

CPH MINUTES
20 July 2022
via videoconference

Present

Rachel Solanki (C)
Karsan Chandegra
Zahra Choudhry
Sean Gage
Girish Mehta
Mohamed Moledina
Vinesh Naidoo
Parag Oza
Vikash Patel
Sheelan Shah
Suraj Varia

Professional

Helen Musson
Farhan Moulana
Sara Norwood
Lorna Girling

Apologies

Ingrid Cruickshank

Guests

Bharat Shah – PSNC (item 7 only)

Minute No.	Agenda Item	Lead
1 and 2	<p>WELCOME & APOLOGIES FOR ABSENCE RS welcomed everyone to the meeting. Apologies were received from Ingrid Cruickshank.</p> <p>Member update: Mohamed Moledina from Archer Pharmacy in Stevenage and Sheelan Shah from Lex Pharmacy in Cheshunt had been appointed as independent members until 31 March 2023 due to vacancies arising from resignations and were welcomed to their first meeting.</p>	
3	<p>CPH PAY REVIEW POLICY The paper was received. CPH members approved the way forward on the following:</p> <ul style="list-style-type: none"> • Principles of the Pay Review Policy • Principles of when a pay rise takes effect • What pay rises should be based upon • How a pay rise takes effect • The amount and how often pay rises apply • Principles for appraisal and 360-degree feedback • Right of appeal process for appraisal and pay rise award • Reward scheme. <p>CPH staff were not part of this discussion. ACTION: Share final policy with members for ratification and inclusion as part of Staff Handbook.</p>	RS/HM
4	<p>DECLARATION OF INTEREST None.</p>	
5	<p>ITEMS OF URGENT BUSINESS None.</p>	
6 6.1 6.2	<p>MINUTES OF CPH MEETING HELD ON 18 MAY 2022</p> <p>6.1 The minutes were received and approved by the committee.</p> <p>6.2 The outstanding actions were received.</p> <p>Item 1: Hypertension – It was noted there were some contractors who had signed up for the service but could not meet all the delivery requirements. It was agreed to keep this action open until the steering group had taken place. ACTION: Highlight to contractors in the e-news and the website that CPH are working with commissioners to have an integrated pathway. Contractors may wish to review whether providing the service is financially viable due to the model being pharmacist led, and to only consider registering to the service if they are ready to meet the delivery requirements.</p> <p>Item 2: PCNs – it was agreed to close the action as the proposal had been developed and submitted.</p>	FM

<p>6.3</p>	<p>ACTION: Members to feedback on the proposal submitted and any gaps the community pharmacy PCN lead proposal submitted to the Hertfordshire and West Essex (HWE) Integrated Care System (ICS).</p> <p>Item 3: NHS111 referrals – it was agreed to close the action as it was complete.</p> <p>The completed actions were received for information only.</p>	<p>Members</p>
<p>7</p>	<p>PSNC</p> <p>Bharat Patel from PSNC gave an update. BP noted the status of contract negotiations is still waiting sign-off. The RSG was discussed and BP reiterated the information that was currently in the public domain.</p> <p>ACTION: Invite Bharat Patel to next CPH meeting.</p>	<p>SN</p>
<p>8 8.1 8.2</p>	<p>ITEMS FOR DECISION</p> <p><u>Review Steering Group (RSG) proposal outcomes</u></p> <p>The paper was received. HM gave an update on the presentation. A discussion took place on proposals/options for joint working/merging/collaborations between LPCs in the East of England. After a discussion it was noted that CPH must be mindful of informing contractors and sharing information although it was noted that further information and next steps were awaited from PSNC. The Committee agreed the principles that if they were to support any changes to LPCs contractor areas, the boundaries must be contiguous with whole ICSs and that financial viability must be secured. Therefore, of the suggested proposed scenarios those that did not meet these two criteria should be discounted. This therefore left scenarios four, six, eight, ten and eleven. However, it was noted these were options available to Hertfordshire and had not given consideration to other LPCs views. At this stage, these scenarios may not be options when considered with other LPCs in the East of England.</p> <p>ACTION: Develop communications to contractors on next steps of RSG process and the principles of what is being considered locally.</p> <p>ACTION: Take principles agreed to next EoE meeting.</p> <p><u>Herts and West Essex ICS MDS vision</u></p> <p>The paper was received. Members were asked to approve the proposed vision statement for MDSs. Committee members felt strongly that providing MDSs should be a commissioned service. Further to discussion, HM amended the wording to the vision as follows: “MDSs are only suitable for people who manage their own medicines, and where these have been agreed as the most suitable option by a community pharmacist which can sometimes be chargeable. An MDS is not suitable for the majority of patients for safety reasons. Where an alternative sector considers an MDS may be suitable, a joint decision discussion is had and agreed with the usual community pharmacist. It is ultimately the community pharmacist's decision as to whether they supply a patient's medicines in an MDS.”</p> <p>The majority of members (9) voted to approve the amended vision statement. Two members voted against supporting the vision statement and any amendments.</p> <p>ACTION: Feedback proposed changes to MDS Vision.</p>	<p>LG/HM</p> <p>HM</p> <p>HM</p>

