

Community Pharmacy Thames Valley Committee Meeting

Wednesday, 13th March 2024
10am-1pm Online

Summary Minutes

Item

1 Welcome, Apologies & Introductions

Present: Robert Bradshaw (Chair), James Famakin (Vice Chair), Ian Dunphy (Treasurer), Danielle Brennan, Khal Khaliq, Rian Kumari Lall, Corrin McParland, Vikash Patel, Olivier Picard, Alex Stacey, David Dean (Chief Officer), Amanda Dean (Minutes)

Apologies: Kevin Barnes

Welcome: RB welcomed Khal Khaliq and Rian Kumari Lall to the committee

2 Declarations of Interests

None

3 Approval of Minutes of Previous Meeting

The minutes of the previous meeting were agreed as a correct record.

4 Sub Committee Updates & Action Log Review

DD reviewed the Action Log and highlighted the following points:

PCN Lead funding – funding has been secured in BOB, however this has coincided with a workforce consultation. Hopefully this will be launched by late Spring.

National Insurance and Corporation Tax queries – no response from CPE but they are investigating.

API changes – the IT pathway is not yet up and running but we should receive a single-pager for surgeries once it is.

BOB ICS strategy – RB and ID attending on 20th March. DD will be presenting on Pharmacy First.

Declarations of Interest – clarity sought around paid work for pharma companies. CPE responded but there is no additional guidance. Include relevant details in updated Declaration of Interest forms.

Treasurer Report

Corporation tax fines have been refunded. Still dealing with query around NI allowance.

DH's fees mirror what we were paying GB. Terms of Engagement are already in place from initial contract, to be amended and finalised with DH.

DH is also taking on payroll and will handle staff expenses. Looking into whether the system is value for money for committee members' expenses as it involves a fixed fee.

Currently using GB's account for Air Table but otherwise work is complete. Awaiting invoice for work undertaken, hope to finalise by the end of March.

Item

ID will email details of expense claim process to new members, and send confirmation of expenses claimed to existing committee members so they can check what is outstanding. All to ensure claims are up to date before the end of May.

Banking arrangements – ID is in the process of setting up an account with Natwest, currently waiting for it to be signed off. This will give us an additional account in order to spread risk.

Backfill – ID asked for comments on the £350 backfill rate. It was agreed it was currently about right and should be reviewed in the autumn when vaccination season and higher Pharmacy First rates come into play.

2024/25 Budget – the main changes are the substantial CPE levy increase, and any potential salary increases. VP asked if the budget takes account of contractor changes. ID confirmed it does. We will be looking at a deficit of around £20k pa so may need to review the contractor levy next year.

ID proposed that the HR (RB & CMcP) and Finance (ID, OP & VP) sub-committees be held before the end of the financial year so any change to wages can be factored in before the budget is finalised and sent to CPE.

ID said some of the categories on the latest accounts are not quite right, but everything will be moved to Xero shortly which will resolve these issues.

Agreed we need to budget for contraception/hypertension training so we are ready for the bundling of these services with Pharmacy First next year. We have asked Cliniskills to quote for broader training - BP, skin, ENT – in May/June, and will approach BOB for funds, but asked if the committee would be happy to fund. Felt it would depend if it was cost-effective. DD said he had been involved in work on women's health hubs and felt we should do some women's health training. Agreed as contraception can be daunting if you have no experience. Quotes to be obtained.

5 Chief Officer Update

See slides. DD highlighted the following points:

Pharmacy First – 99% sign-up rate now. A few challenges on the way but generally positive. Now talking about expanding to UEC. Indicative data shows around 6k referrals in February vs 2.4k CPCS in January. 4 pharmacies in BOB have delivered over 100 consultations each with significant increases on CPCS. Not many referrals in Frimley. OP agreed and said nationally there had been around 55k referrals in February but that he had seen very little engagement in Frimley. Attempts to engage GP unsuccessful. DD meeting the Maidenhead Clinical Director soon to discuss and, once we have proper data, we will investigate those doing well and those not engaging at all.

DD asked the committee for their individual experiences and comments on Pharmacy First. Some common themes includes: Issues with IT (PharmOutcomes MFA and MYS), varying levels of referrals, some GP reticence, most referrals around weekends, fewer walk-ins than anticipated. Generally positive, local engagement is key, good campaign materials are available.

