
CPH MINUTES
17 November 2021
via videoconference

Present

Rachel Solanki (C) RS
Karsan Chandegra KC
Zahra Choudhry ZC
Sean Gage SG
Girish Mehta GM
Vinesh Naidoo VN
Parag Oza PO
Raj Patel RP

Professional

Helen Musson HM
Ingrid Cruickshank IC
Rita Patel RP
Sara Norwood SN

Apologies

Nilesh Bathia
Graham Phillips
Suraj Varia

Guests

Sarah Crotty – ICS
Fiona Deans – Public Health
Avni Shah – ICS
Pauline Walton - ICS

Minute No.	Agenda Item	Lead
1	<p>WELCOME & APOLOGIES FOR ABSENCE RS welcomed everyone to the meeting. Apologies were received from CPH members Nilesch Bathia, Graham Phillips and Suraj Varia.</p> <p>RS welcomed new CPH member Zahra Choudhry from Lloyds Pharmacy in Royston representing CCA.</p>	
2	<p>DECLARATION OF INTEREST None.</p>	
3	<p>ITEMS OF URGENT BUSINESS None.</p>	
<p>4</p> <p>4.1</p> <p>4.2</p> <p>4.3</p>	<p>MINUTES OF CPH MEETING HELD ON 8 SEPTEMBER 2021 The minutes were received and approved by the committee.</p> <p>The outstanding actions were received.</p> <p>Item 1: GP CPCS – HM noted the hypertension service will now be incorporated into the letter to PSNC. ACTION: HM to revise letter to PSNC and send to committee for approval within a week of the meeting.</p> <p>Item 2: Presentation has been done and will be published on the CPH website. ACTION: Office to add presentation to the CPH website and add to e-news.</p> <p>Item 3-5: LMC – CPH acknowledged the LMC has had some staff changes and that some of the actions may no longer be relevant. It was agreed some of the actions could fall into other categories with actions 4 and 5 being closed. ACTION: HM to catch up with the LMC to update them on the actions.</p> <p>Item 6: Diabetes framework – To be discussed under the workstreams item.</p> <p>Item 7: PCN CP Model ACTION: HM to update final document after the meeting and to publish on website and add to e-news.</p> <p>Item 8-9: ICS – To be discussed under the ICS item.</p> <p>The completed actions were received for information only.</p>	<p>HM</p> <p>Office</p> <p>HM</p> <p>HM/Office</p>
5	<p>INTEGRATED CARE SERVICE (ICS) RS welcomed the ICS to the meeting. AS thanked community pharmacies for delivering CPCS and CPH in terms of making the workstream happen, for their hard work and contribution towards CPCS and the COVID vaccination programme.</p>	

