

# South East Forum of Local Pharmaceutical Committees

## for Kent, Surrey, East and West Sussex

Secretariat c/o Community Pharmacy Surrey & Sussex

The White House, 18 Church Road, Leatherhead, Surrey, KT22 8BB. Tel 01372 417726

Online <http://communitypharmacyss.co.uk/about-us/se-forum/>

Email [SEForum@communitypharmacyss.co.uk](mailto:SEForum@communitypharmacyss.co.uk)



**Minutes of the meeting held in the Montreal Room, The Sandman Signature Hotel, 18-23 Tinsley Lane South, Three Bridges, Crawley, West Sussex, RH10 8XH. 7<sup>th</sup> March 2019 from 10.00am**

**Members Present:** Mark Donaghy LPC Chair West Sussex, Gemma Staniforth Vice Chair West Sussex LPC, Hemal Chudasama Vice Chair Surrey LPC, Sally Green-Smith LPN, Sarah Ridgway-Green CPPE, James Wood, CPSS CEO, David Onuoha, Chair Kent LPC, Atif Shamin HEE, Sunil Kochhar PSNC, Craig McEwan Chair East Sussex, Sarah Davis Vice Chair East Sussex, Rupi Bhasin Chair Surrey, Mike Keen CE Kent LPC, Leyla Hannbeck (via conference call) Nicola Tyers HEE, Mike King PSNC Head of Contractor/LPC Support

**Non-members present:** Hinal Patel CPSS SDSP, Sandra Lamont CPSS CEL, Micky Cassar CPSS BA.

### 1: Apologies:

None

### 2: Governance for SE Forum Members

The members were asked if there were any changes to the DOI, nothing raised.

### 3: Minutes

Minutes of the previous meeting on 5<sup>th</sup> October 2018 were reviewed. It was noted there is no e in Ridgway-Green. The minutes were signed as accurate by the Chair.

### 4: Matters Arising

The action log was reviewed. The action regarding the possibility of two-way conversation for research projects from Claire May of University of Brighton is still ongoing and will be picked up by this summer.

The Forum accounts to date were reviewed and will be distributed to the individual LPCs.

### 5: LPC Updates

The options of events for 2019 were discussed including a possible annual conference or more local events. It was suggested that we host an event more for showcasing Pharmacy and for CCGs to be invited etc. Central Hampshire have an annual award ceremony and one of the main purposes of this is PR around Pharmacy. This could be an option and ideal for showcasing Pharmacy. It was suggested that potential sponsors should be outside the room to eliminate the issue of not being able to ask specific questions in front of them.

**Action:** Develop options of potential showcase event, look at cost and bring proposal before the next meeting.

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**Kent LPC update:** Mike Keen will be retiring shortly, and this will be his last meeting. He was thanked for his contributions over the years.

OTC medicines were discussed and where the indemnity lies regarding children and elderly. BMA and LMC are responsible for their patients and we cannot allow this to go unchallenged. The national communications have been rewritten in Kent.

There are lots of new housing developments in Kent, Mike Keen raised with Mike Dent regarding how many closures there have been as he believes the data from Kent skews the national data. GSK are supporting 3 respiratory training events in the area.

Kent are working on improving their links with Primary Care Networks. Pharmacy group have been useful and branded generics have been raised with them as there is a patient safety issue which needs to be recognised. The Primary Care Board are also being useful, and there are good links with the LMC through this.

**CPSS update:** Integrating Pharmacy in STPs, Pilots across pharmacy, Surrey Heartlands is one of these areas. Things are advancing fast within this STP, we have a seat on the medicine optimisation board and have landed several contracts through this, Transfer of Care being one of them. As a model moving forward this is likely to be replicated and there will be structure at STP level. SCR access workstream also ongoing including a showcase event last week.

Healthwatch work – West Sussex Healthwatch visited all pharmacies in West Sussex to view consultation rooms and drive messages of consultation room use. It was good engagement work with partners. The report they produced was good and has been shared widely with their networks.

