

Community Pharmacy Herefordshire and Worcestershire (CPHW) Meeting- Young People's Leisure Club, Perdiswell Park, Droitwich Rd, Worcester, WR3 7SN.

MINUTES OPEN 13/03/2025

09.15 – 12.30

CHAIR	Anurag Hegde (AH)
MEMBERS ATTENDING	Akwal Singh (AS), Jeet Patel (JP), Paul Rowley (PR), Lucy Corner (LC), Sarah Frewin (SF)
IN ATTENDANCE	Fiona Lowe (FL) Eva Cardall (EC)
MEMBER APOLOGIES	Harpal Bhandal (HB), Wayne Ryan (WR), Amarjit Tanday (AT)
Guests & Observers	ICB: Alison Rogers (AR), Caroline Horton (CH), Siobhan Hemans (SH) Worcestershire PCN: Dan Nash (DN) PCN engagement: Lisa Siembab (LS) H&W Ambassador - Liz Brooke (LB) CHS: Michelle Dyoss (MD) Jas Heer – CPE Regional Rep

9.15 am: Welcome, DOI, Minutes, AOB, matters arising

January minutes were approved as presented and closed sections agreed. DOI and attendance sheet completed. No AOB or matters arising that are not covered by the agenda.

Independent Vacancy

The process closes on 7th April. If more applications come in, the committee will be updated. Applicants received by 7th April will be invited to the May meeting. The LPC will make a recommendation to be ratified by independent committee members. The successful applicant will join the LPC until March 2027.

Market Entry, PNA

We are working with PNA and other groups to ensure reasonable parameters for measuring gaps, excluding public transport or walking times in rural areas. Progress has been made with some agreements. Susan will monitor the border PNAs, and we will email you when your areas come up. The feedback template is on Box and allocation details have been shared. (FL) H&W – all, Gloucestershire – WR, Solihull & Bham – PR, Staffordshire – JP, Dudley – AT, Sandwell – HB, Wolverhampton – AS, Shropshire – LC & SE, Warks – FL & EC.

Market Entry

JP asks what the current situation is with DSPs. We only have 2 – one in Leominster and a specialist one in Worcestershire – Nutricia. (FL). Coventry and Warwickshire have 10 DSPs with another approved and two in the pipeline. Many feel that there are enough DSPs nationally to manage any workload.

Joint Exec Feedback provided by AH & FL


The LPC's financial position for the MOU and Levy accounts was discussed. Financial documents are available on Box. LPC reserves, after contingencies, are expected to be around 40% by early 2025-26. MOU funding will support service leads and resources up to 50% until March 2026. Costs and the Contractor Levy need reviewing due to reliance on MOU funds and a high CPE Levy (£107,000 approx.), as no further MOU funds are expected. We are on track for the accounts to be with accountants by early May and completed by end June for sign off in July ready to go out in August in time for the September AGM.

The support team is currently facing challenges with a vacancy and long-term sick leave, and recruitment is proving difficult for the Services and Administrative Project role. Interviews will take place at the end of April, where the role will hopefully be filled, and we may also opt to have a short-term contracted more senior role over the Summer / Autumn.

The transition planning continues with the CEO recruitment activity planned for the Summer with Interviews in November. The plan to appoint by April 2026 for 3-month handover period.

CEO Report is available on Box. Some elements are shared below.

Content



- Independent Vacancy – H&W only
- Market Entry
- PNA
- Joint Exec – Team – Finance
- Strategy
- Self-Assessment & Communication Plan

Herefordshire & Worcestershire

- Levy to CPE £107,190
- No Levy holiday!
- Estimate for end of year £115,000
- Contingency held within reserve total = £34,000 (less £10,000 EA no longer needed)
- Reserves = Est £91,000 excl. contingency = 40%
- Budget on website £225,000
- Accountants pencilled in May & June – for end of June completion

H&W

- LPC Strategy on website with key priorities agreed at last LPC Meeting
- All PCARP, PCN, joint working and Integrated N Teams
- Post CPCL retirement plan – job split between 5!
- Communication Plan drafted to trial – review May
- To work on external communications, LRCs and media
- Visits May and July

Self-assessment

H&W

- Draft version reviewed and scored, and action plan started
- Final version received took account of our comments
- Action Plan to be updated each meeting and reviewed by governance subcommittee in May

H&W

- Joint Plan with ICB for CP
- Pharmacy Strategy for ICB
- Accelerator sites – 3
- Represented on Delegated Commissioning Group – meet Charmaine 6 weekly and Lynda quarterly
- Strategy Session Follow Up in July 2025(10th): with new Chief Pharmacists and ICB colleagues & DPh & Charmaine and Lynda & GP Fed / LMC & Farzana

Governance Group to review self-assessment scoring and action plan at May meeting. Strategy work to commence at July meeting. May meeting will be in Hereford and some local stakeholders will be invited and options to meet with Trust and others explored.

