



North East London Local Pharmaceutical Committee
LPC Meeting 15/03/23
Full day 10:00am – 4:00pm
Prince Regent Hotel, Chigwell

Present: Shilpa Shah (SS), Dalveer Singh Johal (DJ), Rebecca Dew (RD), Ross Fraser (RF), Prakash Patel (PkP), Mina Patel (MP), Pradeep Mayor (PM), Faruque Gani (FG), Kerry Webb (KW), Shazli Hafeez (SH)

Apologies: Imran Jan (IJ), Parvesh Patel (PvP), Abi Saragan (AS), Ravi Vaitha (RV), Jyoti Bakshi (JB)

Welcome

PkP makes introduction

Declarations of interest

No new Declarations of interest

SS gives update on SGM at City Gates in Ilford and outcome of voting.

The proposal of new constitution, merger with City and Hackney (C&H) LPC and extension of the current committee until July 2023, was accepted by all attendees. CCA and AIM members sent their agreement via electronic voting.

Agreement was unanimous with 100% of the votes.

C&H had SGM and similarly had a unanimous yes for merger. The merger will be discussed in more detail later in the meeting.

Minutes and Next Steps from previous meeting

Committee unanimously agree minutes.

SS goes through next steps.

SS notes the ICB is restructuring.

SS Outlines the ICB members that we are aware of.

ICB map will stay on next steps until later in the year.

SS raises the Pharmacy provider group meeting and clarifies this is a discussion group as opposed to a provider company that deals with accounting and bids.

SS informs the committee the LPC now has back-ups being set up with the IT company.

SS updates committee on mailchimp and that the LPC now has a paid plan due to changes to the free plan.

SS updates committee on the potential PSNC role previously discussed.

SS runs through remaining next steps that have been completed.

CEO/PSM update questions from committee (based on presentations sent out)

CEO and PSM update presentations sent to the committee with the papers, prior to the meeting.

SS asks committee for any queries on presentations

No queries on presentations.

SS outlines recent meeting with formulary group to discuss 3 branded generics they planned to send to pharmacies. SS suggested formulary be revisited as advice was based on 2019, pre-COVID. SS had separate meeting w/ Sanjay and Yogi from C&H LPC. RO Chief Pharmacist suggested to take to NEL Formularies and Pathways Group.

SS and Yogi presented to the NEL Formularies and Pathways Group and initially felt overwhelmingly positive however, Sanjay later come back to say the advice on the 3 branded generics had been pushed through. Sanjay has sent memo document to send to Community Pharmacies regarding stock, this has not gone out yet as SS has raised that she wants noted that the LPC have opposed the branded generic changes, and for the memo to be worded to that effect before being sent to contractors.

The committee discuss the changes and raise difficulties with stock and storing controlled drugs. It is also noted there are significant issues with Errors in dispensing for Oxycodone, and members are opposed to making it a branded generic.

Members raise that they wish for it to be noted the LPC are opposed to these branded generic changes.

SS has done all she can and raised.

PkP asks for further clarity on the changes

SS outlines proposed circular to the committee.

SS reiterates the process of being invited to the meeting, what was presented and the opposing case the LPCs made. SS highlights importance and focus on putting their opposition from a patient point of view as well as a to cost of pharmacy, however despite their efforts, the proposals still went through.

Committee discuss time commitment in sourcing medicines for patients.

PkP raises whether information can be shared in a newsletter.

SS clarifies LPC will share the memo with contractors once authorized, and will put a message from the LPC with direction.

SS raises that out of stock documentation has been sent to Pharmacy Leads for comment. Clarifies the document is supposed to be a quick reference guide, and that comments received will be taken into consideration prior to finalizing. Clarifies the document will be finalized and shared.

SS outlines process for shortages locally. Once a shortage is raised with the LPC, they discuss with local contractors and clarify with the manufacturer.

SS clarifies Medicines Optimisation has said there are no plans to further branded generics beyond the 3 that have been pushed through as previously discussed.

SS updates committee on the Pharmacy Provider group meeting. SS explains GPs have provider group which SS attends as an observer, highlighting it is a great group which stand together. There is a want for a provider group that integrates POD into a collaborative with GP's as we are all part of Primary care. The LPC is restricted in their contribution to this group as it needs voices from the ground and there is an offer of one Vice Chair place. SS clarifies it is not a decision making group, however people need to attend to raise issues. SH attended the meeting, SH informs the committee it was a productive meeting, there is no outcome straight away but is an opportunity to raise and be listened to.

