

MINUTES OF THE COMMUNITY PHARMACY STAFFORDSHIRE AND STOKE-ON-TRENT(CPSSOT)**held on****Wednesday 21st January 2026****Dean & Smedley, Burton upon Trent**

MEMBER	CATEGORY	14th May	25th June	10th Sept	12th Nov	21st Jan
Lucy Dean (LD) Chair	IPA	✓	✓	✓	✓	✓
Raj Morjaria (RM) Vice Chair	independent	✓	✓	✓	✓	½ day
Chris Ward (CW)	CCA	✓	A	A	✓	A
Jeet Patel (JP)	CCA	✓	✓	1/2 day	✓	✓
Indy Grewal (IG)	Independent	A	✓	A	✓	✓
Lee Ison (LI) – Services Manager	Independent	✓	1/2 day	✓	✓	✓
Eleanor Cogan (EL)	CCA	✓	✓	✓	✓	✓
Alex Zahorodhyj (AZ)	CCA	✓	✓	A	✓	R
Rafat Tabar	CCA					✓
Helen Watton (HW)	IPA	✓	A	A	✓	✓
Hema Morjaria (HM)	Independent	A	✓	A	✓	✓
Ashwin Patel	CCA	A	A	✓	✓	½ day
Rahul Sharda	Independent	✓	✓	✓	✓	✓
Gillian Mason (GM) (IT Support Officer)	Officer					
Tania Cork (TC)Chief Operating Officer	Officer	✓	✓	✓	✓	✓
Andrea Hawkins (AH) Treasurer	Officer	✓	✓	A	✓	✓

✓ 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.

Lindsey Fairbrother (LF) – CPE Regional Representative for East and North Midlands Region

CPE Update – Summary of Presentation and Discussion

LF joined the meeting via Teams and delivered an update with accompanying slides available on Teams.

Key Updates from CPE

- Overview of the November CPE Committee meeting, including the introduction of new committee members.
- Preparations for the upcoming CPCF negotiations for 2026/27, supported by sector polling and wider engagement.
- Ongoing policy development and workstreams.
- Continued support for LPCs and opportunities for involvement.
- Members were invited to share any comments or feedback on the LPC Conference directly with LF.

Discussion Points

- **Sector pressures:** Pharmacy numbers have fallen by 8% since 2021. Although funding has increased, rising workload and costs mean the overall outlook is still challenging.
- **Engagement and advocacy:** Members discussed the potential benefits of gaining GP Support. It was noted that CP retains strong public support, and there may be opportunities to encourage public lobbying on key issues.
- **Workplace abuse:** CPE is gathering examples to support national work on tackling abuse in the workplace.
- **Category H:** Members asked whether CPE has undertaken modelling. Product details have not yet been released; CPE will continue to press NHS for clarity, and LF will follow this up.
- **Drug shortages:** Concerns were raised about the impact of shortages and whether funding could be redirected more effectively.
- **Business rates:** CPE continues to challenge the government on the classification of pharmacies, noting they are not treated as small businesses.
- **Accelerated payments:** Members highlighted that current payment timings and levels are insufficient and may not align with when funds are needed.
- **Contract length:** Some members expressed reservations about a 12-month contract, particularly given the absence of a confirmed negotiation start date across primary care sectors.
- **IP Pathfinder:** Members noted the lack of a long-term plan. LF has a scheduled 1:1 meeting with NHS to discuss concerns.
- **LPC Conference venue:** Members felt that while the hotel was of good quality, the cost was high and the London location creates financial and travel barriers for many contractors.

	Welcome/Apologies/Introductions/Announcements
	Apologies from CW, RM (Half Day) and AP (half day?)
	Declarations of Interest (DoI)
	Those declaring an interest with Market entry was noted
	Vent, Validate, vision – current affairs
	<p>A number of conversations took place to give committee members the opportunity to discuss current affairs.</p> <p>RPS Credentialing</p> <ul style="list-style-type: none"> • Members expressed strong opposition, noting it appears hospital-focused and on newly qualified IPs, which they felt is inappropriate without sufficient experience. • Members felt new IPs should prioritise consolidating their role as qualified pharmacists first. <p>Action: Raise at the meeting on 17 February at the Staffordshire workforce.</p> <p>STARS Service</p> <ul style="list-style-type: none"> • Ongoing concern that there is no out-of-hours contact number, causing operational difficulties. • TC has raised this and it is included on the Action Plan. • Members described the service as outdated (9–5 only) and highlighted continued frustration with scripts being issued on Wednesdays, creating pressure within Pharmacy. <p>Business Rates</p> <ul style="list-style-type: none"> • To be raised with CPE and escalated to CLOT.
	Approval of minutes from previous meeting and Competition Law approval
	<p>The minutes of the meeting held on Wednesday 11th November 2025 were AGREED as an accurate record of the meeting.</p> <p>During this meeting, along with these minutes, there was a constant check to ensure no discussions could constitute to breaking competition law. The competition lead for this meeting was Ellie Cogan. The minutes of the CPSSOT meeting are therefore APPROVED.</p>
	Matters arising from previous meeting
	None
	Review of Action Tracker
	<p>The Action Log was reviewed, and it will be updated on Teams for members to access.</p> <p>Members were reminded to check it regularly and notify AH or GM if they encounter any access issues.</p>
	Reports
	<p>Chair’s Report</p> <ul style="list-style-type: none"> • No actions or networking to report. • LD noted the CPE conference meeting was interesting but but did not provide any meaningful take-aways. It was good to network with other LPCs though. <p>Chief Officer’s Report</p> <p>POD</p> <ul style="list-style-type: none"> • POD is due to close in 2027, raising questions about the value of delivering webinars on their work at this stage. <p>National Neighbourhood Health Implementation Programme</p> <ul style="list-style-type: none"> • A new neighbourhood has been created in Whitfield (covering Chesterton, Fegg Hayes and

