

# In attendance:

Fiona Lowe (FL) + Members: In person: Anurag Hegde (AH), Wayne Ryan (WR), Jeet Patel (JP), Danielle Brennan (DB), Salman Ahmad (SA), Mitesh Bhalla (MB)

#### Guests:

In person: Alison Rogers - CCG Lead 09.30 - 13.30

# Apologies:

Zoe Ascott (ZA), Akwal Singh (AS) & Sally Rowberry (SR) (NB: CCA Vacancy)

- 1. Standard agenda items (open) FL
- DOI no changes declared For note

Minutes approved - FL & ZA to review closed vs open prior to publishing on website. Action

Market Entry – Core Hours change proposal – LPC approved & FL to inform NHSEI. Decision

<u>Matters arising</u>: Some discussion about whether possible to expand the <u>office function to take on a neighbouring LPC</u>, with contribution to allow additional resource and space to accommodate this particularly around communications / website may be all functions. For consideration after current resource resolved for AHW. Review after new staff started and outcome of the RSG – transformation pack shared. Action

Website – review once CPA set up as to whether move to new platform – we don't want to lose the benefits of ours but need to test the PSNC version. Review in September and be advised by Susan. Action

GPCPCS – where the N&W PCN care navigators have slipped back into verbal 'pop to pharmacy' instead of GPCPCS referral. Important that reps sent to PCN meeting know about the service sent to discuss. Raised with Lisa and Richard to pick up. Action

- PNA reminder ALL Members required to read our PNAs and return comment by end July to ZA and FL for consolidation. ZA / FL to send onto the PNA for inclusion and include response in main online option too to ensure acknowledged.
- 3. CCG Update

CCG formally became IBC on 1<sup>st</sup> July 2022. Structures are coming soon with CEO, Medical Director and Nursing Director appointed. Pharmacy Optometry and Dental Contracts will sit under Director of Finance. The Director of Medicines and Pharmacy will sit under Medical Director. ICS and ICS have websites – not populated as yet.

#### PowerPoint Presentation 16.9 (england.nhs.uk)





**Covid Vaccinations** – H&W second highest % covid vaccinations and pharmacy was represented as part of the Parliamentary Recognition. 9 active sites all done well from 100 to 2,500 a week depending on site – hoping for more in next round EOIs. Deadline 20<sup>th</sup> July 2022. All 9 opting to carry on. Hoping to get the 8-9 pending from November onboard – visits all done! Appears to be a more difficult process through NHSEi to get pharmacies over the line that PCNs or practices. Shape Tool being used to look at locations and need. Areas particularly needed: Kidderminster, Malvern, Bromsgrove, Stourport, Bromsgrove, Droitwich, Worcester City, Evesham and Leominster.

Pharmacies will have access to ICS resources including staff.

SHAPE | Strategic Health Asset Planning and Evaluation (shapeatlas.net)



**Opening hours – workforce issues** – NHSEI working on a google form for pharmacies the send the right info and to be collated into database which LPCs could view. Lot of issues with covid related illness and locum behaviours impacting. Pershore been badly affected as has Malvern and Droitwich. Impacting independents, small and large groups alike.

**ICB funds** – LPC have £25K coming - £5K for extended care training and £20K – liaison / implementation support for Advanced Services. This funds approximately 15 of the 30 hours a week of appointed E&S Officer for 12 months (Approx. Band 7)

**Digital / Shortages –** SPS website useful – Digital team are looking at a website option for information – Susan to support.

Log In < SPS – Specialist Pharmacy Service – WordPress

<u>Prescribing available HRT products – SPS - Specialist Pharmacy Service – The first stop for professional medicines</u> <u>advice</u>

### Waste medicines and sharps

# Contract being sorted for 2023 - meantime still Anenta

From 1st September 2021, <u>Anenta</u> will handle all clinical waste queries for NHS England and NHS Improvement Midlands Region (excluding Covid waste) from all Community Pharmacies and GP sites. You can contact Anenta through the following means:Telephone: 03301 222 143 Email: support@anenta.com Support Ticket: <u>www.vector.anenta.com</u>. **Please note you must register your Community Pharmacy on the Anenta System by <u>clicking here</u> Details about the registration process can be found <u>here</u>.** 

### **Translation services**

Nothing available for pharmacy – suggestion is google translate. Example of error – cetirizine solution being taken for hayfever / itchy eyes – administered to eye instead of orally. Patient Safety issue.

### Proxy access for care home ordering

Pharmacies won't have either read or read / write access. The care home team will be entirely responsible for ordering on time all required items through EMIS patient access system as per position statement. The surgery will need to search by care proxy code so can make sure all go through together to the pharmacy in good time.

#### **ICB video on Community Pharmacy**

Available to soon to share

#### **Sexual Health**

New members of the team Tina Maddison, Rachel Sprostan- contracting. Need more providers of COC / POP – Pershore, Malvern, Bromsgrove and Worcestershire.

