

MINUTES OF THE COMMUNITY PHARMACY STAFFORDSHIRE AND STOKE-ON-TRENT(CPSSOT)

held on

Wednesday 13th November 2024

Dean & Smedley, Burton upon Trent

MEMBER	CATEGORY	8 th May	10 th July	11 th Sept	13 th Nov		
Lucy Dean (LD) Chair	AIMp	✓		✓	✓		
Raj Morjaria (RM) Vice Chair	independent	✓		✓	A		
Chris Ward (CW)	CCA	✓		A	✓		
Jeet Patel (JP)	CCA	✓		✓	✓		
Indy Grewal (IG)	Independent	✓		X	✓		
Lee Ison (LI)	Independent	✓		✓	✓		
Eleanor Lawton (EL)	CCA	✓		✓	A		
Alex Zahorodhyj (AZ)	CCA	✓		✓	✓		
Helen Watton (HW)	AIMp	✓		✓	✓		
Hema Morjaria (HM)	independent	✓		✓	✓		
Ashwin Patel	CCA	A		A	✓		
Rahul Sharda	Independent	✓		✓	✓		
Simon Hay (services Manager) (SH)	Officer	✓		✓	✓		
Gillian Mason (GM) (IT Support Officer)	Officer						
Tania Cork (TC)Chief Operating Officer	Officer	✓		✓	✓		
Andrea Hawkins (AH) Treasurer	Officer	✓		✓	✓		

✓ Present / A Apologies for absence / Absent X / R Resigned/ S sick/ N/A Not applicable * Member unable to attend all or part of meeting due to attendance at a meeting elsewhere on behalf of the CP on the same day.

Morning Group Work

Members re-visited the Stakeholder Map and Communications Strategy. TC asked for amendments/comments by 6th December so that we can publish the document.

Of the 3-year planning stated within the document most of the action is in Year 1, each year we will have to review the actions using the RACI matrix.

At the end are “key pharmacy facts” – these are facts that you can drop in when you’re in a meeting. These also need to go on the front page of the website. A glossary needs also to be added.

The members went through the NHS Change Model and what this means to pharmacy and how we will respond as an LPC.

Lindsey Fairbrother, Regional Representative, North and East Midlands, joined the meeting and presented an update for LPCs.

- Vaccinations – we could do more than Flu and COVID vaccines we could maybe do shingles and RSV vaccines
- Changes to Core hours/change of ownership – this needs to be simpler. Currently it takes too long, it needs to be easier for Contractors.
- The LPC are frustrated with the duration of time that it sometimes takes CPE staff to respond to questions and queries.
- Stephen Kinnock comments – there has been no response from CPE on the comments regarding Pharmacies being private companies.
- CPE Committee composition there will be changes made to the composition of the CPE committee to decrease CCA seats by two and increase non-CCA seats by two. Whilst the changes are made to the CPE constitution non-CCA contractors have been invited to apply for two observer positions on the committee.

NI + National minimum wage was discussed.

This equates to 1.2% extra. £2,500 for each full-time employee on the minimum wage.

Finance Subgroup in January will look at the finances and evaluate our position.

We need another coach as we have no cover in East Staffs or Mercia. We need another 2 days per week. There were no suitable candidates following the initial recruitment drive.

Concession planning.

CPSSOT has now been operational for 18 months. We need to think about planning unexpected leave or absences due to ill health. We need a contingency plan.

We need to discuss whether we are happy with the current structure and also need to know what the officers do on a day-to-day basis. ACTION: Officers will compile a list of their duties.

		AGM
		<ul style="list-style-type: none">• Welcome TC welcomed everyone to the AGM. Kieran Eason (IND – Tamworth) joined the meeting.

