# **Minutes of Meeting of Surrey Local Pharmaceutical Committee**

Date:Wednesday 30th November 2022 starting at 09:30.Location:Zoom online meeting.Present:Purvi Shukla, Jaymil Patel, Jay Amin, Sejal Patel, Jay Patel, Chris Scoble.In attendance:Julia Powell, Chief Executive Officer, Jess Turner, Service & Development Lead, Marie Hockley,<br/>Deputy Chief Officer, Micky Cassar, Business Administrator. Yinka Kuye (am), Hursh Gagda (am) ,<br/>Hadi Zare (am).

# 1: Welcome & Introductions

The Chair welcomed the members and guests to the meeting. CCA Reporter: Chris Scoble.

# 2: Apologies for Absence

Hemal Chudasama, Emma Guy.

# 3: Governance Matters

The Chair asked if there were any changes to the Declarations of Interest. Nothing was raised. The members were reminded by the Chair of the LPC constitution and the Nolan principles.

# 4: Minutes & Matters arising

The Chair asked the members if they had read the 26<sup>th</sup> of September 2022 LPC minutes and if there were any issues with the accuracy. No issues raised. The Chair signed the September LPC minutes as a true account of the meeting.

The action/decision log was reviewed.

Actions in progress:

270 – Circulate the paper written by the College of Mental Health Pharmacy when final version available. – Progress (still not published)

278 - Review the budget again at the September meeting. – In progress (was reviewed at the September meeting and will be further reviewed later in the meeting)

279 - Look into insurance for LPC committee members. – In progress (NPA unable to clarify unless specific examples were given).

281 - Surrey LPC members asked for a log in for Virtual Outcomes to do the CPCS training so they can see from GP end what it looks like. – In progress

282 - Review the expense policy in March 2023. - In progress

285 – Members to decide at the November meeting how the LPCs will look boundary wise. – In progress (to be discussed later in the meeting)

# 5: PSNC update

JP gave a brief update. The PSNC committee size has been reduced to reflect RSG recommendations. There are now 10 local representatives which has been based on numbers of IND contractors within the area. In the South East Coast area there is 1 representative and also 1 for the South Central area. It is proposed that these two areas are combined to one region covered by 1 representative. The members were asked if they had any issues with this, nothing was raised.

At the recent joint East Sussex LPC and West Sussex LPC meeting the members agreed to propose that the 2 LPCs merge to reflect RSG recommendations. This will go out to contractor vote in January 2023.

PSNC have started a new Vision and Strategy project to try and shape what the future contract looks like after year 5, this should be complete by May/June 2023.

The news services initiative has supported the upcoming contraception service, the expansion of the NMS new condition and potentially expanding the role of those who can deliver these services moving forward, in partial and in full. There are challenges with the services and challenges with the margin. There have been issues with drug supply and pricing of drugs (concession prices) shortages and supply issues. There is a mechanism in place to check this, but it is not being managed accurately leading to some contractors incurring losses. This is being fed back as not working but the mechanism has been designed by Public Health and they cannot disclose how this was created.

The constitution – the Wright Review looked at the governance structure of PSNC and recommended a rebalancing of committee members (50/50 IND and multiple), the constitution has therefore been amended. It was raised that you can have this split at PSNC but the multiple definition has now changed, 9 or more is now multiple. Incorrectly they had applied this to the LPC's, in the past AIMp (5 or more) could sit on the LPC. With this change it now stands if AIMp has left then 9 they can stay on LPC and remain AIMp, if an IND has less than 9 they can also sit as an IND. Comms detailing this to follow.

NMS categories expanding: The members were asked for their thoughts on expanding the cap above 1% of items. if you don't have a cap it can go beyond the government budget for the fees, so if you do more services its coming out of the dispensing funding pot.

# 6: Service development & support update

The members reviewed the Surrey LCS data, the Hypertensive data and the BP+ data. Still holding service clinics which has been helpful. CS was thanked for sitting on the needle exchange procurement group. They reviewed the tenders that have been submitted but the outcomes are not known as yet but will be circulated in due course. Needle exchange: figures have been reviewed on how many packs of needles are distributed to pharmacy vs what they claim on PharmOutcomes. The figures (are a guide), Q1 – sent out 2772 packs, Q2 4430, Q3 2570. If averaged £1.00/pack, claimed on PharmOutcomes, for all this total was £2908.00. This suggests that pharmacy are not claiming all supply and it was highlighted to submit claims punctually. In February there is a f2f event at the Brooklands Museum for pharmacies that provide needle exchange. This will be funded by PH and invites will be circulated in the newsletter.