	<p>surrounding areas).</p> <ul style="list-style-type: none"> • No funding is currently available. • A frailty pilot is running without allocated funding, focusing on asking patients about their medicines. • Noted that ageing progresses more quickly without social interaction. <p>PNA</p> <ul style="list-style-type: none"> • Meeting held with councillors in Leek regarding the lack of pharmacy cover after Saturday evenings. • TC was surprised by the limited understanding and awareness of CP shown by councillors. TC helped them understand the way CP contracts and funding work. <p>Treasurer's Report</p> <ul style="list-style-type: none"> • Profit and Loss sheets are available on Teams. • Further refinement is needed to ensure they reflect the financial position accurately. A meeting is scheduled with a new accountant/Xero expert to address ongoing issues. • Xero subscription has decreased to £60 per month. • Exploring the use of HMRC's free payroll service as we have fewer than 10 employees. • Recap provided on the CPE Finance briefings (14 January); slides will be uploaded to Teams. • Potential Corporation Tax liability to be explored further in a meeting with Dains. • Indicative CPE levy figures for next year have been received; these remain illustrative until confirmed after 9 February. • Additional funding received from ICB for a 3-month extension of the PCN Engagement Lead role. <p>Services Report & CPSC Report</p> <ul style="list-style-type: none"> • LI presented the Services Report. • Threshold payments: Dean & Smedley are the only chain achieving 100% in the Midlands. • £90,000 of unclaimed funds identified; LI has requested Staffordshire-specific figures. • Flu: CPSSOT achieved the highest results. • COVID: Strong performance also reported. • DMS: Need to increase activity to secure fees. UHMS do not use PharmOutcomes, so we are not receiving the referrals from them. • Coaches are reviewing pharmacies not meeting thresholds; contractors should also monitor upper thresholds. • Feedback from a recent Coaches visit lacked detail. The Contractor felt they need to provide clearer information, including data on what is working well and what needs improvement.
	<p>LOCAL BUSINESS – DISCUSSION ITEMS</p>
	<p>A Prescription for Success Launched at the conference; based on work from the King's Fund and Nuffield.</p> <p>Contractor Composition and LPC Representation Contractor composition remains unchanged. Query raised with NHS whether we are receiving the correct levy amount. TC is awaiting a response.</p> <p>POD Decommissioning</p> <ul style="list-style-type: none"> • Significant investment went into commissioning the service, and substantial costs are now being spent on decommissioning. • 75% of prescription ordering is currently done by GPs. • Guidance needs to be issued to contractors advising them not to take on re-ordering. • Concerns raised about patients unable to access surgeries or online services; NHS unable to

provide numbers affected.

- Many surgeries still do not accept prescription requests via email.
- **Comms:** Access to the Digital Toolkit will be highlighted in the newsletter.

LPN-Funded Projects

- **Workforce Research Project:** Exploring barriers; potential for clearer guidelines.
- **Dermatology Pilot:** Running well; MOUs due to be signed. Simple acne service.
- **Shropshire AF Service:** Redesign underway; £15k budget for equipment replacement.
- **NHS App Awareness:** Proposal to allocate budget for patient promotion; TC felt this should not come from CPSSOT funds.
- **IP Evaluation Report:** Noted.

Future Funding & Training

- Media training available for LPC leaders, chief officers and chairs scheduled for 31st March; owners' training scheduled for 26 January and 10th February.

Local Funding Potential

Obesity Pathway Innovation Programme (OPIP) – Stoke-on-Trent

- ICB has submitted a £7m bid; outcome expected 30 January.
- If successful, CPSSOT hopes to receive a share of the funding.

Drugs & Alcohol – OHID Funding

- Funding available; discussions ongoing on how best to allocate it.
- Community Pharmacy plays a role in early prevention and follow-up.

Sexual Health (Stoke)

- TC is a key speaker.
- Discussions include implants, injectables, and rising STI rates—particularly syphilis in Staffordshire.

