**Liverpool LPC Agenda – December 2020**

**Present Attendance Statistics 2019/20**

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|  | **Name** | **Designation** |  | **Members** | **Apr** | **May** | **Jun** | **Jul** | **Sep** | **Oct** | **Dec** | **Jan** | **Mar** | **Attendance** |
|  | Gemma Whitehead (GW) | Member / Chair | GW | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |  |  | 100% |
|  | Anna Mir (AM) | Member / Vice Chair | AM | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | x |  |  | 85.7% |
|  | James Forshaw (JF) | Member / Treasurer | JF | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |  |  | 100% |
|  | Dave Sanchez (DS) | Member | DS | x | x | ✓ | ✓ | ✓ | ✓ | ✓ |  |  | 71.4% |
|  | James Moir (JM) | Member | JM | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |  |  | 100% |
|  | David Porter (DP) | Member | DP | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |  |  | 100% |
|  | John Davey (JD) | Member | JD | ✓ | x | x | ✓ | ✓ | ✓ | ✓ |  |  | 71.4% |
|  | Leah Davies (LD) | Member | LD | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | x |  |  | 85.7% |
|  | Peter Beeley (PB) | Member | PB | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |  |  | 100% |
|  | Dave Jones (DJ) | Member | DJ | ✓ | x | x | ✓ | x | ✓ | ✓ |  |  | 57.1% |
|  | Matt Harvey (MH) | Chief Officer |  |  |  |  |  |  |  |  |  |  |  |
|  | David Barker (DB) | Engagement Officer |  |  |  |  |  |  |  |  |  |  |  |
|  | Thomas Wareing (TW) | Business Support Officer |  |  |  |  |  |  |  |  |  |  |  |

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|  | **Item** | **Detail** | **Time** |
| **1** | Welcome, introductions and housekeeping | Declarations of interest, Nolan Principles, fire safety and turn mobiles off. | **9:30am** |
| **2** | Apologies for absence | To receive | **9:32am** |
| **3** | Minutes of the last LPC meeting | To confirm as a true and proper record. | **9:33am** |
| **4** | Actions of minutes | To discuss | **9:35am** |
| **5** | LPC business | 5.1 Care at the Chemist Update  5.2 GP CPCS Update  5.3 Flu/COVID Vaccination/Mass testing Update  5.4 Attendance by James Woolgar, Sexual Health Commissioner, Liverpool City Council.  Break    5.5 Attendance by Ian Cubbin, PSNC Local Representative  5.6 Pharmacy Quality Scheme Update  5.7 Dashboard  5.8 Liverpool City Council Update: Health Protection Board Vitamin D Future commissioning relief payment clawback  Lunch  5.9 Sub-Group Working  5.10 Attendance by Tom Knight, Head of Primary Care, NHS England and NHS improvement  5.11 Officers reports  5.12 Regional Joint working group update  5.13 Contract update  5.14 Forthcoming meeting attendance  5.15 Forthcoming holidays | **9:45am**  **10:00am**  **10:15am**  **10:30am**  **11:00am**  **11:15pm**  **12:00pm**  **12:15pm**  **12:30pm**  **1:00pm**  **2:00pm**  **3:00pm**  **3:30pm**  **3:35pm**  **3:38pm**  **3:41pm**  **3:43pm** |
| **6** | Finance | 6.1 Treasurer’s Report | **3:45pm** |
| **7** | Any other business |  | **3:55pm** |
| **8** | Date and time of next meeting | Thursday 3rd December via Virtual Meeting | **Close 4:00pm** |

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| **No.** | **Item** | **Action** |
|  | This meeting took place on Zoom. |  |
| **1** | **Welcome, Introductions and Housekeeping** |  |
| 1.1 | No members declared a declaration of interest. Members were asked to keep phones off or on silent and to turn screens off when taking phone calls etc. |  |
| **2** | **Apologies** |  |
| 2.1 | AM & LD sent their apologies for today’s meeting. |  |
| **3** | **Minutes from the last meeting** |  |
| 3.1 | The committee went through the minutes of the last meeting and the minutes have been signed off as a true and accurate record. **TW to add minutes to the website.** | **Action - TW** |
| **4** | **Matters arising / Action from previous minutes** |  |
| 4.1 | MH has sent his job description to members and they are happy with it.  MH has not completed the risk assessment yet as he is still clarifying the parameters.  An update to the DOI was addressed and members are happy to discuss this during the sub-group section and have it amended to include a section for other non-business-related interests. All members will update this in April. GW and TW to update their DOI as soon as the new wording is added and signed off.  MH has approached GP’s and PCN Leads over GP CPCS, but no one has wanted to engage yet.  MH has spoken with PCN leads and they have been reminded to use Teams and keep it updated.  MH informed members that PANAM has had a dummy referral sent to Green lane. It is almost ready to go once payments and claiming has been sorted.  All members have replied with their GDPR documents and they have been uploaded for record keeping.  MH informed members that the list of stakeholders has not been completed yet. He will hopefully have it done by the January meeting.  Objectives for the officers have been completed and agreed by members.  JF email has been changed successfully.  MH has not asked about CCG funding being used for PCN Lead’s to complete GP CPCS engagement work yet, as there are various offers coming from NHS England and NHS Improvement for this. | **Action – MH**  **Action – GW & TW** |