MH met with Emma Jones (PH lead for CVD), looking at ratio of BP+ and hypertension and has also been working with Kate Crokett (sexual health PH service lead). The jointwebinar on the 16<sup>th</sup> of Nov was successful with the next one following on the 7<sup>th</sup> of Dec and a further two in Feb and March. CDS – tailored training fee £50.00 retention fee.

Take home naloxone – try and get contractors to take up this service.

BP+ moving forward – discussions around NHS Healthchecks being fit for purpose and costings. PH are keen to reinvigorate these services to align with NHS health priorities.

The members reviewed the Hypertensive case finding data (with AccuRx). MH has been invited to give a presentation for a national webinar.

# LPC updates:

Surrey

- 155 SCC FLU vaccinations since go live, 33 Commissioned. There has been a regulation change of premises you are allowed to use. Will have to be NHS approved premises.
- Condom distribution service (CDS)- now open to any pharmacy in Surrey that is interested in Sexual health. The pharmacies that attended the webinar on the 16<sup>th</sup> of November are going through the process of being set up. If this is successful it may lead to an LCS.
- CDS Training webinars: First held on 16.11.22 16 attended.
- CDS- Clarification for retention payment: For those attending the two training this year (16<sup>th</sup> Nov and 7<sup>th</sup> Dec) they will be paid £50 and for those that attend 10<sup>th</sup> Feb will be paid £37.50 and those that attend 17<sup>th</sup> March £25 retainer fees.
- C difficile service approved 6 chosen pharmacies chosen to avoid gaps. Similar to the palliative care scheme.
- H Pylori circulated to pharmacies and Head office teams. In discussions to try and replicate this across Sussex. £15.00 to provide the breath test and results shared with GP practice.
- Update to EHC specification and PGD- any patient regardless of age over 25yr can access free EHC if the pharmacist deems the need.
- Public Health Meeting 19.1.23.

### Sussex

The following services are currently going through the decommission/recommission process papers have been submitted regarding impact assessments. The LCS harmonization groups have discussed these to establish patient impact, if the services should be de or re commissioned.

- H Pylori unknown at this time if recommissioning
- Gluten Free Will be decommissioned
- MAR Charts unknown at this time if recommissioning

Palliative care – 4 outstanding for £550 21/22 and 43 still outstanding for £300 20/21 £550 21/22 – concerns formally raised. Awaiting new specification in final stages.

# West Sussex

- Public Health meeting 1.12.22 (no meeting since June 22).
- EHC PGD 31 pharmacies chased to submit signed paperwork.

# East Sussex

- Public Health Meeting 9.1.23.
- Monthly meetings with Colin Brown Public health tobacco lead.

### Brighton

- Smoking service specification draft received- resubmitted fee uplift for consideration.
- Chlamydia treatment: PGD Doxycycline expires 31/12/22. The draft has been created and comments made.
- Request for Locally Commissioned Service payments to be made monthly has been submitted formally. Awaiting outcome (this would be from April 2023).
- Public Health Meeting 9.1.23.

NHS Community Pharmacy Smoking Cessation Service 103 pharmacies signed up – 40 Surrey, WS 29, ES 34. Steven King meeting – An evening webinar will take place for him to introduce the service and support.

Hypertensive case finding service – 378 signed up, 74% of our contractors.

Substance misuse contract Sussex- Specification approved expected December and go live in WS and ES in Feb 23. PCN lead- Funding agreed Surrey Downs £400 backfill 1 day per month + £500 LPC funding for Admin– papers have been submitted to Surrey and Sussex.

Service costing tool is being produced. MH has reviewed all the services to review costs. The admin, setup, training and consumables are considered to get to a base line.

DMS – Webinar for Surrey contractors will be prerecorded for website. There is still no go live date for SASH and Epsom & St Hellier have also still not gone live. The Trusts have been asked to submit a timeline as this is a patient safety initiative.