10.15 Guests – open session

Guests were welcomed and introductions made.

Local Services

EC shared the information collated on all local and national services for the PNA and outlined progress around relationships with local commissioners. The details are on Box. Details of the local services can be found on the LPC website: [Local Services – Herefordshire and Worcestershire LPC](#)

The issue of low numbers of ABPM undertaken in rural Counties due in part to driving restrictions when wear device. Some discussion around different devices and whether can apply device and then delay start either automatically or manually until reach home. JP described one such device that allowed this option.

Action: EC to do an article with support from PCN and ICB colleagues to focus on ABPM and BP in general and the implications for patients, pharmacies and surgeries. Some WF surgeries encourage patients who have declined ABPM to go back to the pharmacy to arrange to have one. EC to look at producing some case studies – LS, EB, DN

ICB Update – AR, SH

Refer to slides on Box. Some are reproduced here:

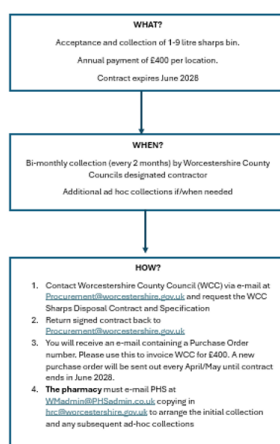
Sharps Update- progress to date

Worcs City Council

Will display single list of pharmacy contractors linked to their nhs.uk websites for opening hours and will keep this list up to date

District Councils

District Councils are then asked to display the same narrative but link to the pharmacy list on the Worcs city council website.



Scriptap Ltd (T/A Hillview Pharmacy)	60 Bromsgrove Road, Redditch, Worcestershire, B97 4RN HILLVIEW PHARMACY - NHS
Stewarts Pharmacy	75-77, Bag Street, Evesham, Worcestershire, WR11 3LF Stewarts Pharmacy - NHS
Vale Pharmacy	Evesham Medical Centre, Abbey Lane, Evesham, Worcestershire, WR11 4BS Vale Pharmacy - NHS
Stewarts Pharmacy	The Quays, Evesham, Worcestershire, WR11 1JZ Stewarts Pharmacy - NHS
Scales Pharmacy	40-42 Ashwood Road, Worcester, Worcestershire, WR3 8EZ Scales Pharmacy - NHS
Scales Pharmacy	37-8 Upper Oldgate, Worcester, Worcestershire, WR1 1JZ Scales Pharmacy - NHS
Scales Pharmacy	27 Lichfield Avenue, Worcester, Worcestershire, WR5 1NW Scales Pharmacy - NHS
PCT (Peak Pharmacy)	Turnpike House Medical Centre, 35 Newtown Road, Worcester, Worcestershire, WR5 1HG PEAK PHARMACY - NHS
PCT (Peak)	300 Oldgate, Road, Malvern, Worcestershire, WR14 2GP PEAK PHARMACY - NHS
PCT (Victoria) - (Google: Victoria Pharmacy)	146 Worcester Road, Worcester, Worcestershire, WR1 1SS VICTORIA PHARMACY - NHS
PCT (The Halt Pharmacy)	11 Ingles Drive, Henwick Road, Halt, Worcester, Worcestershire, WR2 5HL THE HALT PHARMACY - NHS
PCT (Peak)	Quays Moor Health Centre, Fairfield Close, Worcester, Worcestershire, WR4 9TX PEAK PHARMACY - NHS
PCT (Peak)	St Johns Medical Centre, 299 Bromyard Road, Worcester, Worcestershire, WR2 5FB PEAK PHARMACY - NHS
PCT (Peak)	Bewdley Medical Centre, Dog Lane, Bewdley, Worcestershire, DY12 2EF PEAK PHARMACY - NHS
PCT (Peak)	Barbourne Health Centre, 4 Droithway Road, Worcester, Worcestershire, WR3 7JH PEAK PHARMACY - NHS
PCT (Google: Murrays Pharmacy)	Enigma Business Park, Maple Road, Malvern, Worcestershire, WR14 1GG Malvern Pharmacies Group - NHS
J&J Pharmacy	177 Bath Road, Worcester, Worcestershire, WR5 3AQ J&J PHARMACY - NHS
Morrisons	Quays Park Rd, Bromsgrove, B60 3DX Business Pharmacy - NHS

