

**Devon Local Pharmaceutical Committee**

**Meeting held on 13<sup>th</sup> December 2021**

**Virtually using Microsoft Teams**

1/1715	<p><b>Present:</b> Pedro Carvalho, Mike Charlton, Rachel Fergie, Ali Hayes, Andrew Howitt; Ron Kirk, Rafal Korona, Sian Retallick, Matt Robinson, Rob Skornia,  <b>In Attendance:</b> Sue Taylor, Kathryn Jones.</p>
1/1716	<p><b>Apologies:</b> Anna White</p>
1/1717	<p><b>Welcome and Introductions</b></p> <p>Andrew Howitt welcomed everyone to the meeting. A declaration of interest will need to be completed by Rafal Korona; otherwise, all members have submitted.</p>
1/1718	<p><b>Treasurers Report</b></p> <p>A verbal report was given to the meeting by the Treasurer.</p>
1/1719	<p><b>Update from follow up meeting with Jo Turl (ICS)</b></p> <p>Mike Charlton updated the meeting, Jo Turl had been very enthusiastic about the potential opportunities. However, initially she felt the focus should be on development of GP CPCS across five PCNs. It was mentioned that some areas in Devon where there had been negative noise around GP CPCS, things had changed around, and positive comments were now being heard. Most importantly dialogue has been opened, which is a positive step in the right direction.</p> <p><b>Next steps:</b> Somerset LPC had written to the new Chief Executive and Chair of the Somerset ICS to welcome and pass on congratulations; and to ask for an early meeting. This has led to regular engagement between the LPC and ICS senior leaders.</p> <p>Andrew Howitt, David Bearman and Sue Taylor had agreed to co-sign a similar letter that had been sent to the Devon CEO and Chair designate for the Devon ICS. A new clinical leadership system is being set up in Devon, we do not have pharmacy representation on this, but in other areas, e.g. Somerset, it appears they have been given the opportunity to have representation in the local leadership system. It is important for Devon to challenge the current position of not having been invited to engage in a similar way.</p> <p>The Executive team was in discussion with the CCG about supporting a more robust plan to implement the GP CPCS. There was the opportunity to be contracted to offer Anna White's expertise and time to run the local implementation which could release funds to support other local development within a small number of PCNs.</p>

		<p>Michelle Allen has left as the Regional Implementation Manager for GP CPCS so NHSE will be putting out for expressions of interest. In January we will be going back almost to square one as requests for training and retraining for practice staff are coming in and there is no ownership of the work.</p> <p>Jo Turl initially wants to support GP CPCS, but happy for us to support other activity. We also need to engage with other LPCs around the area. Members were agreeable for Anna to undertake GP CPCS implementation if suitable arrangements were put in place.</p>
<b>1/1720</b>	<b>Primary Care Networks</b>	<p>Sue gave a presentation on the current position regarding the Pharmacy Quality Scheme PCN domain; a copy of the presentation is attached to these minutes and outlined the NHSEI offer of funding for the leads in terms of developing ongoing work with the PCNs and undertaking some professional leadership development as part of a regional offer that was being worked up by the LPCs across the South West. It was acknowledged that the offer of funding was good.</p> <p>On the final slide – the questions raised were posed for the newly formed PCN Working Group to consider and use. In the current climate, PCN leads may not be able to be released for two days per month. It would perhaps be more straightforward if technicians and non-pharmacist managers could be used instead as PCN Leads. It could be possible to develop a PCN mentoring role.</p> <p>The meeting appreciated the offer but wondered if the time frame could be extended so we can do this when the pressure eases on the system, however, Sue indicated we are not at that level of discussion yet.</p> <p>The LPC need to make this work for us. Agreed to move this over to the PCN Working Group.</p>
<b>1/1721</b>	<b>LPC Strategy and ways of working – Recap of September and November LPC meetings</b>	<p>Andrew Howitt – everyone now been updated with the outcomes, priorities and working groups.</p>
<b>1/1722</b>	<b>Working Group membership</b>	<p>Integrated Care System – Mike Charlton, David Bearman and Rachel Fergie  Primary Care Networks – David Bearman, Sian Retallick, Rafal Korona, Ali Hayes  Communication and Engagement – Kelly Dawkins, Rachel Fergie, Ron Kirk, Andrew Howitt  Governance and Finance – Andrew Howitt, Matt Robinson, Ron Kirk, Ali Hayes (for regulatory matters)  Sue and Andrew to be on all groups, Tom Kallis PCN, Anna White Communication and engagement;  Kathryn Jones Governance and Finance.</p>

		<p>Groups need to consider if work needs to be completed on a task and finish basis or whether it was appropriate to have standing items for discussion.</p> <p>It was anticipated that there would be a routine contribution of LPC employees and each were assigned to a group. It was agreed to set up Project groups in Basecamp for each group as these had been proven to work well previously. Feedback mechanism – how will this be given to LPC meetings – consideration to be given to this and how to keep the groups connected.</p> <p>Andrew recommended that before the next meeting – “project” groups were set up in Basecamp and the groups should have met to agree priorities and how they are going to work etc. At each LPC meeting there will be a set agenda where feedback can be given. David queried where Workforce sits in our work plans; it was felt initially it will be under ICS but will be across all the groups. We may need some task and finish groups as matters arise. PNA and Workforce could come under this approach.</p> <p>Everyone committed to the work and before 17 January 2022 meeting all groups will have communicated after they are set up in basecamp.</p>
<b>1/1723</b>	<b>AOB</b>	<p>David Bearman has obtained some monies for including a small number of community pharmacists in PCN level Small Group Practice Based Learning. He has ten places for pharmacists to join these groups; Secretariat to send out asking for expressions of interest.</p> <p>A request was made for a temporary amendment to be made in the pharmacy contract for PQS because of the current capacity problems and workload. It was pointed out that this would need to be a national amendment and is not something we can do locally. PSNC has raised this, the LPC was asked to raise this on behalf of Devon contractors. Suggested also sent to NHSE as well. Mike Charlton informed the meeting that this has been addressed in the latest PSNC daily newsletter which came out on the day of the LPC meeting. Also raise timings of PQS deadlines just as flu season starts.</p>
	<b>Date of next meeting</b>	<b>Next meeting 17<sup>th</sup> January 2021 – evening using TEAMS</b>