	<p><u>Covid-19 vaccinations</u> ICS have agreed to provide more resources to support community pharmacy integration in respect of operational delivery. The COVID programme is here to stay and the delivery model is being reviewed. Community pharmacy are well placed to deliver the vaccination service and the strategy is to get more involved.</p> <p><u>ICS</u> ICS is now transitioning with CCG commissioning being transferred to the Integrated Care Board (ICB) of the ICS. The delegated transfer of services including the community pharmacy contract from NHSE&I will be complete by April 2023. The ICS is proposing a primary care board which incorporates all primary care services (general practice, pharmacy, dentistry and optometry) across Herts and West Essex and is mindful of maximising community pharmacy integration into primary care.</p> <p>An operational group looking at GP CPCS has already been set up and there are plans to widen this looking at how to integrate all community pharmacy services. ICS will also have a primary care digital group that will incorporate community pharmacy and looking at local working. Both groups need finalising and this will be taken forward from January 2022.</p> <p><u>Winter Access Fund</u> AS confirmed there will be a PGD pilot for a defined group of pharmacies initially with the aim of a phased implementation across the whole ICS if successful. AS noted this will be a regular item for discussion at the two weekly operational GP CPCS meeting.</p> <p><u>PNA</u> CPH noted the PNA consultation process has been launched and requested that the ICS and CCGs support communications through their teams to encourage patients to complete the questionnaire. ACTION: PW and SC to request a communications plan for the PNA consultation with the communications teams.</p> <p><u>Digital access to health records</u> It was noted that community pharmacy are not part of the shared care record programme. AS will link HM into this programme. ACTION: AS to take back to the primary care digital group regarding shared care record access for community pharmacies.</p> <p><u>Transfer from NHSE to ICS</u> CPH stated ICS need to be careful regarding transfer of functions from NHSE&I eg. market entry as there is already knowledge in the existing team and would not be something worthwhile to be managed by separate ICSs. AS agreed to take this detail on board.</p> <p><u>Hypertension</u> It was asked how can the ICS work with community pharmacy to adopt a joint approach with the hypertension service. AS acknowledged that a joined up approach was needed and would undertake to ensure that this is taken forward.</p>	<p>PW/SC</p> <p>AS</p>
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	<p><u>Staffing</u> It was asked where are the ICS at with the current teams CPH work with ie. prescribing/medicines management. PW confirmed the mapping of functions are complete, workshops in place on how the functions should be performed ie. ICS level or place level then a team structure will be going forward. The workforce will be the same people.</p>	
<p>6</p> <p>6.1</p> <p>6.2</p> <p>6.3</p>	<p>CPH WORKSTREAMS Members asked if all the current workstreams are beneficial to a large proportion of contractors and whether it was value for money to support a small number of contractors with one service. It was agreed to review all the workstreams and to include updates with real data and metrics where applicable and to plan an appropriate exit strategy for workstreams that may no longer be valuable to support. ACTION: Office to update all workstreams and bring proposals to the January 2022 meeting for review.</p> <p><u>Care Homes</u> The paper was received. There was no additional update. ACTION: Bring data and metrics for the Care Home service for review at the January 2022 meeting.</p> <p><u>Stockpiling</u> The paper was received. There was no additional update. ACTION: Bring data and metrics for the Stockpiling service to the January 2022 meeting.</p> <p><u>CPCF 2021-24</u> The paper was received.</p> <p><u>GP CPCS</u> RP updated that two additional PCNs have been trained and will go live on 22 November. Two other PCNs will go live on 29 November and 6 December respectively and five other PCNs will go live throughout December 2021. Since the launch last week, there have been 119 referrals with 91 (76%) complete. Members gave approval for the office to contact pharmacies with supporting referrals going forward as it is of value for the office to support in this way</p> <p><u>NMS</u> HM updated that 155 community pharmacies met the target of 20, 87 had not met the target, 46 were at zero, 25 were below 10 and 16 at 11-19. HM asked what support do contractors want from CPH in helping with NMS in relation to the Pharmacy Quality Scheme (PQS). It was agreed to add an item in the e-news reminding contractors of their professional responsibility, signpost contractors to PSNC via the CPH website and email individual contractors to make them aware it is part of the gateway criteria. ACTION: CPH to add an item to the e-news and add link to CPH website. ACTION: CPH to email the individual contractors concerned to make them aware of the NMS requirement as part of PQS.</p> <p><u>Assisted Living</u></p>	<p>Office</p> <p>IC</p> <p>IC</p> <p>CPH CPH</p>

