

CAMBRIDGESHIRE AND PETERBOROUGH LOCAL PHARMACEUTICAL COMMITTEE

MINUTES OF THE LPC MEETING HELD ON 13/05/2009 AT BRAMPTON PARK GOLF CLUB,

1. WELCOME - TC

Tim Coaker (Chair) welcomed members to the meeting, including new members Murtaza Broachwalla and Balwinder Kandola, both independent representatives, from Peterborough and Cambridgeshire respectively.

2. APOLOGIES & ATTENDEES - SB

Attendees

Tim Coaker (TC) (Chair),	Tim Richards (TR) (Treasurer)
Rita Bali (RB) (Executive Development Officer)	Kassim Kurji (KK)
Peter Schofield (PS)	Meb Dattoo (MD)
Hina Patel (HP)	Cherie Aronson (CA)
Evelyn McKenzie (EM)	Kumar Ladva (KL)
Balwinder Kandola (BK)	Mat Broachwalla (MB)
Susan Brydon (SB) (Administrator)	

Apologies: Shabbir Damani (SD) (Vice chair), Alister Huong (AH), Anil Sharma (AS)

The meeting was quorate.

Guests, open session

Kelvin Rowland-Jones (KRJ)

3. DECLARATIONS OF INTEREST - TC

New members (BK and MB) were asked to complete declarations of interest and confidentiality agreements.

Action: SB is to ensure the remaining committee member, AS, signs an updated confidentiality agreement.

There were no declarations of interest made.

4. CCA REPORT - TC

A CCA member will complete a report on this meeting and send to the CCA. TR suggested that an email be sent to other CCA members to say when the report had been done, to help with completing CCA records.

Action: EM to complete and send off the CCA report for this meeting.

5. MINUTES OF THE PREVIOUS MEETING - TC

Paragraph 3, Page 8. Change the word 'mire' to 'more'.

Minutes of the LPC meeting on 13/05/09 were accepted by the committee as a true record and signed by TC.

6. MATTERS ARISING FROM PREVIOUS MINUTES – TC

Enhanced Services Payments,

TR had emailed Maggie Brown again on the payments issue. The PPP number is not on the payment form. RB had talked to KRJ, nothing has been done yet.

Smoking Cessation

RB's meeting with Andy Liggins, from Public Health NHS Peterborough had been cancelled due to the flu crisis.

Sheffield Needle Exchange Scheme

TR had given RB information on the Sheffield Needle Exchange scheme.

Meeting with Angela Bailey (AB), CEO NHS Peterborough

RB had met with AB. This meeting had gone well.

Malcolm Moss MP (MM) meeting with NHS Cambridgeshire

MM had been sent LPC questions to take to his meeting with Chris Banks.

Pharmacy Group for Vascular Checks

The Strategy Group recommended that it would be useful to have LPC expertise on the pharmacy group and that the LPC should support the expenses for HP. This will be trialed and reviewed after 1 year to see if it is useful to the LPC and contractors.

The proposal was accepted, PS proposed, MD seconded.

IT Update

The treasurer's laptop has the correct software for processing pay and recoding expenses recording.

Anticoagulation Service, Leeds

SB has not approached Leeds for the information as yet – action to be carried forward.

NHS Email

TR had tried to obtain an NHS email address as described in the spring 2009 LPC newsletter. However he had found it very difficult and a long process, having to go via a Leeds office.

Action: SB to send original email outlining the process for obtaining an NHs email address to RB for her to follow up.

Rota

KL had opened over Easter with normal hours (100 hour pharmacy), not part of the rota. Discussion followed on the rota situation in the PCT areas.

7. TREASURER'S REPORT – TR

TR presented the treasurer's report

End of year; balance to 31/3/09	=	£84,337.75
Less uncleared cheques	=	£ 2,451.73
Balance	=	£81,886.02 inc. PB
Development fund	=	£421.12
This results in a loss of £1,951.20 in the financial year 08/09		
Balance to 1/5/09	=	£80,792.08
Less uncleared cheques of	=	£3,858.19
Balance		£76,933.89 inc. PSNC payment of £16,005

In answer to a question on the excess expenditure over income in 08/09 TR explained that it had been the first full year of full day meetings costs.

