

Minutes of the meeting of Community Pharmacy North East Central (CPNEC) held on 7 March 2024 at Chester-Le-Street Cricket Club, Ropery Lane, Chester-Le-Street. DH3 3PF

**In attendance:**

Emma Morris  
 Paul Arnett  
 Rob Pitt  
 Jamie Rotherham  
 Raminder Sihota  
 Andrea Dickinson  
 Jovan Wong  
 Lee Middleton  
 Ian Mensforth  
 Claire Thoms  
 Ann Gunning  
 Geraint Morris  
 Greg Burke  
 Sami Hanna, CPE Northern Representative  
 Joy Cooper, Observer

<b>LPC/016/24</b>	<b>Apologies for absence:</b> Kathryn Brown, Derek Roberts Jovan and Andrea were welcomed to their first CPNEC meeting as new members.
<b>LPC/017/24</b>	<b>Heather Frith – Sunderland City Council (SCC)</b> Heather reminded the meeting that the Pharmaceutical Needs Assessment (PNA) will be published in 2025. SCC will be commissioning the services of a consultant to assist with its production. The current Public Health services contract has been extended until 30 November 2024; there is an option to extend for another year. SCC is looking at the fee structures of existing services. Heather asked members for their views on commissioned smoking services. Rob said that his pharmacies do not provide stop smoking services; they are not financially viable. Rob emphasised just how difficult it is for pharmacies at present; it has never been so financially challenging. Ian said that his pharmacy provides a supervision service for a lot of clients; since the change in provider there are more unsupervised clients which makes the service less viable. Andrea mentioned that Laura Jones is a good contact at CGL. Andrea also said that she has

	<p>difficulty speaking with an appropriate person about sexual health services in Sunderland; it is not clear who the contact person is. Heather said that she would follow up on this. <b>Action: Heather.</b></p> <p>There was consensus that pharmacies are at breaking point; they must prioritise services.</p> <p>Geraint made the point that pharmacies do still want to provide services; they must be appropriately resourced, CPNEC wants to work with the council to ensure that services are viable. Jamie suggested having fewer provider sites and paying them appropriately, perhaps utilise an EoI process for selection. Paul requested LPC involvement if that route is chosen.</p> <p>Ann mentioned the added financial burden of the cost of DBS checks. Paul emphasised the importance of ensuring that good IT systems are in place.</p> <p>Andrea requested that training requirements become less onerous; currently they could be a barrier to sign-up.</p> <p>Geraint suggested digitising the C card service via the use of apps. With regards to the smoking service, Heather confirmed that the council can review the use of the “call it quits” system, using PharmOutcomes instead is an option. Also, Heather is looking to PSNE Ltd to manage the SSS.</p> <p>Geraint asked the council to consider supporting the provision of training for sexual health services by providing some funding. Heather informed members of the proposal for a 12 months LARC pilot. The intention is for eight pharmacies to provide sub dermal implants to teenagers. Again, SCC wants PSNE Ltd to manage the service. The cost of training, signing up via Declaration of Competence, consumables and indemnity insurance would be covered. An EoI process will be used to help select the providers. The priority will be for the service to be for teenagers, but it will be an open offer. There will be a counselling element to the consultation; it could therefore take up to 90 minutes; the fee must reflect this fact. The service can be provided by pharmacists and registered technicians. Geraint reported that SVOC is doing some work which may tie in with this. <b>Action: Geraint to liaise with Heather.</b></p> <p>Rob emphasised the importance of checking closely the cost of indemnity insurance; it could be expensive.</p>
<p><b>LPC/018/24</b></p>	<p><b>Minutes of the January meetings.</b></p> <p>The minutes of the meetings were accepted as true and accurate records of the meetings. <b>Action: Greg to include the open minutes and the AGM minutes on the CPNEC website.</b></p> <p><b>A confidential item was discussed at this point; details are recorded separately.</b></p>
<p><b>LPC/019/24</b></p>	<p><b>Pharmacy First discussion</b></p> <p>Paul stated that pharmacies are still receiving inappropriate referrals. Also, practices are signposting, not referring. Referrals provide a much better pathway, e.g. can refer back to practices.</p>

