## DORSET LOCAL PHARMACEUTICAL COMMITTEE

5th November 2020

Zoom - Remote Meeting

**Attendees:-**

**Independent:-** Robin Mitchell - Chair, (RbM), Roger Mitchell (RgM)

**CCA:-** Janette Best (JB) Di Wood (DW), Jane Hallett (JH), Gabi Horvath (GH), Jose Aguiar (JA), Nabeel Hussain (NH)

**AIMp:-** Richard Maiden (RhM)

**In attendance**

Amanda Moores (AM) Chief Officer, Joao Da Cal (JDC) Services & Implementation Lead, Sara Diamond (SD) Administrator

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| 08.30 | 1. | **PRESENTATION –** Jane Henly, Orion PharmaJane.Henly@orionpharma.com**Topic:** Easyhaler and support platform for HCPs and patients WEHALE.LIFE. |  |
| 08.45 | 2. | **PRESENTATION –** Michael Baker, Boehringer-Ingelheimmichael.baker@boehringer-ingelheim.com**Topic:** Respimat Reusable |  |
| 09.00 | 3. | **WELCOME, APOLOGIES FOR ABSENCE** * Apologies for absence – Gary Warner, Frank Dwomoh & Gabi Horvath from 1pm
* Action Plan (RhM)
* Time Keeper (JA)
* Conflicts of interests – a request for any LPC members interests not already declared
* Expenses form to be completed and submitted to Treasurer via email
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| 09.05 | 4. | **MEMBERS MOMENT**Members talked about what has been working well within their pharmacies/companies and what concerns they have.Topics discussed were:\*Members talked at length about their concerns around the morale, resilience and the level of motivation out there in the community at the moment. The mental wellbeing of our pharmacists and pharmacy staff is a real concern. The pressures and level of stress our pharmacists are under is not sustainable. *\**The increase of abuse witnessed from patients is unacceptable - What can we do as an LPC to best support contractors during this second lockdown?\*Supporting collaborative working.\*The need to improve contractor engagement and our communications to contractors without increases to pharmacy workload.\*Concern around keeping pharmacies open with the lack of staff to ensure patients get what they need. \*PQS domains – Ensuring our PCN leads are on top of their PQS points regarding Flu and Business Continuity.\*Reinvigorating work with our PCN’s and more support given by LPC mentors.\* Working collaboratively with GP practices with eRD, GP CPCS and PCNs.\*Continued support for eRD\*GP CPCS – how to best support the PCN’s who are going live.  |  |
| 09.35 | 5. | **MINUTES OF DORSET LPC MEETING 18.09.2020*** Accuracy - No amendments received. Members agreed this was an accurate reflection of the meeting.
* Review of Action Plan:

\**Any specific topics to note and discuss in Members Moment send to RbM* – Only 3 responses received. \**Draft a letter to MPs to relay concerns in the EY report regarding potential pharmacy closures & impact on Dorset residents* – Not a huge appetite for this currently. PSNC have many useful resources available we can draw on, if we do decide to move forward. Members agreed no further action at this time.  | **ENC A****ENC B** |
| 09.40 | 6. | **Matters arising from minutes of 18.09.2020 (for items not elsewhere on the agenda and/or identified by members prior to this meeting** –SAIL Contract; JDC requested an amendment to his SAIL contract to move from a 3 month notice period to a 1 month notice period – All members agreed to this change. JDC to make the amendment for RbM to sign off.  |  |
| 09.50 | 7. | **Matters arising from reading list – see separate circulations (for items identified by members prior to this meeting and placed on supplementary agenda if necessary)** - None | **ENC C** |
| 10.00 | 8. | **LPC MEMBERS*** CCA new member – Members welcomed Nabeel Hussain to the committee. Nabeel has joined the committee as the newest CCA representative. Nabeel is a manager with Lloyds Pharmacy.
* Member engagement & response rates