It was raised that DMS referrals had been received before the patient was discharged and by the time they were discharged the referral meds were different for the GPs and pharmacy. Royal Surrey referral. Action: Raise this as a risk at the next meeting.

# Total amount of claims including Completed and Incomplete stages eligible for payment as per NHSBSA and counts towards CQUIN published data.

The members reviewed the flu data and were given a brief update on GPCPCS. 79 practices are live with 73 actively referring. Surrey have sent 4500 referrals in total. Support is being given to help clear old referrals. A top tips document has been circulated and there is a webinar on our website to help with process and support. A survey is being created to get feedback from contractors to see how support should look. Action: Invite Yinka to the fortnightly update meetings.

Forward view:

- Continued roll out of the GP AccuRX pathway.
- Discussion and meetings ongoing with trusts regarding advanced services roll out.
- Surrey CDS service- Training webinars.
- C Diff and H Pylori rollout Surrey.
- De/Recommissioning Gluten Free, H Pylori, MAR charts Sussex.
- Support for DPS Surrey ongoing. There is no closing date currently.
- Area manager forum Postponed until March 23, will allow for a better overview of services, once available will be on our website.
- PQS Clinics. MH has created a palliative care document that has been circulated to contractors to assist with PQS actions.
- CGL substance misuse contracts Needle exchange and Naloxone.
- Palliative care.
- Continued collation of data for PCNs without funded lead for hypertensive case finding service.
- PCN Lead support- presenting at PCN meetings and advising on local matters.
- Next round of PH and stakeholder meetings.
- Service fees and contract renewal from 1<sup>st</sup> April 23.

### 7: NHS Surrey Heartlands

Hursh Gagda and Yinka Kuye – Community Pharmacy Clinical Lead Hade Zare – Community Pharmacy Project Manager

The members were given an update with regards to their priorities including DMS, smoking cessation and GPCPCS. This includes looking at what is being referred back to surgery and why. It was suggested that it may be a good idea for HG and YK to visit pharmacies to see pressures first hand. If there are local things that need addressing, what services are needed, deprivation areas etc then this needs to be highlighted so the role can be strategic. The focus is about driving clinical services in community pharmacy. HG has written a paper for the Healthcare and professional committee, it mentions the Fuller Stocktake Report and background around the contractual framework and services and how community pharmacy is performing, aimed at highlighting what community pharmacy can do, The final version can now be shared.

Action: Share the paper written by HG

It was highlighted that some GP practice receptionists are referring patients to the community pharmacy without using the GPCPCS referral.

Action: JT to contact the practices that are not using GPCPCS correctly.

HZ is mainly focussing on DMS to connect the Trusts and community pharmacies to bridge any gap and improve the service across Surrey. Also looking into old referrals that were not picked up, what the issues were, and clear them down and encourage them to claim for the service provided and highlight that this is an essential service.

# 8: CEO report

- Q3 and Q4 Operating Plan
- PCN Leads
- MP communications
- Dexcom One
- Reports from local meetings
- Closure Summit NHSE/ICBs

The members reviewed the Q3 Operational plan (all actions in green) and the Q4 Operational plan.

The HEE workforce survey deadline is 23:59 tonight, all outstanding contractors were called yesterday (149). There were only 4 that were uncontactable, so they received a further email reminder.

The CPAF long version is out for completion with contractors, and they have been emailed to offer LPC support. This year there has been a significant increase in number receiving this. 10% across our patch received this.

Access to the shared care records: Community pharmacy will get access to this is both Frimley and Surrey Heartlands. Frimley connected care are piloting this at this time (via PharmOutcomes). In Surrey Heartlands they are expecting to roll out in January (after a pilot with one contractor). There are 4 phases in Surrey Heartlands with 60 going live in each phase. In Sussex it is being discussed but not on a rollout pathway at this time.

Funding for IP: In Surrey Heartlands workforce development funds – (4-year bid was put in but only successful for 2 years). Community Pharmacy tend to have to go to GP for DPPs. They get paid £2600.00 for supporting however community pharmacy do not so these funds will help towards a £2600.00 payment to the GP. They will be funding to put through 20 people per year and after 3 years they will be able to be DPPs. HEE have separate bids for IP's and DPPs 2 levels, systemwide bid. £90,000.00 bid x 3.

