A picture containing people, room

Description automatically generatedCPSW Minutes

Microsoft Teams Meeting: 19th October 9.30am – 1.30pm

Invitees:

**Chair:** Chris Shields (Vice)

**Members**: Aga Janowski; Abigail Wright, Patrick Gompels; Tim Rendell; Anil Chopra; Paula Paniagua; Nicki Sinclair

**Employees:** Sarah Cotton; Carolyn Beale

**Apologies:** Helen Wilkinson (BSW ICB); Robert Townsend

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| **Item** | **Detail** |  |
| 1. | Welcome and apologies; Confirmation/update of Declarations of Interest.  TR is now also a representative for Community Pharmacy Avon. |  |
| 2. | **Review of Minutes & Action Tracker**   * Minutes were accepted as a true record * Updates on the action report were noted   SC - Update on PCN leads, the funding has now been received. The template is live on PharmOutcomes and the leads are able to claim.  Pathfinder Feedback action point from February will be closed as there is an updated one to take over from this. SC wrote an official letter to the ICB as agreed at the last meeting, this has been acknowledged but no official response yet. |  |
| 3. | **TAPR**  Tim has resigned from TAPR working group due to potential COI as now also sits on CPA. CS requested others members to consider whether one of them could join himself and Paddy, and to let him know directly. PG fed back on the last meeting with CPA working group. Name and committee size agreed. Long discussion around budget setting in the working group, which led to some more discussions around three options – alone, merger or addition of another LPC.  Committee discussed their thoughts around the main aspects so that they can be clear on next steps. PG and CS to draft a letter to CPA to set clear boundaries on behalf of our contractors, and to enable discussion with their committee prior to next working group. Three initial clear boundaries as voted by committee in January 2023, and a new boundary around budget setting. |  |
| 4. | * Items requiring Discussion/Decision * POD   TR and PG decline to comment on this due to a conflict of interest.  A letter was sent to all pharmacies and GPs at the beginning of October to explain the service and the consultation. There has been no decision on this yet, they are asking for comments and feedback initially.  Discussion around repeat prescription slips and the potential workload if they come back to the pharmacy. AW is keen to learn what processes the GP surgeries will have to take on the POD workload. AC states this is a discussion that should be had with GP surgeries and the ICB present.  Discussion around access to this service and accessibility issues if it is removed to.  The committee agree to comment as an LPC and highlight their sadness in POD being removed and the concern around patients with accessibility issues. Highlight that any movement of this workload would not be a service that community pharmacy are currently funded or necessarily able to provide.  SC will send an LPC response, but she encourages individuals to also respond.   * CMDU feedback   Recent feedback has been received from the ICB that this process is not working very well with pharmacies. Noted that it appears to be a national issue around stocking the anti virals, with discussions happinening across many ICBs. SC received an email from HW that they would like to add the two drugs to the palliative care service that is running, without extra funding.  Richard from CP Avon has heavily pushed this back to say there should be a commissioned service. Discussion around this. Committee agree that end of life medicines should be a priority from a patient perspective, but the funding has not been reviewed for a long time. The committee agree they are underlyling supportive of this potential addition to improve the patient journey. However, the list of drugs needs reviewing, and to keep the amount of drugs that are currently on the list and to add two extra, then the funding would need to be increased.   * A Vision for Community Pharmacy   Covered in CPE Conference Feedback.   * Closures policy   There has been a recent review and there have been positive changes to the way the fines are implemented for closures. Potentially reducing the financial impact by around half the amount. This is still quite a stong closures policy, SC just wanted to highlight this to the committee.  There has been no data from the regional hub to show if this policy is helping to have a postive effect, chief officers in the area are all pushing for this data. The committee discussed this and agree any fines on pharmacy are detrimental, all pharmacies do try to open. |  |
| 5. | * Officer Reports – questions   CS advised CB that the closure of Hathaway is now Allied pharmacy.  Notifications are being received to say Lloyds are moving to the LPSD name, but then not always told which business this is then transferring to, especially if this is an independent sale.  TR asked for clarification on how contractors levy is calculated as this has been queried by a contractor. SC will clarify this with RT.   * Updates * IP Pathfinder   SC put forward the committee points to be considered by CPE and BSW ICB. Some of the committee attended the recent local meeting.  The Expressions Of Interest went out yesterday for this with a deadline of the 5th November.  Concerns over DSPs and online/phone consultations, the patient should have the option to attend the pharmacy. There were differing view points on this from the committee members. CS states anyone can express their interest. SC will discuss with HW the site selection process, highlighting potential COI.  There are 5 PGDs currently commissioned, which will be reduced by 3 when they are decommissioned. TR asked what would be the next PGDs to be considered to ensure the funding remains. **AP -** CS asked SC to review possible services to consider.   * CPE conference feedback (SC & TR)   The vision for community pharmacy was considered to read well and the committee agree it was a good start. Discussion around how this will be implemented.  SC and TR attended the conference and enjoyed it. Claire Fuller was a good speaker.  SC received some great feedback to confirm that CPSW have some great services and processes (eg price concessions) in place for the contractors, especially compared to some other areas in the country. The committee asked that thanks also be passed back to HW.  TR raised the subject of branded generics, **AP -** SC will contact another LPC that have already done the work on this to start the process.   * ICS PLN day feedback – NS & CB   This was hosted by Amanda Webb, the chief medical officer. The focus was on working together for the benefit of BSW. CB is not sure all the right people were in attendance and it was a bit disjointed.  There were some interesting presentations during the meeting. The next meeting is in April 24.   * ICB updates   Interviews have been held for a Chief pharmacist, no decision has been announced yet. A project manager to work with the chief pharmacist is also being advertised. SC will invite them both to a committee meeting once they are in post.  SC attended the Primary care access recovery plan meeting, this was a positive meeting and she had good input within this.     * Wiltshire PH contracts / TP   The public Health contract process has now started and has a closing date of mid November.  SC had a positive meeting with Turning Point about the new contract. TP are attending the November meeting.  AJ has been having trouble contacting TP to discuss deliveries that have not arrived, CB will pick this up. |  |
| 6. | AOB   * None |  |

Meeting Dates: 16th Nov (F), 18th January (F), 22nd February, 14th March (F), 18th April (F), 16th May