TR reminded everyone of the expenses policy revision, namely, all claims for locum cover must be supported with an employer's invoice. The cheque will then be made payable to that employer. (See P5 of the minutes of 18/3/09).

TR proposed that claims are made on a monthly basis, with supporting employer invoices, receipts etc. (e.g. rail fare, room hire), and submitted by the 7th of the month following the month to which the claim relates.

Action: SB to produce stamped addressed envelopes for committee members to use to send claims to the treasurer

TR asked for committee approval for the extra insurance for the laptop, back-up drive, projector and screen. This amounts to £31 for cover up to 26/8/09.

The committee approved the additional insurance for IT items

TR suggested that the application for a debit card to be used for room bookings etc. be postponed until a successor to Susan is appointed.

Action: Strategy Group to look at the issue of a Bank Debit/Credit card

Update on internet banking – application pending.

SB confirmed that the new Expenses Policy is on the LPC website

Action: Administrator and Treasurer to review and monitor any personal data held on laptops (names, addresses etc). These must only be kept for the purpose of carrying out the business of the LPC and data no longer needed must be deleted.

The committee agreed to stay with the current accountant for the end of year accounts audit.

There was discussion on whether funds should be spread over more than one account to ensure no more than £50,000 is in any one account.

Action: TR to look at options for higher interest reserves for some of the LPC funds.

Treasurer's Remuneration

The Strategy Group recommended an amount for the treasurer's honorarium

The committee accepted the recommendation, proposed by KL, seconded by PS.

The payment will be annual.

8. COMMITTEE MATTERS

The LPC now has a full complement of members (13). It needs to encourage involvement from all members. Elections for a new committee will be in early 2010.

SB has resigned as administrator to start her own business. She will leave at the end of July 2009. The post will be advertised.

The July LPC meeting and AGM will be held at Brampton Mill. Invitations will be sent to contractors, including the option of a meal at 6pm.

Alan Miller, the outgoing treasurer, will be invited to the meal. It was agreed that Bryn Jones is to be invited to the meal, proposed by PS, seconded by KL.

Action: SB to look at discount for larger numbers at Brampton Mill

9. CONTRACT APPLICATIONS - SB

SB updated the committee on contract applications, including the Petersfield minor relocation in Cambridge, the Fairbrother minor relocation in Wisbech and the Belsize Avenue application in Peterborough. The 100 hour application in Wisbech had been approved by the PCT. SB confirmed that LPC comments on the North Brink application in Wisbech had been sent to ASP.

The committee discussed the issue of members' involvement in the LPC process of looking at contract applications. The process needs to be formalised. It was agreed to update the contract application sub group. There needs to be formalisation that members involved in a contract application are not permitted to stay in meetings whilst the application is discussed. Anyone else must declare an interest.

TC explained the contract application process to new members.

PS offered to be chair of the new contract application sub group

Action: SB to liaise with PS and TC to establish a new contract application group.

10. SERVICES UPDATE - RB

NHS Cambridgeshire Carers scheme. Community Pharmacy can bid to the DoH for pharmacy to identify carers (previously unidentified) in the community so they can be supported. RB has been involved in the bid.

County Wide Health Trainers. Expressions of interest had been requested for health trainers. The LPC can't bid. However it can send 2 people to the meetings. RB and CA to attend on 04/06/09

Action: Once RB and CA have attended the health trainers meeting SB to liaise with them to send out information to contractors.

The new Peterborough Needle Exchange and Supervised Consumption service specifications had been circulated to members by email. The committee raised various issues with the service specifications which will be fed back to Karen Kibblewhite at Safer Peterborough Partnership.

Action: RB to raise the question of who funds the Hepatitis C service with Addaction in Cambridgeshire.

RB will also be feeding back comments to the Shared Care monitoring group meeting in Peterborough.