	<p>It was confirmed that target thresholds can only be met by clinical pathway referrals. Jamie stated that for some of the conditions the gateway points are unrealistic.</p> <p>There was a discussion about the availability of data, Geraint stated that a request for data has been submitted to the digital data team. There was a wide-ranging discussion about the service; it included both positive and negative points of view.</p> <p>Andrea queried whether GPs are being monitored in relation to the number of referrals they make. Sami was tasked with feeding back concerns to CPE now, bearing in mind the threshold of thirty will be introduced later this year. <b>Action: Sami.</b></p>
<b>LPC/020/24</b>	<p><b>PCN Lead funding.</b></p> <p>Mike Maguire joined the meeting for this item. Mike submitted a bid for more PCN lead funding in June 2023; it has only now been approved. The funding for September 2023 to March 2024 has now been transferred to PSNE Ltd. Mike reported that he has also now secured funding from April 2024. It is important that community pharmacy demonstrates the value of the funding. Sami confirmed that PSNE Ltd received the money last week and that Pinnacle is taking its time in finalising the PharmOutcomes template to be used by leads to claim against the funding. Mike will shortly be sending an email to PCN leads explaining the claim process; the funding will go to contractors, not the PCN leads. Mike outlined his thoughts on what PCN leads should be doing to qualify for payment.</p> <p>Any underspend on the September to March money will be used as a buffer until the next allocation of money is received.</p> <p>Mike will do some ad hoc auditing of claims. On completion of the PO module details will be sent to Mike so that he can approve payments. Paul queried whether LPCs will receive a management fee for securing the services of PCN leads. Mike confirmed that this has not yet been looked at, but it will now be considered.</p> <p>Geraint gave a brief description of the PCN lead role at Community Pharmacy North East Central. There was a discussion about the line management role of PCN leads. Sami suggested that this would be a role for Mike.</p> <p>Paul mentioned the importance of securing indemnity insurance and having a lone worker policy.</p> <p>Mike confirmed that the fee structure is £280 per day (September to March) and (hopefully) £320 from April.</p>
<b>LPC/021/24</b>	<p><b>PCN leads – vacancies/appointments.</b></p> <p>There are actions for the LPC to consider regarding recruitment of new PCN leads. There was also a discussion about the possibility of hosting an event for PCN leads. <b>Action: Executive team</b></p>
<b>LPC/022/24</b>	<p><b>Finance update.</b></p> <p>The regional LPC, at its next meeting (26 March) will be discussing the issue of PharmOutcomes licence recharges between LPCs. Lee confirmed that the balance of the Sunderland LPC account has now been transferred to the CPNEC Barclays Business (current) account.</p>