Members all agreed actions during the last meeting (under item 15 Prioritising workload) which were not responded to. We appreciate the huge demand currently however, the actions are ultimately there to support contractors. It was agreed moving forward we need to only agree to actions that members can realistically respond too. AM & JDC are only able to fulfil their roles if members provide the information required.All agreed positive ways to move this forward, including to have more specific and focused actions, which only certain members need respond to. It was also suggested, where applicable, to have shorter deadlines that need to be actioned within 7 days. Members discussed what limits they have on their time, to be able to fully commit in the way they want to and the frustration this brings. **ACTION:** Ensure action plan deadlines are set within seven days, if appropriateMembers to please refer to the minutes from the October Steering Group meeting stating we need to look at what is realistic for us going forward and try and establish a better process or a committee structure that is more able to keep up with the amount of work coming in. All options need to be explored and any changes must be in place by April 2022.  | **ALL** |
| 10.30 |  | **COFFEE** |  |
| 10.55 | 9. |  **FINANCE (RgM) –** Members reviewed the mid-year accounts. Income total at £85,000.00 of contractor levies received in the first 6 months. £1,200 received from meeting sponsorship. £985.00 admin fee to CPSW. £11,480.00 relating to funding received to support GP CPCS pilot. Total income of £98,667.00 received.There has been an increase this quarter due to meeting expenses attended by the Chair, but the prediction for the end of year accounts is we expect to break even. Treasurer confirmed all was in order. |  |
| 11.35 | 10. | **DORSET CARE RECORD –** Off the back of our LPC meeting in September and agreed at our October Steering Group. AM has gone back to the DCR programme board with our estimation that members will support 30 pharmacies to sign up to DCR and go live by March 2021. Each member is to support 3 pharmacies to sign up. We need to be mindful to the fact the Discharge Medicines Service goes live in January and access to the DCR will support pharmacies to deliver that service, so we will have to look at which pharmacies we support and how we are going to approach them. To help support us, PSNC have taken this on centrally and published an article all about the DCR. They have also put together a checklist we can share with our pharmacies.**ACTION:** Review checklist for DCR and provide comments to AM**ACTION:** SD resend DCR registration email to members for reference **- COMPLETED** | **ALL****SD** |
| 12.00 | 11. | **SAIL UPDATE (JDC) –** The two flu meetings JDC has been attending are the South West Flu meeting and the Dorset flu meeting. The weekly Dorset meetings have been very productive with lots of local information and contacts. PHD are involved with these meetings and have made requests around flu vaccinations for certain client groups, who are not those included in the national guidelines. There has been some really great and positive work completed around the Weymouth & Portland GP CPCS pilot which has also given the opportunity for building relationships within that locality. Some challenging pieces of work have arisen from covering COs absence for leave. HEE requested LPC involvement in promoting the opportunity for HEE funded Non-Medical Prescriber courses. There were 19 applications for 5 available places. It is hoped further places will be made available in future. Covid vaccination meetings are now in place, and there are discussions about how community pharmacy can support the vaccination of the population in Dorset, when available. Members discussed viability of pharmacists being released to participate in COVID vaccinations. **ACTION:** Provide feedback on releasing pharmacists to provide COVID vaccinations**ACTION:** SD resend the buddy list to members and all pharmacies. | **ALL****SD** |
| 12.15 | 12. | **NHS DORSET CCG UPDATE - Katherine Gough**eRD – In the new SOP it states that pharmacy will continue to support eRD. CCG are keen to support and promote this and recognised the amount of work community pharmacy has put into this. Members raised a concern of “1 of 1” eRD prescription being issued, this is still causing issues. KG to look into this, as it has already been brought up with the practice by the pharmacy.GP CPCS – Thank you to all who were involved with the pilot. KG trying to get clarity from NHSE&I on where they see CCG’s role locally in moving this forward to the next phase. NHSE&I have advised they have an implementation plan in place which will be rolled out in the next month or so. PCNs/Working together – Practically with COVID, please feedback if there are any challenges talking to the PCNs. SOP is coming and will be shared with Clinical Directors and Network Pharmacists. No change yet on the rapid testing process until the relevant person returns back to the business next week. Workforce – We are constantly looking out how to increase our workforce. It is likely, in the very near future, we will be receiving requests for community pre-reg pharmacist working in combination with other providers. Request is to please talk to the networks to see if there is an appetite for joint posts. It will move very quickly, so please start having these conversations now.Off Scripting – There is a lot of pressure at the moment to go onto an on-pos type system for dressings. There will be an official consultation with community pharmacy, but KG keen to have some early discussions with the LPC. Avian flu – There has been a report of an outbreak, (not within Dorset county) but in the South East. We have FLUOOS scheme in place, which can support 1 or 2 cases, but if a whole farm was to go down, we would have an issue. No action required at this time, but if there was a local outbreak, we would have to get something in place quickly. |  |
| 12.45 | 13. | **PRESENTATION –** Amy Gates, Kora Healthcare Amy.Gates@korahealthcare.com**Topic:** Fluomizin video |  |
| 13.00 |  | **LUNCH** |  |
| 13.30 |  | **Annual General Meeting (AGM)**To approve the Annual Report & Accounts 2019-2020.Four attendees voted during the AGM. Roger Mitchell, 3 votes for Wessex Pharmacies. Robin Mitchell, 1 vote for Victoria Park Pharmacy. Richard Maiden, 1 vote for Day Lewis, Bear Cross. Jane Hallett, 2 votes for Morrisons. 71 postal votes received by the deadline. Total 78 votes for. None against.Annual Report & Accounts 2019-2020 accepted.**ACTION:** SD to upload PDF copy of Annual Report and Accounts to LPC website. SD to send a copy to PSNC. | **SD** |
| 13.45 | 14. | **PUBLIC HEALTH DORSET –** AM presented data to members which highlighted the reduction in service for EHC, smoke stop and supervised consumption since the first lockdown in March. Members split up into groups to discuss the impact of cost of service, during COVID and how to move forward with this:EHC – Members had conversations around how things have changed and what the additional cost were. Additional PPE for face to face consultations, the need to clean down a room in between consultations. Discussions about “fees” for supplying the condoms. If the consultation is done over the phone then that means other patients will not be able to get through. And will these telephone conversations be conducted in a confidential space, with access to PharmOutcomes? Challenges with meeting the opening hours SLA, what with COVID outbreaks and staff shortages. One interesting suggestion is if pharmacist has been furloughed/working from home and not in the registered premises, could they conduct the telephone consultation from home and just instruct the premises which product to supply? National accreditation would be very advantageous. The group agreed there are pros and cons to telephone consultations.Smoke Stop – Currently at £30.00 for enrolment, the initial face to face and taking them through to a 4th week quit. From there you steer them through to 12 weeks with less interactions. Face to face would be preferred, at least for the first 4 weeks, just so you get the quality interactions and proper support for the patient, then it could potentially move to telephone consultations. Again, there would be an increase in costs for PPE. Clean down of the room and to allow an appropriate amount of time for the room to have clean air circulated. Cost implications if we need to restart CO monitoring. Supervised Consumption – Very difficult to come to any definitive answer. All agree what we push back to PHD has to be realistic, smart and work well for pharmacies.**ACTION:** Consider COVID impact on supervised consumption. Send over one thought on the topic to JDC. | **ALL** |
| 14.45 | 15. | **WORK PRIORITIES** * PCNs – Emails sent out to PCN Leads offering to host/support evenings of which included resources and surveys to assist them.