Translation Services- communicated to pharmacies w/c 10 03 2025

Dear Pharmacy Colleagues

Reference: Access to translation services

DA Languages Ltd (latterly known as DALS) are a provider of interpreting services for all our contractors (including pharmacy contractors). The ICB commissions and pays for this service; it is managed by the Office of West Midlands on our behalf.

The provider website can be found here <https://dals.co.uk>.

The provider offers a range of services to support services to enable patient : Health CareProfessional consultations to go smoothly.

The services that DAL offer are:

- Telephone Interpreting ;Video remote interpreting (spoken and non-spoken);Face to Face interpreting (spoken and non-spoken)
- Translation of documents (by prior approval by the ICB)

Given the nature of patient interactions with community pharmacists, it is likely that telephone or video interpreting will be most convenient.

We recommend that contractors get in touch with DAL via clientaccounts@dals.co.uk to set up an account that will then enable them to book services. DAL team will be able to explain the process for making bookings, languages availability, technical requirements, cancellation charges etc.

In summary, **telephone interpreting** is available Monday – Friday 8am - 6pm, as well as out of hours and on Bank holidays. It is billed on a 'per minute' basis, with a minimum charge of 15 minutes.

Video interpreting is available Monday – Friday 8am - 6pm, as well as out of hours and on Bank holidays. It is billed on a 'per minute' basis, with a minimum charge of 15 minutes for spoken and 2 hours for non-spoken.

Face to face services are available Monday – Friday 8am - 6pm, as well as out of hours and on Bank holidays (this attracts an additional charge).

It is of note that cancellation charges apply for bookings cancelled within 24 hours of a booking being made for telephone and online bookings and 7 days for non-spoken bookings.

Translation Services – finally live. Feedback requested when used and how easy to register etc. To be added to the PNA.

Contraception – ICB are sending out a Qr code for patients to fill in to give feedback on service. This is optional for pharmacies but may provide useful feedback.

PFS – DHU referrals for cough listing 'cough' missing red flags, please email Rachel.Holden@DHUHealthCare.nhs.uk

Issues with PFS urgent supply being referred inappropriately. Discussion on patients being able to refer themselves in for this service. Important to use *5 and not to send patients back to start of 111 process.

Annexe D– updated , will send out to pharmacies next week (EC)

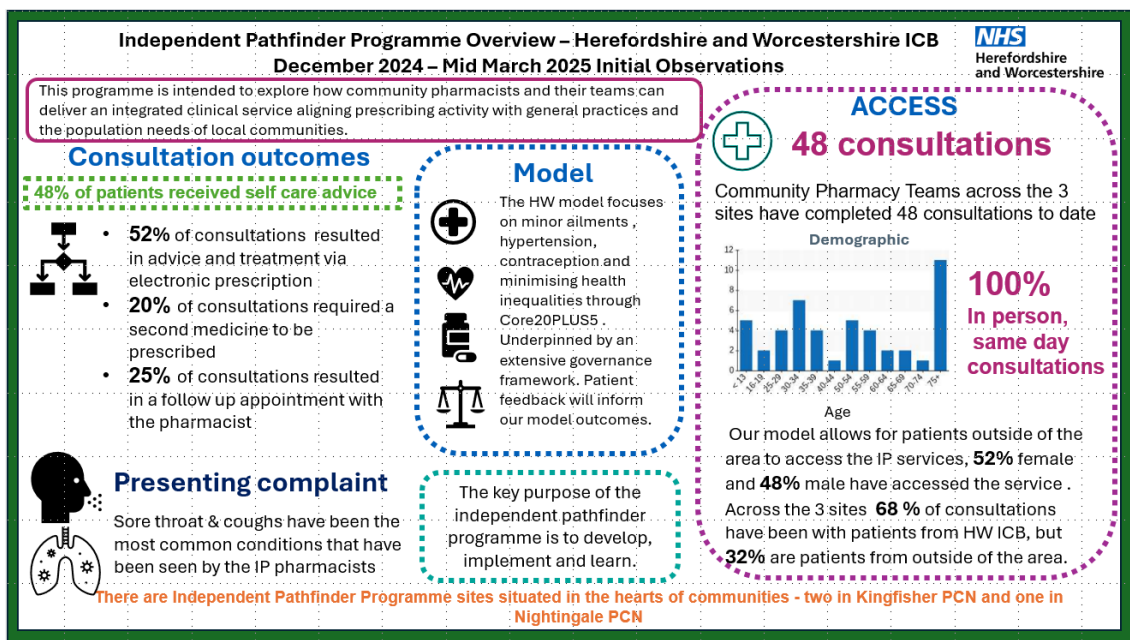
Intervention Scheme Update – HBI to pilot. JP to find out if Bromsgrove Morrisons. £14 + DT inhaler.

