

<b>Location:</b>	<b>Village Hotel, Capitol Boulevard West, Tingley, Leeds, LS27 OTS</b>
<b>Date:</b>	<b>Wednesday 19<sup>th</sup> November 2025</b>

## 1.1 Present

Abbas Bashir	CCA	AB	
<b>Treasurer</b> – David Broome	Independent	DB	Apologies
<b>Chair</b> – Ashley Cohen	Independent	AC	
Mohammed Ikhlaq	Independent	MI	
Nasrat Khan	CCA	NK	
Zak Laher	CCA	ZL	Apologies
James Madan	Independent	JM	
Paul Mason	IPA	PM	
Fahad Rehman	Independent	FR	
<b>Vice Chair</b> – Adeel Sarwar	Independent	ASa	
Sageer Sharif	IPA	SS	
Amanda Smith	Independent	ASm	

## 1.2 Apologies

## 2.1 In Attendance

Nicola Goodberry Kenneally	Chief Executive Officer	NGK
Kathryn Kelly	Head of Operations and Support	KK
Lisa Meeks	Service Implementation Lead	LM
Phil Wiles	Primary Care Network Project Manager	PW
Emma Hermiston	Advanced Services Facilitator	EH

## 2.2 Guests & Observers

David Smith	Integrated Pharmacy and Medicines Optimisation Lead (Chief Pharmacist)	DS
Dawn Ginns	Primary Care Commissioning	DG
Claire Holmes (Sponsor)	Theramex	CH
Sarah Gordon (Sponsor)	Lupin Healthcare	SG

<b>3.0</b>	<p><b>WELCOME TO THE MEETING</b></p> <ul style="list-style-type: none"> <li>Members were welcomed to the meeting.</li> <li>Members' apologies were noted. DB is at the CPE meeting.</li> <li>AC requested that members remain mindful of the CPWY Rules of Engagement.</li> </ul>	
<b>4.0</b>	<p><b>COMMITTEE GOVERNANCE</b></p> <ul style="list-style-type: none"> <li>Members were asked to note the contents of the LPC Code of Conduct. AC reminded members that CPWY works in the best interests of all contractors and asked that all members are prepared for, and engaged, during meetings. AC also noted that matters can be challenged robustly but should be done in a respectful manner.</li> <li>Members were asked to note the Competition Law Compliance Guidelines.</li> <li>Attendance list from previous meetings was shared with members for information.</li> </ul>	

5.0	<b>MINUTES OF THE LAST MEETING</b> The minutes of the meeting on 17 <sup>th</sup> September 2025 were proposed as a true record of the meeting by PM and seconded by ASa. These were signed by AC.	
6.0	<b>MATTERS ARISING AND REVIEW OF ACTION POINTS FROM THE MINUTES</b>	
6.1	<b>7.0.1 – GPhC</b> At the last meeting members had discussed their concerns around situations where patients are unable to get the medication they require and GPhC advice around this. NGK has met with the GPhC inspector temporarily covering the West Yorkshire area who stressed the importance of putting the patient needs first. Members noted the importance of keeping intervention records to support their actions.  <b>7.0.2 – LPC Conference Topic</b> Members had requested that the future view on concessions should be taken forward for consideration as the regional topic. This was agreed and has been put forward to CPE. If accepted AC will speak at the conference.	
6.2	<b>11.0 – Inclisiran Proposal</b> Following the presentation by Mahmoud Khodadi at the last meeting the committee's response has been sent to MK. No reply has been received.  NKG and LM are looking at work being done in other LPC areas.	
6.3	<b>14.0 – ICB Quality and Safety Bulletin</b> This bulletin, designed by the ICB to bring together learnings identified and key national patient safety strategies, has been sent to pharmacies.	
6.4	<b>20.0 – Foundation Training Grant</b> Concerns had been raised at the last meeting around the training grant for foundation pharmacist training and how it is insufficient to cover the costs incurred. AC agreed to feed this back to Ali Sparke (ASp) following his attendance at the meeting.  ASp had no additional information to share regarding this but does want to keep the relationship with CPWY going.  AC has also raised this with the NPA.	
6.5	<b>Proposed Telegram Move to WhatsApp</b> Following the poll conducted around Telegram members willingness to move to WhatsApp, a new WhatsApp group will be set up and work done to encourage sign up to the new group with an Advent calendar promotion to drive participation.	
6.6	<b>Venue for Future Meetings</b> Following reassurances from the Village Hotel that work has been done to improve the wifi strength and speed, it was agreed that this would be assessed at the next meeting before taking any further action.	
6.7	All other matters arising have been completed or are agenda items.	
7.0	<b>CPE UPDATE</b> The October/November CPE/LPC briefing was shared with members for information.  Members discussed their frustrations around the late notification of the childhood flu vaccination opportunity, and the volume inconsistency. Members believe this service should be part of the pharmacy flu vaccination service.  SS advised that Cohen's branches receive updates of key messages, such as the childhood flu.  <i>Action: KK requested that SS share these updates or extracts from, with CPWY to help inform messaging to all contractors.</i>	SS