### 6: PSNC Update

**Mike King gave an update:** work in progress for contractual framework funding. This should start before Easter. The long-term plan, GP contract and prevention agenda are all being considered. There is a drive to integrate Community Pharmacy with Primary Care Networks, this includes mapping PCNs to pharmacies and collating feedback on DIMAR pilot sites, also NUMSAS. Seeing how we can work with the NHS with the model to see how Community Pharmacy can integrate with GP practices. Ideally a multiyear contract integrating with the Primary Care Networks. The PSNC 2019/20 plan is available on the PSNC website. Positive comments from ministers to include Community Pharmacy in the rapidly moving changes to the NHS. Another key workstream is around Brexit, Gordon Hockey is working on this. The main areas are around SSP protocol, allowing changes to be made regarding powers for Community Pharmacy to be allowed to adjust due to shortages of supply. A lot of work is ready and if the outcome is “no deal” there will be more work coordinated with the LPCs. There are lots of communications being prepared depending on various outcome scenarios with a new area on the PSNC website dedicated to this. NHS long term plan will be a feature of the discussions, we have a briefing which we have sent out, its also a briefing on the 5-year GP contract. The approach we are taking is working with other national organisations including NPA to coordinate the work that needs to be done. The chief officers are regularly

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meeting to avoid duplication of information to contractors and to streamline the workload. There has been a stream of work around provider companies, we have previously produced templates as to how to set up a provider company which we are looking to update. The SSP (serious shortages protocols) is complicated, and we are working on this, the additional workload for Community Pharmacy and endorsement of prescriptions, communications needs for patients and GPs to make sure they understand what is happening. A price concessions webinar was presented earlier this week which is available online. This explains how price concessions are negotiated, delivered and the difficulty setting price concessions. The annual plan includes work on helping LPCs engage better with their contractors by including transparency of LPC work. There is a template for an LPC dashboard which would be sharable with contractors and comparable to other LPCs. The pressure on Community Pharmacy as a result of the funding changes and the changes to the contractual framework have been discussed a lot and we are helping the charity “Pharmacy Support” by raising their profile. They will be arranging training for Community Pharmacy soon which will include time management training and how to deal with stress. It does not include business support but is aimed at the personal and health aspect. The final flu vaccination figures should be available imminently. We have been monitoring the entry and exit contracts and the balance is showing an increase in numbers with many of the openings being from internet pharmacies.

There are a couple of events coming up – a new approach to the LPC chairs training, it will still have the same skills and training but aimed more at the role of the LPC Chair and Vice Chair in running an effective committee. That will be open to Chairs and Vice Chairs, one test session will be run on the 3<sup>rd</sup> of May, limited to 12 people which will allow for individual support. If the test is successful more events will be scheduled. LPC member days are also coming up, this is less around market entry and regulations and more about the LPC member role.

The IT group, Local care record updates are coming through. There will be big changes with digital going forward. SCR – KSS healthcare record.

GPhC inspection results is a contractual matter. What should we as an LPC advise? Mike King will look into this.

**Action:** Mike King to investigate advice re inspection results.

### 7: NPA Update

**Leyla Hannbeck gave an update:** Brexit was raised and how pharmacy is preparing, there is a website up and running and there are templates available for our members. There are also patient leaflets and SSP updates will be published as part of our workplan. Refusal to supply medicine questions are also being raised due to shortages and high prices and work is being done on this. GPhC consultation for education training for pharmacists is currently open. Inspection regime, GPhC will adopt 3 models of inspection so members of the public will be able to go on the website and see what the pharmacy has achieved, this should be available from April onwards. We will also show the pharmacies that have done well and offer advice

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of how this was achieved. Pharmacies are expected to display their results. 2 webinars are upcoming, one on the new inspection model and a second focusing on pharmacy contract. Both have open access and can be promoted to local pharmacies. Shortages were raised regarding how quickly shortages can change and what has been done to try and forward GPs support and understanding regarding this. There are several things which have been done to raise awareness with GPs regarding this. The latest bulletin in relation to this will be forwarded and this can also be sent to local contractors. JR has been launched against Government regarding the shortages protocol.

Hypertension project launched in May 2018 (pilot), machines that are used in secondary care are now being used in Community Pharmacy to measure hypertension. We are looking at how to get this piloted in other areas. This is already rolled out in Surrey Heartlands.

**Action:** Get the latest bulletin in relation to shortages form Leyla.

Supply Chain – there have been instances of disputes on brand promotion over borders.