<p>8.3</p>	<p><u>Smoking Cessation Service (SCS) advanced service</u> The paper was received. Members were asked to discuss and agree the messaging CPH should use to inform contractors regarding SCS and to also agree on CPH office resource to support the service locally. After a discussion members voiced it was not financially attractive as no referrals were being received from local hospitals and that CPH should not amend its workstreams to focus on getting this service launched locally in 2022/23. However, it is acknowledged it is ultimately a pharmacy contractor's decision for engagement with the service. ACTION: Add to e-news and website comms regarding service stating the service has no local hospital engagement and therefore is not likely to be a financially attractive service to run.</p>	<p>LG/FM</p>
<p>8.4</p>	<p><u>PSNC LPC conference</u> The conference is being held online and in person on Thursday 22 September 2022. Members were asked to inform the office if they wanted to attend. ACTION: Email members the details and request attendance from members.</p>	<p>SN</p>
<p>9</p>	<p>ITEMS FOR DISCUSSION</p>	
<p>9.1</p>	<p><u>ICS Medicines Optimisation Strategy</u> The paper was received. HM gave a presentation. Members were asked to discuss the implementation and asked how can community pharmacy be involved and make it work. The biggest challenge is implementation and members want to see primary care integration and including IT interoperability and a shared patient record. ACTION: Share presentation with members for information. ACTION: To feedback CPH committee comments to ICS Medicines Optimisation Committee.</p>	<p>SN HM</p>
<p>10</p>	<p>CPH WORKSTREAMS</p>	
<p>10.1</p>	<p><u>Workstreams framework 2022/23</u> The paper was received. Members approved the framework but requested metrics need to be more specific and what we are aspiring to. ACTION: Email the workstreams table (within papers) to members. ACTION: Members to feedback suggestions for the amendment of evaluation metrics to enable SMART metrics. The metrics will be further developed on the basis of this feedback and will be presented and discussed at next Executive Team meeting in August 2022.</p>	<p>SN Members</p>
<p>10.2</p>	<p><u>Member questions</u> The video had previously been sent to members. No additional questions were received by members at the meeting.</p>	
<p>11</p>	<p>ITEMS FOR INFORMATION</p>	
<p>11.1</p>	<p><u>Executive Team meeting update</u> The notes from the meeting were received. No questions were raised.</p>	
<p>11.2</p>	<p><u>Treasurers Report</u> The report was received. No questions were raised.</p>	

<p>11.3</p>	<p><u>Contract Report</u> The report was received. No questions were raised.</p>	
<p>11.4</p>	<p><u>Member Report</u> The report was received. No questions were raised.</p>	
<p>11.5</p>	<p><u>Care Homes</u> The paper was received. No questions were raised.</p>	
<p>11.6</p>	<p><u>Stockpiling</u> The paper was received. No questions were raised.</p>	
<p>12</p>	<p>AOB ACTION: Add to next CPH agenda Drug Tariff pricing challenges.</p>	<p>SN</p>
	<p>NEXT MEETING 5 October 2022 (9am-5pm) FACE-TO-FACE The View, Old Hens Lane, Welwyn Garden City, AL7 2ED</p>	