**Liverpool LPC Agenda – May 2021**

**Present Attendance Statistics 2021/2022**

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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 | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | James Forshaw (JF) | Member / Treasurer | JF | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | Dave Sanchez (DS) | Member | DS | ✓ | x |  |  |  |  |  |  |  | 50% |
|  | James Moir (JM) | Member | JM | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | David Porter (DP) | Member | DP | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | John Davey (JD) | Member | JD | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | Leah Davies (LD) | Member | LD | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | Peter Beeley (PB) | Member | PB | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | Dave Jones (DJ) | Member | DJ | ✓ | ✓ |  |  |  |  |  |  |  | 100% |
|  | 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 Pharmacy First / GP Referrals into CPCSBreak5.2 Discharge Medicines Service Update5.3 Sub-Group Update5.4 Visit from Ian Cubbin – PSNC Regional RepresentativeLunch5.5 Wright Review5.6 Business as usual5.7 Blood Pressure Update5.8 Health Protection Board UpdateBreak5.9 PNA update5.10 Officers reports5.11 Regional Joint Working Group Update5.12 Contracts Update5.13 Forthcoming Meeting Attendance5.14 Forthcoming holidays | **9:45am****11:00am****11:15am****11:30am****12:15pm****1:00pm****1:30pm****2:00pm****2:30pm****2:45pm****3:00pm****3:15pm****3:35pm****3:38pm****3:40pm****3:42pm****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 27th May via Microsoft Teams | **Close 4:00pm** |

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| **No.** | **Item** | **Action** |
|  | This meeting took place at the Holiday Inn, Lime Street. |  |
| **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 leave the room quietly if it was urgent etc. Members were informed of the Fire safety precautions, along with the requirements for Face mask coverings and hand sanitising when leaving the room. |  |
| **2** | **Apologies** |  |
| 2.1 | DS sent apologies to this meeting. JD sent a message to inform us of his late arrival. All other members were present. |  |
| **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. The committee also agreed the minutes from the meeting on the 16th of March 2021 were a true and accurate record. **TW to add minutes to the website.** | **Action – TW** |
| **4** | **Matters arising / Action from previous minutes** |  |
| 4.1 | Members discussed the actions of the previous meeting.* MH informed officers have completed risk assessments and they were attached to the papers for this month, they will be reviewed during the meeting.
* Stakeholder list has been created but is not yet finished. **MH to add to Teams once completed.**
* Social Media has been re-branded.
* Accounts have been dealt with. We are expecting a response from the accountants and reports will be fully ready by the September AGM.
* The NHS proposal from NHSE for PCN Leads development has been submitted and we are awaiting a response to our proposal.
 | **Action – MH** |
| **5** |  |  |
| 5.0 | Bruce Prentice dialled inBP joined the meeting virtually.Members began by asking BP on any advice he could give to improve the referral rate for GP CPCS.BP replied that the best way for the time being is to increase the amount of GP Surgeries able to refer. This is dependent on DB and his success with engaging the surgeries. Liverpool is putting up good numbers nationally and he believes that UTIs currently are the best way to introduce the service before it is expanded. Once GP surgeries get to grips with the processes involved, we can then move on from there.BP asked how CATC is performing. MH explained it is where it is expected to be. It is currently down on the previous month due to the changes made, but we need to make sure we are spending the funding as intended to. This led to MH turning the conversation towards CATC Plus and how we can get started. BP asked for 3 products that can link into CPCS.MH brought up a list of:* Earcalm – Non-POM.
* Esomeprazole – To replace ranitidine.
* Fexofenadine – Will be a GSL item soon.
* Fluticasone Nasal spray – Seasonal, although it is a highly requested item.
* Difflam spray – There are a lot of OOH prescriptions for this item – can also link to Sore Throat PGD.