SS raises the potential for technicians to be included and If there are any technicians that want to be PCN Leads to fill the gaps, they can then also join the group.

Committee discuss technicians in community pharmacy, SS clarifies technicians will be able to give more support i.e. with Blood Pressure pharmacists after May. Committee discuss issues with training technicians and workforce issues as they then leave community pharmacy. Members discuss their experiences and the potential for technicians in community pharmacy after May.

SS raises City and Hackney's provider company as something that needs to be considered when merging. The barrier to be considered is getting funding, as the LPC do not want payment to be a barrier for new services. C&H is an established provider company, with existing contracts for services and C&H LPC needs to know the LPCs initial position on the provider company as funding is available but will only be funded through the provider company.

SS suggests the LPC continue with the provider company Initially as we can't just stop it and we can then look at how we use it to the benefit of contractors in the future as long as there are no legal implications, suggests if services have management fees then pharmacies should not pay membership fees.

MP queries if this is a Federation, SS clarifies it is similar and outlines what a Provider Company is. SS Outlines advice from PSNC, clarifies this Provider company is established and accounts are available. SS Suggests keeping for now, review each service as they are reviewed. SS discusses management and indemnity.

SH queries whether after merger, would there be an option for pharmacies to join from NEL. SS confirms they would, and raises that C&H members have paid so this would need to be reviewed.

SH raises issue being experienced with pharmacies being set up for the lung cancer campaign. SH discusses management fees the provider company would receive to pay for staff members to undertake the work. SS clarifies there are tax implications on any payments made.

SS outlines pharmacies joining the provider group and the usual process with CCAs and provider groups, ICB will usually set up an account with the Provider Company and each CCA separately.

Committee discuss the benefits of provider companies and ensuring consistency.

SS outlines the process for bidding on services, making payments easier, etc. SS also raises the process and potential implications of bidding.

SS outlines experience with provider companies.

Pkp gives experience with provider companies.

PkP clarifies in City and Hackney, Minor Ailments is run through the provider company.

SS clarifies commissioner would still decide who gets the service, the Provider Company would handle the accounting and funding.

Members discuss need to review accounts and membership fees.

SS asks for thoughts in principle

RF queries if City and Hackney are in Pharmacy London

SS confirms they are and the decision to stay will be for the new committee, after the merger.

RF Clarifies CCA position on Pharmacy London.

SS outlines the ICB structure and the mergers, the restructure of the NHS and clarifies there will no longer be NHS London as such and NEL ICB will be hosting the delegation of community pharmacy contracts for all London ICB's.

SS will get more information from the Provider Company and in the meantime, will confirm with Yogi the NEL will be happy to carry it on without prejudice as long as the accounts etc are in order, and he can secure the funding.

Services update

SS informs committee that the LPC will find out in April if have been successful for the Independent Prescribing (IP) bids. Rita shah and Yogi will be job sharing the community pharmacy clinical lead position in the ICB, working with the LPC for DMS, Smoking cessation, and other services. SS has raised the important of bringing issues to the LPC as opposed to going to Contractors directly.

Rita will be leading IP Pathfinder. LPC had an IP Information virtual meeting, which SS led with IPs to discuss potential services. Jignesh from Rohpharm has been supporting SS with IP meetings and has been communicating with SS and supported with costings. The pricing tended to look at cost however, profits needs consideration. SS will keep members informed, ICB are keen.

DJ acknowledged support from GPs, but do not want too much clinical responsibility on pharmacy at first. Services will be basic at first until confidence raises. There are Concerns for patients with co-morbidities therefore, GPs do not want to push too much clinical responsibility where patients are already on medication for various conditions.

Committee members discuss experience with blood pressure checks, and where CP interventions have supported patients. Share experiences of successful interventions where patients received further support.

Committee discuss uploading results on PharmOutcomes and MYS for Hypertension, this is not automatically done on both platforms at the moment due to an API issue so must be uploaded to both.

Committee discuss issues with GP CPCS referrals, experience and learnings.

MP queries indemnity once referral is received, SS clarifies indemnity is with Pharmacy.

DJ clarifies referrals need to be cleared as uncontactable if they are unable to contact patient.

SS clarifies that is the process the pharmacy must go through if the patient is uncontactable. SH suggests as PCN Leads, can communicate to their groups and make a case study to demonstrate liability to contractors.

Next Step: Case studies for GP CPCS referrals to demonstrate Pharmacy liability in different scenarios.

SS clarifies the PCN Leads should currently be focused on hypertension at the moment as there is more urgent work to be completed, the PCN lead work on Hypertension has been sent to leads from the LPC.