The committee approved of the NHS Cambridgeshire idea to put health promotion campaign information on bags.

The first of the 2-part MUR (asthma) support training sessions run with Astra Zeneca had taken place. 30 people had attended. Informal evaluations so far are very positive.

Pharmacy First – RB had met with Angela Bailey (AB) and raised LPC issues on Pharmacy First. AB has requested a follow-up meeting. Areas discussed also included MUR savings, Category M money, commissioning of services from pharmacy.

HP fed back on the Malcolm Moss MP (MM) meeting with NHS Cambridgeshire. MM would like the LPC to send a letter to him stating what the LPC would like to see for community pharmacy. There needs to be more active liaison between the LPC and the NHS Cambridgeshire CEO.

Action: Add item to next Strategy Group meeting on follow up to the Malcolm Moss comments.

TR raised issues around the new Cambridgeshire Needle Exchange service details sent to providers.

Action: RB to meet with Joan Kempster to discuss the Cambridgeshire Needle Exchange service.

11. CURRENT ISSUES – TC

The proposal for a Norfolk/Suffolk/Cambridgeshire joint event for contractors was discussed. The 3 LPCs are being asked to underwrite their share of the costs. Topics suggested for the event include Responsible Pharmacist. It was suggested that UEA could have a stand.

The committee agreed to support the event and to underwrite the costs

Contract monitoring –Concerns with the Cambridgeshire approach will be raised with KRJ later in the meeting.

OPEN SESSION

PCT representatives were welcomed to the meeting (KRJ).

12. NHS CAMBRIDGESHIRE UPDATE - KRJ

Flu planning

The work around Swine Flu had highlighted areas missing from NHS Cambridgeshire planning. The preferred option is to distribute Tamiflu, when a pandemic hits, away from GPs and

community pharmacies (CPs). HPA is co-ordinating treatment. They are considering a call centre set up. 4 assessment points have been identified in the county, at least one open for 24 hours. Antivirals are being stored in the county. CPs will be notified when assessment and collection points go live. Some PCTs are looking at using CPs as collection points using a voucher system. KRJ said all CPs had been spoken to.

The committee was happy for distribution of antivirals to not go through pharmacies.

Concern was expressed for individuals who don't have flu friends and for the elderly.

TC mentioned the issue of a 30 day prescription provision being in place. KRJ said it was an opportunity to promote repeat dispensing.

OOH services are already busy and would be even busier in a pandemic so there are no plans to use OOH services at the moment.

On the issue of Tamiflu and face masks for pharmacy staff KRJ said that pharmacy is frontline. Vaccination for CPs is different to other staff as they are not direct employees of the NHS.

There can be legislation to extend expiry dates on Tamiflu.

KRJ said that they needed to know and co-ordinate what independent contractors are doing. He described the Flu Com status system. When Flu Com 3 is reached in a pharmacy the PCT should be contacted so that expectations can be managed.

PCT staff may be redeployed to antiviral collection points. If CPs couldn't reach the Medicines Management team calls would be diverted to an Emergency Centre at Ely.

KRJ said that alerts are currently faxed through to pharmacies. Assurance that they are getting through is needed and they are looking for email addresses.

Community Pharmacy concerns include increased numbers wanting to buy flu products and closed GP surgeries will mean repeat prescriptions are not available.

Action: SB to include an item on flu information in the newsletter, emphasising the public health message.

MUR Guidance

The guidance had been circulated to members. An aim is to link CP MUR work to the incentive programme for GPs around prescribing. TR said that the Hunts Prescribing Group had discussed this but feedback had not been positive. TC described the Peterborough MUR training event and that to ensure common standards more events need to be run, working with the PCT. KRJ had committed to doing something similar in Cambridgeshire. TC said the LPC wants to move forward with using the Medicines Management team to facilitate MUR training.

The LPC has concerns over handing over MURs for quality inspection. KRJ asked the LPC to consider what are the standards to aspire to. RB and HP are looking at this area.