	<ul style="list-style-type: none"> • Apologies for absence Raj and Ellie sent apologies. • Presentation of the annual report There were no questions on the annual report. • Presentation of financial statements There were no questions on the financial statements. • Questions and discussions Extended Care – ICB decided to use the money to cover their overspend. This was not agreed with and CPSSOT and other LPCs all send a strongly worded letter sent. To date there has been no reply (8 months later) • Ballot of contractors (in addition to votes received by post or email) There were 94 votes to accept the annual and financial report. • Results declared Carried. • Any other business No other business. Kieran was thanked for his attendance.
	Welcome/Apologies/Introductions/Announcements
	Chair (LD) and TC welcomed everyone to the meeting. RM and EL sent apologies.
	Declarations of Interest (Dol)
	<ul style="list-style-type: none"> • SH – Central Health • RS- Butt Lane pharmacy • HW – Cornwells pharmacy group
	Approval of minutes from previous meeting and Competition Law approval
	<ul style="list-style-type: none"> • Minutes from previous meeting were approved, signed and will now be put on the website.
	Matters arising from previous meeting
	<ul style="list-style-type: none"> • No matters arising
	Action Log
	<ul style="list-style-type: none"> • The Action log was reviewed, and it will be updated on Teams for members to access. • Action Log – members were advised to check regularly and inform AH or GM if there's a problem with access. NOTE: GM will be attending January's meeting so will be able to assist with any problems accessing teams.
	Reports
	<ul style="list-style-type: none"> • CHAIRS REPORT LD couldn't go to the Chairs meeting, but James Wood (CPE) briefed her on the meeting. LD then had the opportunity to ask James the questions that the committee had agreed on. James advised that at the meeting they discussed the composition of the CPE Committee, there are now two observers at each meeting. He advised that we should keep using CPE data and not any other data. LD asked about the £85,000 guidance limit for bank auditors. Auditors for CPE feel this won't be a problem and there are a lot of companies in the same position. James committed to checking again with the auditors. (TC and AH have now started trying to transfer money from Nationwide accounts to Lloyds accounts – this is causing problems and taking a long time) The committee agreed that any allocated funds that CPSSOT have had for a while with no movement for a while we may be able to spend. TC is looking at the MOUs to check this. Cyber Insurance – James will raise this with NPA.

Clyde and Co – we don't get the bulletin. James will mention this and ensure that we now get them.

Report Form – LF now has this so this will be used to feedback comments from the committee to James and vice versa.

We were going to elect a CCA member to the Executive Committee to ensure equal representation from all representative groups. Following previous discussion with the CCA members on the committee it was agreed that Ellie would be invited to join.

- **CHIEF OFFICERS REPORT**

- Newcastle Under Lyme collects food waste separately and this is going to be mandated to all Local Authorities next year. This will incur a cost and there is a problem concerning where to store it and potentially a rodent problem. CP doesn't generate a lot of food waste, but it could still actually cause problems.
- Extended Care Letter – we are still chasing a reply.
- Local area may push for the prescribing of 5 days amoxicillin instead of 7. A discussion was had about Gordon's original pack dispensing (OPD) session at the CPE meeting, and he will be presenting some webinars about this. Members will be encouraged to ensure that their PMR provider is going to be updated before rolling out OPD.
- LPC Conference – NHS Policy Team gave a presentation on the 10 year plan. Stephen Kinnock sent a recorded message but didn't attend in person. Soapbox Section – to be discussed later. The conference was very good for networking but TC felt that nothing was learned. Janet spoke well – she didn't really tell us anything different but we should be grateful that there is a lot of political support but it is getting money from them. It's frustrating that there hasn't been a date agreed yet to re-start negotiations. They can't agree 24/25 until they know the principles that are in 25/26. Gordon spoke about OPD and other regulatory changes.

- **TREASURERS REPORT**

Profit and Loss sheets for each month will be found in the Teams folder.

PharmOutcomes License – we now only pay on behalf of 3 companies. These have been completed for 01/07/2024 – 30/06/2025.

- **SERVICES REPORT AND CPSC REPORT**

Simon went through the slides.

Figures for October have improved. SH will check if that's across the Midlands or just CPSSOT.

Could it be that patients are presenting in the pharmacy and CP are not linking them to the electronic referral for the reason for some of the missed referrals?

We need to look at the number of rejections and reduce them. We don't, however, get an idea of how many rejections are those that have been wrongly referred to CP from the GP. This information would be useful. We need an idea of what's been sent that's out of scope.

ACTION: SH will produce a newsletter article on "How to avoid pressing reject".

What are the things that we need to do.

- * We need to ICBs to push the practices.

- * We need the Coaches to highlight the problem areas.

- * Pharmacists need to go into the GP practices to form local relationships and understand historical differences.

Hypertension – CP see a lot of patients; ABPM figures are really good. Practices are starting to use CP and are referring patients. There are some Pharmacists that won't do blood pressure and some Pharmacists aren't confident using the equipment.

Oral Contraception – 219 pharmacies registered. Now chasing 50 pharmacies who registered but haven't been active yet.

Flu – The report to 28th October 2024 states that 199 contractors delivered 32,218 vaccinations. Only Birmingham delivered more.

Trying to help support NHS with Healthy Lung project.

More pharmacies signed up to Needle exchange

Sexual Health services are struggling and trying to refer more patients to Pharmacies.

Service Coaches – they initially spent time getting to grips with the role and introducing themselves. Firstly, they focused on Blood pressure and Ambulatory, however, they are also doing work on DMS.

We are seeing positive results.