Hypertension – should be raising awareness of ABPM, particularly to GPs, as well as the general hypertension service as there may be a danger of busy pharmacies not offering ABPM. Most of the referrals come from GPs as they qualify for QOF points. Where pharmacies work well with GPs this can be a good, lucrative service. DD to investigate where some ABPM referrals are coming through on PharmOutcomes out of area, and the use of the patient referral pathway to get information across.

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Local Services – the LPC has agreed increases in renegotiated local service contracts. Payments are starting to equalise. DD to follow up an issue with a provider insisting on Physeptone.

The Local Authorities in East Berkshire have decided to put out a new EHC contract direct to pharmacies at the end of March, bypassing the LPC on the grounds of PSR, a new legal framework that LAs have to comply with. CPE say this isn't relevant to pharmacies, but East Berks disagree. We are currently at an impasse. DD suggested we advise contractors of the situation and suggest they think seriously before accepting the contract. DD to share a draft statement with the committee and, once agreed, circulate to contractors via email and digest.

Covid Antiviral Service – this is now up and running in Frimley and they are also looking at doing Tamiflu.

IP Pathfinder – BOB has opted out of the project citing cost pressures in the system. DD is trying to work with them to find a way to continue it, even if with a very limited number of pharmacies.

DD highlighted the [BOB board paper link](#) which committee members may find useful to keep abreast of current developments.

6 CSO Update

In KB's absence, content incorporated into CO update above.

7 BOB ICB Update

Julie Dandridge (JD) joined the meeting and provided the following update:

A pharmacist by training, JD was previously involved in commissioning in general practice for the BOB ICB and now works closely with the LPC on embedding community pharmacy into primary care. The BOB primary care strategy sets out the ICB's vision going forward. There are 3 key priorities - same day access and same day care; integrated neighbourhood teams; and cardiovascular disease prevention. The strategy is out for engagement at the moment and will be signed off in May.

Her priority is to keep the profile of community pharmacy raised and she is keen to visit some local pharmacies, those interested should contact her on julie.dandridge@nhs.net.

RB asked about the CPCL role. JD confirmed this role finishes at the end of March. As an ICB they are looking to reduce staff by 30% overall, but are looking at clinical community pharmacy expertise.

DD recorded the LPC's thanks for Sunday's ENT training funding, and said we are looking at training for a broader range of conditions. JD agreed and said we need to look at targeted support and training for the biggest returns, concentrating efforts on Pharmacy First, contraception and hypertension as the areas with the most impact. DD invited JD or members of her team to join a face-to-face LPC meeting in High Wycombe.

8 CPE/CCA/NPA/AIMp Reports

CPE – DD said GW had written to apologise for the lack of engagement and said the situation should now improve. OP provided an update: CPE board received negotiation training; currently discussing use of any surplus of the £645m (anything from funding new services or expanding existing services outside the global sum, to stopping any further clawback in the future). A dinner is being held with SE LPCs during the April CPE meeting. Awaiting robust data before any decision is made on proportional representation. Retrospective concession pricing comes into effect on 1st April.

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The concessionary payment is a top-up payment which should be applied automatically. More information is available on the [NHSBSA website](#). According to the CPE website "... from April 2024, a new retrospective top-up payment system will apply to products granted very low concessionary prices by DHSC when compared to the average purchase prices identified via the Margins survey. Further information on the top-up mechanism can be found using the link...":

<https://cpe.org.uk/our-news/top-up-system-for-concession-prices-to-be-introduced-from-april-2024/>

Payments will be made months later relating to the previous year as there is no other way to do the margin survey and it is unlikely any detail will be provided. DD to feed back potential accounting issues around retrospective payments if it is not clear what they are for.

CCA – no update

NPA – OP said the NPA/LPC connect newsletter is a useful resource and encouraged all to [subscribe](#). The NPA has a new Chief Executive, Paul Rees (PR), who is increasing their media presence and is keen to engage. It was agreed OP would ask him to provide a brief Zoom segment at a future LPC meeting.

The NPA are providing a lot of support for Pharmacy First and Independent Prescribing support for existing pharmacists. They are also participating in the Covid public enquiry, the next stage of which will be on the roll-out of vaccinations. OP has been asked to speak in general on behalf of community pharmacy.

The NPA have produced a letter responding to the supervision consultation and will be supporting members in their response to the consultation.

AIMp – no meeting update but there was debate around an amendment to category A medication which had been imposed and which is going to result in a material change over time. DD/OP to raise.

9 AOB

ID said BOB Pharmacy First promotional video may be filmed at the end of March.

Next Meeting – 10am-4pm, Wednesday 15th May 2024, Hampton by Hilton High Wycombe