

CPH MINUTES
25 January 2023
via teleconference

Present

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

Professional

Helen Musson
Farhan Moulana
Ingrid Cruickshank
Sara Norwood

Apologies

Mohamed Moledina

Apologies

Lorna Girling

Guests

Miriam Blom-Smith – Healthwatch Hertfordshire (item 6)
Fiona Corcoran - Healthwatch Hertfordshire (item 6)
Rachel Halksworth – Herts & West Essex ICB (item 6)
Anurita Rohilla – Herts & West Essex ICB (item 6)
Tunde Sokoya – representative from West Essex (item 6)

Minute No.	Agenda Item	Lead
1	<p>OFFICE STAFF INFLATIONARY INCREASE 2023/24</p> <p>The paper was received. The committee discussed the annual inflationary rise. There was general consensus that inflation is at a high level but that CPH have agreed a process that should be followed as long as the organisation can afford it. However, on reflection of the process, it was agreed that it was not possible at this juncture to see if the inflation rise of 8.8% would take the salary bandings out of the market place as the committee had not asked for this information. The committee agreed that they would need to amend the CPH policy to reflect that a market place review would need to take place each salary review to allow this to happen. This information would be requested for a decision to be taken at the March 2023 meeting.</p> <p>ACTION: Provide information for the committee to make a decision on at the March 2023 meeting.</p> <p>The committee also requested for openness and transparency the references / sources used for the market place review be documented and consistent at each review. Suggestions were other LPC officers/staff, other similar organisations locally (ie. LMC, LDC), Agenda for Change - indicating which level each job role is comparable to, non-retail staff from larger pharmacy organisations eg. CCA Head Office staff.</p>	HM/FM
2	<p>WELCOME & APOLOGIES</p> <p>RS welcomed everyone to the meeting. Apologies were received from CPH member Mohamed Moledina.</p>	
3	<p>DECLARATION OF INTEREST</p> <p>None.</p>	
4	<p>ITEMS OF URGENT BUSINESS</p> <p>None.</p>	
5 5.1 5.2 5.3	<p>MINUTES OF MEETING HELD ON 16 NOVEMBER 2022</p> <p>The minutes were received and approved by the committee.</p> <p>The outstanding actions were received. The following was agreed:</p> <ul style="list-style-type: none"> • Close items 5 and 12. • Item 3 extended to March 2023 and item 4 extended to May 2023. <p>The completed actions were received for information only.</p>	
6 6.1	<p>HERTS & WEST ESSEX INTEGRATED CARE BOARD (ICB)</p> <p><u>Healthwatch Hertfordshire</u></p> <p>RS welcomed Miriam Blom-Smith and Fiona Corcoran to the meeting. The paper was received. The community pharmacy survey outcomes were presented and well received. It was agreed the public must be better made aware of what community pharmacy do particularly promotion of services and it was suggested that the ICB could support in this area. Going forward it was agreed to feedback any actions from the survey following further discussion at the ICB.</p> <p>ACTION: Share public/community pharmacy presentation with CPH.</p>	MBS

	<p>ACTION: Send final outcomes document to contractors once received.</p> <p><u>Update</u> RS welcomed Anurita Rohilla, Rachel Halksworth and Tunde Sokoya to the meeting. Concerns were raised with understanding the structure of the organisation. It was agreed to make contractors aware of what is happening and introductions of personnel. CPH requested all comms are run by us first. ACTION: Send comms to CPH first prior to sending to contractors re transition.</p> <p>AR thanked CPH and community pharmacy for their support over the festive period.</p> <p>It is the ICBs aim to have the pharmacist networks pilot implemented across each of the places (East and North Herts; South and West Herts and West Essex) by April 2023.</p> <p>AR reported that NHS England had launched an Independent Community Pharmacy Prescribers Pathfinder. HWE ICB is unaware of independent prescribers in Hertfordshire so a survey to engage those interested is in process. It was suggested using independent prescribers to take part with the UTI pilot alongside the PGD may be worthwhile.</p>	<p>SN</p> <p>RH</p>
<p>7</p> <p>7.1</p> <p>7.1.1</p> <p>7.1.2</p> <p>7.1.3</p> <p>7.1.4</p> <p>7.1.5</p>	<p>CPH WORKSTREAMS</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> It was noted that there was an education session on this topic at the SGM and that the survey for contractors as part of the agreed evaluation had been signed off by the Executive Team. No further discussion was held on this item.</p> <p><u>Primary Care Networks (PCNs)</u> HM updated the committee on her new role working as Primary Care Workforce Project Manager at the ICB from January 2023 for 1.5 days a week. Financials for the position of Primary Care Workforce Project Manager will be taken to the Executive Team for discussion. Consideration must also be given by the committee to HMs conflict of interest when presenting this item at meetings. ACTION: Executive Team to discuss the funding for the Primary Care Workforce Project Manager and how this finance will work at the meeting on 20 February 2023.</p> <p><u>Community pharmacy communication and engagement</u> The communications strategy was discussed at item 9.4.</p> <p><u>Integrated Care Systems and preparing for commissioning transition</u> It was noted that the paper had been sent out for committee comments later than expected and the committee had time to make their comments. No further discussion was held on this item.</p> <p><u>Vaccinations and Immunisations</u></p>	<p>Exec Team</p>