KRJ described some work with Private Medical Services GPs around extra work to maintain their payments in the area of prescribing and medicines management. Collaborative work with CPs could include MURs. The LPC liked this idea.

The PCC is nationally doing work on MURs among a selected sample of CPs.

Action: RB and KRJ to liaise on the MUR issues.

Contract Monitoring Report

KRJ said that recording is still an issue, both doing the recording and using it to manage a business better.

Some training is needed for some IT systems. Some systems are not user friendly to let CPs provide evidence for contract monitoring.

Action: SB to feedback LPC comments to KRJ by 20th May 2009.

The LPC asked KRJ to take back to the PCT concerns on the “over the top” expectations that NHS Cambridgeshire is perceived to be taking on contract monitoring. One contractor had commented that NHS Cambridgeshire expect more than the other 2 PCTs with which they deal.

NPSA Alerts

The alert over using female catheters in male patients was highlighted.

Val Shaw is putting together a proposal for dealing with NPSA alerts

Action: SB to put an item on the catheter alert in the summer newsletter

Not Dispensed Scheme

A report is in draft. The figures for last year show 3,000 items not dispensed. The fees paid for the scheme were £8,000. The not dispensed items were to the value of £29,500. The PCT is looking to increase the number of CPs signed up to the scheme. Although nearly 75% of CPs are signed up only 27% send regular returns.

Minor Ailment Scheme

In the first month 35 items were prescribed of which 32 would have gone to OOH or GPs. There is a higher uptake in areas where Care in the Chemist previously ran.

EHC

There is a training session on 15th June, Oak Tree Centre

The PGD needs re-writing in the autumn. The PCT is looking to put together a package for CPs so they don't need to attend so many events. They also want to increase coverage. Also they would like to have a similar accreditation across the Eastern Region, which the LPC supports.

Clinical Governance Events

Forthcoming events on 9th June in Wisbech, 24th June in Huntingdon and 2nd July in Cambridge. The events will include MUR Guidance, MAR Chart enhanced service, Sexual Health and Flu Planning update.

PNA

KRJ drew attention to the document “Pharmacy Care Communications, Improving Pharmacy Services” The document emphasises robust PNAs. Jenny Booth has drafted a questionnaire for pharmacies for the Cambridgeshire PNA.

Action: KRJ to forward pharmacy questionnaire to SB to forward to committee for comments.

Malcolm Moss meeting with NHS Cambridgeshire CEO

The LPC fed back comments from the MM meeting to KRJ. (See item 10).

KRJ responded on some areas highlighted from the meeting as follows:

Vascular Checks: KRJ, RB and AH attended the SHA briefing on vascular checks.

They are looking at models for delivering the checks, one of which includes CP. These won't start until the end of the year and will focus on the most deprived areas.

Category M Funding: A lot has been redirected to enhanced practice fees for CPs. Any additional has gone into the PCT pot.

MUR funding: Any not used does not go back into pharmacy services.

TC said the LPC had concern over the CEO of the PCT having limited knowledge of pharmacy. In the past the LPC has dealt directly with CEOs. Also of concern is the role of the PEC pharmacist in keeping the CEO up to date on pharmacy.

13. AOB

TR mentioned the government suggestion to use pharmacies for issuing identity cards. C & D had commented negatively on this. The feeling is it doesn't fit with pharmacy.

Action: TC to highlight the identity card issue to Dhiren Bhatt at the next Norfolk, Suffolk, Cambridgeshire meeting.

PS mentioned that there is to be an APPG meeting on recording errors which he would like to attend. The LPC is happy for him to go on behalf of the LPC as long as the majority view of the LPC is represented. Any members with comments on this to email SB.

Reducing Hospital Admissions –

Action: SB to send the above document to TR and RB

DATE & TIME OF NEXT MEETING

Wednesday 15th July 2009 at Brampton Mill.

There will be 9.30am tea/coffee for a 10am start.

The meeting closed at 4.30pm

Minutes agreed:

Print Name:

Date: