



**MINUTES OF THE LPC MEETING HELD ON 9 MARCH 2011 AT
NAPP PHARMACEUTICALS LIMITED, CAMBRIDGE SCIENCE PARK, MILTON ROAD,
CAMBRIDGE**

Present:	Tim Richards, Chair	TR
	Peter Schofield, Vice-Chair	PS
	Eve McKenzie, Treasurer	EM
	Cherie Aronson	CA
	Andrew Jones	AJ
	Jon Norman	JN
	Anil Sharma	AS
	Ellis Waring	EW
Open Session	Maggie Brown, NHS Cambridgeshire	MB
	Ruth Kent, NHS Peterborough	RK
In attendance	Raza Ahmed, Pre-Reg. Pharmacist, (Anil Sharma)	RA
	Linda McGeever . Secretary	LM

CLOSED SESSION:

- 1 **WELCOME:** TR welcomed RA who attended to observe the meeting. **ACTION**

- 2 **APOLOGIES:** Kumar Ladva (KL), Hina Patel (HP), Rita Bali, (RB), Shabbir Damani (SD), Bal Kandola (BK), Meb Dattoo (MD), Tushar Patel (TP), Jody Butler (JB), Kelvin Rowland-Jones, NHS Cambridgeshire, (KRJ) and Ron Smith, NHS Peterborough (RS). The meeting was quorate.

- 3 **DECLARATION OF INTERESTS:** RA signed a declaration of interest and confidentiality agreement.

- 4 **NOMINATION FOR CCA MEMBER TO REPORT TO CCA:** EM/EW to complete the report. **EM/EW**

- 5 **ACCEPTANCE OF MINUTES FROM PREVIOUS MEETING (26 JANUARY 2011):**
 EM will check the levy rates quoted for surrounding LPCs from ours at 0.11%, to 0.15%.
 The minutes of the LPC Meeting held on 26 January 2011 were accepted by the Committee as a true record and will be signed by the Chairman.

- 6 **MATTERS ARISING:**

'Flu Vaccinations: RB to follow up with RK whether a public health campaign should be held across the county in August/September to target at risk groups and people over 60, together with some set up financing to allow vaccinations to be carried out in pharmacies. **RB**

AS gave a briefing on the visit of Andrew Lansley, MP and Secretary of State for Health to his pharmacy in Bassingbourn in early February. AS was positive about the visit and felt Andrew Lansley was very well briefed and was pro-pharmacies and actually prolonged his visit to 45 minutes. The NPA were supportive sending their CEO, together with their Public Relations and Press Officers to arrange photographs for an article on their web site.

Specials: TR has been contacted by two more contractors who have also been threatened with the withdrawal of enhanced services by Ron Smith, Chief Pharmacist, NHS Peterborough. One of which has taken legal action seeking a judicial review. TR has received copies of the relative correspondence. On behalf of the LPC, TR has written to the CEO of NHS Peterborough and Cambridgeshire to complain about these threats, but to date no reply had been received.

AS brought up the situation in Waterbeach where GPs have been directing prescriptions, but TR confirmed that this is not good governance or good professional practice.

Both Cambridgeshire and Peterborough PCTs wish to run their multi-disciplinary audit around ~~specials~~ TR will contact the PSNC for advice as it was felt that they are not obeying at least two principles in that the audit is to run over 28 days, and the audit is requesting details of the supplier of the special product and cost involved. It was also felt that this was not a clinical audit and in the light of the advice received TR will contact contractors accordingly.

TR

CAS Alerts: TR reported there has been no movement on this, but he had attended a Harm Reduction meeting and the general consensus of opinion was surprise that the process currently used is so archaic.

7 TREASURER'S REPORT: EM gave the following report:

Current balance	£55332.84
Less uncleared cheques of	£1196.80
Leaving balance of	£54136.04

The funds appear to have stabilised at about £50,000, our lowest level being £39000, after payment of PSNC levy.

EM thanked everyone for their work in reducing our outgoings and putting the LPC on a more stable financial footing.

EM presented the budget (previously circulated) for next year for agreement and stated that all calculations for meetings assume full attendance

8 SERVICES UPDATE: RB submitted a written update.

- **Pharmabase:** KRJ has viewed the Pharmabase system and is keen to progress with it, initially for contract monitoring and then for the EHC service. RB has also contacted Susie Talbot Cambridgeshire DAAT with a view to using the system for supervised methadone/buprenorphine enhanced services. The LPC should encourage contractors to become familiar with the system.
- **Meeting Notes from LPC/LMC/PCT** - attached to these minutes.
- **MUR Workshop COPD Sponsored by GSK** was the most successful event so far and Committee members were urged to support the next events on Dermatology on 23 March (Cambridge) and 24 March (Peterborough).
- **The Future for LPC's PSNC Event in Coventry:** RB found this event very useful and suggested Committee members should view the presentation on the PSNC

website. The PSNC is planning to hold contractor road shows in May regarding NHS changes. The LPCs structure is likely to change depending on how the statutory recognition works with the NHS Commissioning Board. Control of Entry Regulations are not finalised yet.

- **NHS Peterborough Smartcards:** A series of dates/venues have been issued to allow pharmacists/technicians/dispensers to apply for or update Smartcards ready for EPS2. Full details are on the LPC website and were also featured in the Spring Newsletter.
- **Wisbech:** The meeting discussed the situation at Wisbech where a GP Surgery is issuing private prescriptions which can be dispensed at the pharmacy next door for £6.00. HP has given advice to independent pharmacist who raised the complaint, and TR expressed a hope that they would come directly to the LPC for assistance.

9 COMMITTEE MATTERS:

- 9.1 **Business Plan/Budget :** Pharmabase . EM confirmed that as far as she was aware the £75 average cost per contractor was a one off charge this year, but going forward she could not be certain there would not be further charges. TR confirmed that Pharmabase will ensure that data is sent to the PCT at the end of the month and they pay contractors without the paperwork currently generated, and should therefore be of benefit to all contractors.

The Committee agreed a proposal by AJ to set aside a capital sum of £1500 for IT equipment for the secretary as existing equipment has come to the end of its useful life. This was seconded by JN.

TR told the meeting that the Strategy Group had discussed the cost of training courses, and reassured them that each course would be judged on its merit to ensure that it was worthwhile for members to attend.

The Committee discussed the proposal by PS and seconded by AJ to increase the levy payment to 0.16% with effect from 1 April 2011 as reserves have fallen to an unacceptable level. PS was of the opinion that increasing the levy would give flexibility to give contractors a payment holiday if reserves are adequate. This was unanimously agreed by the Committee and EM will prepare and send a letter to all contractors mentioning the possibility of a payment holiday if reserves allow.

Post-meeting note: Due to timescales, this will not be possible, but will be applied for with effect from 1/5/11.

The budget for next year was agreed and accepted by the Committee.

- 9.2 **Election of Chair, Vice-Chair and Treasurer:** EM told the meeting that whilst she enjoyed the role of Treasurer particularly with regard to budgeting and strategy, the day to day running of the Committee's finances such as dealing with tax matters etc was not a role she found satisfying. Therefore, she asked if any other Committee member would be prepared to take on the role. However, if no volunteer came forward she would be prepared to undertake the role for a further year. TR expressed the opinion that he would not like to see the role split, therefore it was agreed that LM should seek expressions of interest in this role from Committee members.

LM

PS told the Committee that for personal reasons he may resign from the position of Vice-Chair, probably in September of this year. The Committee agreed that it was important that independent members are adequately represented on the Committee. AJ suggested that expressions of interest are also sought from CCA representatives on the Committee

when and if PS finds it necessary to resign.

9.3 Pay Review: As discussed and agreed at the Strategy Group, AS put a proposal to the Committee that TR/EM/RB should receive a 2% pay increase, and also an increase of 50p per hour for the Secretary. This proposal was seconded by PS. This proposal was accepted by the Committee to be effective from 1 April 2011. At their own request, TR and EM had foregone a pay increase last year. Due to the constant heavy workload it was also agreed that these officers (TR/EM/RB) should monitor the number of hours worked.

9.4 Sub Group Formation: This was discussed at the Strategy Group and various ideas submitted. However, following discussion it was agreed to defer this item to the next meeting when attendance will be more representative.

However, with immediate effect HP wishes to resign from the Strategy Group and AJ will take up this vacancy. RB is to join the Contracts Group.

EM made the point that experienced people serving on the various sub groups should ensure that valuable knowledge and expertise is passed on to new members. JN made a comment that anyone interested in taking over the role of Treasurer should join the Finance Group to get such training.

9.5 Cover for Committee Member's Leave of Absence: The Committee discussed KL's absence from the Committee due to personal circumstances. Following debate it was agreed that he be granted a leave of absence until September this year, and at this time the situation will be reviewed. During this period Tushar Patel will be invited to attend Committee meetings as an observer to maintain the CCA/independent balance. TP will have no voting rights during this period. As this leave of absence may coincide with the resignation of the Vice-Chair, if this is the case the independent vacancy will be advertised to the contractors who will be given seven days to respond; and the Committee will appoint his successor from any applicants, therefore no election process will be required.

10 CONTRACT APPLICATIONS: Up to date application details are as on Appendix B issued with the agenda.

OPEN SESSION

11 NHS Cambridgeshire: MB gave the following update:

1. Chlamydia PGD has now been agreed and signed by the Working Group.
2. New draft Local Enhanced Service Specification for EHC was presented for comments. The most notable feature is to include a requirement that Chlamydia screening packs are given to women under the age of 25 who seek EHC from pharmacies. There have been a number of concerns received by the PCT from CASH (Contraceptive and Sexual Health Services) regarding the current EHC service from Pharmacies, mainly in Cambridge city. The PCT are currently putting together a working group to look at these concerns. The PCT has noticed an increasing number of patients complaining that the pharmacies involved have refused to supply the morning-after pill to them via PGD, and the reasons cited have been; no pharmacist or *trained* pharmacist available, the pharmacist was going to lunch and did not give a time when the patient could return, and the patient had already had the morning-after pill once in their cycle. CA and PS expressed an interest in joining the working group.
3. The NHSC is keen to use the same Specials Audit as NHSP as Specials are a

concern, and the situation appears to be getting no better and is the focus of a lot of activity across primary and secondary care. The PCT believes that there are a number of benefits to undertaking the same audit across NHSP and NHSC. TR is to follow this up with the PSNC to ensure this meets contractual guidelines.

4. The PCT has followed up concerns about specials with two contractors, one an independent and one a multiple. Both have provided further information that has been useful and gave the PCT a better understanding of the situation. The dialogue will continue to see if there are some actions which can be put in place which will help with the specific concerns raised and with the wider issue of specials as a whole.
5. The PCT is keen to make use of the Pharmabase system as soon and as much as it can. They have written to the PSNC for some details about the ownership and right of access to the data that will be produced. RK commented that she had seen the Pharmabase presentation and thought it looked really good.
6. The PCT are currently compiling door posters to inform customers of pharmacy opening hours for the Bank Holidays in April/May. Following a query from EW, MB confirmed that the posters will display opening hours in respect of Good Friday, Easter Sunday, Easter Monday, Royal Wedding and Bank Holiday Monday . 2 May 2011.
7. The PCT has become aware of some pharmacies not receiving alerts from ASP. This is currently being investigated and the results will be used by the working group looking at how these alerts are disseminated. TR is to represent the LPC on this group.
8. As part of QIPP the PCT are reviewing activities to see how things can be improved and possible savings made. One area to be reviewed is Pharmacy Mattersq They are still committed to producing and distributing the newsletter to pharmacies and any interested parties. However, printing and posting costs are being incurred unnecessarily where the newsletter is accessed electronically; therefore they are proposing to move to a system where the newsletter is distributed electronically unless a pharmacy is unable to access it in this way in which case they will continue to distribute the newsletter by post for the time being.
9. MB advised the group that the roll out of EPS Authorisation Directions which enable the deployment of EPS by prescribers in a PCT has been put on hold. The DoH, through Connecting for Health, will advise in due course the timetable for future authorisations. In the meantime PCTs are advised that they will need to ensure for example that dispensing contractors have smart cards and dispensing tokens and that business continuity arrangements are in place. These PCTs will also want to consider how they will learn from the first PCTs deploying EPS and how deployment will be co-ordinated and resourced locally when the timetable is reinstated.

12 NHS Peterborough: RK gave the following update:

1. RK told the meeting that the waste medicines campaign is up and running, and urged all pharmacies to take part in the competition by sending photographs from their pharmacies.

Due to time constraints, RK was unable to give a full update but told the Committee that many of the points she intended to raise had been covered by MB.

13 ANY OTHER BUSINESS:

- **Cluster Group Information:** TR reminded Committee members to send this information to LM as soon as possible.

14 The meeting closed at 13.00 hours. The next meeting will be held on Wednesday 11 May 2011 at the Brampton Park Golf Club, Huntingdon.

..... Tim Richards, Chair

..... Date