

Minutes of Meeting of East Sussex Local Pharmaceutical Committee

Date Thursday 10th February 2022 starting at 09:30
Location: East Sussex National, Uckfield, TN22 5ES
Present: Sarah Davis, Vice Chair, Paul Antenen, Treasurer, James Grieves, Mark Weston, Jas Condon, Ankit Tyagi, Joel Daniels.
In attendance: Julia Powell, CEO, Marie Hockley, Service Development & Support Lead, Micky Cassar, Business Administrator, Jack Rooney, NHSE&I (part meeting), David Clark, GPhC (part meeting).

1: Welcome & Introductions

The Vice Chair welcomed the members, new members, and guests to the meeting.
CCA reporter: Mark Weston.

2: Apologies for Absence

Craig McEwan, Susan Khlef.

3: Governance Matters

The Vice Chair asked if there were any changes to the Declarations of Interest, none were raised. MW highlighted that he currently oversees the CGL contract with Lloyds pharmacy.
The members were reminded by the Vice Chair of the LPC constitution and the Nolan principles.

4: Minutes & Matters arising:

The minutes from the last meeting on the 25th of November 2021 were reviewed. The minutes were signed off as accurate by the Vice Chair.

Actions in progress:

- 247 - Speak to LPC member regarding attendance at meetings. – Complete.
- 248 – Chase PSNC re indemnity question. – Complete.
- 249 - Request refund from MAKE. – Complete.
- 250 - MH to chase outstanding Palliative Care payments for all pharmacies – In progress – update later in the meeting.
- 252 - JP to raise Anenta issue with the Director once more and if fails escalate to NHSE. – Complete. JP escalated to NHSE and then the manual was made available, has been circulated and is on the CPSS website. The members highlighted there are still issues, it is vital that these are logged on the Anenta system as otherwise there is no awareness of the problems.
Action: Add the manual to a further communication.
- 253 - Remind contractors of the need to select their provider pay model – Update later in the meeting.
- 255 - MH to progress vitamin discussion if like LFT model – In progress, no update currently.
- 256 - MH to feedback outcome of out-of-date consumables response – Complete.

5: CEO report

Website Update: CPSS were one of the pilot sites and went live in December. It was highlighted that links to annual reports are now broken. PSNC will launch their website shortly.

Action: MC to investigate any links on the website.

LPC WhatsApp Groups: The WhatsApp groups have been set up and the new members were asked if they would wish to be added.

Action: The new members agreed they would like to be added to the WhatsApp group.

At the last CPSS Exec meeting a joint CPSS event was discussed. This has been provisionally booked for the 18th of September 2022 at the East Sussex National. Pharma companies are being contacted for sponsorship. The members were asked for suggestions for content for the day. Revalidation has been suggested, also inviting the new PSNC CEO. There is also a possibility of arranging a talk on clinical research with regards to reimbursements for audits / advice etc.

QTR3 Plan In red:

Palliative care service for Sussex – Update later in the meeting.

PCN lead training – Was due to run in November however due to workforce issues this was postponed. Update later in the meeting.

QTR4 Plan:

Stop smoking advanced service – update later in the meeting.

HLP Champion – 90 places still available and uptake should be encouraged.

PQS deadline for claim is in the next couple of weeks and reminder will be sent out. Those that have a low amount of NMS will be chased and reminded if they do not meet the gateway criteria, they cannot claim for PQS.

Action: Highlight that you need to do at least one NMS per month for the payment and that this needs to be done on MYS as of March as paper copies will no longer be accepted.

CPCS Update:

The members reviewed the status of GP CPCS training. 157 surgeries in Sussex are taking part (4 surgeries do not want to participate currently). In the last 6 weeks there have been 900 referrals into community pharmacy. Healthy Crawley PCN were the first to go live and have done over 400 referrals. Reminder will be sent out to PCN's on how many referrals they need to do if the IIF indicator for 22/23 remains the same.

CPCS – A&E and urgent care pilot Sussex – ESHT (Eastbourne and Hastings) and Western (Worthing and Chichester). Currently PharmRefer licence is being agreed and will be live next week. This will be used to refer patients into PharmOutcomes. As it's a pilot, only the 5 closest pharmacies (who wish to take part) will be chosen. This should go live end in March. At this time a referral pathway back should the patient need is still to be agreed. The initial sign-up fee is £600.00 and then £14.00 is paid for each individual referral. The pharmacist needs to complete the GP CPCS clinical assessment training as a requirement.