PQS: MH has been running clinics and updates on our website and newsletters. All contractors have received support with the palliative care action plan.

Q4 plan: most of work around the EGM following TAPR recommendations and forming a new LPC committee.

PCN leads: as part of the PQS there was funding for them, there isn't this year. Surrey Downs have £30,000.00 winter access funding which has been secured and will be given to Surrey LPC for pharmacies in Surrey Downs, to pay to free up the pharmacist 1 day a month, £400.00 / day. There are further funds at NHSE and NHS Sussex will be bidding to support PSN lead fee and admin fee (will find out in Jan if successful £190,000.00). Surrey Heartlands looking at this and including Optom and Dental (Sussex are not looking to include them), Frimley may also wish to do this. In Surrey Downs the £30,00000 will also include a simple UTI service. GP's are keen for pharmacy to assist with UTI's to free up appointments. Surrey Downs also looking at Strep A – sore throats PGD.

MP comms: PSNC held an event on the 15<sup>th</sup> of November, all MPs in our area were invited, 2 attended, both will be doing a pharmacy visit. Looking to be more proactive with MP engagement.

Dexcom One: continuous glucose monitoring. Dexcom one glucose monitor has been approved but there is an objection as there is a transmitter part that needs renewing which is expected to be supplied by pharmacy. The stance is that community pharmacy is not happy to do this free of charge but happy to do under an LCS, or alternatively this could be supplied by the company directly to the patient. JP is seeking advice from PSNC to establish what the national stance is. Frimley will allow it to go on the formulary. PSNC have stated they will support Dexcom application to be included in the drug tariff. There is however no cost associated with it so this may be a barrier (there has never been a zero-cost item in the drug tariff). Dexcom are now stating the transmitter will go directly to the patient, but this is not confirmed. Surrey Heartlands are stating they won't support this until the issue resolved.

Closure summit update: Meeting was held with NHSE, with reps from the 6 ICBs and LPC CEOs and rep from Boots. The aim of the meeting was to educate the ICBs. Julia Booth gave a presentation around closure figures, and it was highlighted that pharmacies are not closing because they want to, they have no choice. SD also gave a presentation on Boots barriers. JP spoke to Gordon Hockey prior to this with regards to regulations re planned / unplanned closures. It was highlighted that community pharmacies cannot give advance notice of closures as this is against regulations. The ICBs were very receptive of this idea to allow for this flexibility to improve communications. Linda Honey is following this up with NHSE and is meeting with Julia Booth regarding flexibility, awaiting response.

When the new model constitution is available this will be circulated by email (as still in draft form).

# 9: TAPR update

- Transformation Toolkit
- Discussion of 5 key questions
- Merger sub-committee update
- Forecast for 23/24 and 24/25

# 5 Key questions need to be address:

Surrey LPC does not match the ICS structure. Surrey ICS has three LPCs within. Frimley, Surrey, and Thames Valley. The three CEOs covering Frimley have always agreed to leave this across the three patches due to several considerations including levy costs, CCA initially however did not agree with this. If Frimley was one LPC it would still be covered by three councils, CCA have therefore agreed not to force the issue of having one LPC looking after Frimley.

1: Are we happy to keep Frimley shared across all LPCs: Consensus was yes for all members.

2: Are we the right size: yes.

3: Are we effective with our finances: yes.

4: What are we called: Community pharmacy Surrey – Consensus yes.

5: How many committee members do we have: Consensus - members agreed to move to a ten-member committee.

### 10: Finance update

- LPC 2022/23 YTD
- CPSS 2022/23 YTD
- Expenses policy reminder

The members reviewed the Surrey LPC finances and the CPSS finances. No issues were raised but the members were reminded to kindly submit their claims promptly. The members were shown a forecast of the next 2 financial years to see the impact of the increase of the PSNC levy. It was highlighted that contractors need to be kept up to date.

### 11: Consultation: Nuffield Trust and The King's Fund on the PSNC and community pharmacy vision and strategy

The consultation has set up questions which the LPC's can respond to. The first phase involves a steering group panel and working groups being set up. This has been promoted in the newsletter and contactors can submit their opinions, the LPC can also submit a response (cut-off date is the 9<sup>th</sup> of December). The questions are:

- 1. Thinking about the future of community pharmacy, what would "good" look like, from either a community pharmacy, NHS, or patient perspective?
- 2. What are the key building blocks that need to be in place to achieve that ambition?

