

**CPH MINUTES**  
**16 November 2022**  
via Teleconference

**Present**

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

**Professional**

Helen Musson  
Farhan Moulana  
Ingrid Cruickshank  
Sara Norwood  
Lorna Girling

**Apologies**

Suraj Varia

**Guests**

Miriam Blom-Smith – HealthWatch Hertfordshire (item 7)  
Geoff Brown – HealthWatch Hertfordshire (item 7)  
Bharat Patel – PSNC (item 10)  
Tunde Sokoya – Essex LPC – representative from West Essex (item 7)  
Pauline Walton - Herts & West Essex ICB (item 7)

Minute No.	Agenda Item	Lead
1	<p><b>WELCOME &amp; APOLOGIES FOR ABSENCE</b> RS welcomed everyone to the meeting. Apologies were received from CPH member Suraj Varia and guests Anurita Rohilla, Herts &amp; West Essex ICB and Michael Sissens, LMC.</p>	
2	<p><b>DECLARATION OF INTEREST</b> None.</p>	
3	<p><b>ITEMS OF URGENT BUSINESS</b> None.</p>	
4	<p><b>MINUTES OF CPH MEETING HELD ON 20 JULY 2022</b></p>	
4.1	The minutes were received and approved by the committee.	
4.2	<p>The outstanding actions were received.</p> <p><u>Dispensing in Community Pharmacy</u> <b>ACTION: Develop a mechanism of communication with PCN and GP pharmacists and use this to help them understand it is not appropriate to advocate where community pharmacies should order their medicines from and at what price. This may include prescribing meetings or clinical pharmacist forums.</b></p>	HM
4.2.1	<p><u>CGL</u> The paper was received. CPH members were asked to consider whether to change from the existing supervised consumption service to the CGL MAT proposal, based on the feedback from the large volume contractors and the responses from CGL. If the change in service is supported, CPH members were asked to agree a timeframe for implementation as the current contract does not expire until 31 March 2026. After a discussion and a vote, eight out of ten members agreed to adopt the new proposal with the view that this should be implemented from April 2023 providing everything is in place correctly with enough lead time and notice to community pharmacy contractors. <b>ACTION: Feedback to CGL regarding next steps and implementation.</b></p>	HM/FM
4.3	The completed actions were received for information only.	
5	<p><b>ITEMS FOR DECISION</b></p>	
5.1	<p><u>Treasurers Report and Q2</u> The paper was received. Members approved quarter 2. Members were also reminded to submit their expense claims for the CPH meetings as this will have an impact on end of year budget figures if claims are not submitted in a timely way.</p>	
6	<p><b>ITEMS FOR INFORMATION</b></p>	
6.1	<p><u>Executive Team meeting update</u> The notes from the meeting were received. No questions were raised.</p>	
6.2	<p><u>Contract Report</u> The report was received. No questions were raised.</p>	

