

# **LPC Meeting Minutes**

# Wednesday 9 March 2022

#### 1 Present

#### Members

Daniel Byatt	AIMp	DB
David Crosbie	CCA	DC
Ian Cubbin	Independent	IC
Stuart Dudley	Independent	SD
Jemma Grossman	CCA	JG
Heather Johnson	CCA	HJ
Rachel Jones	CCA	RJ
Anna Mir	CCA	AM
Dane Stratton-Powell	CCA	DSP
Stephen Thomas	CCA	ST

#### In Attendance

Suzanne Austin	PSM	SA
Sara Davies	EO	SDa
Adam Irvine	CEO	Al
Gary Pickering	PSM	GP
Alison Williams	BSO	AW
Helen Bromley	CW&C	НВ

### **Apologies**

Paul Barry	CCA	РВ
Jack Eckersley	Independent	JE
Nick Goodwin	Independent	NG
Andrew Hodgson	Independent	АН
Wesley Jones	CCA	WJ

### 2 Welcome, Apologies and Expressions of Interest

DSP chaired the meeting and welcomed members, including Jemma Grossman who has filled the vacant CCA seat and Eve Kane a Trainee Pharmacist with Lloyds Upton (Sainsburys). Introductions were made.

Apologies were received from PB, JE, NG, AH and WJ.

DSP reminded members of their responsibilities to regularly attend LPC meetings.

No expressions of interest were received.

#### 3 Helen Bromley (HB)— Cheshire West & Chester Council

(Present for this agenda item only)

HB joined the committee (virtually) to talk to members about the Cheshire West Place Plan, which is also the Health and Wellbeing Strategy for the Borough.

HB talked to a set of slides which will be circulated to members after the meeting. Points to note:

• HB previously attended the December 2019 LPC meeting to talk about the Cheshire West 5-Year Place Plan and was keen to understand how pharmacy played in and influenced what happened on the ground. At that time the LPC provided HB with some useful and helpful comments that were worked into the Place Plan.

- Whilst the Place Plan was signed off, COVID arrived, resulting in very little movement on driving forward the plan over the last couple of years although a refresh was done in April 2021 which went to the Health and Wellbeing Board (HWB).
- HB shared the areas that the Place Executive want to see strengthened including a review of the current priorities, more narrative around things that have happened since the original Place Plan, the most important of which are reference to the Marmot work that is going on in Cheshire and Merseyside.
- The HWB has also developed three key areas (obsessions) Mental Health & Wellbeing; Poverty and Health Inequalities; Climate Change.
- A refreshed plan will launch in July 2022 to align with the new ICS structure; HB will share the draft with the LPC towards the end of April/early May and this will include the Marmot indicators (if they have been signed off).
- There will be a rewrite of the Place Plan during 2023 to launch in April 2024 for the period 2024-2028.
- HB believes that pharmacy has a massive part to play in the Place Plan and it is about how we use that opportunity to sing the praises of pharmacy.
- IC stressed to HB that Mental Health throughout COVID has been an issue, including
  amongst school aged children, which subsequently impacts on their families. He asked HB
  if she sees community pharmacy fitting into providing solutions. HB believes that
  pharmacy can support the broader wellbeing agenda eg signposting perhaps to local
  community support groups and neighbourhood activities, rather than just the
  management of medicines alone. HB thanked IC for raising the discussion point and
  acknowledged that this needs some further thought.
- For the climate change element of the Plan ST asked HB if she needed evidence of what people have done or for ideas for what people are going to do. HB is interested to hear what pharmacy have done but for the Place Plan the key issue is what pharmacy is intending to do.
  - ST is aware that several contractors are making some quite significant inroads into more eco-friendly vehicles, lighting, heating, re-cycling, etc so there are a number of examples that can be quickly pulled together. HB would find this useful as she is not familiar with the pharmacy agenda on climate change at all however is aware of are the work around inhalers and reducing waste of medicines.
- Al shared that after HB's last visit the LPC took the outcomes from the draft and put a lot
  of work into suggesting where pharmacy could have an impact in each of them. This time
  would the LPC be better to look at the Marmot Programme or to stick to the Outcomes
  Framework? No, as the Marmot indicators have not been fully agreed and set but will
  eventually be included in the place plan.