**ACTION:** Check in with your PCN Lead to see how they are progressing. Check that they have received paperwork and if they require Zoom meeting.* PQS - As agreed we will send out reminders via email but will focus on signposting and PCN domains.
* GP CPCS – National service is now live. If a pharmacy is doing NHS111 they are doing GP CPCS, there is no sign up. Pilot has worked well in Weymouth & Portland and data coming in shows the service is working really well with 172 referrals since the live date. Very positive feedback given by JH. We are waiting to receive the details of NHSE&I Implementation Plan for the service and if there is any funding/resource to support. There are a number of PCNs in Dorset that have expressed an interest in going live rapidly. We have resources we can use, from the Weymouth & Portland pilot, to use to support these PCNs. The CCG and LPC would look to work together to support the PCNs with the new service. There are discussion about whether it would be possible to have a PharmOutcomes license to cover all practices and pharmacies to do this. There is currently no funding for this.
* Flu service – Pharmacies have done brilliantly so far. In the

South West 177,724 flu vaccinations have been administered. There have been massive issues around stock but the hope is the national stock pile will be released next week in some areas. | **ALL** |
| 16.00 | 16. | **AOB****HEE –** HEE are offering the opportunity for Health Champion training support. Members discussed the benefits for the training and agreed that it would not be feasible before April 2021. Training would be delivered by Pharmacy Complete and all that would be required of us would be to disseminate the information. **Rota Payments –** NHSE&&I South West have been doing a review of Rota Payments due to the massive variation across the South West. They have proposed increasing Special Bank Holiday payments to £350 per hour and normal Bank Holiday payments to £275 per hour.**Breach Notices –** NHSE&I SW have shared some suggested correspondence to inform contractors they plan to be far stricter around breach notices and increase the punitive fines. This has been pushed back firmly by LPC COs in the SW and further discussions are due to take place. |  |
| 16.10 |  | **Meeting closed** |  |
|  |  | **Dates of Steering Group Meetings 2020-2021:**07-01-21, 25-02-21**Dates of Dorset LPC Meetings 2020-2021:**14-01-21, 11-03-21**All meetings at currently being held via Zoom until further notice.**  |  |