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Description automatically generatedMinutes

Face to Face Meeting: 20th July 9.30am – 4pm

The Pierre Simonet Building, North Swindon Gateway, North Latham Road, Swindon, SN25 4DL

Invitees:

**Chair:** Tim Rendell (Vice)

**Members**: Robert Townsend; Anil Chopra; Abigail Wright, Patrick Gompels; Paula Paniagua; Nicki Sinclair; 1 CCA vacancy

**Employees:** Sarah Cotton, Carolyn Beale

**Guests**: Helen Wilkinson (BSW ICB); Steve Maddern – Director of Public Health (SBC)

Apologies: Chris Shields, Aga Janowski

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| **Item** | **Detail** |  |
| 1. | Welcome and apologies  New Committee Induction (includes CPE recent updates) - all documents are within the members area within teams and SC asked the new members to read these, along with any other member that wishes to access this.    Update of Declarations of Interest for all members.  The meetings are recorded for minuting purposes, but deleted afterwards. |  |
| 2. | * Review of Minutes - agreed. * Action tracker   CB has had some offers of sponsorship for an event - stop smoking is a possibility. The committee used to hold an awards evening but the turn out was sometimes limited, due to finding a good central location within Swindon and Wiltshire. The committee discussed the fact that all meetings are open and all contractors are welcome to attend any meeting.  **Alcohol intervention service** - this is happening in Swindon, pharmacies are paid up front. The activity in this service is quite low currently. SC raised this as a concern, to ensure they deliver what was promised. Discussion around this and what challenges the pharmacies have faced. CB is supporting with this and will continue to do so. CB stated that the training and scratch cards were not delivered on time and this accounts for some of the delay in starting this properly. The committee are keen for this to work to show how pharmacy can deliver a service with this payment model.  **EHC service** - contracts are due to go out to pharmacies, this has taken quite a time to get to this point. SC met with the representative from GWH and they have received the money from the council and this has to be used to commission the service. There will be a discussion if a price concession came up. It will be reviewed when the council contract is up in 2 years.  **GP CPCS** - no update yet. The NHSE implementation managers are now covering a big area.  **PGDs** - first line drug choice for UTI have been reviewed as raised by the committee – this has now been changed. This will be updated from Monday 24th July.  **Pharmacy Operational group** - the committee have asked if a member can attend these. This has been requested and seemed to be well received, but this is early days at the moment (no TOR) – can start once meeting has an established rhythm (currently monthly).  **Sending IP details to CPE** - action closed.  **Meeting with Neighbouring Chairs** - action closed.  **Governance with spending excess funds** - this will stay active until RT hears back on how to proceed.   * Officer Reports   **Lloyds transfers** - CB has visited lots of new pharmacies as they have been change of ownerships with new independents. Offering support in circumstances that can be tough for a new pharmacy. This is a good time to discuss new local services with them.  **PCN leads** - there are now only 2 gaps which is a big step forward ready for the NHSE funding.  **BSW implementation plan** - HW has taken the LPCs comments back and community pharmacy is now a lot more visable within the plan. |  |
| 3. | * Election of officers and governance   **Chair** - TR nominated Chris Shields, seconded by PG, unanimous vote taken.  **Vice Chair** - PG nominated Tim Rendell, seconded by NS, unanimous vote taken  **Treasurer** - TR nominated Robert Townsend, seconded by PG, unanimous vote taken.  TR recognised the hard work carried out by RT as treasurer to date.  SC has updated the current role descriptions of Chair, Vice Chair and Treasurer, these were agreed with the committee. |  |
| 4. | Public health and pharmacy – Steve Maddern (SM)- Director of Public Health (SBC)  The committee discussed what they wanted to achieve in the section with SM before he attended. Detailed discussion around health checks and the importance of these being adequately funded. Changing suits are running events for health checks and they would like a pharmacist to attend. Discussion around funding to enable this to happen and how the pharmacist going out into the community to promote/provide a service would be a great service.  AC raised that they do not get many hypertension referrals, HW suggested the GPs need more guidance on when they can make these referrals.  SM is keen to learn about the challenges within pharmacy. Public health has just launched the Health and equality funding for Swindon. There are other opportunities if you are not in the Swindon area. There is now a 10 year strategy for changing a healthy life expectancy.  A number of complaints were brought to the attention of the health and wellbeing board regarding a pharmacy in Swindon. The residents were not happy with the board asking them to complain to the pharmacy themselves or the commissioner. CB has since reached out to the pharmacy to look into the matter. The board would like to understand the current state of play in Pharmacy in Swindon and what support they need.  