	<p>The direct debit for the Sunderland Gmail account has also been transferred to the Barclays account.</p> <p>The Lloyds bank account is still functioning, it is not possible to obtain a debit card for the Barclays account. The Vodafone and Mailchimp Direct Debits still come from the Lloyds account.</p> <p>Lee informed members of the balance of the Business account and how much of that is ring fenced. <b>Action: Lee to include details of ring-fenced money in a spreadsheet and circulate to members.</b></p> <p>Lee informed members that the CPE invoice for the half yearly levy has been received; there has been an increase on the H2 levy from 23-24.</p> <p><b>Action: Greg to query with CPE whether LPCs can pay the CPE each levy each month rather than in two lump sums.</b></p>
LPC/023/24	<p><b>Content of meeting agendas</b></p> <p>Members discussed the possibility of hosting more Pharmacy First (PF) training to include consultation skills, how to document the content of consultations, ensuring that legally everything is covered. Sami reported that Gateshead and South Tyneside LPC used Sandie Keall for their training, she may be willing to develop more bespoke training.</p> <p>Geraint reported that the ICB has approved a budget of £50k to support PF training across the ICB; LPCs will be able to claim for training events they have already funded.</p> <p>Greg was asked to look again at the VirtualOutcomes package, what it provides, how much it costs. <b>Action: Greg</b></p>
LPC/024/24	<p><b>Co Durham Healthwatch – Pharmacy First</b></p> <p>Chloe Bradbury attended from Healthwatch (HW).</p> <p>Chloe explained the HW proposals around the Pharmacy First (PF) service. It is planning to survey patients. After that, HW will be looking at the impact of PF on pharmacies. HW is keen to obtain the perspective from patients and pharmacies. There was a discussion about the importance of good communications between pharmacies and practices. There was a discussion about the possibility of pharmacies being able to update patient records via integrated records. It was confirmed that patients can now access their records via the NHS App.</p> <p>Chloe informed the meeting that HW is considering producing a guide on services provided by community pharmacy. Paul suggested that instead people should be sign posted to the CPE website where all information should be current. Members stated that they would be very keen to input into the content of any communications issued on this by HW. Chloe confirmed that HW will engage with the LPC in advance.</p> <p>There was a discussion about the capacity of some pharmacy premises.</p>
LPC/025/24	<p><b>Declaration of Interest and Governance documents</b></p> <p>Members present signed the documents.</p> <p>It was agreed that the Finance and Governance Sub-Group must meet soon. <b>Action: Lee.</b></p>

LPC/026/24	<p><b>CPNEC Officer Posts for 2024/25</b>  There was a unanimous decision that the current incumbents remain in post for 2024/25:</p> <ul style="list-style-type: none"> <li>• Chair: Emma</li> <li>• Vice-chair: Paul</li> <li>• Treasurer: Lee</li> </ul> <p><b>Action: Greg to inform CPE, CPNEC pharmacies and update the website.</b></p>
LPC/027/24	<p><b>Proposed Training event – contraceptive service</b>  Emma provided the background to the proposal. There was a request that if the meeting does go ahead then the training should cover some of the required 40 hours of training. <b>Action: Greg to circulate an Expression of Interest SurveyMonkey to pharmacies.</b></p>
LPC/028/24	<p><b>September meeting date</b>  It was agreed to move the date to 10 September 2024. <b>Action: Greg to send amended diary date to members/officers.</b></p>
LPC/029/24	<p><b>Office space proposal</b>  Greg explained that this has previously been discussed at regional level. It has been raised again recently by Sandie Keall at Community Pharmacy Tees Valley. The proposal is for LPCs in the region which are interested in sharing office/board room space to source an appropriate venue and share the cost. Durham has been cited as a possible venue. Members considered the proposal. Officers confirmed that they are happy with the current arrangements. Raminder made the point that CPNEC already pays utility bills for its Chief Officer, it could not pay the same again if an office were to be used. Members confirmed that they do not support the proposal.  <b>Action: Greg to inform the region</b>  <b>Action: Greg to discuss CPNEC office address with Rob.</b></p>
LPC/030/24	<p><b>National Foundation Trainee Pharmacist Recruitment Scheme</b>  Emma provided the background to the process and the content of the meeting held with Charntel Clark and Kate Huddart. Raminder declared an interest; she sits on the Oriel group. Paul informed the meeting that Kate Huddart had agreed to meet with the LPC in September to discuss an appropriate process of allocation. There was recognition that the revised process is potentially a huge issue for community pharmacy.</p>
LPC/031/24	<p><b>Action Log</b>  The meeting reviewed the content and updated as appropriate. Jamie fed back on the meeting he had attended with the Ferryhill and Chilton practice regarding post dated prescriptions. Geraint suggested that if the situation is not resolved then Jamie should bring it to the attention of Kate Huddart. Jamie has another meeting scheduled with the practice after which he will review the next steps.   Ian left the meeting.</p>
LPC/032/24	<p><b>Critical coach update</b>  Greg outlined the process of how Jamie was appointed to the role. Jamie will be attending Time in Time Out sessions in Durham and has a meeting shortly to discuss the format with Kate Huddart. Geraint</p>