	David Smith and Dawn Ginns were welcomed to the meeting.	
8.0	<p><b>ADVANCED SERVICES FACILITATOR UPDATE Phil Wiles &amp; Emma Hermiston</b></p> <p>An update of the work being done by the Advanced Service Facilitators was shared with members. Key points included:</p> <ul style="list-style-type: none"> <li>• The promotion of the PCARP services to GPs, building relationships with GP practice staff, offering training and support to GP teams as required and requested.</li> <li>• The focus recently has been on the roll-out of TPP for the Pharmacy First Service. Feedback has been positive with practices finding TPP easier to use.</li> <li>• Pharmacies are being supported if issues are identified or support requested.</li> <li>• An update on the ICB Place reports developed and shared with Place Leads was given by EH. Place Leads use this information to hold practices to account. Testimonials are being included to highlight the benefits to patients.</li> <li>• AC asked if it would be possible to overlay GP appointment waiting times.</li> </ul> <p><b>Action: NGK to raise with CPhIG.</b></p> <p><i>Post meeting note: NGK has submitted a request for this to be introduced for future reports.</i></p> <ul style="list-style-type: none"> <li>• The need to accept and close a referral when a patient is uncontactable was highlighted to ensure feedback is sent to the GP.</li> </ul> <p><b>Action: DS requested he be added to the circulation list for the ICB Place reports.</b></p> <p><i>Post meeting note: Action completed.</i></p> <ul style="list-style-type: none"> <li>• Demonstrating the impact of the ASF work by mapping visits against Pharmacy First activity data to see correlation/trends and demonstrate the impact of ASF resources was suggested.</li> </ul>	<p>NGK</p> <p>PW/EH</p>
9.0	<p><b>ICB HOMMS UPDATE – David Smith</b></p> <ul style="list-style-type: none"> <li>• Information on the Medicines Optimisation – Good Practice Recommendations was presented. DS advised that this builds on the ICB Model Blueprint.</li> <li>• DS share details of the organisational changes and the likely impact on staffing numbers and timelines. It was noted that gaps are already being seen where staff members have left.</li> <li>• QIPP planning work is underway but is still to be consulted on and finalised.</li> <li>• ICB governance process is now complete for the Waste Service and contracts have been sent out to Leeds and Bradford pharmacies. Logins for practices are being sorted.</li> <li>• Members asked that community pharmacy be considered as providers when future vaccination planning is discussed.</li> </ul>	
10.0	<p><b>PRIMARY CARE UPDATE – Dawn Ginns</b></p> <ul style="list-style-type: none"> <li>• EOIs are being managed for Christmas and New Year cover and are still to be finalised. AC noted that the 2-hour blocks of opening may not be long enough to detail with referrals that are sent through and perhaps 4-hour blocks may be needed.</li> </ul> <p><b>Action: DG to feed this back to the ICB team.</b></p> <ul style="list-style-type: none"> <li>• CPhIG update – highlighting the work being done supporting the progress and delivery of the ASFs and CPWY team support.</li> </ul> <p>The next CPhIG plan is to look at GP practices that are not actively referring patients to Pharmacy First and develop a plan to improve this.</p> <ul style="list-style-type: none"> <li>• IP Update – positive patient survey comments slide shared. 10/11 CPWY IP Pathfinder sights have expressed a wish to remain in the Pathfinder if funding is available.</li> <li>• Nominations – A marked increase in complaints regarding changes to patient nomination has been seen.</li> </ul> <p><b>Action: DG and NGK will work on comms to remind contractors of the reporting process.</b></p> <p><b>Action: PM to share CPSY's statement.</b></p> <p><i>Post meeting note: Actions completed.</i></p>	<p>DG</p> <p>NGK/DG</p> <p>PM</p>