Al will feed back LPC comments on mental health and climate change to HB.

AW will repeat the Ask ANI details in the newsletter.

#### 4 Suzanne Austin - Chair of the Cheshire LPN

SA updated members on the following LPN/NHSE business:

- There is a lot of job flex due to the transition to the ICS and ICB which involves NHS and CCG staff.
  - There are several new roles within NHSE. Steve Riley has recently been appointed to a northwest transition role, starting on 1 April. All will invite Steve Riley to an LPC meeting to share his aspirations.
  - o There are several roles appointed to support DMS with trusts.
  - o Some National roles are out for recruitment.
- All Trusts has been given £6k to fund DMS. Locally, this has enabled work to be done on the PharmOutcomes template.

- The northwest figures for DMS show us to be way ahead nationally. However, lots of the activity is directly linked to The Royal.
- GP practices have had a Hypertension Referral Button added to their EMIS system allowing queries to be sent to pharmacies.
  - There has been a query raised about whether pharmacy can do the BP service offsite, and this has been escalated to the national team.
- The Medicines Optimisation group (MIAA) is still meeting and currently the main pieces of work are DOAC switches and SIP feeds (appropriately prescribed on discharge).
- CPAF visits (some virtual) have been arranged and will be taking place shortly; 2
  pharmacies have been breached for not returning CPAF at all. NHSE will also be visiting
  'good' pharmacies for the purposes of benchmarking.
- Contractors need to understand that there is a digital footprint for CPCS activity.
- SA asked members of the LPN for their top three priorities for the coming year these are optimising services, integration and reducing waste.
- The COVID vaccination programme will focus on business as usual (available to everyone who is still eligible for the initial vaccine offer), spring (no start date announced (booster for 75+, in care homes and the immunosuppressed)), autumn (15-week programme starting from September for cohorts 1-6) and surge planning.
  - o SA is anticipating that pharmacies will get contract extensions beyond 31 March.
  - CWP are providing the service and will hopefully do the housebound patients.
  - o All patients will need to use the National Booking System.
  - ST asked whether SA was aware of any contractors vaccinating 5–11-year-olds and if so, what uptake are they seeing. There are some PCN sites delivering this and the numbers are not high.

### 5 Treasurer's Report

a) CPCW total money is £249,575 as of 8 March 2022

Lloyds Bank Current Account		£190,022
Close Brothers 12-month notice account		£86,804
Less Holding Money		- £27,251
<ul><li>Estates</li></ul>	£11,677	
<ul> <li>Inhaler Training</li> </ul>	£5,834	
<ul> <li>Warrington Alcohol Pilot</li> </ul>	£4,500	
<ul> <li>EPS Round-Off Event</li> </ul>	£240	
<ul> <li>CWC PH Campaign Resources</li> </ul>	£5,000	

- b) The Governance and Finance sub-group met on 10 January to review the Q3 accounts. IC recommended that all LPC members should be given the opportunity to undertake the Mental Health First Aid course and act as advocates going back into the community. AW will circulate to the committee and arrange dates.
- c) The LPC Levy for 2022/23 is due for payment on 1 April (£40,728). There has been no increase again this year, the levy rate has been maintained since 2014/15 and it is likely that this will be the last successive year.
- d) The Governance and Finance sub-group will meet on 7 April to review year end accounts, set the 2022/23 LPC budget and to review the PSNC recommendations regarding the format of financial statements and expenses policies. All recommendations will be brought to the April meeting.