| **5** | **LPC Business** |  |
| 5.1 | CATC update  MH referred to the 4 new PGD’s since the last meeting. They have been approved at all stages with the CCG and the commissioning has been approved. MH asked if members have any questions about the PGD’s but there were no questions.  Members have read the specification. They are happy with the £15 remuneration and are happy to sign it off. |  |
| 5.2 | GP CPCS update  NHS England and NHS Improvement have funding for GP CPCS training. Each session is 4 hours and there will be 1 sessions worth for every PCN. Depending on the size of the PCN, there will be extra sessions available. There will be four sessions available for 30% (3) of our PCNs. This still leaves a big gap in training for the other PCN’s.  NHSE&I are also proposing to put training funds into the joint LPC account for Cheshire & Merseyside to aid with training. NHSE also have clinical advisor training with Bruce Prentice. Members discussed the matter and are happy for NHSE to pay money into the joint Cheshire & Merseyside account. MH then deferred to members for ways they would like this to roll out. Additionally, it has been noted that surgeries are not trained proficiently yet so there will be some initial problems, as well as a host of other information is not available yet. **DB was asked to check the GP specification to see if they can or cannot refer for emergency supplies**.  As of the 1st April 2021, NHSE will not provide funding for the IT systems to run CPCS. The integration between PharmOutcomes and EMIS has happened but is limited to Cheshire and Merseyside only. There will be support videos available for training purposes on how to use the system. If you use PharmOutcomes there will be a charge on completion. This will be tiered so the more referrals completed, the cheaper it will be.  DS & GW to find out if their companies are using PO to claim for GP CPCS. | **Action – DB**  **Action – DS & GW** |
| 5.3 | Flu/COVID Vaccination/Mass testing Update  MH explained that unsurprisingly there has been a huge uptake in flu vacs this year. The over 50’s vaccination has gone live and has also seen great uptake in people wanting the jab. During discussions between MH and LMC they were shocked to find out pharmacies have to procure their own stock and can sometimes provide the service at a loss if they have stock left over at the end of the year, therefore, hopefully an agreement can be sorted to try and ensure a less competitive environment to help pharmacies use up all their stock before the end of the season.  Patients taking part in COVID-19 mass testing have given feedback that the drop off for tests has been confusing, therefore that has been stopped.  COVID-19 vaccinations are going to be provided across 11 sites in Liverpool in partnership with our PCN’s. All areas in Liverpool will have 1 site with exception to Central which will have 2 areas. There will be mass vaccination areas located in the Echo arena and at Edge Lane eventually, but the PCN sites will be going live sooner.  It has been noted that some sites have not been spread equally, therefore pharmacies can put forward an expression of interest for the future to be a vaccination site. This must be done before the 6th of December. As for procuring stock, it appears only mass testing sites will have access for the time being.  JD declared that he has applied to be a testing site.  There will be funds available from NHSE to backfill expenses such as venues, fridges etc.  The LPC will send a message to contractors to inform them of our capability to help with setting them up if they are interested in becoming a vaccination site in the future. | **Action – TW** |