CPCS provider pays model update: By the 28th of February all contractors delivering the CPCS service need to sign up to an IT provider. NHS111 referrals PharmOutcomes licence will not be funded after 1st of April. Contractors therefore need to contact the provider they wish to sign up with (there are 4 to choose from). The GP CPCS model in Sussex use EMIS and there is therefore no charge for referrals. Provider Pays Model is needed for 111 and any referrals via NHS mail. It was highlighted that there is a lack of knowledge from contractors that they need to sign up to this by the 28th of February. The members were asked for suggestions to raise awareness.

Regional meetings updates:

PNA progression in East Sussex, the PNA questionnaires circulated to contractors. This deadline has been extended due to the lack of response. Aiming for a 50% response rate.

HEE: HEE will be providing funding for PCN Lead training. These funds are to cover backfill for PCN lead training. Training providers will now be looked into and will be part leadership training and part local level training. A successful bid was also placed for further careers website funding. The additional funding will allow for the Technician role to be added onto the pharmacy careers website.

NHSE&I have agreed to pay £1,200.00 per PCN Lead if they create and complete a Hypertensive case finding service proposal. £400 will be paid upfront with the remainder £800.00 to be paid once all actions in the proposal are complete. A template from NHSE is being created and will be reviewed by the LPC before agreeing.

Devolved pharmacy contract update: This is moving to ICS level in 2 stages, early adopters in 2022 and April 2023 for the remaining adopters. Surrey and Sussex have requested to be early adopters. If the ICS becomes a legal entity as of the 1st of July, the contract will move to ICS as of then. It is unknown at this time which parts of the contract will be moved. To support community pharmacy, at ICS level 2 new positions have been created. A Community Pharmacy Clinical Integration Lead (full time) which will be funded by NHSE for 2 years from 1st of April. Their remit will involve DMS, GP CPCS, hypertension case finding service etc. The second position is a part time role with remit to implement discharge medicines service and the stop smoking hospital discharge service.

6: Service Development & Support

East Sussex: Pharmacy NHS Health Checks diary portal system will be put in place and also inhouse training to get the service running smoothly, also an increase in fee.

MH presented at Surrey Downs Diabetes Forum which was mainly for consultants and GPs. Weight management tied this in with diabetes and further signposting information has since been requested from GPs which has been very positive.

Service clinic dates have been booked, 23rd of February, 16th of March and the 29th of March. The hours have now been extended to include evening options.

Palliative Care Service in Sussex update: The LCS pricing group approved the fee of £550.00 for 2021/22 and has approved £1000 for 2022/23. The outstanding payments issue was raised at the meeting, it was agreed in principle

that the £550.00 be paid retrospectively. The palliative care contract had to go to the LCS harmonisation group for review. Community pharmacy now sit on this group for LCS at CCG level. Jo Piper will audit what payments were made for 2020/21 and what's outstanding including uplifts. It has also been requested in the new service spec that the £1000.00 is paid in advance not arrears.

CGL meeting update: On the 10th of January a meeting took place with CGL. Looking to develop a new service, that looks after wellbeing and quality outcomes. Ambitious timeframe to have sign off April/May 22. The draft service spec has now been received and was reviewed by the members. This is CGLs first draft proposal with the next meeting on the 28th of February. In the meantime, the LPC will review how many patients are involved and alternative costings. It was discussed that the overall spec is ok, but the financing is not viable. CGL cover 23 LPC's who have all received this proposal and is being reviewed by all. It was raised that there needs to be a consideration of the staff members who need to do the review, chaperones etc and there is also no indication of remote consultation.

Reducing drugs reducing deaths meeting update. Ian Dunster, gave a presentation of how CGL have invested in mental health nurses etc. MH queried whether pharmacy would be included in this mental health pathway and has requested a meeting with him to discuss this.

The members reviewed the LCS data, the DMS data and the LFT data. OneYou East Sussex have a stop smoking waiting list so patients could be referred into commissioned pharmacies in B&H. They are looking into a pathway from the healthy living pathway in B&H to LCS in East Sussex.

B&H do not have an LCS for council colleagues flu vaccination. Neither ES or B&H had a high uptake in council colleagues being vaccinated for flu.

DMS: It has been raised that this work may have been done but not reported. November figures, indicate referrals completed do not match MYS and are less. The pharmacist at Sussex County and the program lead on DMS will do a webinar with MH to take staff through the process from start to finish, one during the day and one in the evening. On the 28th of February there is a planned relaunch for DMS throughout the hospital including high risk meds and inhalers.

LFT service is due to end 31st March, not known at this time if it will be extended.