	<p>mentioned that he has a meeting next week with a Sunderland colleague who may be able to influence access to Sunderland sessions. <b>Action: Geraint to provide contact details to Greg.</b></p> <p>Jamie said that he will be looking to committee colleagues to help him engage with their companies.</p> <p>Jamie has a mobile he is using specifically for this role (SIM only), the LPC is covering the cost for 12 months.</p> <p><b>Action: Greg to circulate the introductory document to CPNEC pharmacies.</b></p> <p>There was a discussion regarding PharmOutcomes and Multi-factor authentication.</p>
LPC/033/24	<p><b>Community Pharmacy Strategic Priorities</b></p> <p>Geraint provided the background to how he first received sight of the document. He ensured that it was circulated to LPC Chief Officers and Charis. RLPC colleagues met, fed back comments to Geraint who forwarded on to the ICB. Colleagues were happy to support such a document but had concerns that LPCs had not been consulted in a timely manner and with some of the content of the document.</p> <p>Geraint asked Greg to circulate the document to members with a request that they feed back comments to Geraint. <b>Action: All.</b></p> <p>Given the importance of the document Raminder expressed frustration that members had not been given earlier sight of it and the fact that the discussion was happening so late in the meeting and had not been afforded more time.</p> <p>Sami mentioned that one of the priorities of the document is the introduction of a local Pharmacy Quality Scheme (PQS); in previous discussions RLPC colleagues have made it clear that they do not support a local PQS.</p> <p>Paul provided members with the content of the feedback he had provided to Kate Huddart regarding the authors of the paper.</p> <p>Raminder called on Pamela Phelps and Ken Youngman at the ICB to better manage the situation. Raminder also queried whether the separate roles performed by Geraint may confuse the landscape in situations such as this and suggested that the CPNEC Executive Team should think about this situation. <b>Action: Executive Team</b></p> <p>Andrea suggested inviting PCN leads to LPC meetings. Previously in Sunderland PCN leads were invited to meetings on a rota basis.</p> <p><b>Action: Executive Team to consider.</b></p>
LPC/034/24	<p><b>Health and Well Being Boards</b></p> <p>Greg provided an account of his attendance at the Durham Health and Well Being Board (HWBB) on 22 January. He also informed members that Sunderland HWBB had responded to CPNEC's request for a seat on the Board by saying that the LPC has access to the HWBB through its seat on the Living Well Delivery Board. Raminder queried whether Mukarrom had been a member of the HWBB.</p>
LPC/035/25	<p><b>Regional LPC</b></p>

	<p>Members agreed that the Discharge Medicines Service (DMS) should be prioritised. It is an essential service. Andrea reported that in Sunderland pharmacies receive three discharge notices.</p> <p>Members noted that RLPC had reaffirmed with the ICB that Geraint is its single point of contact. Members had received another copy of the Memorandum of Understanding with the meeting papers.</p>
<b>LPC/036/24</b>	<p><b>Pharmacy Services North East Ltd</b></p> <p>Paul updated members following the recent meeting of PSNE Ltd.</p>
<b>LPC/037/24</b>	<p><b>Message from Wear Recovery – missing prescription.</b></p> <p>Andrea informed the meeting that the current process of reporting missing prescriptions works well; Jovan also confirmed that she has not had any issues. It was agreed that no LPC action is required.</p> <p><b>Action: Ann will report back to Laura at CGL that intervals are being shortened.</b></p>
<b>LPC/038/24</b>	<p><b>Any other business</b></p> <p>It was agreed that the Strategy should be included as an agenda item for the May meeting.</p> <p>Ann informed the meeting that, on behalf of the Region, she has submitted a complaint to PharmOutcomes with regards to its poor levels of service. Pinnacle has informed Ann that it is taking the complaint seriously.</p>
	<p><b>Date of next meeting: 9 May 2024 at Chester-Le-Street Cricket Club.</b></p>