### 6 | Ian Cubbin/Stephen Thomas - PSNC Report

PSNC held their last meeting virtually on 2/3 February and IC/ST updated members on the following PSNC business:

- Year 4 negotiations are now underway with a desire for them to be concluded before the summer recess. There are restrictions in place that prevent the sharing of any further details at this time, but the Negotiating Team are meeting weekly.
- Work is going on on a number of items that fall outside of the formal negotiations eg reforms of the drug tariff.
- Janet Morrison has been appointed to the role of Chief Executive and IC summarised the recruitment process and Janet's background.
- DSP asked whether the next round of PQS will be as demanding ST/IC shared some information.
- From 1 April, to support more service-based delivery in the new contract, Community
  Pharmacy Wales (CPW) are switching prescriptions to 56 days over the next 12 months.
  It was acknowledged that this might impact some of our contractors who are on the
  Welsh border and the briefing on the CPW website will be highlighted in the LPC
  newsletter (AW).

### 7 Stephen Thomas – Review Steering Group (RSG) Update

ST updated members on the work of the RSG, including:

- The RSG has been in operation for a little over 12 months and ST summarised the groups activities up until this point.
- The group are continuing to work on a structure and readying a final proposal that will be put to contractors. The current timescale indicates that a proposal will go to the RSG on 24 March, with a further meeting in the dairy for 31 March, if needed, for signoff.
- The proposal will then be finalised and published after Easter. There will be a 4-week period from publication for contractors to discuss/view a prospectus followed by a late May/early June, 2 (possibly 3) week voting window. The voting will be done by Civica Election Services.
- If the vote is 'Yes', there will be an implementation phase at which point the RSG will cease to be. If the vote is 'No' then the sector will need to discuss.
- All asked if there was anything specific the team needs to be doing in preparation. ST confirmed that there is a comms plan that will be shared which relates to the launch of the prospectus with suggestions about what LPCs can do.

#### 8 | Ian Cubbin – Education

IC updated members on the changes to early years pharmacy. Main points to note:

- Every registrant in 2026 will be a prescriber.
- The parallel work is that the GPhC issued its initial education training standards last
  January and has stated that although they operate a 4+1 model, 4 years at university and
  1 year of pre-reg training, the latter will be a foundation year. The foundation year will be
  transformationally different from the way it is now. The pre-reg grant will be abolished
  together with funding that goes into secondary care and HEE will take over responsibility
  for that.
- The only route to foundation training will be through Oriel.
- Community Pharmacy will be a placement provider.
- There is an aspiration that all foundation trainees will be doing 4, 4 and 4 (4 months in each of hospital, community, 'surgery' land). During the year they are going to need to be able to practice prescribing; this will be challenging due to the number of designated prescribing practitioners available.
- As has happened in Wales this year, every foundation student will be an employee of the NHS, and this may prevent challenges as they finish their foundation year.



- The regulations will need to be changed as currently before someone can undertake a
  prescribing programme to become an independent prescriber they need to have 2 years
  on the register. IC outlined some of the risks ie specialism.
- The responsibility for placements is important because in the initial GPhC Education and Training Standards it requires that the undergraduate programme must provide 55 days of placement experience. There will need to be a mechanism for doing this with a uniformity across all of the country's pharmacy schools as well as a set programme for the placements which will take place in community, hospital and practices.
- The placements will be funded at the clinical tariff.
- There will have to be a single uniform placement accreditation how this will be done is as yet undetermined.
- Schools of Pharmacy will have to change the way they design and deliver their curriculum.
- The Community Pharmacy Workforce Development Group (which consists of members from CCA, AIMp and NPA) are currently trying to put together a prospectus for Schools of Pharmacy which details what every employer will deliver.
- HEE is funding 2,700 places in the next 2 years, in 4 cohorts, to people who are prescriber ready.

#### 9 Feedback

a) Staff & Resource

HJ updated members that they had met just before the main meeting; points to note:

- i. GP contract will be extended.
- ii. NHSE have asked CPCW to be the employing organisation for an individual, working part time across the northwest region in developing the community pharmacy contractual framework. There is 3 years of funding available from NHSE and work would be directed by them.
- iii. Al and staff reviews are due to take place before the next meeting.
- iv. Some of the team laptops require upgrading.
- b) Member Feedback Important Items and Context for Team

Members undertook an exercise to populate 4 flipcharts relating to Operations, Business and Financial, Customer, Workforce and People.

Members split into groups; AW will collate the flipcharts and forward to AI.

#### 10 Sub-Groups Feedback

a) Services

GP fed back on the topics discussed; full minutes will be circulated when available. Topics covered:

- Warrington Palliative Care Scheme
- Warrington Supervised Consumption RAG Sheet
- b) Communications

SDa fed back on the topics discussed; full minutes will be circulated when available. Topics covered:

- Engagement Officer priorities including DMS, tracker catch-up
- MP Communications
- Webinar Thoughts RSG with another topic
- Website Review Members will let AW have updated biographies for the website
- Update rolling table of topics and activities

### 11 | Minutes of CPCW Meeting – 8 December 2021

- a) The minutes were accepted and signed.
- b) Outstanding actions/updates:
  - i. Item 9bi The fees for the publication of the MOCH findings will be funded from the Campaign Resources holding monies (AW awaiting invoice)

#### 12 PNAs

Members reviewed the pre-circulated draft PNAs for Warrington and Wirral and sent through comments to AW; AI will feedback any suggestions to the relevant people

### 13 | Topics for Discussion

- a) Mental Health First Aid Training for Committee Members
  - Members who want to undertake the training should let AW know by 25 March; AW to organise training accordingly.
- b) National Meeting of LPC and PSNC
  - AW will register AI/SD for the meeting which is taking place in London (hydrid) on 12 May 2022.
- c) LPC Dinner

AW will seek availability of the committee for a Saturday during May/Jun/July and confirm the most popular date when everyone has responded (AW). The venue will remain as Willington Hall, Kelsall.

### 14 ICS Update and Clinical & Care Leadership Activity

Al updated members on the status of the Integrated Care System (slides will be circulated). He shared the Place Directors for each of the Places across Cheshire and Merseyside.

Members shared their thoughts on a number of key areas – workforce, technology, PCN integration and development, place-based working and commissioning.

AW will collate the flipcharts and forward to AI.

#### 15 | GP CPCS Update

GP updated members on the status of the service implementation; slides will be shared after the meeting.

• GP drew members attention to the interactive Training Guide for GP Practices. This document will be shared with practices and will be uploaded to the LPC website and highlighted in the newsletter. This will be shared via NHSE, LMC, RJWG. GP will circulate the document for member comments.

### 16 | CEO and Employee Report

An employee report was pre-circulated to members and AI updated members on a variety of topics (slides will be circulated after the meeting).

Points to note:

• SDa will commence contractor visits shortly and will email contractors when she is due to visit.

#### 17 Date and Time of Next Meeting

Wednesday 27 April 2022, 9am-5pm, Forest Hills Hotel, Frodsham

6

# **Action List**

NOTE: Shaded rows indicate an action carried forward from the last meeting(s)

Min	Action	Person	Update
8bi	The fees for publication of the MOCH findings will be funded from the Campaign Resources holding monies (AW)	AW	Awaiting invoice
3	Al will feed back LPC comments on mental health and climate change to HB	AI	Complete. Draft to be circulated by CWAC around w/c 25 <sup>th</sup> April
3	AW will repeat the Ask ANI details in the newsletter	AW	Complete
4	AI will invite Steve Riley to an LPC meeting to share his aspirations.	AI	Invited, awaiting date
5b	AW will circulate Mental Health First Aid training information to the committee and arrange dates	AW	Complete
6	AW will highlight the CPW briefing regarding prescribing intervals in the newsletter	AW	Complete
9b/14	AW will collate the flipcharts and forward to AI for the Member feedback and ICS	AW	Complete
10b	Members will let AW have updated biographies for the website	Members	Outstanding: Nick, Wes, Anna
12	Al will feedback any suggestions to the Warrington and Wirral PNAs to the relevant people	AI	Complete
13a	Members who want to undertake the MHFA training should let AW know by 25 March; AW to organise training accordingly	Members/ AW	In progress
13b	AW will register AI/SD for the National Meeting of LPC and PSNC on 12 May 2022	AW	
13c	AW will seek availability of the committee for a Saturday dinner during May/Jun/July and confirm the most popular date when everyone has responded (AW	AW	
15	GP will circulate the Training Guide for GP Practices document for member comments	GP Members	Complete

7