

DEVON LOCAL PHARMACEUTICAL COMMITTEE

Minutes of the meeting held on Monday 13<sup>th</sup> June 2011 at Deer Park

**Members in attendance:**

David Bearman	Chris Naidu
Nerys Cadvan-Jones	Karen O'Brien
David Chapman	Stephen O'Reilly
Andy Lawson	Paul Stevens
Michael Lennox	Adrian Tebby
Kevin Muckian	

**In Attendance:**

Sue Taylor – Chief Officer  
Mark Stone – Project Pharmacist  
Kathryn Jones – Secretary

**1/663 Apologies for absence:**

Nigel Gray, Peter Hope, Tony Perkins, Brenda Taylor.

**1/664 Welcome and Introductions**

David Bearman welcomed everyone to the meeting.

**1/665 Register of Interests:**

All members of the LPC have now signed both the Register of Interests and Confidentiality Agreement for 2011-12.

**1/666 Minutes of the meeting held on 17<sup>th</sup> May 2011**

The minutes of the meeting held on 17<sup>th</sup> May 2011 were then signed as a correct record.

**1/667 Matters arising from the minutes**

**1/649 Just in case bags – Devon**

The LMC/LPC had raised concerns with NHS Devon re the launch of the scheme. A response had been received from the Director of Quality, Patient Safety that the End of Life GPs felt that there had been LMC/LPC discussions, and they were not clear what the problem was. The GPs feel that the process is running smoothly with no incidents or problems. Reports from members indicated that even if a pharmacy had decided not to sign up, they were expected to provide the bags, often with little warning. It would be helpful if prescriptions could be sent to the pharmacy before lunchtime so that drugs could be ordered for the afternoon. It was also suggested that it would be useful to know which pharmacies are participating.

**Action: Prepare a response to NHS Devon**

**1/649 – Torbay Care Trust – Request for details of residential and nursing home information**

Sue had contacted the Medicines Management team at the Trust asking for an update on the questionnaire that had been circulated to contractors requesting information about their relationships with care homes. A response had been received from Torbay that due to pressure of work the data had not been analysed. The support to those in care homes has been discussed at the Baywide PBC Group and the Care Trust commissioning group. Torbay are committed to having in place a service specification for the specific medicines management support in care homes that will need to take into account end of life care,

nutrition, wound care and appliances and this will need to be part of a "Care Pathway" for support to those in care homes. No specification has yet been agreed.

It was noted that NHS Plymouth and Devon had set up steering groups, which include the LPC, who meet regularly to discuss systems and processes, but this is not happening in Torbay.

**1/649 – Practice Pharmacists in North Devon undertaking homes visits**

Sue reported that she would be attending an NHS Devon Care Homes meeting and she would highlight this matter again.

**1/668 Finance Report**

A verbal report given by Andy Lawson.

**1/669 Secretariat Report**

Members received the Secretariat Report. David Bearman highlighted that during March 2011 the MURs undertaken by Plymouth pharmacies had exceeded the nominal monthly average allowance for the first time. A total of 6035 MURs were carried out by contractors in the three PCTs. This has increased from 3000 in the past twelve months. The dispensing volume data was also included in the report and will be adjusted slightly in the future.

Sue reported that the SW Regional LPC meeting held in May had discussed the New Medicine Service and how this could be implemented across the south west from 1<sup>st</sup> October 2011. Following a query from Kevin Muckian regarding a comment made in the report about top slicing some funding from LPCs, Sue explained that although there could be some expense to LPCs, the pharma companies are offering to sponsor a project manager to oversee the New Medicines Service roll out. In addition, the south west LPCs are considering some work to be carried out on a regional basis utilising existing skills, including collation of evidence, communications, IT and media and political lobbying.

An invitation has been received from the North Devon Clinical Executive Commissioning Group for an LPC representative to be included on the North Devon Commissioning Reference Group.

A place has been confirmed for the LPC on the Torbay Health and Well Being Board and David Bearman has been appointed (as a clinician) to be a member of the Plymouth Clinical Commissioning Executive. Karen O'Brien informed the meeting that the South Devon Joint Formulary Group is now the South Devon Prescribing C2C Group.

It was reported that following negative comments made about the effectiveness of LPCs which had appeared in Chemist & Druggist, Sue had sent a letter of response highlighting the impact Devon LPC is having. A feature is due to appear in Chemist & Druggist.

**1/670 Contractual Applications**

**Co-Operative Pharmacy, Community Resource Centre, Pool Park Road, Plymouth – Preliminary Consent.**

There are currently no primary care services in the locality and the LPC had previously supported this application. It was recommended that the LPC support this renewal as both necessary and desirable.

**Action: Send response to NHS Plymouth**

**CSPC Ltd, 14 Marsh Green Road, Exeter – Exempt Internet/Mail Order**

The applicant had not included any details regarding the supply or delivery of Controlled drugs, nor how thermo labile products will be managed. The PCT will need to ensure that the correct cold chain management process will be put in place. It was noted that an internet pharmacy application had been refused in the past because of these issues not having been addressed.