BP happy to pass the funding for this to the CCG and let them make the decisions on what to allow. This will be a conversation for MH to have once the committee have had a discussion over it.Urgent Care in conversation with NHSE to provide CPCS in the future. |  |
| 5.1 | Pharmacy First / GP referrals into CPCSDB has prepared a presentation. Prior to the presentation, MH gave praise to DB and gave a brief explanation to members of the fantastic work DB has been doing with Pharmacy First & GP CPCS. DB has contacted all 80 GP practices in Liverpool but has had very few responses. Even with a follow-up call, there is still a lack of responses. Up until yesterday, there are 97 contractors so far that have signed up to provide the services, but we are waiting on a reply from Boots, Asda and Day Lewis. DB gave members an explanation of who is currently up and running, who will be targeted over the next 2 to 3 months and what that spread will look like for the city. Currently, he is able to have 2 or 3 meetings with GP Surgeries which is higher than previously expected, however the time constraints this adds is substantial.There have been additional difficulties during this process. The most consistent is a lack of availability to the decision makers on a consistent basis. DB, MH and members agreed that we should try to promote the service and check with the CCG whether they can create some promotional posters for the service to go up in surgeries and pharmacies. Additionally, utilise social media to drive the message that the service is available and have patients asking for it. Other ideas were discussed such as an event for non-pharmacists to help the general pharmacy workforce feel confident and engage the service with patients.**MH to contact CCG for a link to their comms group to arrange promotional posters.** | **Action – MH**  |
| **BREAK** |
| 5.2 | Discharge Medicines Service UpdateMH showed members a DMS report which is a new function we can use. There have been 3317 referrals since going live on the 15th of February 2021 in Liverpool. The data shows many different areas, but MH focussed on the area of referrals that have not been accepted or completed at Stage 1 level by pharmacies, highlighting the missed opportunity for funding. **MH to send the report to members.** | **Action – MH**  |
| 5.3 | Sub-Group WorkingGovernance group – Risk assessment**MH will have to have a 1 to 1 with officers to clarify what level of support people need**. From there, equipment and amendments can be made and filled into the handbook. A template will be made as a reference for the future. This will happen over the next month with the line managers for some advice.Communications group – Plan on how best to promote Pharmacy First.**Social Media**:* Aimed mainly at health professionals.
* Periodic posts over a 1-month period with key information on the service and eligibility.

**Posters**:* Aimed at patients and patient-facing staff in the surgeries.
* Simplicity.
* Clear outline of who is eligible.
* Sizing should be A2 to be big enough to be noticeable.
* Keep it relevant to the GP surgeries.

**Newsletters**:* Communicate to contractors and their staff how best to identify patients eligible for the service who may be unaware.
* Send a standalone newsletter giving brief advice on how best to provide services in a safe manner and ways to boost patient confidence.