- 3. Thinking about past policies and developments in pharmacy practice and possible future developments, what are the key barriers to change?
- 4. Thinking about past policies and developments in pharmacy practice and possible future developments, what are the key enablers of change?
- 5. Are there innovative models of the delivery of community pharmacy services that you are aware of that should be explored during the development of the vision?

From the initial feedback there will be a second consultation (March/April) and a final version (June) will then be agreed. The members discussed the above points and gave feedback to JP for collating.

# 12: Timeline for 2023 committee

The proposals will need to be taken to an EGM in In January (this will be held as a virtual evening webinar), inviting the contractors. This will likely to be towards end of January to allow for notice, once held and if agreed a new committee will be formed. The members were asked to decide if they wanted to extend the committee term until the end July 2023 (from 31<sup>st</sup> of March). As WS and ES are merging (which involves financial work) they have decided to extend the period however Surrey are not making any changes so don't need the extra time. Following the EGM the contractors will be reproportioned into AIM/CCA/IND and see what the committee size allocation will be. All IND contractors will be approached if they wanted to be a member (this would be done straight after the Jan EGM), if more applicants than the allocated seats would have to go to contractor vote. The EOI will be circulated to IND by end of Jan so outcome known by March and new committee members confirmed ready to start 1<sup>st</sup> April. Decision: Leave end date as 31<sup>st</sup> March.

### 13: LPC Self evaluation

The LPC evaluation is carried out annually. The list of questions was circulated prior to the meeting. The members decided that the PSNC rep should be moved to amber. Contractor proactive engagement is amber and will look to improve. The members agreed with the self-evaluation rag rating. Action: Upload the self-evaluation to the website.

#### 14: Market entry

#### Awaiting response

Unforeseen benefits – Pharmservices – Guildford Road, Ash parish – Appeal Consolidation – Boots – Caterham Consolidation – Boots – Cranleigh No significant change relocation – Easihealth – Woking No significant change relocation – Haslemere Healthcare – Haslemere Dispensing Doctors relocation – Edenbridge Consolidation – Nicklevale – East Molesey

### Notification received – Refused

Inclusion in the pharmaceutical list – DSP - Medicines Professionals – Ashvale - Appeal

### 15: AOB

Nothing was raised.

#### **LPC Committee Meetings**

East Sussex LPC	West Sussex LPC	Surrey LPC
The East Sussex National, Uckfield, TN22 5ES	The Old Tollgate, Bramber, Steyning, BN44 3WE	Tyrrells Wood Golf Club, Tyrrells Wood, Leatherhead, KT22 8QP
9.30am – 4.00pm	9.30am – 4.00pm	9.30am – 4.00pm
Thursday 09/02/23	Wednesday 01/02/23	Wednesday 08/02/23
Thursday 11/05/23	Wednesday 03/05/23	Wednesday 10/05/23
Thursday 20/07/23	Wednesday 12/07/23	Wednesday 19/07/23
Thursday 14/09/23 Short meeting +	Wednesday 13/09/23 Short meeting	Wednesday 20/09/23 Short
AGM – Venue TBC	+ AGM – Venue TBC	meeting + AGM – Venue TBC
Thursday 23/11/23	Wednesday 22/11/23	Wednesday 29/11/23
Thursday 08/02/24	Wednesday 07/02/24	Wednesday 14/02/24

# Community Pharmacy Surrey & Sussex Executive Committee:

(Chairs, Vice Chairs and Treasurers to attend – options for conference call dial in) 12<sup>th</sup> January 2023 – 15:30 – 17:00 Online 30<sup>th</sup> March 2023 – 10:00 – 12:00 Venue TBC

#### South East LPCs and Partners (Regional Meeting)

(Chairs, Vice Chairs to attend) 12<sup>th</sup> January 2023 (hosted by – Kent) 10:00 – 13:00 Online

# **PSNC Forward Dates:**

National Meeting of PSNC and LPCs 2023: Thursday 18th May 2023, 10am-3pm, Location: Online

Annual Conference of LPC Representatives 2023: Thursday 12th October, 10am-3pm, Location: London