

# Community Pharmacy Arden – In Shadow LPC Meeting – 22nd March 2022

**CHAIR:** *Theresa Fryer (TF);*

**MEMBERS:** *Jas Heer (JH); Vicki Roberts (VR); Bal Heer (BH); Faye Owen (FO); Sat Kotecha (SK); Sam Griffiths (SG); Mike O'Donnell (MO); Caroline Harvey (CH); Baljit Chaggar (BC);*

**IN ATTENDANCE:** *Fiona Lowe (FL); Kathy Robinson (KR); Zoe Ascott (ZA);*

## **Welcome and introductions:**

DOI - individual and collated sheet. To include list of regular meetings usually attend for the LPC for approval going forward after May meeting. Executive Committee to make recommendations for next main LPC meeting in May.

## **Executive elections:**

Had one member put forward, VR now elected Chair. Now need interest in Vice Chair role. SK cannot have an executive position on an LPC through NHS role. FO elected for Vice Chair. TF is Treasurer. Positions to be reviewed in one year.

## **Subgroup and PCN / buddy pharmacies allocations:**

See subgroups from previous LPCs to update and provisional allocation of PCNs / buddy pharmacies. Subgroups will be confirmed by Executive committee at the end of the meeting after EOIs viewed and appropriate balance made for each group – as they may well meet at the same time in meetings / have overlap etc. EOI for subgroups and declaration of any not interested in supporting.

## **Subgroups are:**

**Update around PSNC and RSG - JH: CLOSED**

**CPWM – CLOSED**

**New LPC Attendance Fee: CLOSED**

**Connected Pharmacy Programme: SK - CLOSED**

**Changes: IPMO, ICS/B, NHSEi and 8c role & LPN Funds. – CLOSED**

## **GPCPCS implementation positions – Richard and Lisa. - CLOSED**

### **Advanced / New Services – DMS, Hypertension, SSS, ED / UTC – CPCS: - Covered.**

EDCPCS in Coventry and Rugby, it is a slow starter. Covid has made such a difference with the amount of people turning up at the treatment centre. They are also very risk averse and have to have a nurse sign off. There is good Pharmacy engagement though. There is also always nervousness around sepsis. The service is running, and the success rate is exceptionally good. There have been UTIs, on medicine related, and other minor illness. Less than 20 referrals so far. Patients seem more reluctant to go to pharmacy from the Treatment centre rather than ED. FL – think so sort of service will be rolled out, maybe more treatment centres or out of hours.

### **Launch of CPA:**

New committee officially from April. Would be ideal to have a launch, maybe the May LPC meeting on 5<sup>th</sup>. Potentially an afternoon meeting which rolled into the evening and invite Contractors and stakeholders etc.. Need to gather a view: JH might be difficult with timescale, could move to join with the Contract Year 4 announcement. Agree this would work with being attractive with Contractors. MO – could link with the completion of GPCPCS work. Agree to move to July, SK – might have tier 3 commissioned by then. July Meeting is on 7<sup>th</sup>, was planned teams but move to face to face.

May 5<sup>th</sup> meeting = face to face morning BAU and afternoon working group

July 7<sup>th</sup> meeting with contractor evening = face to face

Discussion over the need for full day meetings over half days, with locum fees and bookings and working groups.

### **Expenses: CLOSED**

Actions – read and consider stop smoking and SGL documents in box, try and attend RSG update,

Exec and finance group for working group: FL/TF/VR/JH

CGL working group (to feedback): MO/SG/KR/BH

*Meeting closed.*