**Action:**

Margin calculator has just been launched that contractors can use to look at their margins.

### 8: CPPE Update

**Sarah Ridgway-Green gave an update:** Gateway pages available on the website, these give a continuum through an introduction, your level, core level and advanced level. DIMURs and Minor ailments training have been arranged and we are doing locally. AF learning has also been arranged (eLearning) this is likely to be supported by declaration of competence, but the training is already available. E course has just started and is a good update in clinical areas for Community Pharmacy. A Suicide Prevention course is also available as a link on our website. Return to practice course, the LPC may be the first access point for people returning to practice and please could they sign post to this CPPE training which is a 4-day course to help them get back on the register and up to date. EAA registration – starting practice in the UK is also available, this can be started before they have started practicing in the UK (within 6 months). Joint event with RPS – joint study day on 10.03.19 in Cobham, also some revalidation events are in the planning stages across Surrey & Sussex. April – September, asthma support program (inhaler technique will not be included in this). Also 2 sexual health all day events (one 07/03/19). Worforin services declaration of competence is being developed. Minor ailment services contacts have been requested. It was asked if Blood pressure training / sign off doc can be done online to avoid 8-hour training however you have to be signed off by someone competent as there are issues with people using the machines, stating they are competent and doing it wrong. It was raised that there has in the past been training from the manufacturer of the machine to sign people off as competent (OMRON have done this)

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### 9: HEE Update

**Atif Shamin & Nicola Tyers gave an update:** Pre-Registration Pharmacist recruitment scheme, there is now two years of data available to analyse trends. The members were given an update on Oriol and the results of the last 2 years.

Pre-Registration Tutor Training – The members were given an update on the eLearning. 4.5 hours per module is the average and is designed to be flexible around the day job. This is only funded until November. Recruitment takes place every two months in groups of 30 and the application website address is <http://www.lasepharmacy.hee.nhs.uk/training-1/supervisor-training/>.

HEE are working with the GPhC to see how they can share data regarding good sites and pass rates. This should give trainees a better insight where they wish to apply to work.

It was raised that there is no promotion in Sussex & Kent to encourage young people to consider Pharmacy as a career. There needs to be a joint approach from different areas to do this. It was suggested that an insight driven approach should be taken and worked on by SL.

**Action:** Agree a promotion to pharmacy approach for young people. Sandra to discuss with Mark.

### 10: Rob Andrew & Susy Ellis, Pharmacy Care Support England

Primary Care Support England has restructured. Rob & Susy now focus on Pharmacy Engagement Team, the aim is to bridge gaps between pharmacy and other organisations. Online market entry application form will be rolled out this year and replace the applications currently available. Real time validation will be available so incorrect information cannot be submitted and acknowledgement email will be sent with a reference to track the application. Online payment facility. NHS England and stakeholder timing for roll out is being worked on. A new pharmacy manual will also be available regarding time scales etc. There is also a market entry call back service which is for urgent enquiries and generally a response is given within 48 hours. Email [PCSE.marketentry@nhs.net](mailto:PCSE.marketentry@nhs.net) for this. If there is a question that is not directly linked to a specific case, then contact should be made to Rob or Susy. Fitness to practice applications will also go online, there are issues with the expectation of this being completed within 30 days and the guidelines in the pharmacy manual should assist with this. It was raised that records have been lost in Kent (FPT documentation). It was asked if the portal may be used for change of ownership applications which at this time is not clarified.

**Action:** find out if the online market entry portal can be used for change of ownership applications also.

It was raised that there are inconsistencies in the means of communication from PCSE, sometimes by letter and sometimes by email and there is concern this could lead to missing information.

**Action:** Provide recent example of when there have been inconsistencies with PCSE notifications.

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## 11: AOB

None raised

## 12: Meeting wrap up

### 13: Future meeting dates & venue

1<sup>st</sup> October 2019 – 10:00 – 15:30. The Sandman Signature Hotel

5<sup>th</sup> December 2019 – 10:00 – 15:30. The Sandman Signature Hotel

5<sup>th</sup> March 2020 – 10:00 – 15:30. The Sandman Signature Hotel

## 14: Close 1.00