

Pharmacy Thames Valley Committee Meeting

Wednesday, 19 May 2021

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, Aron Berry, Navjot Chohan, Andrew Jones, Shelton Magunje, Corrin McParland, Vikash Patel, Barrie Prentice, David Dean (Chief Officer), Kevin Barnes (CSO), Amanda Dean (Minutes)

Apologies: Olivier Picard

2 Declarations of Interests

None

Committee Engagement

Each attendee was asked to comment on how they were, personally and professionally. Common themes were frustrations with GP CPCS and pre-reg/pipeline; and positivity around Covid vaccinations and Pharmacy Heroes Awards.

3 Action Log Review

The Action Log (previously circulated) was reviewed and updated. The following points were raised:

- HETV – HEE balance c.£18k – to be used for landing CPCS
- Treasurer has full banking access - complete
- Finance software solution – just completing end of year. Moving into overlap phase with new software
- Need signed off copy of accounts by the end of next month
- Finance Committee to meet to go through new software
- Take members through claiming at July meeting
- PCN training – awaiting full team
- Asymptomatic Covid testing – PH leads not looking for assisted testing in our areas
- Health Champion training – extended to 3 per pharmacy – re-publicise in Digest
- Webinars – May delivering DMS (sponsored); June – Impact of Covid on respiratory prescribing; July - possibly NHSBSA
- Add budget line spending vs predicted
- Hep C – contact needle exchange pharmacies to ensure they know the service is available

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4 Chief Officer's Report

DD highlighted the following points from his report (previously circulated):

- Market Entry – a few changes of ownership; current applications – Didcot, Oxford City – no progress; Upper Heyford has gone to appeal. No recent closures.
- Health Champion Training – 41 signed up so far, 97 places available. Please promote. Republicise in digest.
- GP CPCS roll out – webinar available online. Separate Boots version.
- DMS – April webinars – Successful, Bristol Myers sponsored, good turnout.
- COVID Mass Vaccination – going well. 6 sites launched in Oxfordshire. Disappointing that no pharmacies providing in E Berks.
- Covid/Flu Vaccination – no indication from NHS about expectations in September. GPs may want to do both.
- 111 CPCS – numbers pitiful. Over the last 6 months 111 CPCS generated around £100 per pharmacy. Repeat prescriptions used to take 3-4 days, now 4-5 days, being put down to staff shortages. No longer has access to some surgery phone numbers. Raise with LMC.
- GP CPCS – BOB very poor - only two practices with very limited conditions and referrals. Oxfordshire Primary Care team are not planning to invest time in the service. Model has challenges – need to convince Practices that referral pathway is quick and meaningful.
- Possibly run a session with PCN leads on how to engage PCNs. Perhaps provide them with a very short (5 minute?) presentation which explains: the process; the benefit to GPs and surgeries; that this is a crucial part of the CP funding model; that it provides a good audit trail; that it closes the loop giving feedback through PharmOutcomes; and that it might satisfy some QOF points. Where PCN Leads aren't able to deliver, we could utilise a pharmacist who is happy to have a conversation with the surgeries. Committee members could attend one each.
Agreement that a national minor ailments scheme would have been a much better alternative - admin is minimised and it is convenient for patients. Rollout has been poorly handled by CCGs. Recent good progress in Frimley - looking to get scheme up and running there to use as an example.
- DMS – RBH are doing manual referrals by NHS mail. PharmOutcomes now just days away from working. Lots of referrals from surrounding hospitals. Must ensure pharmacies are checking NHS mail and PharmOutcomes for referrals. Wexham being signed off now. All hospitals will be referring by next month. Patients very grateful for support. Suggestion that referral letter can be uploaded and treated as a referral. Need to verify. (Post meeting note: this was a misunderstanding and is not an acceptable process.)
- Meeting in Bicester. Patients to be reviewed in the next 6 months to see if still required. Good article in the Pharmacy Business magazine – the overriding opinion is that original packs are preferable. Bucks MAR spec to be shared.
- Frimley ICS may be split, with NE Hants going to Hants and Surrey Heath to Surrey. East Berks could then merge with BOB. Good to have all TV pharmacies in one system as currently disjointed. Not clear where pharmacy will sit in terms of commissioning. Working closely with both Meds Ops teams to make sure pharmacy is “at the table”.
- Awards – Very positive. Agreed to make an annual event.

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5 CSO's Report

KB highlighted the following points:

- PCNs - Braccan – new PCN, just waiting for list of pharmacies. AB has offered to be Lead. Arranging visits to try and fill vacancies. This will be the biggest focus in the next few months.
- Services – Naloxone – 6 Berkshire LAs working together for the first time. £15 per pack dispensed. They will fund and provide training. Probably just 30 minutes at lunchtime but, if longer, advised they will need to pay for double cover. Reading have chosen 2 pharmacies; Bracknell are going for a wide spread and will see how it works. Contracts are being sent out now. CCA reps checking contract.
- ICE Oxon Stop Smoking service – sign-up has been far better than S4H. Asked to look at the payment.
- Substance Misuse – RBWM still looking at extending an extension. In negotiation. Resisting changes to medication. Looking at standardising payments for supervised consumption.
- Hep C rollout – contacting needle exchange pharmacies to promote. Training will then be provided.
- Pharmacy Heroes – great success. Good opportunity to visit contractors.
- Visits – first priority targeting PCN vacancies. Committee to provide any contacts who might be interested.

6 Treasurer's Report

ID highlighted the following points:

- Everything seems to be on track. Only minor deficit helped by lower meeting costs last year. Copy of budget to be sent to NHS, PSNC and CCA. Next meeting will be on new software (Nomisma) and should have enhanced tracking. Accounting costs in reports should be aggregated.
- Received £3.8k from Frimley - offset against this year's Virtual Outcomes therefore no corporation tax payable. To be discussed at the next Finance Sub-Committee meeting.

7 PSNC/NPA/CCA Updates

PSNC – No update available.

NPA – No update available.

CCA

- Meeting has covered all CCA priorities such as PCN Lead training and response to the White Paper.
- There are questions about where the Pharmacy Review is heading. Reps encouraged to make sure governance structures are working properly – no concerns.

AIMp

- Some AIMp pharmacies have had to close due to lack of pharmacists. Some have had warnings or been fined. Some pharmacies are recruiting from overseas and paying for conversions. 20% fewer year-on-year students applying to pharmacy schools. Potential of remote supervision may come up again.

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8 POC

- Berkshire – most content is focussed on GPs' funding schemes. Each time they meet there is some review of prescribing that relates to self-care. Policies are beginning to line up and might feed into GP CPCS.
- Oxfordshire – little for pharmacy apart from OUH heart medication changes. Webinar being held in June. Publicise.
- Frimley – issue on eye drops but waiting for MHRA response.

9 AOB

- Lateral Flow tests – pack sizes have changed from 54 to 56.
- Annex C GP CPCS query – put on the group.
- Restriction of customer numbers in stores – all agreed limits are being retained. Ranges from completely open to a barrier across the door and everything in between. Whilst encouraging staff to be pragmatic, CCA health and safety teams expect to see signage of maximum numbers allowed.

Next Meeting – 10.00-13.00, Wednesday 14th July 2021, Online