	<ul style="list-style-type: none"> <li>Members discussed the inability for pharmacies to prevent their pharmacy being renominated via the NHS App or via a GP practice for patients who have been barred due to threat of violence.</li> <li>ICB Changes – changes are impacting as staff leave posts. Advise ICB team if this is impacting on work requirements.</li> </ul>	
11.0	<p><b>PRESENTATION FROM SPONSOR</b></p> <p>This meeting was part sponsored by Theramex. Claire Holmes attended and presented to members and took questions before lunch.</p>	
12.0	<p><b>PRESENTATION FROM SPONSOR</b></p> <p>This meeting was part sponsored by Lupin Healthcare. Sarah Gordon attended and presented to members and took questions after lunch.</p> <ul style="list-style-type: none"> <li>MI queried the use of Otigo when a perforated eardrum cannot be ruled out.</li> </ul> <p><b>Action: SG to seek response from Lupin HO and share with KK for circulation. SG to also share digital version of Otigo leaflet for inclusion in News Digest.</b></p> <p><i>Post meeting note: Action completed.</i></p>	SG/KK
13.0	<p><b>BRADFORD AND LEEDS WASTE REDUCTION SCHEME</b></p> <p>NGK shared background information regarding this service. The service has taken two years to get through the ICB contracting team. Service specifications and expression of interests have now been sent to pharmacies in Bradford and Leeds as well as some border pharmacies. The closing date for EOIs has been set for the end of November with a likely December start date. CPWY acknowledges the difficulties of launching a service at this time of year. The SLA runs to 31<sup>st</sup> March 2026. An online engagement event is planned for 27<sup>th</sup> November 2025.</p> <p>Members discussed their concerns around the service, particularly the end date of March 2026. Members were concerned that interventions would be made by the pharmacy which are not accepted by the GP practice and they would therefore not receive full payment of £30. Members were also concern around the cap of 10 provisions that CPWY has put in place to try to protect contractors from making high numbers of interventions which fail to be picked up by the GP practice.</p> <p>Following lengthy discussions members agreed that if CPWY could get assurance that the service would run for a minimum 6–9 month they would support the service.</p> <p><b>Action: LM to seek assurance from ICB commissioners of continuation of contract to at least the end of July 2026.</b></p> <p><i>Post meeting note: Action completed. Contract end date is now 31/07/2026 after which it will be reviewed and a decision made as to whether to extend it.</i></p>	LM
14.0	<p><b>CPWY TEAM UPDATES</b></p> <p>Team update reports were shared with members for information and for members to ask questions or seek clarifications.</p>	
14.1	<p><b>PCN Update</b></p> <p>Work being done to drive community pharmacy inclusion and consultation with respect to the implementation of Neighbourhood Health and Integrated Neighbourhood Teams across West Yorkshire was highlighted. CPWY is now being included in meetings/discussion about the three WY Neighbourhood Health pilot site (Wakefield, Bradford and Leeds).</p>	
14.2	<p><b>Events</b></p> <p>The updated events calendar was shared with members for information. NGK asked members for suggestions for future events for consideration.</p>	
14.3	<p><b>Comms Strategy</b></p> <p>Members discussed the potential benefits of a CPWY TikTok channel and how influencers could be used to create content. Members also discussed the potential of speaking to the public via this channel.</p> <p><b>Action: NGK/KK to review options regarding this.</b></p> <p><i>Agenda item – January 2026</i></p>	NGK/KK