Pharmacy first – is not as visible as it was but some pharmacies have no visibility at all.

There are general themes that SH gets from the coaches, and this helps him with face-to-face communications into the surgeries. SH then feeds back to Sam and Tunde, and they try and look at individual practices, however, time and resources are a problem.

Simon showed the posters that they propose we use in Pharmacies.

- **COMMISSIONING AND STAKEHOLDERS UPDATE**

Sam Travis (ST) joined the meeting on Teams.

PC Best Practice Show – There was a talk about the anti-coagulant model with Kiran Raja.

Pharmacy Show - talking about Independent Prescriber Programme with Andrew McGrath. Both presentations were well received with lots of interest.

Our approach to Pharmacy First – working together with a focus on the collaborative work with Simon and the coaches and practices.

ST was interviewed by NHS Digital and approach to Primary care Access programme. ST talking again about our collaborative working.

Regional Comms have also approached ICB comms to see why Staffordshire is always top of the charts. Again, talked about collaborations. They are interested in the work that we do.

Health Lung check services – pilot ended. They had a webinar for those pharmacies wishing to sign up for the newly commissioned service. There are several pharmacies that are in the process of signing up to the Everyone Health SLA.

They are advertising again for Pharmacy Engagement Lead posts. There is a small amount of money to develop some collaborative models to encourage the uptake of Pharmacy First, Oral Contraception and Hypertension.

	<p>Tunde Kikiowo (TK) is working on a large piece of work round ICB workforce strategy. He's setting up a ICB workforce Group which he's happy for us to join. Key thing – developing a data base of DPPs.</p> <p>TK is also looking at more cross sector placements for CP with the local trusts.</p> <p>Members raised a query about the Repeat Prescribing Toolkit document from Royal College of GP combined with RPS, and whether there will be an engagement plan to help GPs understand what they need to do. There were concerns raised about the size of the document and whether it would be looked at properly. Sam agreed to look at the possibility of an engagement plan.</p> <p>Members also queried whether there was any work going on adding CP to any Winter Pressure communication that's going to go out to the practices. ST responded that the communication from NHSE has only just come out. It's now being tweaked locally to make common seven pathways and make it more prominent locally.</p> <p>Non-compliance to PGDs in relation to age groups that CP in Staffordshire are seeing. In two pharmacies -1 has seen 79 patients outside the specified age ranges and 1 has treated 39 outside the age range. Sam has spoken to the one pharmacy but hasn't had information about the other one. Sam will send TC the details so she can conduct her own investigation.</p> <p>Although they haven't been sanctioned yet there is a possibility that they may be.</p> <p>ST confirmed that there will be no Winter Pressure money this year.</p> <p>Rachel Bentley- Parton was going to arrange for some practice training through Connexus around Pharmacy First. Sam will check whether this is going ahead.</p>
	LOCAL BUSINESS
	MORAG
	<ul style="list-style-type: none"> They have said that they do not recommend the use of branded generics anymore. TC is waiting for Amin to find out what they agreed locally and whether they decided to adopt the practice. If they don't, they will be one of the last that don't.
	Period of prescribing – 28,56,84 days
	<ul style="list-style-type: none"> There is an increasing number of surgeries moving to 56 days prescribing. There is very little we can do if GPs want to do this. There is no evidence to suggest this will cause more waste. If you're impacted, then you can claim a safeguarding payment.
	Smoking Cessation
	<ul style="list-style-type: none"> Sam mentioned about Staffordshire. <p>In Stoke on Trent – a lot of work going on looking at reintroduction of Varenicline and Champix. The government have given councils a large amount of money to sort out smoking cessation. They will increase the number of Pharmacies that will be able to do it.</p>
	POD
	<ul style="list-style-type: none"> This has been running for ages with several practices in Meir. Meir Park and Weston Coyney also want to get added on, so it keeps it going within that PCN. They will be live in 1 week. Longton Hall Surgery want to join which is good as its outside the PCN area. That is going live in 2 weeks. <p>There are other areas that Amin would be interested in extending the POD to, but the decision has been made to stick with these few until the end of March 2025 when it will be</p>

		reviewed.
		STARs
		<ul style="list-style-type: none"> There is a PowerPoint presentation included in paperwork. Undergoing a major move called Section 75. First part has already been done. MPFT are now looking after the services and subcontracting to CPSSOT contractors. This is very successful. Second part – Now to look at management, premises and estates and pathways for treatment. We are involved in this.
		PNA -update
		<ul style="list-style-type: none"> TC working on it and this will come out to members in the new year for comments.
		Inhaler sustainability project
		<ul style="list-style-type: none"> TC working with a Consultant Paediatric and Asthma Specialist – he has this in his plans. Phase 1 – collecting baseline figures from participating pharmacies. Phase 2 – keep reminding patients to bring back inhalers when they’ve finished with them. Phase 3- Save the inhalers and someone will pick them up. They will weigh them and see what’s left in them. Money is divided up and is approximately £569 for each of the 9 pharmacies taking part. Launch event is 25th March 2025. Pharmacies in North Staffs were given £300 up front to store their Pencycle boxes Idea is to give the patients the box to post straight back. Website – Pen Recycling – they will send you a small box to give out to the patient. We need to bring this to the attention of South Staffordshire Pharmacies
		Lord Darzi – review of NHS
		<ul style="list-style-type: none"> He has done a recent review to diagnose problems in the NHS and its current performance. Long waiting times, mixed quality of care depending on where you are in the county, low productivity of staff and budget mainly going on acute care. Starvation of capital money, funding austerity, Covid/ problems with Management and lack of patient voice. Based on that report we now have NHS Change. Everyone is encouraged to complete the surveys. You can complete multiple ones as a member of public, an organisation and as a healthcare professional. Outline is things that are quick to do within next year, those to be done within 2-5 years or more than 5 years. We need to do something as an LPC. LD will do the response on behalf of the LPC. When members complete the document, mention pharmacy. Its about ideas for change. CP have lots of ideas for change.
		POLICY AND ADVISORY
		<ul style="list-style-type: none"> Community Pharmacy Workforce Survey We have waited a long time for the results of last year’s survey. Now published, figures indicate that there is a rise in the number of Locum Pharmacists and a growth in Pharmacy Technicians as well as delivery drivers. The survey for this year is now live for contractors to complete before 11th December, there was a discussion about funding for Tech Training and how they decided on the placements. No one in the meeting had been able to get funding.

CP-SSOT Committee Meeting 13th November 2024

	<ul style="list-style-type: none"> • Diagnostic Centres – Action for TC, update at next meeting • ARRS roles – ours is about supporting and improving GP services and access. Further work needs to be done. • Repeat Prescribing Toolkit – this was commissioned by NHS for the RPS to address over prescribing review. The Toolkit is to prescribe correctly and consistently, and it addresses patient safety. General opinion is that the document is too big, and people won't read it. • Pharmacy Advice Audit – 1.3 million patients are having healthcare needs addressed by Community Pharmacy. • Midlands Greener NHSE newsletter – this is a big newsletter. It shows that sustainability is stepping up to the mark. ICB have employed some sustainability leads. They've required that TC meets with them for discussions. One problem is that Sustainability costs more in the beginning and this needs mentioning. Before looking at alternatives we need to look at our practice and see what small things we can do. There is quite a bit in the Toolkit that people can do already. It was mentioned that there are different pressures for corporate companies and Independent Pharmacies.
	MARKET ENTRY
	<ul style="list-style-type: none"> • These can be found on Teams – GM updates them regularly.
	CCA questions
	<ul style="list-style-type: none"> • JP completed the CCA questions. • CCA also released their Pharmacy First insights on LPCs. Good Report.
	Actions from the Meeting
	<ul style="list-style-type: none"> • As there are a lot of actions, members were advised to log onto the Action Sheet on Teams.

	AOB
	<ul style="list-style-type: none"> • There are a lot of Pharmacists in GP Surgeries – can we use them as ambassadors. We have used them but sometimes it doesn't work out. Members could let Simon know who the ones are that are friendly. • PHS – put labels on waste but they haven't provided any labels. LD asked if members had seen this in their pharmacies. No members had.

If you are unable to attend, please send your apologies to

Tania Cork taniacork@cpstaffsstoke.org.uk or **Andrea Hawkins** andreaahawkins@cpstaffsstoke.org.uk

Date	time	Venue	chair
Wednesday 8 th January 2025	9:30	Thea Pharma, Keele	LD
Wednesday 12 th March 2025	9:30	Dean & Smedley	LD
Wednesday 14 th May 2025	9:30	Thea pharma, Keele	LD

CP-SSOT Committee Meeting 13th November 2024

Wednesday 25 th June 2025	9:30	Dean & Smedley	LD
Wednesday 10 th September 2025	9:30	Dean & Smedley	LD
Wednesday 12 th November 2025	9:30	Thea Pharma, Keele	LD

These minutes are signed as being a true record of the meeting, subject to any necessary amendments being made, which will, if any, is recorded in the following meeting's minutes.

Signed:Position:CHAIR..... Date:

Signed:Position:CO.....Date:

During this meeting, along with these minutes, there was a constant check to ensure no discussions could constitute to breaking competition law.

Signed.....position.....Date.