Intervention Scheme - update

- **Minimising health inequalities – Review of Spacer devices in Children and Young people (CYP) within Worcestershire. Provision of AeroChamber spacer devices where appropriate.**
- Review of spacer devices with patient / patient rep , Consultation conducted by pharmacist.
- Review includes ensuring the patient has a spacer that is appropriate for age, is using spacer correctly, has an asthma management plan in place (if not patient signposted to GP for full asthma review) and has access to spacer at school.
- Provision of a new spacer is included post review where required and will be reimbursed to the pharmacy at DT pricing
- PharmOutcomes profile to be updated to record the number of interventions.

MD and AR to discuss how CHS may support commissioners as SPOC – MD to comeback with some suggestions so that more pharmacies can provide things like the intervention service.

Independent Pathfinder Programme Overview



Pharmacy Connect Dashboard

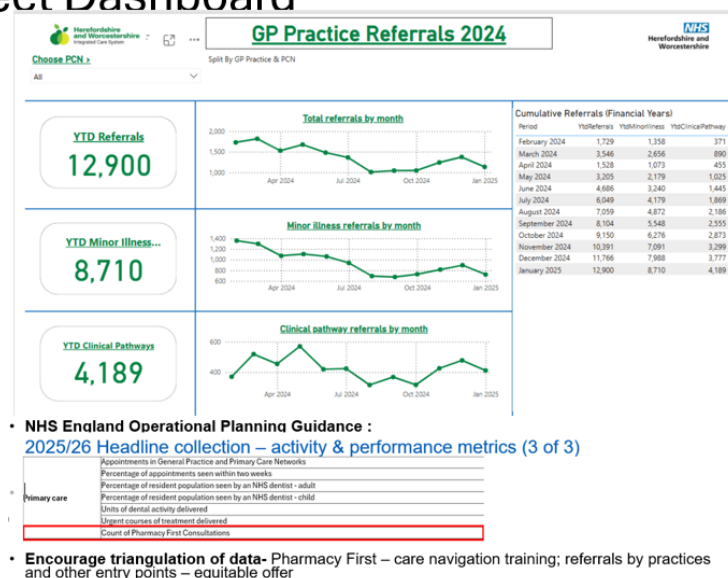
Notes:

Operational Planning Guidance FY 25 26 lists

Number of Pharmacy First
Consultations
BP checks
Oral contraception service

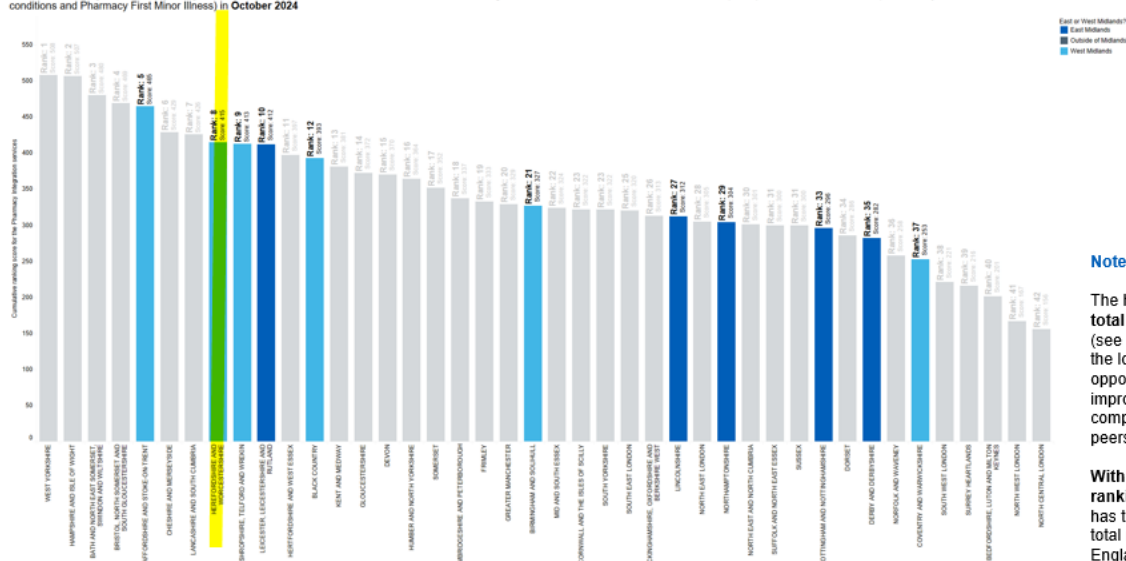
Estimated target figures
exercise completed based
on 5% uplift of previous
year activity.

N.B. Will be required to be
updated following
outcomes of consultation.
HW will receive 1.4% of
national targets



Overall ICB ranking for all **Pharmacy Integration services*** in **October 2024** (*NMS, Blood Pressure Checks, ABPM, Smoking Cessation, DMS, Flu vaccination, Oral Contraception (Continuation and Initiation), Pharmacy First 7 common conditions and Pharmacy First Minor Illness)

Overall ICB ranking for **Pharmacy Integration services** (NMS, Blood Pressure Checks, ABPM, Smoking Cessation, DMS, Flu vaccination, Oral Contraception (Continuation and Initiation), Pharmacy First 7 common conditions and Pharmacy First Minor Illness) in **October 2024**



Notes:

The higher the ICB total ranking score (see previous slide), the lower the opportunity of improvement compared to their ICB peers.

With the overall ICB ranking, a rank of 1 has the highest ICB total ranking score in England.

Joint workplan and Engagement role

- Update the Joint Workplan with the LPC
- Community engagement role to therefore reflect the above workplan
- Lisa Sembiab – end of June 2025
- WhatsApp – Pharmacy Connect Professional Group
- Community pharmacy Strategy ?

**Herefordshire
and Worcester**

Pharmacy Connect - A Herefordshire Worcester's NHS Community Pharmacy Benefit & Engagement Workplan

October 2024 to March 2025

This plan describes immediate priorities until March 2025 and invites key partners who will bring the benefits to HW ICS of national changes to and expansion of pharmacy-based services for complete

trial on **NHS England - Delivery plan for recovery access to primary care**, and is shared with HW ICS LAs, HMBs, neighbouring ICB pharmacies leads, Primary Care Networks, GP practices and NHS sites. The summary references ICB priorities through links to IG Practices, PCN Networks, NHS sites plus other Stakeholders together with enabling functions and key contacts. Updates and outcomes V/IGB Medicines and Pharmacy Board, other ICB committees and partner organisations.

COMING SOON...

ICS Community Pharmacy Primary Care Network Engagement Role

The Primary Care access and Recovery Plan (PCARP) is of high priority as a result the ICB is taking of the opportunity for involvement to ensure the requirements are realised. Acknowledging that 'ices are needed to achieve success in executing the ambitions of the plan anchoring community pillar of service delivery within the future of the primary care neighbourhood model'

tions of the role will be to:

- the gap between community pharmacy and general practice and building on momentum in HW the expansion of pharmacy-based services.
- n the great work that has already begun and leading to, facilitating increased access to complete s of care in pharmacies with good patient experience
- red at place and at neighbourhood accelerator sites with specific outcome measures e.g. sd BP checks in specific cohorts; increasing contraception services or furthering Pharmacy First

force for the future through **IP Pharmacy Pathfinder Programme**

rogramme will support preparation for the workforce of the future who will qualify as prescriber onwards

amme model: Phase 1 Minor ailments and Contraception, Phase 2 Hypertension and Phase 3 OPLUSS approach to health inequalities

Current service status

4.25 April – September 2024

Implementation of Pharmacy First in Herefordshire & Worcestershire rate from practices have been consistent with high percentage of high quality of referrals (Based ified data)