Stop smoking service update: This is due to go live April 2022 however this is reliant on acute hospital and capacity to aid roll out. Areas without a stop smoking LCS may find this challenging to implement. Patients can be signposting into a LCS - If they do not continue with the service up to their planned four-week review, the pharmacy should seek to re-engage with them and continue the service. If preferable to the patient, they can be signposted to a locally commissioned service at this point. Patients that wish to re-start their quit attempt after the planned four-week review date should be signposted to a locally commissioned service. The service can only be carried out by a pharmacist. Pharmacy contractors must have a working carbon monoxide (CO) monitor (which is suitable for use with pregnant women) and meets the requirements outlined in the spec. The following fees have been agreed: A set-up fee of £1,000, a fee for the first consultation of £30, a fee for each interim patient consultation of £10, and a fee last consultation of £40.

Other updates:

West Sussex and East Sussex are in very early discussions of a new ADHD service which would potentially involve monthly checks and the use of IP's. This could be a 3-tier program, level 1 involving pharmacy providing an ongoing health check. Level 2 could involve more than just assessment, signposting etc. level 3 using IP prescribing and looking after patients. Any problem patients would be referred back, service spec and costing may need to be created.

NHS Health check service plans to relaunch and increase delivery. Alcohol brief intervention and advice webinar preliminary booked 1st of March. There are 7 active providers for 2021-22.

Brighton updates: Alcohol awareness - HLP commissioned service – £50 paid training and £100 paid for service delivery. No pharmacies have claimed any of this money and MH is chasing this. Stop smoking specification to be reviewed – requested meeting with PH lead. Hypertensive case finding – presented at B&H CVD Steering Group - public health and PCN CD to organise a meeting to collaborate to form pathway for GPs.

East Sussex updates: Progesterone Quick start Service 3 pharmacies – no updates. NHS health check increased fee £35.36 to £37.50 live on PharmOutcomes. East Sussex Healthy start- no updates.

Surrey updates: Surrey CCG - LCS for fidaxomicin and vancomycin for treatment of C. difficile in progress. Surrey LCS Flu vaccination - 390 SCC colleagues were vaccinated. Ondansetron service in Frimley- training meeting took place

on the 19th of January and in the process of collating contracts. Surrey Blood Pressure Plus (BP+) - since launching in December 377 checks have been completed across 9 providers in Surrey. 60 patients identified with a BP >140/90 mmHg. Condom distribution service (CDS) – distribution service with retainer fee paid upfront £200 pilot 1 year. Hosting webinar for C-card, Chlamydia / Gonorrhoea Testing training - 3 dates booked with the first webinar on the 17th of February. NHS Health check service relaunch webinar will take place on the 28th of February between 09:30 and 15:30. DPS - portal closed 11/01/22 SCC to cleanse data and review bids. Contacted LCS LFT pharmacies to confirm expiry dates.

Other updates: WS, ES and SCC: review tariffs for LCS – all costing tools have been submitted to the Public Health Teams. Covid vaccination - live in 59 sites across Surrey and Sussex. Flu - 89.1% growth rate for vaccine delivery. Hypertensive case finding - 101 pharmacies signed up to date. Weight management - pharmacies to engage with referring patients online on the NHSDWP. HLP champion - 59 courses requested to date.

7: Documents & Policies

The members reviewed the Expenses Policy. The members day rate is due for review at this meeting. It is currently £280.00. The members agreed to keep it as it is and review in 6 months' time. PSNC have released a new expenses template which has been updated in line with HMRC guidance around tax.

Decision: The members agreed to keep the delegate rate as it is and review in 6 months' time.

Decision: The members agreed to adopt the expenses policy.

The members reviewed the Equality, inclusivity, and diversity policy.

Decision: The members agreed to adopt the policy.

The members reviewed the Governance sub-group policy. PSNC are recommending a subcommittee is in place including a governance lead. James Grieves agreed to be the governance lead. Mark Weston volunteered to join the subcommittee with Joel Daniels.

Decision: The members agreed to adopt the Governance sub-group policy.

The members reviewed the Corporate Governance Statement.

Decision: The members agreed to continue with the Corporate Governance Statement and have a review date in 12 months' time.

8: GPhC Update – David Clark

The members were given an update from David Clark who provided an update from GPhC.

