**North Staffs and Stoke Pharmacy Committee**

Minutes of the meeting held on 25th May 2021. The meeting was held at 1.30pm via Teams due to the COVID-19 pandemic

**Present:**

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| Committee member | Present | Apologies  |
| Nita Allen (NA) - Chair |  |  |
| Elliot Patrick (EP) |  | A |
| Raj Morjaria (RM) |  | A |
| Hema Morjaria (HM) |  |  |
| Harpal Bhandal (HB) |  |  |
| Ellie Lawton (EL) |  |  |
| Vicky Greenwood (VG) |  |  |
| Peter Walker (PW) |  | A |
| Lucy Platt |  |  |
| Ben Morris |  |  |
| Soura Kafaji (SK) |  |  |

**In Chair:** Mrs Nita Allen (NA)

**Chief Officer:** DrTania Cork (TC)

**In attendance;** Mr Simon Hay (part) Andrew Pickard (part)

**Standing Items**

*0521-1* **Chair:** NA welcomed all members to the meeting

*0521-2* **Apologies:**

*0521-3-* **Governance/Declarations of Conflicts of Interest (DOI):** verbal confirmation taken of DoI

*0521-4-* **Power to act:** these will be discussed during the meeting

*0521-5-* **Minutes from previous meeting**: all agreed andwill get wet signature once we all meet physically again

*0521-6-* **Matters Arising: None**

*0521-7-* **Finance:** Bank accounts looking healthy, all expenses paid up to date. Almost ready for auditors to check at the end of financial year. More money allocated to us via LPN. PSNC levy to be paid.

The treasurer went through the new pack guidance from the PSNC and made a list of where this LPC matches the requests and where improvements needed. Finance subgroup was revisited due to one member now left the committee with frequency of the Meetings has now increased from two a year to four in line with the recommendation in the finance pack. The subgroup will consist of HB, EP and TC. We are waiting for the new Expenses policy which should be out in the Summer.

Budget, on the new templates, will be ready for the finance subgroup in June 2021

*0521-8* **- Action Tracker;**

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| Libre Freestyle | completed |
| PSNC Guidance for finance  | Completed |
| 2021-22 strategy for LPC | started |

**Business Agenda**

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| *0521-9* | **Pharmacy workforce pressures**TC lead a discussion around community pharmacy work pressures and the issue of recruitment and retainment of pharmacy staffIt was recognised that there was extra demand on support staff during the pandemic. Training for support staff for PQS was too intense and there wasn’t enough time. Other concerns are;* There were instances of support staff experiencing unreasonable behaviour from some members of the public which could cause mental health problems.
* If support staff are suffering, this impacts on the Technicians and Pharmacists.
* If there a career progression scheme for support staff?
* How to attract Support Staff into Pharmacies
* How to keep them and ensure that they are operating at a level that provides support for the Pharmacists.
* How to deal with support staff leaving for better prospects once trained
* During the pandemic there were changes to every essential service. These were primarily provided by support staff.
* There are concerns that support staff aren’t happy in their jobs.
* We need to do more to find out what our support staff feel about pharmacy now.
* Some CCA companies have looked at changes in patient patterns and changed staff to match this. Right person, right time.
* The committee talked about PODs and how PCNs could help with this.
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| *0521-10* | **IPMO & ICS – update**The Midlands Regional Chief Pharmacist Richard Seal nominated Sue Thomson (Clinical Director of Pharmacy and Medicines Optimisation at University Hospitals of North Midlands NHS Trust) to be the STP Interim Pharmacy lead in March 2020 at the start of the COVID-19 pandemic. She is a member of the Midlands Regional Pharmacy Leadership Group which commenced monthly meetings from April 2021 to support the integrated pharmacy and medicines optimisation in integrated care system work stream. Within Staffordshire and Stoke on Trent STP a pharmacy leadership team has been established and comprises of: Amin Mitha (Acting Deputy Director of Primary Care – Medicines Optimisation); Dr Tania Cork (Representative of North Staffordshire and Stoke Local Pharmaceutical Committee, Head of Pharmacy Stoke on Trent College); Helen Sweeney (Deputy Director of Medicines and MACE, North Staffordshire Combined Healthcare NHS Trust), Dr Andrew Campbell (Director of Pharmacy, Midlands Foundation Partnership Trust); Andrew Pickard (NHS E Local Pharmacy Network Chair); Dr Katie Maddock (Head of School, School of Pharmacy and Bioengineering); Peter Prokopa (Representative South Staffordshire Local Pharmaceutical Committee). Weekly meetings are established and the main focus over the last 12 months has been collaborative working on COVID-19 related initiatives including the vaccination programme, end of life, delivery of medicines and professional support during this period.The IPMO is aimed to develop a framework which would set out how to tackle the medicines optimisation priorities for the local population in an STP/ICS footprint. It additionally aimed to use the expertise of pharmacy professionals in the transformation of systems to deliver the best patient outcomes from medicines and value to the taxpayer. TC informed the committee of the progress of IPMO. The pharmacy system leaders (TC included) are producing a one-page document. It is hoped that this will then be adapted to form a section in the ICS document. The main workstreams that will be included in the one-page document is workforce, medicines optimisation, digital technology, Integrating the pharmacy workforce and Risks and Mitigation. For example, the workforce workstream may include;•Work with PCNs to support the development of GP practice clinical pharmacists and technicians •Enhance and develop integrated care pharmacist and technician specialists working for both primary and secondary care•Offer professional clinical leadership, education support and strategies to improve competencies for the use of medicines for prescribers across ICS•Work with system providers, NHSE, AHSN to develop a career pathway for the pharmacy workforce to include trainee to senior management levels. Enabling opportunities for cross sector workforce experience and development to aid and improve transition between sectors |
| *0521-11* | **Wright Review – RSG minutes and update** An update was provided to members about the work undertaken by the RSG by NA. Berkeley Partnership since they began working with the RSG on 15thMarch with a mandate to further refine the project scope, develop out the programme plan, approach and key milestones, with an initial focus on mobilisation. NA and TC attended the recent engagement webinar event around the design principles, working programme and draft programme plan. NA posed a number of questions on timing, resources for the RGS to function, and with regard to the new vacancy for a project manager. Many attendees also asked about better timing of communications. No decisions have yet been made until the design programme has been agreed. NA informed the committee that extra meeting may be needed to address constitutional changes. |
| *0521-12* | **Local Services**1. NHS England Services Update