6.3	<p><u>Member Report</u> The report was received. No questions were raised.</p>	
<p>7 7.1</p> <p>7.2</p> <p>7.3</p> <p>7.4</p>	<p><b>HERTS &amp; WEST ESSEX INTEGRATED CARE BOARD (ICB)</b> <u>Update</u> RS welcomed Pauline Walton from ICB and Tunde Sokoya from Essex LPC to the meeting. PW gave an update on the reorganisation of the ICB. PW also confirmed the ICB Community Pharmacy Integration Lead post was not in place yet and it was expected that CPH would be involved in the support of recruitment for this position.</p> <p><u>Urinary Tract Infection PGD</u> PW confirmed this was being developed in Dacorum and Hertsmere. There were concerns with antimicrobial resistance so they need to get the pilot right which may run for 6 months depending on funding. It was suggested they build the evaluation in at the start and are looking for guidance from the national antibiotic lead. It was queried whether the pilot would be rolled out to other areas of Hertfordshire and West Essex. PW indicated that if the pilot was successful and additional funds could be identified that the plan was to roll it out across the ICB.</p> <p><u>Pauline Walton Retirement</u> CPH thanked Pauline for all her help with supporting community pharmacy over the years and wished her well on her retirement. PW thanked CPH and all community pharmacies.</p> <p><u>HealthWatch Hertfordshire Community Pharmacy Survey</u> RS welcomed Geoff Brown and Miriam Blom-Smith to the meeting. It was reported that Herts and West Essex ICB has commissioned HealthWatch Hertfordshire to develop a survey for the public to find out what awareness they have of community pharmacy and what they can offer. The survey is open from now until January 2023.</p> <p>Concern was expressed about involving CPH at an earlier opportunity to maximise the benefit of the survey and making the survey available in paper format. There was also agreement about how CPH and Herts Healthwatch could work together in the future through campaigns/communications to make the public better understand the role and services of community pharmacy. <b>ACTION: HealthWatch Hertfordshire to send CPH the public survey flyer to add to CPH e-news and website.</b></p>	<p>MBS/LG</p>
<p>8 8.1</p>	<p><b>ITEMS FOR DISCUSSION</b> <u>TAPR</u> RS gave an update on the East LPCs Chairs and Vice Chairs meeting held on 14 November 2022. The meeting notes were shared with the committee at the meeting. There were two proposals presented:</p> <ol style="list-style-type: none"> <li>1. Deliver the RSG contractor vote mandate <ol style="list-style-type: none"> <li>a. All LPCs co-terminus with ICS footprint.</li> <li>b. 200 contractors or minimum viable number.</li> <li>c. Effective and efficient with our finances</li> <li>d. Community Pharmacy 'Local'.</li> <li>e. Each committee comprise 10-12 members.</li> </ol> </li> </ol>	

<p>8.2</p>	<p>2. No change – maintain the status quo</p> <ol style="list-style-type: none"> <li>Maintain engagement with multiple ICSs per LPC despite NHS and ICSs have indicating that they wish to only collaborate with one voice for community pharmacy locally.</li> <li>4 LPCs significantly below 200 contractor number.</li> <li>4 LPCs will be unable to sustainably deliver the increased PSNC levy.</li> </ol> <p>After a discussion reconfirming the position of the committee from October 2022, members were asked to vote on Proposal 1 or Proposal 2. All members voted unanimously to approve Proposal 1.</p> <p><b>ACTION: Send East regional meeting notes to members for information.</b></p> <p><b>ACTION: Take back committee discussion and agreement on East proposal.</b></p> <p><u>Member questions</u> The video had previously been sent to members. No additional questions were received by members.</p>	<p>SN</p> <p>RS</p>
<p>9 9.1</p>	<p><b>ITEMS FOR DECISION</b></p> <p><u>Transforming Pharmacy Representation (TAPR)</u> The paper was received. Members were asked the following:</p> <ol style="list-style-type: none"> <li>To approve an extension to the members’ terms of office until 30 June 2023.</li> <li>To approve the timing of the LPC elections to be delayed until April 2023.</li> </ol> <p><b>ACTION: Take forward the next steps needed for approval by contractors for extension to committee terms of office, new constitution and a delay to the elections.</b></p> <p><b>ACTION: It was agreed to change the wording in recommendation 1 to ‘at least 30 June 2023’ with a potential Special General Meeting in January 2023.</b></p> <ol style="list-style-type: none"> <li>To approve putting the Services and Engagement Lead officer post on hold and making the full time Business Officer post permanent. All members voted and approved this recommendation. <b>ACTION: Take forward the agreed actions for CPH office staff.</b></li> <li>To discuss and agree whether a TAPR subcommittee should be set up and next steps for implementation if agreed. Members were in agreement that no subcommittee should be created as all Executive Team members were involved in discussions in the East and committee members were regularly kept updated with plenty of opportunity for discussion by all.</li> </ol>	<p>HM/SN</p> <p>HM</p> <p>HM</p>
<p>10 10.1 10.1.1</p>	<p><b>CPH WORKSTREAMS</b></p> <p><u>Workstreams framework 2022/23</u> The paper outlining a progress update on all the workstreams was received.</p> <p><u>National CPCF Services – making it work locally</u> No discussion was held on this item.</p>	