**Action: Send response to NHS Devon**

**Contact PSNC for advice regarding deliver of drugs anywhere in the country by distance selling pharmacy**

**Co-Operative Group healthcare Ltd – New town of Sherford – Preliminary consent**

The LPC had supported the previous application. Since that time the locality maps had been prepared and the LPC was asked to consider if Sherford should be a reserved location. The regulations had been checked; the LPC felt that as the question of reserved location had not been consulted on originally, the response should highlight this and ask why this particular consultation had included the reserved location status. As reserved location has to be determined based on the total number of patients living within 1.5km of a pharmacy, and the preliminary consent did not identify premises, it was irrelevant. The LPC agreed to support the application.

**Action: Send response to NHS Devon**

**Tesco Stores Ltd – Harbour Road, Seaton – 100 hour exempt**

It had been noted that the applicant had not ticked all of the potential local enhanced service, and NHS Devon currently commissioning chlamydia screening services.

**Action: Send response to NHS Devon highlighting omission from the Tesco application and asking the PCT to refuse the application.**

The meeting was informed that following the work undertaken on controlled localities, NHS Devon had written out to dispensing practices asking them to check that they were not dispensing to patients living within a mile of a pharmacy, but who had been identified as having a dispensing flag. Under the regulations, practices would have to cease dispensing to any of these patients living within 1 mile of a pharmacy. Community pharmacies in the relevant localities had also been written to about this process; and a suitably worded letter for patients also sent to the practices.

**1/671 Contractor Engagement – Small Group Work**

**It was agreed that each of the groups would work on the next steps and develop an action plan at the next LPC meeting.**

**Locality Forums**

**What needs to be done?**

Reconvening Sub-Committee to share good points, planning and sharing workload. The audience not to be set in stone. Plan workload and timelines to ensure organised in plenty of time.

**Who needs to do it?**

Not just LPC members, ex-members to be asked to help, although at least one LPC member per forum.

**How do we measure success?**

Marking people's attendance, how many pharmacies represented at events. Tie in with CPD entries, at end of event.

### **New Medicines Service**

#### **What needs to be done?**

Increase in MURs, pharmacies need to get on board with them, as new service will come into effect on 1<sup>st</sup> October. LPC use same format as that for Responsible Pharmacist events. How to engage with pharmacists who don't see LPC newsletter – C&D and other media sources details to go on website.

#### **Who needs to do it?**

LPC needs to work with pharmacists who show an interest. How to engage GPs, hold events with possibly a GP in attendance in each commissioning area or local pharmacies to visit GPs practices.

Pharmacies who are experts in local delivery provide some top tips.

Prepare a top tips paper to include how to organise your day/ the process for New Medicine Service (Chris Naidu, David Bearman, Stephen O'Reilly, Mark Stone)

### **Working at locality/GP Consortia level**

#### **What needs to be done?**

Engage with localities and GP Consortia Groups, get away from trying to sell services – offer solutions. Raise the clinical skills of pharmacists. The New Medicines Service will be online – highlight clinical areas, look at C2C groups and join up.

#### **Who needs to do it?**

Pharmacists with communication skills – C2C groups use the same language.

Ask LMC for clinician/medics who would come to LPC locality meeting for the New Medicines Service and invite them.

#### **How do we measure success?**

Ask GPs for their views

#### **1/672 Plymouth Doctors Activities relating to distance selling pharmacies.**

There was a general discussion about the responsibilities of the LPC in response to potential complaints being made by pharmacy contractors against other contractors. although it was clear that the LPC had to represent all of its members, there was uncertainty about the powers that LPCs had. There had been some reports of inappropriate advertising being carried out by pharmacy contractors in Devon; Sue highlighted that there is a NHS Code of Practice regarding advertising and promotion of NHS services, and when necessary, the presence of the Code of practice had been highlighted to contractors. GPs were encouraged to follow the GMC guidance on direction of prescriptions, where some practices had been identified as having written to patients or advising them of GP owned pharmacies, the LPC had alerted the LMC to this fact who had taken steps to remind their members about the GMC code of practice.

**Members asked for clarity about charging for the delivery of NHS medicines.**

**Action: Contact PSNC for clarification.**

#### **General Promotion of Community Pharmacy Services**

Sue informed the meeting that she had been in discussions with the PCTs to undertake a promotional/media campaign which would focus on the National Pharmacy Association's "Ask Your Pharmacist" campaign. It had been agreed to run this in November, as one of the PCT directed health promotion campaigns, across the whole of Devon.

#### **1/673 Any Other Business**

##### **Annual Contractors Meeting**

It was agreed to hold the meeting on 10<sup>th</sup> October 2011, with Mike Holden, from the NPA as guest speaker. It was also agreed to invite a speaker on Healthy Living Pharmacies. It was

noted that the DH are looking for pathfinder sites for healthy Living Pharmacies, the LPC with Torbay will be applying, and possibly Plymouth, expressions of interest have to be in by 8<sup>th</sup> July.

**Action: Invite speaker**

**NCSO**

Mark highlighted some significant changes.

**The meeting closed at 9.45pm**

The next LPC meeting will be held on Monday 18<sup>th</sup> July at Deer Park starting at 7.30pm

Signed.....

Date.....