Agenda

- Our Vision 2030, Strategic Plan and strategies for change
- Reforms to the initial education and training of pharmacists
- Registration assessment
- Responding to the ongoing impact of the COVID-19 pandemic
- Patient safety concerns relating to online prescribing services
- Q&A

Safe and effective pharmacy care at the heart of healthier communities

- A good quality, independent regulator of pharmacy for the public
- Practising an anticipatory and proportionate approach to regulation
- Operating as a professional and lean organisation

Strategic plan 2020-25

- Delivering an adaptable standards framework that meets rapidly changing public and professional needs
- Delivering effective, consistent, and fair regulation
- Driving improvements in pharmacy care through modernising our regulation of education and training
- Shifting the balance towards more anticipatory, proportionate, and tailored approaches to regulating pharmacy
- Enhancing our capabilities and infrastructure to deliver our Vision

There are currently two big strategies, EDI and managing concerns about pharmacy professionals.

Delivering equality, improving diversity, and fostering inclusion:

Our strategy for change 2021–26

- To make regulatory decisions that are demonstrably fair, lawful, and free from discrimination and bias
- To use our standards to proactively help tackle discrimination and to make sure everyone can access person-centred care, fostering equality of health outcomes
- To lead by example and demonstrate best practice within our organisation, holding ourselves to the same high standards we expect of others

Managing concerns about pharmacy professionals:

Our strategy for change 2021–26

- Keeping patients and the public safe, and maintaining public confidence in pharmacy, by using our full range of regulatory tools to prevent, anticipate and resolve concerns
- Taking a person-centred approach that is fair, inclusive and free from discrimination and bias
- Promoting professional values and behaviours that encourage openness, learning and improvement in pharmacy
- Taking account of context and working with others to address problems in the pharmacy and healthcare systems

Update on reforms to initial education and training for pharmacists

Overview

- New standards for initial education and training of pharmacists published, introducing important changes to ensure pharmacists are equipped for their future roles
- Implementing the standards will transform the education and training of pharmacists, so they are able to play a much greater role in providing clinical care to patients and the public from their first day on the register, including by prescribing medicines
- Changes are being gradually made to implement these reforms

Key changes

Independent Prescribing:

- Incorporating the skills, knowledge and attributes for prescribing
- To prescribe independently from the point of registration

Learning outcomes

- To design, deliver and assess the full 5 years of education and training
- Link to a continuum of development post-registration

Science in clinical practice

- Greater focus on key skills
- Including professional judgement, clinical decision making, management of risk, diagnostic and consultation skills

Foundation training year

- Strengthened clinical supervision and support
- Collaborative working between universities, SEBs and employers

Equality, Diversity & Inclusion

- Greater emphasis
- Address discrimination & health inequalities

The ultimate aim is that all pharmacists are qualified as an IP when they graduate. It was asked if the findings of the GPhC consultation re prescribing will be published.

Action: DC to find out of the outcomes of the questionnaire are available.

Registration assessment

- New supplier, BTL Group Ltd, appointed to run common registration assessment sittings which we hold jointly with the Pharmaceutical Society of Northern Ireland (PSNI)
- Candidates will sit the registration assessment online in a network of test centres across the UK
- The next sitting will be on 29 June 2022
- Candidates will continue to receive regular updates to help them apply and prepare to sit

Responding to the COVID-19 pandemic

- Pharmacy teams in all settings are continuing to play a critical part in the response to COVID-19, including in the COVID-19 vaccination programme
- Our standards for pharmacy professionals and registered pharmacies provide a helpful framework for decision-making
- We are now resuming routine inspections but are also continuing to provide support to pharmacies
- We have extended the easing of the revalidation requirements

Revalidation

- Pharmacy professionals who have a registration renewal deadline on or before 31 May 2022 will only need to submit a reflective account
- We would encourage pharmacy professionals to reflect on their experiences during the COVID-19 pandemic when completing their reflective account, although this is not essential

Patient safety concerns relating to online prescribing services

- Inspectors continuing to identify serious patient safety concerns
- Prescribing medicines liable to abuse, misuse and overuse to people on the basis of an online questionnaire only
- Ensure you are familiar with and follow our guidance

It was asked when the split placement standards will be published. Designation from HEE but the sites need to be registered as a training site with GPhC.

Action: DC to establish when the split placement standards will be published.

It was raised that the Government are assessing the 11 regulators and a proposal is a move to just 1. At this time there is no update.

9: Training needs assessment

The members completed a training needs assessment prior to the meeting. These results have been feedback to PSNC and will assist in them determining their training. If there are still gaps once this training is known Pharma companies will be approached for sponsorship for inhouse training across CPSS. This might be run as part of an LPC meeting or a separate event. Eileen Callaghan will be invited to our May LPC meeting as more information re ICS development will be known.

Action: Invite Eileen Callaghan to the May LPC meeting.

10: Draft operating plan

The draft operating plan was circulated prior to the meeting.