FG clarifies his process for contacting patients and closing referrals to ensure protected with regards to liability and an audit trail, should the patient not respond.

DJ raises where there are locums at the pharmacy, to ensure they are able to check PharmOutcomes as they are liable as the Responsible Pharmacist.

Committee discuss the rise in reliance on locums and their responsibilities whilst on Duty at the pharmacy.

SS informs committee the LPC will be having a June contractor meeting, and opening to locums as there will be no extra cost and will support the local community pharmacies. Discuss process for turning off GP CPCS if responsible pharmacist is a locum who does not provide.

In Havering, Smoking cessation pilot in 8 pharmacies in specific postcodes. SS outlines service. WDP have now taken over Smoking Cessation in Redbridge based on the Havering model.

Tower Hamlets wanted to extend sexual health for a year but no increase in payment, SS refused at same price. TH have confirmed uplift in price. SS outlines the uplift.

SS confirms Smoking Cessation is being renewed for three years. TH PH Teams approached to say they could not increase the fee and there would not be staggered payments, therefore no payment without a quit. The quit rate is currently 55%, meaning 45% of work is not being paid for. SS and DJ have discussed with contractors and have agreed to pull out if no staggered payments or uplift. SS has informed Tower Hamlets they may need to pull out but has assured them this will be over a period of time to ensure patient continuity.

SS raises discussions with other LPC's regarding signing up with CGL contracts. Clarified LPC cannot talk numbers but confirmed there has not been unanimous agreement to the suggested core MAT contract by all LPC's. SS outlines the initial offer for the core service and reasons for not signing up. SS outlines her ask of CGL and their agreement for figures. Committee are happy with the new offer from CGL for Havering.

PkP outlines experience with gp cpcs in his pharmacies. Discusses engagement with GPs and reiterates closing the loop by closing referrals is integral for the service, as well as opening PharmOutcomes the morning to ensure referrals are picked up.

Members discuss the benefits of PharmAlarms.

SS informs committee NEL are number 1 in the UK for GP CPCS, for the amount of referrals that have been done. NHS London have asked SS to share what we have been doing. ICB funding has paid for time, supporting results. Funding is in place until February 2025 to use

EMIS, all NEL GPs are EMIS apart from approximately 15. SS notes there is a group of surgeries which are still referring via NHS Mail which causes issues with coding. This will be rectified and LPC will work with them.

With the funding, LPC have got pharmacists on ad hoc basis that complete checklists to ensure Pharmacy is ready for GP CPCS, i.e setting up PharmAlarm, have process in place and have cleared old referrals. SS further outlines the work NELLPC have done to support GP CPCS in pharmacies and surgeries i.e. with face to face training where requested.

SS reminds committee funding supports the training but will not be there forever, and once the training is complete, Surgeries and Pharmacies need to implement in business as usual or remove themselves from the service if they are unable to continue.

SS highlights not much of the funding has yet been utilised and informs the committee they have interviewed a candidate to be employed with the remainder of the funding, as agreed by the committee at the last meeting. SS discusses interviewed candidates and informs the committee of the person they intend to offer the position to. Outlines this is a fixed term, 12 month contract at present. SS informs the committee the job includes support for GP CPCS, Hypertension and all national services to ensure it is in line with the funding.

LPC has started support for the Hypertension in the same way as GP CPCS, DJ outlines the positive and negatives experience so far. DJ confirms there has been a virtual event for surgeries with 55 attendees, good engagement and good questions. Mixture of GPs, nurses, were in attendance and are happy to do face to face training as needed.

Positives, Pharmacies are getting referrals quickly, quicker than seen with GP CPCS which is likely because it is clearer where work will be moved over from the Surgery. 600 patients were confirmed to be sent over 8 weeks from one surgery, however, LPC had to go back to the surgery for discussions in terms of planning as such a large number of referrals at once overwhelms the pharmacies. There have been further issues with using GP CPCS referrals for Hypertension, and is not in the remit of GP CPCS, therefore they had to be sent back.

LPC will be suggesting a 3 day per patient rule for ABPM. A day of fitting; 24 hrs for monitoring and a day to return. Turn around time can then be considered to ensure Pharmacy can plan for patients. Do not want pharmacies to buy more ABPMs until The service has stabilised and we can really see that the machines are needed.

SS also highlights there have been errors such as sending 2 – 5 year olds to the pharmacy via referral.

SS raises that LPC do not want pharmacies to stop doing the opportunistic blood pressure checks where they are overwhelmed with referrals, as this is really what the service was developed for.