TC and SH informed the committee that Gill Hall has collated a list of pharmacies signed up to services. SH to chase those pharmacies yet to sign.They (NHSE) have caught up with the accreditations for Tier 1 and 2a. There are about 40 sites live for Tier 2a. There was an issue with chloramphenicol eye drops which meant that the service was withdrawn. CPOSS has had to be amended and they have included chloramphenicol ointment. This may come back as a Tier 1 service but we don’t know yet. UTI PGD and Emergency Supply has been extended. NHS England are working on Tier 2b services which they hope will be ready to launch later this year.1. CPCS

SH gave a report on CPCS and the progress of PCNs in taking up the service. Many practices are ready to be involved with the service and SH s working with them all to train practice staff. SH is also working with pharmacies to ensure they are accredited and can deliver the service 1. DMS

There is no information on numbers yet. There seems to be a very negative view in the practices. Communications to GP practices have been very poor. Virtual Outcomes have produced a training module which is ok. This may be a good one for the PCN Leads to start to talk to practices about.1. Local LFT service

TC gave an update of the Staffs and Stoke service. We held a webinar for both Stoke and Staffs pharmacies to guide people through the process and to undertake the training. Local Scheme is £10 per test as opposed to £1.50 for the National Scheme due to the pharmacy team visually checking the person undertaking the test and helping with data entry. Staff County Council would now like to avoid testing in the Covid Vacc centre due to spiralling costs. SH will be checking with Stoke Council within the next week. The service is likely to be extended from both councils Data being collected is being analysed by Keele in the hope for a paper to be wrote in relation to service evaluation. 1. Locum guide – ‘short-life working group’ needed

TC and SH discussed the issue of locums not understanding local services. This is also a problem with some pharmacy team members. TC suggested a ‘short-life working group’ that could help develop tools for locums across Pan- Staffordshire and make links with locum companies. Why and what you need to do. PW and EP along with BM will be part of this group. TC to Chair and ensure actions are logged and addressed.  |
| *0521-13* | **LPN project bids - update and outcome**1. Mental health of contractors
2. musculoskeletal

