

# **Pharmacy Thames Valley Committee Meeting**

Wednesday, 28<sup>th</sup> September 2022 10.00-13.30 Online

# **Summary Minutes**

### ltem

### 1 Welcome and Apologies

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

### Apologies: None

### 2 Declarations of Interests

None

#### 3 Action Log Review

DD reviewed the Action Log.

Healthwatch Round Table to be held 29<sup>th</sup> September 2022.

Merger is not on the Bucks LPC agenda yet.

One-off mileage compensation for CSO – Treasurer to present issue to HR Committee to discuss.

Finance subcommittee - SM agreed to replace NC as CCA rep.

DMS data discussed.

Lead Clinical Pharmacists - no appointee in Berkshire West.

RB bank account access – just requires card reader; Treasurer confirmed reader from any bank will work and can provide if necessary.

## 4 Chief Officer's Report

See attached presentation. DD highlighted the following points:

- ICB BOB and Frimley have now put together executive boards and the LPC is involved with both. BOB POD oversight committee meeting held 27<sup>th</sup> September 2022. One seat on provider board offered but to be shared between CP, optics and dental. Requested one seat each. Frimley waiting for formal structures to be released.
- Local Services UTI now set up in East Berkshire. Negotiating new Substance Misuse contract with Slough to start in April. CGL in Reading renegotiated old model with increased fees. Have agreed to consider changes with enhanced funding. Data entry is a real problem with needle exchange. In-roads have been made on that with other providers. KB to take back to CGL. Anti-Depressant pilot early next year, as well as possible Cancer pilot.



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- Hypertensive Case Finding DD presenting to healthcare staff 28<sup>th</sup> September 2022 to promote.
- Flu good start, represented on all Place Boards, working with comms teams to highlight CP vaccination. Non-flu trained locums are an issue. It was agreed that locums should be fully equipped to provide national services and the national bodies should specify that this training is mandatory. NPA has approached GPhC but they are not prepared to get involved. No quick fix. CO to raise the issue on the Plot call.
- Covid Vaccinations more sites confirmed.
- Healthwatch Roundtable 29<sup>th</sup> September 2022 focussing on unplanned closures and NHS prescriptions.
- NHS summit 13<sup>th</sup> October 2022 discussing unplanned closures and workforce pressures.
- HEE Workforce Planning looking at ways to engage young people and keep graduates in CP.
- Clinical Integration Leads 2 now appointed to promote CP.
- CPCF PCN funding has been withdrawn. All agreed we should discontinue PCN CP Lead work unless it is separately funded.
- Cost of Living Crisis NPA has done a big piece of work on this (Taylor Report) it is a slap in the face from the government and is just getting worse. All to raise awareness, talk to their MPs, etc.

# 5 CSO's Report

See Report attached. KB highlighted the following points:

- Practices get paid by referral, CP by **completed** referrals so it is crucial for pharmacies that they are completed.
- DMS training 90% of practices now complete RB put on record his thanks to KB; DD said the resultant contact building has wider knock-on benefits as well.
- PQS PSNC webinar on 4<sup>th</sup> October. LPC will also provide contractor support.
  PQS start date of 10<sup>th</sup> October is poor timing. Going forward we need to ensure we don't have PQS between October and January. Whilst we should be in a better position in Year 5, we need to pressure PSNC as it is poor negotiation. Last year 35% of contractors didn't complete PQS as they felt it wasn't worth their time for £6.5k. This goes on the back burner especially at this time of year. Timing might provide challenges in terms of supporting contractors but KB to work out detail over the next few weeks.

# 6 Treasurer's Report

- Year End Accounts the Finance Committee have approached an accountant that works with a number of other LPCs. She will write the assurance letter and take on a representative position for LPC on HMRC which will be more efficient and cost effective. She will come back with recommendations on corporation tax and PAYE, and could take on the whole end of year accounts process in future. She was very complimentary about LPC transparency, accounts, etc.
- There had been some issues with PAYE references which will be resolved in next set of accounts. Expenditure is currently in line with budget. Cash-in-hand is currently £133,469 in current a/c, £103,754 in savings. There is approximately £10k less in the current account due to a PAYE liability that they weren't fully aware of.



