

CPWY Minutes

Location:	Virtual Meeting Held Via Zoom
Date:	Wednesday 15th March 2023

1.1 Present

Faisal Ali	CCA	FA	Apologies
Paul Barry	CCA	PB	
Abbas Bashir	CCA	AB	
Vice Chair - Chris Bland	AIM	CB	
Treasurer - David Broome	Independent	DB	
William Chapman	AIM	WC	
Chair - Ashley Cohen	Independent	AC	Apologies
Mohammed Ikhlaiq	Independent	MI	
Zak Laher	CCA	ZL	Apologies
Adeel Sarwar	Independent	ASa	
Sab Shah	CCA	SS	
Amanda Smith	Independent	ASm	

1.2 Apologies

2.1 In Attendance

Kathryn Kelly	Head of Operations and Support	KK	
Alison Hemsworth	Head of Services	AH	AM only
Phil Wiles	PCN & Contractor Support Lead	PW	AM only

3.0	WELCOME TO THE MEETING <ul style="list-style-type: none"> This half day meeting was chaired by CB in AC's absence. Apologies were noted. 	
4.0	COMMITTEE GOVERNANCE <ul style="list-style-type: none"> Members were asked to note the contents of the LPC Code of Conduct and inform the Chair of any changes to their Declaration of Interests. Members were asked to note the Competition Law Compliance Guidelines. Attendance list from previous meetings was shared with members for information. 	
5.0	MEETING OBJECTIVES Members considered what the CPWY objectives were for this meeting.	
6.0	MINUTES OF THE LAST MEETING The minutes of the meeting on 18 th January 2023 were proposed as a true record of the meeting by ASa and seconded by DB. These were signed virtually by CB.	
7.0	MATTERS ARISING AND REVIEW OF ACTION POINTS FROM THE MINUTES All matters arising have been completed or are agenda items.	
8.0	FREEDOM TO SPEAK UP GUARDIAN ASm brought members attention to a Freedom to Speak Up Guardian website and queried if this could be used by community pharmacy teams. Item to be raised with NHSE at today's meeting.	
9.0	RISK REGISTER The risk register will be updated with any risks that are identified from this meeting. Action – DB to engage with the new CPWY CEO to work on this going forward.	DB
10.0	PSNC UPDATE – David Broome	

	<p>DB updated members on:</p> <ul style="list-style-type: none"> The introduction of the HRT prepayment certificate from 1st April 2023 and GPs apparent unawareness of this which may lead to potential issues with mixed scripts. Work is still being done around price concessions looking at better methods to manage the issues of contractors not being reimbursed the amount they have paid for certain medicines. DB advised members that he has been appointed as PSNC rep for West Yorkshire for a further four years. The tone of communications and responses from PSNC CEO Janet Morrison was noted to be more challenging towards the issues being faced by contractors. Members discussed the recent communication from PSNC around the firmer stance it is taking with regards to Year 5 funding, additional services and PQS. 	
11.0	WY PRIMARY CARE AND MEDICINES OPTIMISATION UPDATE	
11.1	<p>PRIMARY CARE COMMISSIONING TEAM – Dawn Ginns & Marie Wharton</p> <p>Bank Holidays</p> <ul style="list-style-type: none"> Information from pharmacies who had opened over the Christmas and New Year holiday period under an expression of interest was shared with members. It was noted that bank holiday cover was well utilised and activity data collected included the logging of telephone calls as this accounts for much of the work done. A request, via MS Forms, has been sent out to pharmacies to request bank holiday opening times for 2023/24. This information has been shared with Place Leads for review. Members queried why this information needs to be requested when it is Terms of Service for pharmacy to update DOS with this. MW agreed to take this query back to the national team, acknowledging that this was duplication of work. <p>Action: DB to ask PSNC to remove the bank holiday template from their website. <i>Post Meeting Updated: PSNC has removed the bank holiday template and communications are being sent out regarding bank holiday updates.</i> ACTION: DB to share comms with MW when published.</p> <p>Pharmacy Closures Details of number and types of pharmacy closures so far this year were shared with members. NHSE is closely monitoring the impact of the closures noting that there are no specific gaps. DB requested that it be noted that consolidations do not constitute a gap in provision.</p> <p>CPCS</p> <ul style="list-style-type: none"> Headline information was shared with members around the work being done by the CPCS Support Leads. Willing GPs have been identified and work is being done to support them but the increase in referrals has not been as high as anticipated. Members suggested that the new GP contract would be a good way to encourage referrals. It was highlighted that some of the comms mention signposting rather than the correct term of referral. Members discussed how informal referrals could be recorded to assess the level of the issue of patients being told to go to pharmacy rather than being referred. It was noted that where a surgery is not signed up to GP CPCS there is no referral mechanism for them to use, noting that GP CPCS needs to be mandatory. <p>Action: MW will feed this back.</p> <ul style="list-style-type: none"> NHSE has previously paid for the IT Licence used by GP for this service. MW confirmed that this would continue to the time being, but for how long is unknown. 	<p>DB</p> <p>DB</p> <p>MW</p>