Both bids have now been accepted by the LPN board. The committee would like to thank the LPN in making this happen. TC is running the OA project with PP form South Staffs LPC running the MH project. Both projects are available across the STP area. With regards to MH first aid we hope to provide 4 sessions for Pharmacy teams to have 2 ½ hour sessions using Samaritans. They used the programme originally used for NHS 111 and 999 call handlers. It was developed to form a service for Pharmacists in Kent. The Chief Officer in Kent is involved with the Samaritans as a local director and has been part of that. They hope to provide that at a reasonable cost.The OA service will feed back into a bigger project called JIGSAW-E as a parallel programme. This programme of work that supports the proactive self-management of joint pain in line with NICE 2014 OA guidance. The pharmacy team will have access to the on-line training will be an introduction and 4 short modules about 10 minutes each covering: * Join pain and its impact
* What is osteoarthritis and how to explain it well
* Helping people to manage their joint pain
* The role of the Pharmacist and their Team

The pharmacy will be paid a fee of £50 once training is completed, this will cover some of the costs for training and setting up the service. The pharmacy will be paid a professional fee of £15 for each initial consultation carried out and information entered onto PharmOutcomes (capped at 16 consultation per pharmacy). |
| *0521-14* | **Covid- 19 update*** National LFT service – going very well with over 11000 pharmacies delivering the service
* Pharmacy vaccination sites – CP sites given go ahead for Pfizer/Moderna small in numbers. Some PCN GP sites withdrawing from service
* Collaboration with other STP sites – our CCG has been excellent in helping pharmacy and delivering training for using the Pfizer. The committee would like to thank the CCG for their support
* Stock reporting, referencing groups – all covid sites must submit stock takes when asked and this informs NHSE of vaccine numbers
* Community pharmacy recovery – impact on pharmacy teams has been immense during the Covid, so recovery will ensure they can continue to provide services to patients and the public.
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| *0521-15* | **Initial education and training for pharmacists**There are 55 Learning Outcomes, which are organised into 4 domains: • Person-centred care and collaboration • Professional practice • Leadership and management • Education and research Learning Outcomes is differentiated between the MPharm and the Foundation Training Year by the level at which the learning outcome must be demonstrated by the student/trainee pharmacist, and the context in which the Learning Outcomes are demonstrated. In order to successfully complete the Foundation Training Year, the Trainee Pharmacist must be signed-off against all of the Learning Outcomes by the Designated Supervisor.The committee discussed the worry of IP and where community pharmacy fits into this. |
| *0521-16* | **CPWN - update**CPCS updateCPWM have their own website. A repository across the footprint of WM. It runs You Tube videos providing links to external information. The latest one is about encouraging ethnic minorities to take the vaccination; this is available in all languages. We will be putting links on the LPC website and Patient Facing website.Future CPWM meeting where discussed- delay any face to face meeting decision until test event findings are known. Consider cost of time and venue as well. Blended approach may be desirable. |
| *0521-17* | **Community pharmacy workforce**TC reminded everyone the community pharmacy workforce survey needs to be completed and that the findings will inform education commissioning for future workforce developments. The link will be sent to all individual pharmacies and the data collection is by Manchester university  |
| *0521-18* | **Annual Contractor Meeting (AGM) – planning phase**The committee decided that a virtual event would be better for the AGM, as per last year. the topic of focus should be around both local and national services and how to implement them in the pharmacy |
|  | **CLOSED MEETING** |
| *0521-19* | **CHSL Scrutiny & Oversight Committee**Loan will start to be re-paid ay time soon. TC will inform members once this starts  |
| *0521-20* | **strategy for LPC for 2021-22**NA and EL agreed to look at the plan on a page and make necessary changes. |
| *0521-21* | **Future meetings – Face-to-Face or virtual**NA and TC asked the committee member their thought about the future meeting set-up for the LPC. A number of permeations were discussed with the outcome being to remain as w are at the moment and TC to contact Thea to discuss their procedures for using the board room again. |
| *0521-22* | **Applications/Regulations**TC shared the number of supplementary hours changes. There was some concern about local service provision when so many pharmacies are now reducing hours or closing on a Saturday. Another concern was that the pharmacies remaining open are becoming very busy due to the limited number of pharmacies available on Saturdays.The main discussion was around relocation of Well Blurton into the new primary care centre in Meir. TC to respond accordingly. |
| *0521-23* | **AOB**EL raised the point that DoI need to be updated a that, due to virtual meeting, no committee members have sight of these. TC will send around new forms to be completed and then share to members |

These minutes are signed as being a true record of the meeting, subject to any necessary amendments being made, which will, if any, is recorded in the following meeting’s minutes.

Signed: ………………………………………………Position:......CHAIR............. Date:............................

Signed: .................................................................Position:......CEO.................Date:............................

During this meeting, along with these minutes, there was a constant check to ensure no discussions could constitute to breaking competition law.

Signed......................................................position.............................................Date