| 5.4 | Attendance by James Woolgar, Sexual Health Commissioner, Liverpool City Council  JW briefed us on advances made since the last meeting in March. There is still on ongoing internal discussion, however they have proposed a contract extension for the EHC service which will cover pharmacies until November, at this point a new sexual health service will be commissioned.  There will hopefully be extra provisions and extra funding available and the integration of the new system should be on PharmOutcomes. They are hoping to keep 32 sites providing sexual health services with the possibility of adding more if there is enough availability. Members were happy with extending the contract until 31st October 2021. |  |
| **BREAK** | | |
| 5.5 | Attendance by Ian Cubbin, PSNC Local Representative  IC joined us for an update at the PSNC.  IC apologised for missing the September meeting. He recently attended the November board meeting last week at the PSNC. This meeting is usually reserved as a planning meeting for the PSNC. The focus was on the Wright review and having a retrospective on how successful they have been recently by reflecting on issues the Wright review brought to light.  There has been a review group created which consists of many recurring faces of the PSNC which members felt was missing the point of the Wright review. MH addressed the lack of diversity on the review group which was agreed upon by the committee and IC who implored that this was considered during the selection process.  There was no further information available of note. Members discussed their dissatisfaction of the time taken to get to this point, as well as the lack of diversity and fresh faces chosen to implement change in the PSNC. |  |
| 5.6 | Pharmacy Quality Scheme Update  DB had a presentation for members showing the progress of pharmacies on Part 1 of PQS. There has been effective communication with most pharmacies on PQS as most of them have completed and declared Part 1 already and those who haven’t are simply waiting until nearer the deadline.  DB explained that Part 2 is very big in comparison to Part 1 and expressed his concerns that some pharmacies may miss a lot on this area due to some tasks such as PCN Lead engagement being difficult and out of his hands.  DB asked for feedback with NHS Mail from members. Members explained that the main issue NHS Mail is that is does not appear to remember the username, therefore users need to continually log-in. Accessing the shared inbox is also harder. Members reported being passed between local and national teams when trying to unlock accounts and create new users, which is frustrating. There are also issues that arise when staff members leave therefore having to deactivate the NHS mail and when a new NHS mail needs to be set up.  DB asked members for feedback for the recent training that was released containing Suicide prevention etc. Members have said they are all getting through it but finding the time to complete each section is an issue which is further exacerbated for staff who are not computer literate. |  |
| 5.7 | Dashboard  DB presented the dashboard to members displaying fee’s and earnings for contractors on a quarterly basis. He showed members different visual representations of the data, to display how services are performing across the board, as well as reasons to support upward or downward trends which are mostly due to the pandemic. |  |
| 5.8 | Liverpool City Council Update: Health Protection Board Vitamin D Future commissioning relief payment clawback  MH explained that the council is looking to reclaim the funding that was given to pharmacies to ensure they were not financially out of pocket during Q1 of the pandemic. The council initially paid a payment to cover the anticipated service delivery for Q1, along with the actual activity. They were now looking to reclaim the smaller of the two figures.  Members asked if we could soften the blow and pay it back over time. The council would accept a delay in payment over time if the original option would impact contractors massively at such a financially unviable time. It is thought that the payment has been agreed to not be paid back in a lump sum and will more than likely just affect payments in Q4. Members agreed to let MH deal with this matter.  JD has been attending Health Protection Board meeting on behalf of MH which is made up of the council and others from the communities concerning local public health issues. They discussed a vitamin D supply scheme like the Healthy Start vitamin services commissioned in other parts of the country. MH will submit a proposal to the council with the aim of piloting this with the aim of showing how capable pharmacy is at reaching hard-to-reach patient cohorts |  |
| **LUNCH** | | |