	<p>CPH requested to develop an end-to-end medicines related service for an assisted Living pilot with funding being made available. It was noted that CPH must be mindful of the services community pharmacy currently provide and requested appropriate remuneration. ACTION: HM/IC to explore and feedback to members.</p>	HM/IC
	<p><u>NHS111 Referrals</u> ACTION: Pick up with PharmOutcomes regarding referral feedback form from community pharmacy via NHS111.</p>	HM/IC
	<p><u>Hepatitis C</u> Due to capacity and the small number of contractors that had expressed an interest it was agreed for the CPH office not to assign any resources to this service at present</p>	
	<p><u>Public Health Campaigns</u> It was noted some contractors had not received their campaign materials and it was unclear what evidence was required to demonstrate community pharmacy activity. ACTION: HM to follow this up with PSNC and feed back to the Committee and inform contractors as appropriate.</p>	HM
6.4	<p><u>Local Prescribing and Dispensing</u> The paper was received. It was asked if CPH want to continue with the access to emergency drugs scheme as it only affected a small number of contractors and too much time was being spent on this by the office. After a discussion it was agreed to disengage from taking forward the service until commissioners were willing to engage in a meaningful service to be taken forward in the future. This should be carefully communicated to the existing 26 contractors and support provided to make their own business decisions. ACTION: CPH to contact the contractors involved and inform them of CPH decision. ACTION: CPH to inform the CCGs that CPH are not taking this service forward.</p>	HM/IC HM/IC
6.5	<p><u>COVID-19</u> The paper was received. Members were supportive of the amount of time as office staff are putting into supporting contractors recognising the numbers of contractors taking part is increasing and the is improving community pharmacy reputation.</p>	
6.6	<p><u>PCNs</u> The paper was received. No questions were raised.</p>	
	<p><u>Public Health</u> It was asked how many contractors are delivering the Public Health services at this current time. It was agreed to review this at the January 2022 meeting. ACTION: Bring data to the capacity plan and feedback at the January 2022 meeting. ACTION: Feedback impact on pharmacies re PGDs.</p>	CPH HM
	<p><u>Diabetes</u> HM gave an update noting the service was not working pre-COVID. There is funding still available and CPH are keen to use this for community pharmacy.</p>	

6.7	<p>It was agreed to proceed to use the residual funding based on the service model presented at the meeting.</p> <p><u>Member Questions</u> Members were again encouraged to watch the Chief Officers video presentation and bring any questions in advance of the meetings.</p>	
7	<p>Integrated Lifestyle Service RS welcomed Fiona Deans to the meeting. Fiona presented and gave an update on findings from the Health & Wellbeing Consultation (January to March 2021). CPH requested that community pharmacy is better involved and integrated with the service as it is taken forward. ACTION: FD to keep CPH updated on the development of the Integrated Lifestyle Service and that CPH are invited as key stakeholders.</p>	FD
8 8.1 8.2	<p>ITEMS FOR DECISION <u>Pharmacy Staff Vacancies</u> The paper was received. CPH members were asked to consider a request to create and add a pharmacy staff vacancies section to the website. It was agreed to go with option 1 on a trial period free of charge until the end of this financial year on 31 March 2022 with the suggested process being approved and to also audit this piece of work properly so CPH can understand exactly if value is gained. ACTION: SN/LG to create a webpage on the CPH website.</p> <p><u>Treasurer's Report</u> The paper was received along with Quarter 2 budget. No questions were raised and the committee approved the budget presented.</p>	SN/LG
9 9.1 9.2	<p>ITEMS FOR DISCUSSION <u>CPH Member Expectations and PSNC Member Days</u> The paper was received. There was no time for this item and this will be discussed at the January 2022 meeting. ACTION: Add to the January 2022 agenda.</p> <p><u>CPH Meetings Face-to-Face Proposal</u> The paper was received. The proposal was agreed to hold the two planned face-to-face meetings as full day meetings.</p>	SN
10 10.1 10.2 10.3	<p>ITEMS FOR INFORMATION <u>Executive Team Meeting Update</u> The notes from the last Executive Team meeting were received. No questions were raised.</p> <p><u>Contract Report</u> The report was received. No questions were raised.</p> <p><u>Member Report</u> The report was received. No questions were raised.</p>	
11	<p>AOB 2022 meeting dates – members agreed and approved the proposed dates. ACTION: SN to send members diary invites for the meetings.</p>	SN

	It was noted all members must attend the AGM on 4 July 2022. It will be confirmed at the March 2022 meeting whether this will be face-to-face or virtual.	
	NEXT MEETING 19 January 2022 (9am – 1pm) via teleconference	