SS outlines the amount of referrals had been received to date and the revenue that will bring into community pharmacy.

KW queries whether the pharmacy should come off if they are booked up, SS clarifies they should not and instead discuss with the surgery to manage bookings and lean on local relationships.

SS reminds members that surgeries need to give patient choice where they want to go, rather than sending to one pharmacy.

DJ outlines experience with local surgeries and referring to pharmacies.

SS raises discussions with local area managers with regards to buying more ABPMs as are investments and must be considered on cost/benefit basis.

SS raises PSNC pausing year 5 of CPCF due to funding issues.

Members discuss the change in need for free deliveries during COVID, and the need to change to stay competitive.

Members discuss Lloyds pharmacies closing.

Members discuss closures of Lloyds pharmacy branches in NEL, SS clarifies the changes in NEL. Lloyds are closing Sainsburys instore pharmacies and there are some change of ownerships. LPC are not aware of all changes yet or the dates in which they will close/change.

Finance Update

SH gives finance update.

SH raises the savings the LPC has made in the current budget, giving examples of where money has been saved.

Members discuss alternative arrangements for meeting rooms.

SS highlights where large savings have been made, the LPC had budgeted for sub committees to have meetings however, sub committees are communicating effectively by email. SS raises that there has also been a vacancy on the committee and absence at meetings which has contributed to the savings.

SH outlines further savings.

Opens to committee to questions

SS raises that we may be able to give another months Levy holiday in May 2023.

Committee discuss possibility of one more months holiday.

Committee discuss financials on merging with City and Hackney LPC.

Members discuss LPC Mergers across London and the changes in PSNC revenue, and therefore, contractor levy.

Members discuss contractor payments and how levy payments are calculated.

SS further discusses City and Hackney's provider company as she has received a statement from C&H wanting to clarify wording. Members discuss and agree they must see accounts and terms prior to agreement.

Committee discuss contractor levy.

Regarding the merger, SS clarifies both committees come in with 50%, then merge accounts would be an ideal process. Committee query the budgeting and merging accounts process.

Pkp queries the funding money from the ICB for the services in Account 2

SS clarifies City and Hackney are entitled to a pro rata percentage of some of the funding, and we could either have C&H invoice and send to them, or keep it in the account.

SS reiterates that we will be merging and will all become NEL, and are working to the ICB and must align with that area.

Committee further discuss levy fees, dispensing figures and agree further discussions must be had once we have more information on accounts and budgeting from C&H.

SS will look into the accounts and ensure merging is as fair as possible.

SS to look at money spent and amount needed for the remaining levy holiday months, and come back to executive committee to agree if another months holiday is viable.

Next Steps: RD to send statements to SS to consider another Months contractor levy holiday for May 2023.

SS raises that money must be saved for the tax bill. SS will be meeting with City and Hackney LPC tonight.

SS presents funding spreadsheet since January 2022, when SS and DJ started with the LPC. Goes through positive outcomes for NELLPC over the past 13 months including amount of funding coming in, savings made on changes to office. SS outlines the money which has gone to contactors through new/uplift in existing services; support for contractors to access funding and levy holiday.

Members discuss update from SS and agree savings are positive.

SS put to committee for questions.

No further queries from Committee Members.

SS has put together a predicted budget for the next financial year, after the merger. Notes the budget is not set in stone, would have a better idea after the first year of the merger. SS clarifies the need to find over 21k for PSNC Levy increase, but will likely find this in savings for 2024/2025. Therefore, the LPC will not need to increase levy for contractors this year as changes from merger will mean this does not need to be done. The LPC will not need to put up next year either but may need to the year after.

For staffing, the budget has been increased for another PSM incase we need to due to workload however, this will not be filled unless deemed necessary. SS raises that the workload is increasing for the right reasons in terms of networks and there is a need for another pharmacist to support with the workload.

Budget has included an uplift as current staff will be increasing workload with another 60 pharmacies.

SS confirms no staff members are being taken on from City and Hackney LPC.

Committee discuss budget for venues and changes in meetings that may occur. Committee agree to budget for face to face for next years meetings.

SS raises that the budget for staff course fees has not been utilised. Members suggest possibility for a team building exercise, particularly considering new committee members and the need to build relationships.

SS continues through budget and asks committee of any amendments.

Members agree any potential changes to amount are negligible at present and will be given in Levy holiday if unused.

PkP raises possibility for a member to give presentations at pharmacy show to showcase the good work we are doing. Members agree, SS highlights it can budgeted for where person is going for LPC.

Committee discuss paying for VirtualOutcomes as pharmacies are not using it. Committee discuss the need for additional training when there has been so much already.

