

DEVON LOCAL PHARMACEUTICAL COMMITTEE

Minutes of the meeting held on Monday 10th August 2009 7.30 pm at Deer Park Business Centre, Haldon Hill, Kennford, Exeter.

Members in Attendance:

Mr David Bearman (Chair)	Mrs Ali Hayes
Miss Nerys Cadvan-Jones	Mr Andrew Lane
Mr David Chapman	Mr David Norsworthy
Mr Phil Dawes	Mrs Sian Retallick
Mr Martin Frankland	Mr Paul Stevens
Mr Simon Gardner	Mr George Wickham

In Attendance

Mrs Sue Taylor – Chief Officer	Kathryn Jones - Secretary
Mr Mark Stone – Project Pharmacist	Mr Mike King – PSNC

1/393 Apologies

Mr Andy Lawson, Mr Michael Lennox, Mrs Brenda Taylor,

1/394 Welcome and introductions

David Bearman welcomed everyone to the meeting. He introduced Mike King from the PSNC who had agreed to attend the meeting, to aid the discussion regarding the new constitution.

1/395 Register of Interests

There were no changes to the Register of Interests.

1/396 Minutes of the meeting held on 13th July 2009

The minutes of the meetings held on the 13th July 2009 were signed as a correct record.

1/397 Actions arising from the minutes

1/372 – LPC Audit – Quotas

A quick reference guide for pharmacy teams had been posted on the website.

1/389 – Flu Pandemic

A newsletter article had been written regarding the need for pharmacies to have a service continuity plan in place. Updates were regularly posted on the website.

1/390 – Chlamydia LES – Plymouth and Devon

Plymouth had increased the proposed fee for the grab bins to £250 per annum, with a fee of £2.50 payable for returned kits. For targeted interventions an initial fee of £2.50 would be paid for issue; a further £2.50 paid on return of a kit. Sue had requested an evaluation after three months,

Letters have been sent out by Devon PCT to selected pharmacies regarding the grab bins.

1/392 Compliance aids

Mark highlighted a potential risk to contractors if seven day scripts were stopped. With the devolvement of budgets down to PCT level, the likelihood of stopping seven day scripts is a real threat. There is evidence that seven day scripts are being changed regularly, if moved to 28 days, this will incur more waste. It was agreed that an article would be put in the next newsletter asking for details of positive experiences using seven day scripts. Mike Barbour felt more resources may be needed to carry out this piece of work.

Action: Mark prepare article for newsletter

1/398 LPC Constitution

Following the discussion held at the last meeting, Mike King had been invited to attend and aid the discussion. David Bearman had written to Rob Darracott at the CCA following the last meeting, and

had received rather negative responses to the points he had raised. Thought needed to be given to the practical running of the LPC and how it would work in certain circumstances. Mike reminded the meeting that there was a need for a compromise, and with the timescales short, before the election of the new LPC, the last thing to do would be to split the LPC.

A debate followed where members spoke about their concerns and thoughts.

Mike King then reminded the meeting that there are 228 pharmacies in Devon across the three PCTs and it is a large area, he felt that it would need more than an LPC of 13 members to undertake the work properly. If the LPC voted for 15 members and then split it so that the CCA had 8 and Independents had 7 places, it is for the CCA to fill the places with good people. If the CCA are unable to fill the places; the constitution could be changed and an independent could then fill the vacancy. The CCA are keen to improve some LPCs and make them more effective. David Chapman felt it was very important to have the geographical cover too.

A discussion then followed regarding the option to include non pharmacist members on the LPC. Mike King reminded the meeting that the LPC is a contractors committee not a professional body. A person with good links, but not a pharmacist could be the best person for the job. It is very important to remember that the skills set that is needed for the LPC may be provided by a non pharmacist. The CCA also wanted to be able to co opt on non-pharmacists. The meeting was concerned to hear that they would not be able to cap the number of non-pharmacists, it is for the contractors to decide who they wish to represent them; however, the CCA is aware of the sensitivity this issues raises.