| 5.9 | Sub-Group Working  Governance Group  The governance group settled on the wording on the addition to the DOI for additional items of interest that are not currently addressed with the DOI. DS will send the updated DOI wording to TW, who will then update the DOI. GW and TW will then be required to complete an updated DOI by the next meeting. **Actioned in 4.1**.  Communications  The communications group agreed to re-use the contractor survey questions from last time, but possibly tweak the questions to try and engage contractors more about services and what they would like to see. They also discussed talking to local MP’s asking why community pharmacy is given praise from the public and the government, yet it is not appropriately supported and remunerated.  Services  The services group discussed GP CPCS and how referrals happen with GP’s. Will PO refer directly to GP’s and can we use PO or an additional system to book in with the GP for a priority phone call if necessary? Pharmacists are health professionals and should be treated as such with priority on our time when dealing with the GP surgery. Could PO send a summarised text to the patient of their discussion which could help a GP with any necessary steps that may need to be taken after the conversation with the pharmacist. |  |
| 5.10 | Attendance by Tom Knight, Head of Primary Care, NHS England and NHS improvement  GW asked TK about the proposed merger between CCGs’. TK had no information as he has not been seen it as of yet, but he advised that in order to see the possible struggles as well as successes, we could look at Cheshire to see how they perform as they merged, but still retained localities based on the old system.  TK went on to thank community pharmacy with regards to work in recent events. NHSE acknowledges the importance of community pharmacy and potential of community pharmacy going forward. He explained that there is going to be an “Integrated care system” in 2022 which will be a great opportunity to clarify where responsibility sits. He hopes this will reform a split which occurred in the 2013 reforms. Overall, he is unsure what that means for NHSE going forward, but he is committed to give pharmacies in Cheshire & Merseyside a better place when it comes to commissioning services. He added that remuneration for PCN’s could have been more attractive and that there are hopes on bringing greater clarity on being a commissioner and a regulator and that they will always deal with any problem with “what is best for patients”.  When asked what feedback they see at the top when looking down the chain towards PCN’s, he said there was no specific feedback from the top downwards on PCNs.  JD asked what the original goals for NHSE before the pandemic were.  TK said the main goals were transformation work, more initiatives with community pharmacy, plugging the gap between GP and pharmacy so create more capacity to help more patients. The pandemic has scuppered some of the efforts, however they will hopefully be able to continue with it and support the development of networks sooner rather than later. |  |
| 5.11 | Officers reports  Reports were circulated prior to the meeting and no further questions were asked, and no comments made. |  |
| 5.12 | Regional Joint working group update  Reports were circulated prior to the meeting and no further questions were asked, and no comments made. |  |
| 5.13 | Contract update  MH updated change of ownership for Myrtle Street is now official.  Lloyds has also acquired a Rowlands pharmacy located at Garston walk-in centre, however, the date of the transition is unknown |  |
| 5.14 | Forthcoming meeting attendance  MH asked for help to attend MOC meetings on a Friday afternoon as he was finding it increasingly hard to attend. |  |
| 5.15 | Forthcoming holidays  JF - 4th January |  |
| 6 | **Treasurers Report** |  |
|  | The PSNC levy of £18,000 has been paid since the last update.  Spending for the year is massively under  TW taking over remittances |  |
| 7 | **Any Other Business** |  |
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| 8 | **Date and Time of Next Meeting** |  |
|  | Thursday 14th January 2021 |  |

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| **Min** | **Action** | **Person** | **Update** |
| 3.1 | Add minutes to the website | TW | Completed |
| 4.1 | Risk Assessment | MH |  |
| 4.1 | Amend DOI once it has been amended | GW & TW | Completed |
| 5.2 | Check if the GP specification for GP CPCS allows for referral emergency supplies | DB |  |
| 5.2 | Check if their companies will be claiming for GP CPCS through PO | DS & GW | Completed |
| 5.3 | Inform contractors that the LPC can aid in setting up as future COVID vaccination site | TW | Missed |