Section1:

There is a lot of content, it was suggested to take half out and pick 50% things that will drive 80% of the revenue. How the LPC communicate with contractors was raised. PQS will have a big effect on contractors.

Section2:

How many relationships are of benefit to us, which have the greatest impact. As ICS not set its an unknown if the meetings will be beneficial so will be revaluated once the ICS forms. How can we utilise Pharma on a regular basis for funding opportunity.

Section3:

Some of this may need to be taken out and then if capacity changes can be added back in.

Deadline tracker needs to be static on front-page.

Action: Add deadline tracker to the front-page static.

Section4:

Change Pre reg to trainee pharmacist.

Section5:

Comms section: national award, should we enter.

It was questioned if the LPC need to specifically add in about the AGM and annual review as it will happen anyway. This year's plan will be the overall booklet and 3 shorter annual reports.

11: PSNC Update

Update: The new CEO for PSNC has now been appointed. The pharmacy audit has been extended and contractors should be encouraged to take part. IP, get your mentor in place, know what university will be used. The pharmacy contract is devolving with 11 early adopters, Surrey and Sussex, Kent, Hampshire and Thames Valley will all be part of this. Julia Booth is leading on this and when plans are set, she will update. PSNC did push back on getting rid of the 16-digit code, without success. It was questioned if there is any data yet re the hypertensive service. There is data of who signed up but not who is providing however first set of data should be available shortly.

Action: Feedback to SK re workforce issues.

PSNC Looking to host an MP Day on the 28th of February across Kent Surrey & Sussex and have written to all MPs across the patch, unknown at this time who will attend.

12: RSG Update

3 focus group meetings took place in the end of January. Mainly concentrated on how the council should be represented. The prospectus should be available shortly with voting shortly afterwards. The focus groups mainly consisted of RSG, PSNC and LPC members. When the prospectus comes out the LPC needs to engage with contractors to make them aware of what is happening and allow them to make an informed vote.

13: Finance update

The members reviewed the CPSS budget where the contributions from the 3 LPCs are budgeted to remain the same. The members reviewed the East Sussex LPC budget. It was proposed that next month is a levy holiday.

Decision: Implement a month's levy holiday.

14: Market entry

Oral Hearing

No significant change relocation – Uckfield

15: Proposal for 2022-23 committee dates

The dates have been circulated. The members discussed if they would like to have a joint LPC meeting in July.

Decision: The members agreed to have a joint meeting in July.

Action: MC to scope joint LPC meeting venue.

16: AOB:

17: Close

18: Future meeting dates & venue

LPC Committee Meetings

East Sussex LPC	West Sussex LPC	Surrey LPC
The East Sussex National, Uckfield, TN22 5ES 9.30am – 4.00pm Please note these will be online Zoom meetings until further notice.	The Old Tollgate, Bramber, Steyning, BN44 3WE 9.30am – 4.00pm Please note these will be online Zoom meetings until further notice.	Tyrrells Wood Golf Club, Tyrrells Wood, Leatherhead, KT22 8QP 9.30am – 4.00pm Please note these will be online Zoom meetings until further notice.
Thursday 12/05/22	Wednesday 04/05/22	Wednesday 11/05/22
Thursday 21/07/22	Wednesday 13/07/22	Wednesday 20/07/22
Thursday 22/09/22 Short meeting + AGM – Venue TBC	Wednesday 14/09/22 Short meeting + AGM – Venue TBC	Wednesday 21/09/22 Short meeting + AGM – Venue TBC
Thursday 24/11/22	Wednesday 23/11/22	Wednesday 30/11/22
Thursday 09/02/23	Wednesday 01/02/23	Wednesday 08/02/23

Community Pharmacy Surrey & Sussex Executive Committee:

(Chairs, Vice Chairs and Treasurers to attend – options for conference call dial in)

31st March 2022 – 10:00-12:00 Venue TBC

2nd June 2022 – 15:30 – 17:00 Venue TBC

6th October 2022 – 10:00 – 12:00 Venue TBC

12th January 2023 – 15:30 – 17:00 Venue TBC

30th March 2023 – 10:00 – 12:00 Venue TBC

South East LPCs and Partners (Regional Meeting)

(Chairs, Vice Chairs to attend)

2nd June 2022 (hosted by Kent) 10:00-13:00 Venue TBC

12th January 2023 (hosted by Surrey & Sussex) 10:00-13:00 Venue TBC

PSNC Forward Dates:

2022 PSNC Meeting Dates

18th and 19th May 2022

6th and 7th July 2022

14th and 15th September 2022

23rd and 24th November 2022