It was agreed to vote on the split of CCA and independents membership. It was unanimously agreed to go for a straight majority. The vote for the size of the committee was; Size of Committee 13 members – 4 votes; 15 members 8 votes. Therefore it was agreed to opt for a 15 member committee on a straight majority – 8 CCA and 7 Independents. Regarding the non-pharmacist issue, Mike King was aware of the strong feeling around the table, but felt the LPC should not restrict membership of the LPC to pharmacists. A vote was taken and 8 members voted in favour of non pharmacists on the LPC 3 voted against.

1/399 Control of Entry Sub-Committee

It was agreed to review this when the new committee was in place. There were causes for concern regarding deputies and CCA representation. In the meantime, details of contractual issues would be emailed to members for comment. It was noted though that dealing with the applications is very time onerous and is too much for one individual.

1/400 Finance Report

The finance report discussed

1/401 Secretariat Report

The report had been circulated with the agenda and was noted.

1/402 Contractual Issues

Application for preliminary consent – Kingsteignton for David Lord

The PCT had determined that the proposed application was neither necessary nor desirable. It was felt by members that the application had also been too vague about the neighbourhood.

Application for change of hours - Boots – 21-23 Station Road, Cullompton

The proposed changes are for the pharmacy to be closed over the lunchtime, there is a 100 hour pharmacy open at Tesco in the town. The LPC supported the application.

Oral hearing – Day Lewis – Vicinity of Collins Road, Exeter

Following the oral hearing the appeal had been dismissed.

Application for preliminary consent at the new town of Sherford – Co-operative Pharmacy

David Bearman, David Chapman, Simon Gardner, Nerys Cadvan-Jones and Phil Dawes declared an interest and left the meeting.

The LPC had supported the previous application submitted by the Co-Operative Pharmacy for Sherford, and it was agreed to support this application, but to highlight that the preliminary consent would only be valid for six months; however, building on the proposed site had not yet started.

Action: Send response to Devon PCT

Appeal – John Ware – Appeal against decision of Devon PCT for preliminary consent at Broadclyst

David Chapman, Simon Gardner and Nerys Cadvan-Jones declared an interest and left the meeting
An appeal has been lodged on the basis that the dispensing doctors do not provide a full pharmaceutical service and only meet one of the eight essential services required. The LPC had originally supported the application and agreed that a response be sent asking for the appeal to be upheld.

Action: Send response to NHS Litigation Authority

1/403 Branded Generic Prescribing

Mark informed the meeting that a website has been launched highlighting cheaper branded generics. The members were asked to be aware that further changes could be brought in soon. They were asked to think how they would argue against generic switching. Plymouth PCT had not negotiated the inhaler change with the LPC and was saving at least £10000.00 per month.

Action: Mark and Phil Dawes to put together a ten bullet point action plan.

1/404 Community Pharmacy Charter

PSNC has asked the LPC to give feedback on the campaign which would be used in the run up to the next election. It was felt the workload would require additional professional support. Lobbying of MPs had helped with the dispensing errors issue

Action: Members to give feedback to Sue

1/405 Any Other Business

Neoral (Ciclosporin) Patent Expiry

The potent immunosuppressant Neoral which is indicated for use in organ and tissue transplantation loses its patent in September 2009. Ciclosporin is a drug with a very thin therapeutic index and because of this it has laborious monitoring requirements for patients on the maintenance dose.

The BNF recommends that as Ciclosporin is such a critical drug with potent effects and the fact that there is a difference with the bioavailability for the products on the market, Ciclosporin should always be prescribed by brand to reduce dosing problems experienced by patients. Members were informed that around 35% of prescriptions are written generically, however it is best practice that the pharmacist confirm the brand that the patient is currently taking and dispense that product.

Locums

Nerys informed the meeting that there is an issue with locums just not turning up. Other contractors had noted an increase in no shows.

Aviva Test Strips

George Wickham informed the members that they are making a loss on every single strip used. They are costing more than the reimbursement received.

Clopidogrel

Ali Hayes highlighted an opportunity for MURs.

Action: Mark to write newsletter article on all of the above.

The meeting closed at 10.00 pm

Date of the next meeting – Monday 14th September 2009 at the Devon Hotel, Exeter.

Signed

Date.....