(using PEMS) – significant work to resolve disruption caused by digital delayed transmission of dived

orking with LPC to operationalise emergency department minor injury unit Pharmacy first j/hal tool – to be embossed as business as usual

take of Community Pharmacy Contribution service by patients and pharmacists providing lead – developed and commits plan for the public with widespread signposting to the public

ies 24/25 for the next 6 months

/ Development

i dashboard to illustrate trends in service provision at PCN level within IG data sharing is plus sharing of data sets as they emerge to fully understand provision and provide support ordshire and Worcestershire.

ent and Activity

orative working with wide range of providers and networks, sharing access to media assets to profile of community pharmacy services and increasing engagement and access to /services communities.

uraging referrals through structured referrals using GP IT systems, rather than verbal posting to ensure complete episodes of care

ieve ICB contributions to regional targets supplied by national team

ancement of IP Pathfinder Programme

upport our 3 awarded community sites to 'go live' with prescribing services within the scope of ur ICB model

inter pressures

Increasing volume and consistency of referrals from all settings including MIU/UEOD to community pharmacy to improve patient care and ease pressures in other locations.

Community Pharmacy Integration Lead

as	Pharmacy Integration Lead, Pharmacy First, IP Programmes, Digital, Finance	pharmacist@hwicb.nhs.uk
as	Pharmacy First, IP Programme, BP Checks Services, COVID19/LISS Ambassador	ambassador@hwicb.nhs.uk
ng	Pharmacy First, IP Programme, Contraception, DMS, Patient and Medication Safety; APR	nurse.pharmacy@hwicb.nhs.uk
ion	Primary Care Governance/Programme, NHS Community Pharmacy Contract	governance@hwicb.nhs.uk
an	Pharmacy Technician Project Co-ordinator IP Programme	technician@hwicb.nhs.uk
ab	Community Pharmacy PCN Engagement Role	pcnengagement@hwicb.nhs.uk

Pharmacy Facility and Workforce Development

a Modern need	Pharmacy Facility, Pharmacy Workforce Lead	service@hwicb.nhs.uk
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Community Pharmacy Herefordshire and Worcestershire

as Lead	Community Pharmacy IMI Chief Executive Officer	businessdirector@hwicb.nhs.uk
as Carolee	Community Pharmacy IMI Engagement and Support Officer	carolee@hwicb.nhs.uk

Alison leaving – Siobhan will be doing integration work with Sadia. GW will do the DMS and contraception work. Siobhan will also be working with Lisa. CH has landed the regulatory, rota and assurances work. Anne Hadley will be the strategic lead for the team within the pharmacy medicines team. Emma Jones will be working on the OOH contracts. GW role is around patient safety aspect also.

LS- Calls and Webinars hosted by ICB. PFS training calls were well attended. Relationship calls were attended mainly by practices, with only one pharmacy representative.

FL: Any update on Extended Care

AR: Staffs have written it, it will then go through our policy process. Bacterial conjunct + infected eczema.

Michelle Dyoss (MD) from CHS is present and explains the role her company plays in managing contracts for local services in other areas. She is introduced to AR and team.

AR: Our preference would be to have a contract with a provider to reduce the administrative burden at ICB and council level.

MD – explains CHS and how it can support with contract management. Also has well equipped two vans for roaming services.

Finally, we wished Alison well for her forthcoming retirement and presented gifts and cards from the LPC.

Happy Retirement to Alison Rogers!



At our LPC meeting last week, with colleagues from the ICB and PCNs - we said a fond farewell to Alison Rogers – ICB Pharmacy Integration and Medicines Assurance Pharmacist Lead. Alison has been huge advocate for Community Pharmacy for many years and fostered a very close working relationship between the ICB and LPC. It was lovely to be able to wish Alison a happy retirement and show her how much we have appreciated her support for Community Pharmacy teams. We will really miss you, Alison!

Strategy

We agreed to run a strategy session in July and invite ICB and PCN colleagues.

Guests leave 12.20

CPE Update

JH (CPE Regional Rep) gives brief update on the current state of play re: negotiations. Group discusses the general feeling in pharmacy now in terms of confidence in CPE and financial struggles for pharmacies. All agree that the sector urgently needs financial support.

CCA Questions – same as January

Meeting Closed at 12.40