPCS. Awaiting paperwork.

**Hypertension** – numbers have dipped slightly in Frimley but are on the increase in BOB. Thames Valley is one of the top performers in the South East.

**Flu Vaccinations** – successful flu season. Frimley and Berkshire West dipped slightly this year, probably due to co-administration.

There was an issue with the Pinnacle Covid record platform this year. Initially the combined module for Covid and flu was removed. NHS then recommissioned it in early November but an error meant GPs were incorrectly advised that duplicate vaccines had been given. Advice now is to only use the combined module if you are delivering both vaccines. Payment appears to be correct but notifications are wrong. Also not possible to run reports to check MYS figures.

Some contractors used paper consent forms which, whilst useful was time-consuming and shouldn't be necessary.

There is still demand currently for flu vaccination. The consensus seems to be that 50-64 cohort should stay permanently.

All issues will be dealt with at the flu evaluation meeting in March/April and issues raised with Pinnacle to ensure they are resolved for next season.

**CPCS** – new NHS dashboard. We are focussing with CPILs/ICBs on surgeries that aren't delivering.

**Core Funding** – data clearly shows that pharmacy is simply doing more work for the same money. OP agreed and said the only extra funding is from flu vaccinations.

**LPC Dashboard** – this compares LPCs with similar numbers of contractors.

EPS - Dispensing practice issues are being addressed with CPILs. Particular issues with one Practice who are clearly in breach of rules.

**PCN Lead Funding** – we have put in a proposal for £400 per month for 1 day backfill per PCN Lead, plus LPC admin fee.

**Shared Care Records** – we are still progressing in Frimley but not seen as much of a priority in BOB.

**Sales/Changes in Ownership** – many sales going through. New pharmacy opened in Upper Heyford.

## Item

**IP Pathfinder Service** – the ICS’s are setting up a pathfinder service to investigate IP in primary care. A number of pathfinder sites are being sought to trial different approaches and consider governance, reimbursement, IT and professional development needs. (See further discussion in CPIL section below.)

## 5 Introduction to New CPIL’s

The new ICS Community Pharmacy Integration Leads, Subrina Ramdarshan (BOB) and Yinka Kuye (Frimley) joined the meeting. SR reviewed the services she has been taken on to support. YK said all CPILs across the South East will be working collaboratively and meeting weekly, looking at a “Pharmacy First” service along similar lines to the Scottish service. More information will be available shortly.

IP Pathfinder – they are looking at test sites to trial how IP might work in the community. DD suggested setting up focus groups. YK said they are still deciding whether they will put in a joint or separate funding bid.

The committee raised concerns around workforce and said that it was important that the funding model makes it worthwhile. Big changes would be required in terms of the regulatory framework and funding to allow CP to be on a level playing field. Anything rolled out needs to be IT-enabled, succinct and needs to work.

## 6 CSO Update

See slides attached.

**GP CPCS** – big increase in BOB, slowing in Frimley. There may be an issue where patients are going direct to pharmacy and being dealt with so there is no claim. It can be a struggle to keep on top of everything and do GP CPCS as well. Referrals need to reach a critical mass so you can plan and earn enough revenue to make it pay.

RB said SR and YK (CPILs) should be good allies in improving referrals.

## 7 Treasurer Report

There had been few changes since the last meeting. The Treasurer confirmed current balances. There was also 3 months levy to go in. The only unusual expense was for Clyde & Co subscription as discussed. Virtual Outcomes has been paid up until the end of June. The Treasurer is trialling different banking options.

## 8 PSNC/NPA/CCA/AIMp Updates

**PSNC** – no update.

**NPA** – over the past year NPA had made over 700 media representations (TV, Radio, press), mainly around dispensing at a loss. They have published a lot of support documentation for CPCS and GP CPCS to help contractors with governance. An online conference was held at end of October with some very good speakers. Going forward there will shortly be a newsletter. Next Monday there is a parliamentary event about support for CP, talking to MPs and taking a letter to Downing Street. For NPA members there is a link to invite your local MP to that event.

NPA will be holding elections in line with PSNC. The areas have changed and rather than having 15/16 areas it is broken down by contractor group size. The new board will start on 1<sup>st</sup> March.

## Item

Members that have been on the board for more than 12 years cannot stand again but, in order to retain experience, are being automatically co-opted just for the next 2 years. OP will be standing again, this time for Area 10 (England East), for members with less than 5 sites.

**CCA** – the only guidance issued was around mergers and provider companies.

DD said he had spoken to 3 provider companies and the costs are quite high just for administration, this is currently paused awaiting the new committee. He said we need better guidance from PSNC around this. Pharmacy Complete are considering launching a provider company arm.

**AIMp** – no update, the next meeting is in 2 weeks' time.

## 9 **APC/MOG Update**

Frimley – no update. APC Workshop – ID to attend next week.

## 10 **RSG/Merger Update**

In November both LPCs agreed to take the vote to contractors. Bucks didn't progress this. They held a committee meeting w/c 9<sup>th</sup> January when the 3 CCA and AIMp members agreed to progress but the 3 independent members were undecided. We will now be holding a joint TAPR sub-committee meeting on 2<sup>nd</sup> February with PSNC involvement. CCA reps have agreed to cover the CCA vacancies for both LPCs if required.

## 11 **AOB**

PSNC Representatives – elections will be held for a representative for the whole South-East region.

CSO Expenses – HR Sub-Committee to respond to Treasurer re proposal.

**Next Meeting** – 10am-4pm, Wednesday 15<sup>th</sup> March, Holiday Inn High Wycombe