NHS Health Check Programme

- Funding confirmed for 3–5 years.
- Checks for 40–74-year-olds in Staffordshire (not Stoke) who haven't had a check in the last 5 years.
- Any trained staff member can deliver checks; face-to-face training required.
- 12 machines available across 6 areas; each machine costs £500.
- Financial modelling shows CP earns approx. £10 per 30-minute consultation.
- If CPSSOT supports the programme, TC will issue an EOI and select participating pharmacies (open to Burton and Tamworth).
- Pharmacies must complete 30 checks per month to retain the machine.
- GPs may also deliver checks.
- Claims will not be paid if the postcode is outside Staffordshire or if the patient has had a check within 5 years.

GPPhC – Supervision Changes and draft rules for Responsible Pharmacists and Superintendent Pharmacists

- • Under supervision changes concern was raised that pharmacists are unpaid during lunch despite being responsible for scripts handed out.
- General view: little practical change from current arrangements.
- Draft rules for Responsible Pharmacists and Superintendent Pharmacists reviewed. TC to draft a response from LPC, but will wait for CPE's response first.

Category H

- Significant impact on Community Pharmacy: items being moved from Category C to Category H, reducing margins.

	<ul style="list-style-type: none"> • Government perception remains that pharmacies have financial capacity because services continue to be delivered for free and empty pharmacies are still being purchased. • Drug Tariff due 26 February; it is believed that the list is likely already finalised although not published yet. <p>Action: Reshare briefing with contractors and request modelling from CPE.</p> <p>Patient-Facing Website Proposals</p> <ul style="list-style-type: none"> • Central Health quoted £2,500 for setup (10 pages) and £205/month for maintenance. • Members agreed not to proceed. • CPSSOT will monitor Coventry & Warwickshire’s PFW for learning. <p>Stoke-on-Trent Flu Vouchers</p> <ul style="list-style-type: none"> • Proposal for all SOT City Council staff to receive flu vaccinations via community pharmacy. • Recommendation to open the scheme to all pharmacies, not a select few. • Need to review the PharmOutcomes module and ensure contractors use the correct one. • SOT CC must pay for vaccinations even if staff are otherwise eligible for a vaccination from the NHS. • Identification method to be agreed: paper voucher, email, or lanyard.
	Policy and Advisory – Information only
	Market Entry
	Declaration of Interest – RS and JP
	Confidential Matters
	See separate sheet
	CCA, IPA questions
	AP agreed to go through the CCA questions HW agreed to go through the IPA questions – it was raised that these had not changed for a long time. There is an IPA Rep meeting in March and LD agreed to raise this.
	Subgroup Reports
	<p>Communications Sub Committee Pharmacy Rag Rating was approved. LI will create a survey to send out, using Area Managers where appropriate. Coaches – more structured questions will be developed for use during Pharmacy visits. Social media – agreed not to prioritise this at present. More resource will be directed towards WhatsApp and the Newsletter Social media activity will remain under review.</p> <p>Governance Sub Committee LP South Yorkshire website was noted for strong content on changing patient nominations. The subgroup will contact them to explore whether we may use or adapt this material. Continuing work on the Health and Safety Policy</p> <p>Finance Sub Com RM, AH and TC attended the CPE Finance Briefings. It is predicted that CPE will increase the levy by 3%. Discussion held on whether this increase should be passed on to Contractors. A committee vote was held and it was agreed that the levy will be increased. CPE will be asked to explain why the levy is being increased. TC will raise this at CLOT.</p>

CP-SSOT Committee Meeting 21st January 2026

	Reserve Policy – agreed that we do not need one at present. Noted that if a merger occurs in the future, redundancy costs may need to be met.
	Review of Logs and Actions
	The Logs and Action Plan are on Teams and available to view at any time.
	AOB
	<p>Workforce Survey Noted that the additional optional data is not aligning with the main dataset. This will need to be reviewed to identify the cause of the discrepancy</p> <p>Business Rates The LPC needs to agree on next steps for how the LPC can support contractors with petitioning about the increase in Business Rates It was proposed that contractors write to local MPs to highlight the issue. Noted that Community Pharmacy cannot pass these expenses on, unlike many small businesses which received protections that CP does not. RS has written to his local MP and will share the letter with TC. TC will circulate the letter to the full committee.</p> <p>Research Participation Keele University is undertaking a research project exploring why Community Pharmacies do not take part in research. RS has volunteered to take part in the study</p>
	Confirm next Meeting
	Wednesday 11th March 2026 at Thea Pharma, Keele

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

Tania Cork taniacork@cpstaffsstoke.org.uk or Andrea Hawkins andreaawkins@cpstaffsstoke.org.uk

Date	time	Venue	chair
Wednesday 11 th March 2026	9:30	Thea Pharma, Keele	LD
Wednesday 12 th May 2026	9:30	Dean & Smedley	LD
Wednesday 8 th July 2026	9:30	Thea Pharma	LD
Wednesday 9 th September 2026	9:30	Dean & Smedley	LD