Services group – Hint and Tips for returning to normal.They reviewed the workplan and have set about facilitating a network of support for PCN Leads. They have also begun to review development for members to improve their skills, however there are no training opportunities at the moment due to COVID-19, but they keep an eye out for when things do surface. They would also like to contact BP about GP CPCS training. They will also be creating a guide for restarting pharmacy services which will be shared with the Communications Group to ensure it is circulated to contractors and will be used to try and aid in boosting Pharmacy First engagement. | **Action – MH**  |
| 5.4 | Visit from Ian Cubbin – PSNC Regional Representative - UpdateIC gave an update in changes to the PSNC negotiating team, although was unable to update the committee on the current negotiations. He also touched on educational matters that he is involved with, such the future of the pre-reg year and how to get all pharmacists to be prescribers. |  |
| **LUNCH** |
| 5.5 | Wright ReviewGW and MH attended a steering group meeting on Monday 24th May 2021. The papers were sent out on Saturday 22nd May 2021 which did not give much time for those attending to read and digest the information.There was no progress and remained focused on the process to implement changes.MH asked members for feedback regarding the delay of PSNC representative elections and their request for LPCs to hold a vote for member elections earlier than intended. This would require the LPC to change their constitution and postpone the elections themselves, however, that would give us a better insight to future decisions before we are required to hold our elections.CCA members asked this be postponed to the next meeting to allow for the CCA position on delaying LPC elections to be sought. This needs to happen by July at the latest. **MH to add this to the next agenda.****GW asked members to read through the pre-reading from the meeting and formulate a series of responses and they are to be sent to MH by the 7th of June 2021.** | **Action – MH****Action - Members** |
| 5.6 | Business As usualMH has asked members for some general feedback on how we can restart services and how we can get back to “normal” now that the pressures of the pandemic are starting to ease.Members discussed the possibility of providing contractors with a guide to help identify ways of providing services again in a safe manner. A lot of this hinges on patient confidence and their willingness to sit in an enclosed area. This will be discussed by the Services Group at the Sub-Group section today. |  |
| 5.7 | Blood Pressure UpdateMH had a meeting on Monday and was informed BHF has pulled the service, triggering a rethink of how the blood pressure service can be carried on in their absence. Additionally, the NHS England service specification has expired, along with the MUR inclusion criteria, hence the rethink of the service.Conversation has centred redesigning the service and how it is going to be carried out. The aims will remain the same with the addition of providing patient confidence in the cleaning of the equipment & consultation area. Another meeting is scheduled for a couple of weeks from today. MH asked members if they have any questions regarding the notes from the meeting but there were none and members are happy with proceedings. |  |
| 5.8 | Health Protection Board UpdateJD fed back to members following his attendance to the Health Protection Board meetings. Meetings for this board have been switched now to every fortnight. There is a total of 61 people who have been regularly attending these meetings, mostly from the council. Over the last couple of months, they have turned to community pharmacy more for feedback on primary care due to our involvement in vaccine rollout or signposting. Overall, JD feels it has been a good opportunity to explain community pharmacy as an outlet for primary care and inform members of this board of the reach we have, our professionalism and capabilities to open up opportunities for pharmacy to take centre stage. |  |
| **BREAK** |
| 5.9 | PNA updateMH informed members that this is happening. It will need to be published by Oct 2022. There have been 2 PNA meetings in the last month with all councils and the new officers going through the council and public questionnaire. There will be a contractor survey to go out in the middle of June. It will be running for 2 months from June to August to give people time to answer.There will be a questionnaire directed at patients as well, but that will go out September.Members had no comments or questions at this point. |  |
| 5.10 | Officer reportsNo comments or questions.  |  |
| 5.11 | Regional Joint Working Group UpdateNo comments or questions.  |  |
| 5.12 | Contract’s updateFinal consolidation for Rowlands in Lodge Lane has been approved.**Let us know when the branches are closing.** | **Action - LD** |
| 5.13 | Forthcoming Meeting AttendanceMH can attend all meetings at the moment. |  |
| 5.14 | Forthcoming HolidaysMH – 31st May to 4th June.LD – 4th June to 11th June |  |
| 6 | **Finance**  |  |
|  | 6.1 Treasurer’s Report JF ran through figures to let members know the accounts are in a good position. We have received the funding that is to be distributed to the HIV pilot pharmacies.  |  |
| 7 | **Any Other Business** |  |
|  | Members discussed concerns raised by JD regarding his efforts given toward the Health Protection Board. This was discussed informally. JD agreed that minutes would be sent to the Chair and MH with no further actions following on from this. |  |
| 8 | **Date and Time of Next Meeting** |  |
|  | Thursday 8th July 2021 |  |

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| **Min** | **Action** | **Person** | **Update** |
| 3.1 | Add minutes to the LPC website | TW | Completed |
| 4.1 | Add Stakeholder List to Teams | MH |  |
| 5.1 | MH to contact CCG for a link to their comms group to arrange promotional posters. | MH |  |
| 5.2 | MH to send the DMS report to members. | MH | Completed |
| 5.3 | MH will have to have a 1 to 1 with officers to clarify what level of support people need regarding the risk assessment | MH | Completed |
| 5.5 | Add a vote to the next meeting’s agenda to decide the outcome of postponing elections  | MH | Completed |
| 5.5 | Action here for all members to report to MH their responses, then for MH to send these to the RSG. | Members | Completed |
| 5.12 | LD to inform MH when the Lodge Lane pharmacy is planning to close | LD | Completed |