	<ul style="list-style-type: none"> Data shows that GP CPCS signups are stagnant and 111 CPCS utilisation has dropped considerably over the last 12 months. MW is addressing this with the YAS/NHS111 team. <p>FREEDOM TO SPEAK UP GUARDIAN</p> <ul style="list-style-type: none"> Details of the FTSUG website were shared with NHSE, asking if this can be used by community pharmacies. <p>Action: MW to investigate this and feedback at the next meeting</p>	MW
11.2	<p>PRIMARY CARE – Kirsty Turner (Leeds)</p> <p>Apologies were received from KT. In KT's absence, DG gave members an overview of the GP contract changes. These included:</p> <ul style="list-style-type: none"> Streamlined approach to QOF/IIF Changes to childhood immunisation Improving patient experience and satisfaction of access Building on ARRS GP Access Recovery Plan <p>Members noted that it appears there is to be a reduction in the work required to allow for an improvement for patient access, but that this is not the case of community pharmacies and that this appears unfair.</p>	
11.3	<p>MEDICINES OPTIMISATION UPDATE – Lindsey Greenhalgh (Kirklees)</p> <p>LG had IT issues and was unable to join the meeting. LG will send an update by email which will be circulated to members.</p>	
12.0	<p>CPWY TEAM UPDATES</p> <p>Team update reports were shared with members for information and for members to ask questions or seek clarifications.</p>	
12.1	<p>SERVICES – Alison Hemsworth</p> <ul style="list-style-type: none"> AH outlined the details of the work done reviewing the Hypertension Service and the differences in delivery that this has highlighted. AH also clarified the details of the Leeds Hypertension Pilot which is due to end on 31st March 2023. Members queried whether it's possible for a contractor who has done a hypertension clinic check to refer the patient to another contractor for an ABPM check. <p><i>Post meeting update: PSNC has confirmed that this is not currently a facility within the service specification. All contractors providing the service must be able to provide both parts of the service (clinic BP and ABPM).</i></p> <ul style="list-style-type: none"> AH advised that some contractors are not claiming through PharmOutcomes and MYS for services that they are delivering and highlighted the loss of income for these pharmacies. AH asked members to encourage contractors that they are speaking with to ensure that they are claiming for work they are undertaking. DB advised that the API required for several services to enable the link between PharmOutcomes and MYS should be available within the next 6 months. It was noted that some hospital trusts are expressing concerns that pharmacies are not processing DMS which is leading to QIPP issues for the Trust. Contractors who are not claiming for DMS which they have completed may be impacting this. DB stressed the importance of highlighting that issues are being created due to the IT systems not integrating in the way that is required. 	
12.2	<p>OPERATIONS</p> <p>There were no queries with regards to the shared report.</p>	
12.3	<p>PCN / CONTRACTOR SUPPORT</p> <ul style="list-style-type: none"> A brief discussion was held around the PCN Community Pharmacy Lead vacancies and whether a contractor from a different PCN could be a PCN CP Lead. 	

13.0	CONTRACT APPLICATIONS AND AMENDMENTS UPDATE This was shared with members for information.	
14.0	TREASURER'S UPDATE – David Broome <ul style="list-style-type: none"> The operational and services summary finance packs were shared with members for information. RB did work prior to leaving post on the 2023/24 budget which was presented to members for approval. The proposed levy increase is in line with the PSNC levy increase. It was noted that the move to a smaller office has led to a £10k reduction in cost (a budget has been allowed for the use of meeting rooms if required). The budget was unanimously accepted. Members discussed the impact on the levy if a high script volume pharmacy was to move out of the area. Action: DB to discuss with PSNC and seek assurance that the CPWY levy charge would be reduced in a timely manner to protect contractors in the area from a significant increase in levy charge. Action: DB to add this significant risk to the risk register. Action: DB to draft a News Digest item to advise contractors of the change to levy	DB DB DB
15.0	COMMITTEE MEMBER BLOG An updated blog timetable was circulated following changes to membership. Thanks to members for blogs which have been submitted. Next ones due are: <ul style="list-style-type: none"> March – Adeel Sarwar April – Chris Bland May – Paul Barry 	
16.0	CONTRACTOR ITEMS None received.	
17.0	MEMBERS' ITEMS <ul style="list-style-type: none"> PB raised concerns that planned pharmacy closures will impact on the workload of other contractors in the area and on patients if the pharmacy they move to is unaware of the service that has been provided by the closing pharmacy. DB advised that Healthwatch is to attend the next CPWY meeting so this will be added as an agenda item for the next meeting. 	
18.0	CCA REPORTING QUESTIONS These will be completed by AB.	AB
19.0	ANY OTHER BUSINESS Following the usefulness of the multi-sector GAS antibiotic discussions last year, the ICB has decided that there should be a formal process to reinstate a Pharmacy Silver group should an issue warrant this. The draft Terms of Reference were shared with members for comments. Action: KK to feedback comments to the ICB	KK
20.0	MEETING OBJECTIVES Objectives were reviewed and all objectives were met.	
21.0	DETAILS OF NEXT MEETINGS Meetings will be held at the Village Hotel, Leeds South and will commence at 9.30am prompt on the following dates: <ul style="list-style-type: none"> Wednesday 24th May 2023 Wednesday 5th July 2023 Wednesday 13th September 2023 Wednesday 15th November 2023 Wednesday 17th January 2024 Wednesday 20th March 2024 	

22.0	CLOSED SESSION This session of the meeting was held with the Finance and Performance Subcommittee and discussed the following: <ul style="list-style-type: none"> • Contract applications • Risk register • Bundle check 	
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