

Community Pharmacy North East London Committee Meeting 17/09/2024. Full day 10:00am – 4:00pm London Chigwell Prince Regent

Present: Shilpa Shah (SS), Rebecca Dew (RD), Dalveer Singh Johal (DJ), Jaspreet Dhaliwal (JD), Bhavna Tailor (BT), Gulveer Sura (GS), Faruque Gani (FG), Prakash Patel (PkP), Nickil Patel (NP), Shazli Hafeez (SH), Ross Fraser (RF)
Ravi Vaitha (RV) from 11:45am.

Apologies: Parvesh Patel (PvP), Mina Patel (MP), Jyoti Bakshi (JB), Kerry Webb (KW)

Welcome, Introductions & DOI

PkP starts the meeting at 10:49am

PkP gives brief introduction to the day.

Members and attendees around the table introduce themselves, Bhavna gives introduction as this is her first meeting with the committee following her start in August.

SS opens for new DOI

No new DOI

Minutes & Next Steps

Minutes sent prior to meeting. SS opens for queries and comments.

No queries from committee.

Minutes unanimously agreed

SS goes through next steps.

Carry over Committee training day step.

Next Step: SS to outlines outcomes from a Committee Training day.

SS outlines the eight planned CPNEL webinars. SS made contact with an organisation that is providing the training for free with honorariums covered by them of the presenters. Other companies were considered and were offering similar at high cost. At the first UTI webinar, 140+ attendees. Webinars are recorded and will be made available on the website.

SS has asked for consultation examples to be included in future events.

Happy to share with other LPCs as contractors found really useful. Hopefully will start to see an improvement in clinical notes for future.

Members discuss Webinar. Members commend the webinar for detail and engagement.

PO template has been gone through, just need to find out what the GP sees their end. This is a national template so no changes can be made.

Carry over Branded generics email

Next Step: CPNEL to prepare a form where contractors can send information regarding branded generics, so we can raise with the ICB to understand why this is being prescribed.

Meds Waste photos have been gone through and collated onto a presentation, to be shown at tonight's PPG meeting.

The responses to the request for CPs to measure emergency supplies over 1-day mid-week to be checked and collated.

Next Step: Collate responses to emergency supplies over 1-day mid-week, to feedback to the ICB

Members discuss Raliat's visit at the last meeting.

SS gives examples of recent discussions and meetings with the ICB.

Members give examples of PCN pharmacists in local GP surgery and appointments.

SS updates on recent Wes Streeting visits to a NEL pharmacy.

Members raise the importance of Wes Streeting's Visit and commend Shilpa for arranging.

SS raises initial plans for a NEL conference likely in January 2025.

CEO update

SS opens for queries on presentation.

No queries or comments from members.

SS recaps Wes Streeting Visit and conversations.

Members discuss local issues with GP appointments.

SS raises C&H PSP company and the three services paid through them. Discusses the end of the contracts and alternative payment methods, as they are trying to close PSP down. Unsure on how long it is going to take due to payment issues. Going to use the 200k remaining MAS funds for CPSAS and then close down. Aiming to close by March 2025 but likely to take longer.

SS raises the potential to leave the company dormant after closure, so it can be re-opened if the need arises. SS outlines reasonings for and against remaining dormant, and associated accounting costs.

SS put to committee - Do we close or do we leave dormant?

Members discuss options and mention with the new government, we do not know what the landscape is. Suggestion to wait until nearer the time of PSP closure and consider again, so we better understand the situation then.

SS outlines the money that is still with PSP and where it is earmarked to be spent, and at which point the money is spent and the account can be made dormant. Notes contracts can move out but the MAS is ongoing, now as CPSAS.

Committee agree to come back to committee for further decision.

Members discuss recent communications with Pharmacy London and changes in personnel.

Raise the importance of representation and behaviours at meetings, ensuring CPNEL's professionalism.

PkP raises that he presents CPE updates to Pharmacy London to avoid a potential conflict of interest. Notes NEL is not discussed at these updates.

Ravi joins at 11:45am

SS raises recent email from CPE RE their Committee composition and sector ownership, following RSG. SS outlines email update on situation with pharmacy owners with 10+, and the selection process.

SS raises the Healthwatch complaints charter at C&H. Previously amended the charter as Pharmacy is different, and it was based on surgeries. Agreed changes at last meeting in principle, SS will send for approval.

Next Step: SS to send the amended C&H Complaints Charter for approval.

CPNEL have recently seen an increase in contractors raising concerns about EPS nominations and changes being made without patients full understanding. SS informs members contractors are coming to the LPC regarding nomination changes without patient permission. SS outlines examples the pharmacy owners.

Suggestion to formulate a template for patient complaint email. SS reminds committee that this has been suggested before however, the committee decided not to move forward with sending at the time. SS opens the previous email outlining the complaints procedure for pharmacists to share with their patients. Issues with blanket emails was raised. SS outlines members responses to the previous email.

SS opens for committee discussion on how to move forward. Do we send the email to all, or just those that have raised concerns? Notes concerns are significantly rising and a lot of time is being utilised. Members discuss the potential ways forward.

Suggestion for previous email to go to all contractors for support. Members agree there is nothing wrong with the email. Staff raise the importance of having a response.

Members unanimously agree for the email to be sent to contractors.

Members raise Dentists and Opticians doing BP checks. Members discuss the opportunities for patients and how the service will work.

Discuss CPE posters being utilised in local places such as Gyms.

Discuss experience of opportunistic checks and Pharmacy First.

Treasurer Update

Finance papers sent prior to meeting; SH gives update.

Opens for queries

No queries

Break for lunch at 12:30pm
Reconvene at 13:45

Dalveer/Jaspreet/Bhavna update

Dalveer, Jaspreet and Bhavna sent their update prior to the meeting. Opens to committee for queries or comments.

Member queries booking and training in C&H, JD gives update and offers to share booking link. SS to send out to all PCN Leads by early next week.

FG queries if new start will take over Abi's workload now that she is on Maternity leave, SS confirms he will be and we will be sending an introduction in due course.

CPE Update

Prakash gives CPE update to committee members. Updates on data and latest news from CPE.

Next Step: CPE Survey to be included in Newsletter/WhatsApp grp.

PkP opens for queries.

Members query PQS. PQS has not yet been negotiated.

SS suggests asking for PQS to be pushed to January and given at least 6 months.

Members discuss Pharmacy First figures and query thresholds. Members discuss their experience attempting to meet thresholds.

SS to email CPE to inform them that the Committee have raised issues regarding the pressures within pharmacy and the low referrals, therefore, pharmacy first threshold should be considered.

Next Step: SS to email CPE regarding pharmacy pressures and Pharmacy First Thresholds.

AOB

SS and DJ went out to pharmacies with Alex Norton, and the ICB on a visit to various areas including pharmacies, PCN and other primary care. Visit went well.

SS outlines the issues with CP being able to close during the recent riots.

SS raises bilingual labels and issues with liability. Members discuss and suggest until it is approved, similarly to language line, it is unlikely the pharmacist would be able to use it.

Further discussion regarding Pharmacy First referrals and CPSAS.

Close at 15:46