<p>7.1.6</p>	<p>The collaborative pilot between GP practices and community pharmacy to improve the take up of flu vaccinations in the at-risk groups had not been taken forward. The main barrier is the governance surrounding sharing of patient data between GPs and CPs. ACTION: CPH office to reflect on pilot and consider feasibility of taking forward in the future</p> <p><u>Community pharmacy locally commissioned services</u> The UTI PGD service specification was received. The committee were asked to feedback on the service specification and to agree the payment structure. All agreed that there should be more funding within the initial consultation than the follow up. It was suggested and agreed that there need to be clarity on best practice for infection control procedures for dip testing. It was noted that the PGDs would be based upon the national SPS ones devised and that CPH office was involved in the working group. ACTION: Send service specification paper to the committee today for detailed comments as outlined at the meeting to HM by Friday. HM to feed back to ICB.</p>	<p>IC/FM</p> <p>Members / HM</p>
<p>7.2</p>	<p><u>Member questions</u> No further questions were raised.</p>	
<p>8</p>	<p>TAPR TS gave an update on the Essex LPC position. At their SGM there was a majority vote for the constitution but it was not a two thirds majority. Essex LPC would be continuing as they are and going out for elections on their existing constitution.</p> <p>RS gave an update. 6 out of 7 LPCs in the East had agreed a way forward for LPCs initially to be contiguous with ICBs. HM gave an update on the available options for committee to agree based upon PSNC advice.</p> <p>At his stage CPH do not want to involve contractors as it was unlikely that they would understand the background and are already overwhelmed with work pressures.</p> <p>It was noted that Essex LPC do not agree with the other six LPCs about moving to be contiguous with one ICB. 9 out of the 10 committee members present agreed, via a vote, to invite Essex LPC committee members to meet with CPH committee members in order to agree a way forward. It was agreed that there was no value in Officers meeting and the best way forward was for the two committees to meet and discuss.</p> <p>It was suggested that Suffolk, Essex and Hertfordshire committees should consider meeting altogether but this was not agreed.</p> <p>It was noted that the SGM on 30 January 2023 would be recommended to support the transitional arrangements to continue while conversations are ongoing with other LPCs in the East. The terms of office for members will then be allowed to be extended until a new election is called when agreement has been reached. ACTION: Write and publicise to Hertfordshire contractors regarding CPHs view of TAPR on the way forward to avoid any misinformation being published to Hertfordshire pharmacy contractors.</p>	<p>HM</p>

	<p>Consider brand this in a simple way to ensure it is easily understandable for all contractors and available via a number of mediums.</p> <p>ACTION: CPH to invite Essex LPC to a meeting involving all committee members to be facilitated by an independent organisation with an invitation to HWE ICB presenting on their needs to work with the representative bodies moving forward.</p>	HM
9	ITEMS FOR DECISION	
9.1	<p><u>Treasurers report including Q3</u> The paper was received. The committee approved quarter 3.</p>	
9.2	<p><u>Draft budget for 2023/24 (April-June)</u> The paper was received. The committee approved the draft budget. It was noted that this budget would run from April to June 2023 but could be extended via committee decision if the outcomes of TAPR were not finalised.</p>	
9.3	<p><u>MCA guidance</u> The paper was received. After a discussion the committee were asked to comment. ACTION: The committee to respond to HM with comments by Friday.</p> <p>ACTION: CPH to feedback committee comments to agree way forward with HWE ICB.</p>	Members HM
9.4	<p><u>Communications strategy 2023/24</u> The paper was received. The committee were asked to approve the final communications strategy for 2023/24 based upon the outcomes of the survey undertaken in 2022 that also incorporates social media and events.</p> <p>It was noted that it was a very comprehensive document. A suggestion was made for other pharmacy staff who do not get to see CPH e-news via email to include a page to print off for pharmacy staff to have on a notice board. It was noted that the strategy was broad enough to incorporate pharmacy staff. The strategy was approved. ACTION: Office to take forward the strategy and implement as agreed.</p>	FM/LG
10	ITEMS FOR INFORMATION	
10.1	<p><u>Executive Team meeting update</u> The notes from the meeting were received. No questions were raised.</p>	
10.2	<p><u>Contract Report</u> The report was received. No questions were raised.</p>	
10.3	<p><u>Member Report</u> The report was received. No questions were raised.</p>	
10.4	<p><u>Community pharmacy in crisis</u> The paper was received. No questions were raised.</p>	
11	<p>AOB <u>Healthwatch Hertfordshire</u> ACTION: Invite HH to future meetings as an observer only.</p>	SN

	NEXT MEETING 15 March 2023 (9am-5pm) FACE-TO-FACE The View, Old Hens Lane, WGC, AL7 2ED	