

Community Pharmacy Herefordshire and Worcestershire (CPHW) Minutes

(open)

Worcester Woods 10th July 2025

9am – 2pm

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| PRESENT | Members: Chair Anurag Hegde (AH), Wayne Ryan (WR), Akwal Singh (AS) Paul Rowley (PR), Jeet Patel (JP), Gareth Lamb (GL) Team: Fiona Lowe (FL) CEO, Eva Cardall (EC) |
| MEMBER APOLOGIES | Amarjit Tanday (AT), Harpal Bhandal (HB), Dhiran Vhadia (DV) Sarah Frewin – resigned |
| Guests | This meeting is short committee only meeting ahead of a Strategy Session with many guests – detailed in minutes. |

1. Welcome, DOI, Minutes, AOB, matters arising

FL: minutes were approved by LPC for March and July.

LPC introduce themselves to GL, who is new to committee.

FL explains how the day will work with the Strategy section later and the guests – Conor Price (CE for Pharmacy London and also works for Taurus), Jas Heer (JH) – CPE rep, ICB – Anne Hadley (AH), Karen Payton (KP), Caroline Horton (CH), Lisa Siembab (LS), PCN – Liz Brookes, LMC – Paul Bunyon, Secondary Care Chief Pharmacists: Fozia Khan (Worcs) and Hayley Pearson (Hereford)

Declaration of interest and attendance sheets were circulated

Members in attendance have either sent in their skills and capacity audit or completed on the day.

Absentees will complete at September meeting.

We have a vacancy which has been highlighted to IPA.

FL: AOB re: marketing and dashboard options to be discussed later.

New list of subgroups and networks shared on Box (this will need revising due to SF late resignation)

2. Market Entry, PNA

PNA is out now for Herefordshire and for Worcestershire. We have 60 days to reply.

FL: Nothing very controversial in there, have come out with no gaps.

LPC discusses the function of the PNA and how it can impact pharmacy and ME if gaps are determined in the summary.

FL: Gloucester PNA is also out and with many mistakes. Awaiting Bsol.

FL updates on ME, a few more DSP applications and core hour changes. It isn't clear if core hour change application can be applied to 100hr/72hr pharmacies. JH attending later and will confirm.

3. Finance update – Wayne Ryan - closed

4. Visits

FL explains how contractors really seem to value committee visits. For those who have indicated they are happy to do more visits – then it would be great to plan these in for these local networks.

FL shares pack LPC gave those who attended the 22nd June CPCF

5. **Local Community Pharmacy Strategy Session** started at 10am, with excellent facilitation from 3 members of the ICS Academy – led by Abigail Oates. The outputs will be added to our website; an advanced copy is available on request and will be presented at the AGM on 25th September 2025. The key areas discussed during the 3-hour workshop were as follows:

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| Where are we now? |
| How would you like things to be? |
| How are we going to get there? |
| What would be your top priority actions? |
| Next steps & close |



<https://hw.communitypharmacy.org.uk/our-news/community-pharmacy-strategy-building-session/>

Lunch Break and networking 13:00 – 13:30

Meeting Resumes at 13.30

6. CPE Update – JH

JH gives update on CPE negotiations and meeting in Liverpool.

Changes to clinical pathway gateway, delay with implementation is due to IT updates.

Sore throat pathway is one of the main wins to these changes.

PQS Audit will be published imminently. Cannot be started before September 1st 2025

Spending review done. The NHS spending budget increase is at 3%, which is lower than previous years.

DT in July gone down, gone down by £50million, £13m attributed to claw back.

Sending out CO survey to collate top three priorities (contractors will also be asked at road shows) to inform negotiations.

Presentation from PA consulting – commusioned to to three pieces of work

1. Look at retained margin
2. Different funding models
3. Outcome modelling based on projections

Recrutiing for new CPE committee chair.

FL: need to know the detail of the change in constitution as per lpc makeups in August so that it is know and can inform the AGM. This has been put back and so will be standard AGM wrt accounts only.

7. **Review of morning**

AH: was a really good morning.

Asks group what their view of the benefit of the morning sessions

JP says it will depend on what progresses from this.

LPC discusses how conversation has to start somewhere and this was a good start.

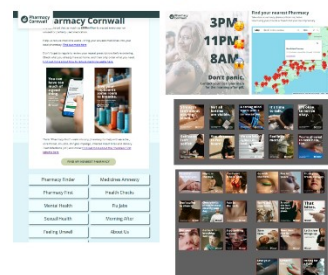
8. **AOB**

CPA and CPHW marketing and data dashboards



Marketing Proposals for Pharmacy First

- <https://pharmacycornwall.org.uk/>
- Pharmacy Cornwall represents all pharmacies across Cornwall and the Isles of Scilly
- At its core, Pharmacy Cornwall champions, supports, protects and develops pharmacy services throughout the region.
- Pharmacy Cornwall is dedicated to enhancing people's lives by improving health outcomes and ensuring the wellbeing of the local population.
- If you're looking for healthcare, you can find your nearest pharmacy here.
- If you think you need medical help right now, dial NHS 111 who will help you
- Are you a pharmacist? Contact us/ update your information at: admin@communitypharmacycornwall.org
- Reach 400,000 per month – targeted – Meta and Google



Marketing Proposal

Wordsmith Digital

- Website build and mapping pharmacies and information £2,500 HW, £3,250 CW or £5,000 joint
- Branding £1,000 per LPC or could be joint
- £400 pcm admin on website and reporting
- £400 pcm copy and social media posts development per LPC or as joint
- £500 pcm advertising budget 50:50 Meta and Google per LPC or as joint
- Test campaign – set up costs + £2,000 for 3 months testing of campaigns



CHS & Local Digital Marketing

- Have asked CHS and one other to quote for something similar

Dashboards - Data

- We get a very complicated version Midlands version from the NHS Regional Team, but it is free
- CCA are producing one – similar to the NHS one but it is national not just Midlands and will have some LPC comparators – in test have seen a demo – should be available within 2 months around £350 – £450 a year depending on how many licences
- CPE London CEO have an easier to use version – national and easier to drill down and get information – available now – £1,000 a year
- In all cases only uses NHSBSA data which is freely available and 3 months behind and all suffer from the issue that old codes not always cleaned out and for some reason Kitsons (Worcester) appears in C&W data as NHSBSA have it wrong



Marketing – LPC overall not keen to progress with marketing proposal currently but will review when C&W have theirs set up and may join at that point. JP thought funds could be better directed. ICB and Council may support if C&W works out well. Some discussion that Cornwall may have worked well due to the transient nature of some of their patients – who lacked knowledge of what was available. The thought being that H&W had more informed stable patient base. Although PNA patient survey has indicated lack of knowledge of pharmacy services in the geography. Decision not to go ahead now, but to review after C&W set up and see whether to piggyback on – would be a reduced cost to both.

Dashboard – discussion around the costs and options. FL to confirmed cost is annual and reasonable as shared resource with C&W. LPC agreed to support the most useful option – FL to arrange – currently trialling the one provided by CP. CCA demo seen – cheaper but less sophisticated – wait for further details and continue with trial in interim. Neither provides data that is different from the NHSBSA or earlier / recent or referral end data.

Meeting closes at 3pm