# Intervention (AMR perhaps) and Care Home Service options not already in PCN contracts

To look at options over next couple of months

#### OOH pharmacy opening e.g. Sunday pm

Looking at options and possible ROTA requirements IF there is a need – requires evidence first.

# 7 days scripts and MDS

Position confirmed – not linked. 7 day scripts if only safe for patient to have 7 days worth at a time. Legacy MDS need reviewing and all involved (Practice, Patient, Pharmacy, Carer) – duty of care to have a reasonable handover period to review and enact changes so patient safety not compromised.

#### Safeguarding

Child of member of staff who was unwell in consultation room and DUS client came in to take supervised medicine. Reported to safeguarding team. Reminded of duty of candour. MASH and GPhC informed.

# Clinical

A Pharmacist advised a pregnant woman who had been exposed to chicken pox to make non urgent appointment with GP. Complaint that should have been urgent appointment so that immunity.

# **Covid Reporting**

If 2 or more - has to be reported as outbreak as usual - see website for process.

Phase 4 – reminder to practices needed – see NHS website Electronic Prescription Service – Phase 4 - NHS Digital

## SS – see webinar on demand on NHS Futures website

#### Finance (open part)

We have recruited E&S Officer to start in September – proposal that can use LPC Levy Funds and ICB funds to pay Claire for first 12 months. Then some residual funds from NHSEi and LPC Levy Funds for following 12 months before moves to LPC funded role in entirety.

**LPC Transformation:** Waiting on the transformation pack from PSNC to support change following RSG. It is noted that the LPC – CPHW is already coterminous with ICB and works closely with CPA.

**Governance:** Ensure all employed staff have hours confirmed ahead of payroll and documented. Members claims – complete forms and meet new Expense Policy.

Accountants: ZA supporting WR to get them on board – mid July – for mid-August return – allow 2 weeks slippage – as need to go out by 8<sup>th</sup> September.

Sufficient Funds to pay PCN Leads

#### 4. Chief Officer Update

DMS still slow burn until the trusts have their project support in place.

IPMO and Faculty on track – awaiting new Director of medicines and pharmacy to be Chief Pharmacist for the system. Other systems copying the H&W Faculty approach with support from HEE. H&W will spend the HEE money on a project manager to support workforce workstream.

Professional Development Programme – very good – get behind it and recommend to teams. Will be requirement for any PCN Leads signing MOU for funding to take part in the training. Same team to support team build activity.

Websites – leaving with Susan to see if PSNC one is manageable.

Database - looking for something like 'salesforce' for our databases.

GPCPCS – more surgeries have started, but most slipping back wrt numbers. HMG has resurgence in June.

Place	PCN	Referral System	Raw Pop	Target p/w*	2021	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22
Hfd	East - Herefordshire	NHS Mail & EMIS	29,915	19	2		13	34	18	9	34
Hfd	Hereford City - WBC	NHS Mail	29,613	19	68		1				
Hfd	HMG	NHS Mail	49,532	32	934	40	49	59	48	65	145
Hfd	North and West - Herefordshire	EMIS	51,013	33				27	55	56	30
Hfd	South and West - Herefordshire	EMIS	42,091	27						1	28
R&B	Bromsgrove and District	EMIS	78,123	51	3	2		2	3	3	16
R&B	Kingfisher	NHS Mail & EMIS	60,018	39	199	49	107	89	81	86	115
R&B	Nightingales	EMIS	43,136	28	1	9	43	90	109	97	80
WF	Wyre Forest Health Partnership	EMIS	72,716	47	1	19	24	16	14	13	19
WF	Wyre Forest Network of Independent Practices	EMIS	41,910	27			1	15	20	7	4
Worcs	Droitwich and Ombersley	EMIS	54,116	35			1	10	17	6	5
Worcs	Malvern Town	EMIS	39,369	26		1		15	7	7	10
Worcs	Pershore and Upton	NHS Mail & EMIS	33,864	22			10	7	1	2	2
Worcs	The Vale of Evesham Health Network	NHS Mail	62,368	41				1		2	3
Worcs	Worcester City GP Network	EMIS	126,842	82			30	58	44	48	41
			814,626	530	1,208	120	279	423	417	402	532

# VirtualOutcomes

Renewal due again 45% pharmacies signed up – lower use last year but still cost-effective training option. Price likely to be  $\pm 8.70 - 9.00$ .  $\pm 10$  ish if a lot fewer LPCs signed up per contractor per year. All approved continuation funding from non-levy money up to  $\pm 1300$  pa. Several useful past course and new ones – bites and stings, rashes, ENT, children's illnesses. ED – CPCS module too.

- 5. AOB DDA Tool to look at options to support MDS reviews
- 6. AOB AGM Preparation WVT, WA, HCT, ICB, PCN and Contractor and Commissioners to be invited.

Meeting closed at 14.00