14.4	<p><b>Services</b></p> <ul style="list-style-type: none"> <li>Services data was discussed and alternative ways of presenting this data suggested for consideration including: <ul style="list-style-type: none"> <li>RAG rating the % of pharmacies achieving threshold target payments each month.</li> <li>Looking at numbers of MAS referrals and how these are spread across pharmacies. Using banding to categorise/RAG rate and identify areas for targeting work (87% of pharmacies are getting less than 10 referrals per month).</li> <li>Review NMS data to measure impact of new subcontracting changes which came into effect from the end of October 2025.</li> </ul> <p><i>Post meeting note: LM and PW to consider these requests for reports in the future with advice from FR.</i></p> </li> <li>Query regarding plans to repurpose emergency contraception funds following inclusion in the Pharmacy Contraception Service. LM confirmed that discussions are underway regarding this with all commissioners.</li> <li>Discussion around whether hospital admission notifications are being/should be sent to pharmacies in West Yorkshire following receipt of one from a South Yorkshire trust. <p><i>Post meeting note: Discussed at the DMS Operational Group. It is believed that only LTHT send Admission Notifications. This is a carry-over from a previous service and is not a mandatory part of DMS.</i></p> </li> </ul>	
15.0	<p><b>CONTRACT APPLICATIONS AND AMENDMENTS UPDATE</b> This was shared with members for information.</p>	
16.0	<p><b>TREASURER'S UPDATE</b> The operations and services finance updates were shared with members for information.</p>	
17.0	<p><b>CONTRACTOR ITEMS</b> None were received.</p>	
18.0	<p><b>MEMBERS ITEMS</b> FR requested opportunity to discuss CPWY team reports in more detail. (Item 14.4 above)</p>	
19.0	<p><b>CCA REPORTING QUESTIONS</b> These will be completed by the CCA members. <b>Action: AB will submit the CCA report.</b> <i>Post meeting note: AB confirmed responses submitted.</i></p>	AB
20.0	<p><b>FINALISED 2026-27 COMMITTEE MEETINGS DATE</b></p> <ul style="list-style-type: none"> <li>Wednesday 20<sup>th</sup> May 2026</li> <li>Wednesday 15<sup>th</sup> July 2026</li> <li>Wednesday 9<sup>th</sup> September 2026</li> <li>Wednesday 11<sup>th</sup> November 2026</li> <li>Wednesday 20<sup>th</sup> January 2027</li> <li>Wednesday 17<sup>th</sup> March 2027</li> </ul> <p><b>Action: Venue to be confirmed following the January 2026 meeting.</b></p>	KK
21.0	<p><b>DETAILS OF NEXT MEETINGS</b> Meetings will be held at the Village Hotel, Leeds South and will commence at 9.30am prompt on the following dates:</p> <ul style="list-style-type: none"> <li>Wednesday 21<sup>st</sup> January 2026</li> <li>Wednesday 25<sup>th</sup> March 2026</li> </ul>	

22.0	<p><b>CLOSED SESSION</b></p> <p>This session of the meeting was held with the Finance and Performance Subcommittee.</p> <p>Matters discussed:</p> <ul style="list-style-type: none"> <li>• Minutes of the last meeting.</li> <li>• Market entry applications for consideration.</li> </ul>	
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**This meeting was part sponsored by Theramex and Lupin Healthcare who had no influence on the agenda or its topics. Thank you for your sponsorship.**

Minutes agreed as true and accurate record of this meeting.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Ashley Cohen, Chair, Community Pharmacy West Yorkshire*