10.1.2	<p><u>Primary Care Networks (PCNs)</u> HM updated members on the opportunity to support the ICB with the Community Pharmacy PCN leads project and confirmed a service spec was in development. The majority of members had supported HM and CPH by email in between meetings in putting in a bid to provide the secondment for the Community Pharmacy PCN Leads project.</p>	
10.1.3	<p><u>Community pharmacy communication and engagement</u> The paper was received. Members were requested to approve the suggested principles for how the CPH office handles community pharmacy service data and that short, medium and long term actions proposed. A vote was taken and all members approved the suggested principles. <b>ACTION: CPH office to action recommendations from data paper.</b></p> <p><b>ACTION: Events strategy – bring back to January 2023 meeting.</b></p> <p><b>ACTION: Members asked to complete comms survey and encourage others to complete it.</b></p>	<p>Office</p> <p>IC/LG/SN</p> <p>Members</p>
10.1.4	<p><u>Integrated Care Systems and preparing for commissioning transition</u> The paper was received. Members were asked to consider whether the current representation at HWE ICB meets our current needs and identify any gaps. This item was not discussed due to time. <b>ACTION: Send to committee for information and submit any comments to the office within one week.</b></p>	<p>HM/SN/ Members</p>
10.1.5	<p><u>Vaccinations and Immunisations</u> No discussion was held on this item.</p>	
10.1.6	<p><u>Community pharmacy locally commissioned services</u> The paper was received. Members were asked for their view on dip testing for UTIs in community pharmacy. It was noted that this would not be for all patients – but only those with only one or no symptoms. It was the view of the committee that we should include dip testing from the launch of the service as changing a service halfway can be more problematic and gives more scope to support the patient and demand in general practice. It was however suggested that further detail on what was needed practically for UTI dip testing needed to be fully explored. <b>ACTION: UTI PGD service – get detail on process and pharmacy requirements if dip testing was to be undertaken within the pharmacy premises.</b></p>	<p>HM</p>
11	<p><b>PSNC</b> RS welcomed Bharat Patel to the meeting. Bharat confirmed there had been no dialogue with the government so no update could be provided on the framework level. Price concession mechanism was still ongoing. PSNC elections are due and encouraged members to put themselves forward if they were interested.</p>	
12	<p><b>AOB</b> <u>CPH meeting dates 2023</u> <b>ACTION: send members meeting dates for March (face-to-face) and May 2023.</b></p>	<p>SN</p>

	<p><u>PSNC Vision</u> The paper was received. HM confirmed a CPH response was needed. Key items to feedback from the consultation questions are:</p> <p>Q1 Thinking about the future of community pharmacy, what would “good” look like, from either a community pharmacy, NHS or patient perspective?</p> <ul style="list-style-type: none"> <li>○ All commissioners recognise community pharmacy and involve community pharmacy from the start;</li> <li>○ involve, include and integrate community pharmacy within the NHS and primary care in particular ensuring that community pharmacy are no longer seen as “shopkeepers”.</li> </ul> <p>Q2 What are the key building blocks that need to be in place to achieve that ambition?</p> <ul style="list-style-type: none"> <li>○ IT/digital integration</li> <li>○ Equal partners – parity in funding for training and IT with other providers</li> </ul> <p>Q3 Thinking about past policies and developments in pharmacy practice and possible future developments, what are the key barriers to change?</p> <ul style="list-style-type: none"> <li>○ Commissioning mechanism does not work to its optimum currently</li> <li>○ Services need to be rolled out at a national level as much as possible</li> </ul> <p><b>ACTION: Draft a response and send to members to sign off.</b> <b>ACTION: Make available to contractors via e-news and website.</b></p> <p><u>CPH Success</u> <b>ACTION: CPH to look at how we celebrate our successes at a national level.</b></p>	<p>HM SN/LG</p> <p>Office</p>
	<p><b>NEXT MEETING</b> 25 January 2023 (9am-1pm) via videoconference</p>	