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- It would be helpful if GB could produce accounts earlier so the committee has more time to consider them prior to the LPC meeting.
- RB put on record his thanks to ID for his hard work on the finances.
- It was agreed, given that lack of consistency in government is worrying the markets, and as only £85k is underwritten per account, we should consider splitting funds so we don't exceed that limit. Finance Sub-Committee to meet to review banking arrangements (Lloyds Bank have been very inefficient) and consider splitting funds.

### 7 PSNC/NPA/CCA/AIMp/SPOC Updates

PSNC – no update.

**NPA** – the LPC Connect newsletter should be available shortly. There has been a lot of recent work on situation around locums and the cost of living crisis - meeting with ministers, attending conferences, etc.

AIMp – no update

CCA – email update

**SPOC** – no update

### 8 Other Matters Arising

- Handling Complaints about poorly performing pharmacies it was agreed these should be sent to DD or KB to handle.
- Clarify Sub-Committee and other roles:
  HR CMcP, BP, AA
  Finance KA, OB & SNA (agreed to join as CCA ron to

Finance – KA, OP & SM (agreed to join as CCA rep to replace NC).

• GM Provider Company Proposal – It was agreed, given the uncertainty around levy and structure, that we pause all decisions until the new committee is in place.

#### 9 TAPR

- DD went through the PSNC conference slides (see attached).
- Robbie Turner has been taken on the manage the process.
- Five key questions we need to consider:
- 1. Is the LPC co-terminus with one or more ICBs?
  - Frimley could be a separate LPC but really too small with only 110 contractors and there are structural issues as it is divided between Berkshire, Hampshire and Surrey. The ICB value input from the 3 LPCs, who meet regularly as a South East group (although from July this probably needs to become a formal, minuted Frimley-specific meeting). It had been expected that Frimley CCG would be divided up between the ICBs but this hadn't been the government decision as Frimley is seen as an innovative, successful ICB. Question whether PSNC would be happy for Frimley to remain split across 3 LPCs. Need to consider absorbing or ceding Frimley pharmacies to the other LPCs. BOB ICB's preference would be for a single LPC. Agreed merger with Bucks would be expected and Frimley will be discussed depending on contractor/committee priorities. Although there would be a natural nervousness about losing the local touch, a larger LPC would give contractors more influence, more capacity and greater economies of scale.



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**Decision** - It was agreed to set up a sub-group that will approach all neighbouring LPCs to review options. The sub-group will be made up of DD, RB, ID & KA. DD to advise PSNC and neighbouring LPCs that we have a sub-group and wish to engage.

- 2. **Finance** financial viability is going to be key in potential structures. DD to review and present figures to sub-group once indicative levy received.
- 3. **Name Change** Community Pharmacy Thames Valley is the suggested format but confirmation delayed until structure agreed.
- 4. Committee Size a smaller committee will be cheaper but mean more work for the members, and we also need to consider being quorate for meetings. There will be a maximum of three 4-year terms starting from July 2023. We are currently 3 CCA members short. CCA member completing the questionnaire to raise as an issue, bearing in mind we may need one less and have a different geography next year. Decision 11 committee members would be the optimum size.
- 5. **PSNC Levy** the new levy will be based on total contractor income. We are awaiting indicative numbers, but the expected increase is around 45%. (The average increase nationally to generate the £1.5m is around 13%.) Whilst the directive not to increase the contractor levy is not set in stone, the spirit is not to. It would be much fairer if the levy was standardised across the country. This confirms why economies of scale are important, and highlights the questions around hub and spoke and the future, and why a merger makes sense. Figures to be circulated once confirmed.

### 10 AOB

• None

#### 11 AGM

• DD declared the AGM open. He confirmed paperwork had gone out to all contractors. 85 postal votes had been received (including Boots, Lloyds, Rowlands and 1 independent contractor). 24 votes (RB, AA, ID, KA, CMcP, VP, OP) were received at the meeting. All votes cast were in favour of accepting the annual report and accounts. The AGM was declared closed.

Next Meeting – 10am-4pm, Wednesday 23<sup>rd</sup> November 2022, Holiday Inn High Wycombe