Open for committee comment.

Committee discuss the current budget and agree it will set NELLPC well to budget for next year.

Committee discuss support to Shilpa as CEO.

SS suggests a Job title change for DJ from Pharmacy Services Manager to Deputy Chief Officer.

RF suggests putting together a Job description and go through the proper process to ensure expectations of the role are acceptable for DJ.

Next Steps: Outline Deputy Chief Officer Job description

PkP raises the need for office staff to choose meetings they are attending to ensure value for money by attendance.

DJ clarifies meetings are mostly virtual.

SS and DJ highlight meetings where Pharmacy has no representation and the work they have done to be included. Highlight that whilst the agenda may not always be relevant, attendance is important to ensure voice is heard where relevant.

Members discuss Deputy CEO role.

Merger Update

SS outlines the process of merging with City and Hackney LPC. SS confirms there is a meeting with City and Hackney LPC tonight to discuss. SS outlines the process for calculating new committee representatives, with a cut off date of 31st January 2023 to ensure as accurate as possible contractor numbers. LPC will then take out CCA and check AIM members with Leyla from AIM.

Once the contractor sheet is accurate, the LPC will put in for 11 committee members and deduce how many CCA, AIM and independent representatives are allocated.

CCA/AIM places will be allocated by CCA/AIM respectively. For independent places, members agreed would prefer contractor candidates will take preference over employee and after the merger, independent places will not be split geographically as there may not be enough places. Therefore, will go out to all independents for places on the committee. The new committee will be in place by Mid-June, ready to start 1st July.

SS needs to check process for when they can elect executive committee. Highlights that most LPCs only have Chair, Vice Chair and Treasurer and NELLPC should follow suit after the merger. If two candidates come forward for the positions, the committee will vote and then the office will take the necessary admin i.e. bank account signatory changes.

SS clarifies the changes to the constitution and elections are now done virtually.

SS would like to go to C&H to agree budget for the new committee to take on, as our committee have agreed.

SS asks committee whether they have received any comments from contractors with regards to the work done by the LPC. Members give feedback. Members highlight comments received regarding better engagement via WhatsApp groups; the efficiency of meetings done virtually and less frequently as historically there were a number of evening meetings. Members discuss potential for trainings to support technicians with changes to role from May.

PSNC Update

Prakash gives PSNC update to members.

Break taken in PSNC update for Yogi, CEO of C&H LPC to join meeting to discuss LPC statement on intentions with City and Hackney LPC's provider company.

Yogi Joins the LPC Meeting to discuss the provider company (PSP). Yogi outlines the funding providers concerns with the LPCs attitude towards provider companies. Funding provider wants assurances before providing funding for the next three years, and asks for a position statement from NELLPC of their intentions after the LPC merger.

Members raise concerns as they have not seen accounts, Committee need more information before can commit to a stance.

Yogi informs the committee the accounts are publically available.

Yogi presents PSP accounts to the committee.

SS queries the amount currently in the account and whether there are any expected issues. SS queries whether current City and Hackney Committee members will stay on with the changes in the LPC. Yogi clarifies the constitution dictates the board must have 2 LPC members.

PkP queries if there are any outstanding liabilities for the Provider Company.

Yogi confirms there are not.

PkP queries whether the Provider Company has any employees.

Yogi confirms there is one employee working 10 hours a month.

PkP asks for full accounts from the Provider Company.

Yogi to share full accounts with the LPC.

Next Step: LPC to make considered opinion once accounts received from Yogi.

Yogi highlights he needs a qualified statement for today to secure funding.

Members query payments to managing directors, and liabilities of board members.

SS queries the amount of funding the statement will secure. Yogi confirms 180k.

SS queries whether funding can be given as a grant, as seen in NEL. Yogi confirms this is a straight contract renewal, which requires a position statement to go ahead

Yogi outlines benefits of provider company.

Committee to discuss over the next 5 minutes and then send the statement.
Yogi leaves the meeting.

Committee discuss the options for taking over the provider company.
Committee discuss services under the provider company.
Committee unanimously agree to the mission statement agreeing we will take on the provider company and are comfortable and without prejudice, and should any new information arise which cause concerns, the LPC will reconsider support.

Pkp continues PSNC update

AOB

SS has unused annual leave of 5 days which she intended to take next week, however with current workload has asked the committee if she can carry it over to next financial year.
Committee unanimously agree.

SS raises whether time in lieu can be flexible to take back hours worked on overtime without prior approval.
Committee unanimously agree as they trust SS and the office team.