TR provided SM with an overview of community pharmacy, the contracts and the funding challenges.  SC mentioned that there is a pharmacy operational group that meets and would be great to have Public Health attend these. SM is keen to look into this.  TR brought to SM that pharmacy could add great value in being able to go out into the community to provide health checks/hypertension, if there was sufficient funding to enable this. This could be entered as an inequality bid. Discussion around the fee that is paid for a health check – SM acknowledged the committees view that it is currently too low.  SM asked if doing enhanced services in less sites with more focus would work in pharmacy, TR stated this would be more challenging for a pharmacy than it would for a GP surgery.  SM shared there is funding from NHSE for tackling inequality, there is a bidding scheme to get the funding out into the community.  SC raised if pharmacy could be funded to attend the changing suits events. SM stated these events were a great success in their community, that they completed with a very small budget.  There is a proforma on how to bid for funding, SM shared this with the committee.  SM will forward his slides used today to the committee if they wish to check back. |  |
| 5. | * Items requiring Discussion/Decision * Member expenses   Discussion around current rates of expenses.  SC clarified the expenses policy, this needs updating in line with the committee term (and other governance documents).  Discussion around how easy it is to obtain a locum for a half day meeting.  TR proposed £37.50 an hour for 8 hours = £300 per day and £200 for half day. 45p per mile. From 1st July 2023. Seconded by PG. Unanimous vote taken.   * Hep B – WC   Wiltshire council are currently recommissioning their public health contracts. PG attended the first meeting, but the second one was cancelled. Flu will sit under a different contract going forwards and substance misuse will sit under turning point.  Wiltshire council occupational health, has approached SC about running a Hep B service. The GPs have pulled out of providing this and so they are looking for a solution. The committee discussed this and agreed the council should contact pharmacy’s individually who are already providing this as a private service.  The sexual health contracts need commenting on by next week, SC is hoping to get these shortly.   * Rebrand (CPE led)   PSNC are now CPE and they are encouraging that all LPCs become community pharmacy plus their area. CPSW already have the correct name. SC asked the committee if they wish to use the CPE branding. AP: The committee agreed to sign up for this and SC will look into how much work there is to complete this.   * Provider company   Part of the RSG proposal there was a suggestion that all LPCs have access to a provider company. CPSW used to have a provider company but was not utilised sufficiently and this is why it was not continued with. Gloucester LPC have asked if CPSW would like to set one up jointly, the committee agreed not to set one up and to use an existing one at this stage. Avon has their own provider company and so does Cornwall. SC agreed to speak to Avon to use theirs if needed. |  |
| 6. | * Community Pharmacy ICB update (HW)   HW is spending a lot of time with Caroline Quinn working on workforce. Teach and treat is going well and there are a new cohort of 9 students starting in September. There is a business case ready to ensure this continues going forwards.  NHSE have advertised funding for pharmacy technicians, HW advised anyone to contact her direct if they know anyone who is interested in this so they can partner them up with a GP practice. All pharamcies have been sent a message regarding this.  There is funding coming for the PCN community pharmacy leads, discussion around this. Expressions of interest will be requested soon.  HW is hoping there will be a BSW wide event in January for the PCN leads. SC/CB will continue with the evenng online meetings and HW will attend these when possible.  HW shared the latest PGD data, which is looking good.  HW is now linked into the meetings that are happening around the Primary Care access recovery plan, this is useful for pharmacy. There is also a regional team focusing on this too.  HW provided a digital update.  HW now has a good link with the communications team and the community services procurement team.  HW hosted a webinar for the PCN leads and her team to update on community pharmacy,the opportunities and challenges.  HW still needs to focus on dossette boxes to get an official statement clarified. |  |
| 7. | * TAPR   Working group established between CPSW and CPA – meeting Wednesday 26th July. Committee discussed and agreed the remit of the working group. |  |
| 8. | * AOB * Meeting dates 2024   SC proposed the dates for 2024/March 25, the committee agreed these.   * AGM   SC and CS proposed to have the AGM within the September committee meeting, 9am - 10am. This is open to all contractors.  The committee agreed this. |  |

Meeting Dates: 21st Sept (F), 19th Oct, 16th Nov (F).