## Dudley PHARMACEUTICAL Committee meeting minutes

<ul> <li>2. Declarations of interest <ul> <li>there were no declarations of interest</li> <li>CPDO report (MD)</li> <li>CPDO workplan- reviewed progress. Discussed NRT scheme from DPH- query voucher scheme payment. HIV POCT discussed for renewal of service. S4H situation discussed</li> <li>Medicines management/Office of Public Health report (JS)</li> <li>eRD- needs to be discussed at sub-committee and will save GP workload but not CCG cash. Come up with targeted patients list. Need to think about if batches change. Messages being lost on some pharmacy systems- not printing on tokens. Dry eye pathway and guidance on formulary website. MECS being updated to include ocular lubricants. Live by early lune. Likely to be more activity through CP. Still not being adopted through Boots or Lloyds. POD- more coming onboard. Pharmacy First activity going well. Use PharmOutcomes alerts when patients in hospital and being discharged-WMAHSN. No funding but communication sharing. Funding for hospital for license for PharmOutcomes. Could do discharge MUR (if still available). Discussion on financing this initiative. IPMO PLG- outline of workstream group. Need to understand what happens to data. SN asked if there was any information on PCN development-numbers/appointment of clinical directors/key contacts- JS confirmed there would be five networks, with leadership being left to CCG. Lion Health, 3 Villages, Wychbury likely to form one PCN of their own, and there may be surgery movements across boundaries. S. Committee meetings <ul> <li>Area Clinical Effectiveness committee</li> <li>No meeting</li> <li>Prescribing sub-committee</li> <li>No meeting</li> <li>Prescribing sub-committee</li> <li>Fax machines-SurveyMonkey gone out on fax usage. More efficient way of reordering repeats and POD. Will still need fax for stockings reordering etc. d. POD meeting - No meeting, MC confirmed he would be attending the next. Concern that Bath St. surgery</li> </ul> </li> </ul></li></ul>	Date	May 13 . 2019	May 13 . 2019 Chair Dan Attry (Mob: 07973 632 (dudleylpc@gmail.com/cha			
Present       Dan Attry (DA) Stephen Noble (SN) Matt Cox (MC) Michelle Dyass (MD) Aman Grewal (AG)       Amijd Iqbal (AI) Abul Kashem (AK) Mo Kolia (MK) Vijay Lad (VL) Chetan Parmar (CP)       Lynn Rees (LR) Scot Taylor (ST, Thomas Thomin Diane Walker ( Jag Sangha (IS)         Open rection       1. Welcome and apologies - Apologies- Dan, Diane, Thomas, Lynn, Michelle, Scot 2. Declarations of interest - Apologies- Dan, Diane, Thomas, Lynn, Michelle, Scot 2. Declarations of interest 3. CPDO report (MD) - CPDO workplan- reviewed progress. Discussed NRT scheme from DPH- query voucher scheme payment. HIV POCT discussed for renewal of service. S4H situation discussed 4. Medicines management/Office of Public Health report (JS) - eRD- needs to be discussed at sub-committee and will save GP workload but not CCG cash. Come up with targeted patients list. Need to think about if batches change. Messages being lost on some pharmacy systems- not printing on tokens. Dry eye pathway and guidance on formulary website. MECS being updated to include ocular lubricants. Live by early June. Likely to be more coming onboard. Pharmacy First activity going well. Use PharmOutcomes alerts when patients in hospital and being discharged- WMAHSN. No funding but communication sharing. Funding for hospital for license for PharmOutcomes. Could do discharge ML (f still available). Discusion on financing this initiative. IPMO PLG- outline of workstream group. Need to understand what happens to data. SN asked if there was any information on PCN development- numbers/appointment of clinical directors/key contacts- JS confirmed there would be five networks, with leadership being left to CCG. Lion Health, 3 Villages, Wychbury likely to form one PCN of their own, and there may be surgery movements across boundaries. S. Committee meeting a. Area Clinical Effectiveness committee - No meeting b. Prescribing sub-committee - No meeting c. Primary Care Development c	Venue	Savoy Centre, Northfield Rd.,	Chief	Stephen No	oble (Mob: 07856 30	9573)
Stephen Noble (SN) Matt Cox (MC) Michelle Dyoss (MD) Aman Grewal (AG)       Abul Kashem (AK) Mo Kolia (MK) Vijay Lad (VL) Chetan Parmar (CP)       Scot Taylor (ST, Thomas Thomin Diane Walker ( Chetan Parmar (CP)         Details       Details         I. Welcome and apologies - Apologies- Dan, Diane, Thomas, Lynn, Michelle, Scot 2. Declarations of interest - there were no declarations of interest 3. CPDO report (MD)       Infa         OPD or port (MD)       CPDO vorkplan- reviewed progress. Discussed NRT scheme from DPH- query voucher scheme payment. HIV POCT discussed for renewal of service. S4H situation discussed 4. Medicines management/Office of Public Health report (JS)       Infa         eRD- needs to be discussed at sub-committee and will save GP workload but not CCG cash. Come up with targeted patients list. Need to think about if batches change. Messages being lost on some pharmacy systems- not printing on tokens. Dry eye pathway and guidance on formulary website. MECS being updated to include ocular lubricants. Live by early lune. Likely to be more activity through CP. Still not being adopted through Boots or Lloyds. POD- more coming onboard. Pharmacy First activity going well. Use PharmOutcomes alerts when patients in hospital for license for PharmOutcomes. Could do discharge MUR (if still available). Discussion on financing this initiative. IPMO PLG- outline of workstream group. Need to understand what happens to data. SN asked if there was any information on PCN development- numbers/appointment of clinical directors/key contacts- JS confirmed there would be five networks, with leadership being left to CCG. Lion Health, 3 Villages, Wychbury likely to form one PCN of their own, and there may be surgery movements across boundaries. S. Committee meeting a. Area Clinical Effectiveness committee - No meeting b. Prescribi		Netherton, DY2 9ES	Officer	(ceo@dudle	eylpc.org)	
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had not contacted patients to tell them of change to POD. SN confirmed this was in past newsletter. 6. AOB- SN mentioned MASTA had contacted him on 'flu training. Decided to leave it to CHS as before	Open section	<ul> <li>Apologies- Dan, Diane, Thomas, Lynn,</li> <li>Declarations of interest</li> <li>there were no declarations of interest</li> <li>CPDO report (MD)</li> <li>CPDO workplan- reviewed progress. D scheme payment. HIV POCT discussed fe</li> <li>Medicines management/Office of Pul- eRD- needs to be discussed at sub-com cash. Come up with targeted patients lit Messages being lost on some pharmacy pathway and guidance on formulary we lubricants. Live by early June. Likely to b adopted through Boots or Lloyds. POD- going well. Use PharmOutcomes alerts WMAHSN. No funding but communicats PharmOutcomes. Could do discharge M initiative. IPMO PLG- outline of workstr data. SN asked if there was any informer numbers/appointment of clinical directs five networks, with leadership being left to form one PCN of their own, and there 5. Committee meetings</li> <li>a. Area Clinical Effectiveness committee</li> <li>No meeting</li> <li>C. Primary Care Development committee</li> <li>Fax machines- SurveyMonkey gone ou repeats and POD. Will still need fax for meeting, MC confirmed he would be atthad not contacted patients to tell them</li> </ul>	iscussed NR or renewal o blic Health r omittee and st. Need to t v systems- no ebsite. MECS be more acti more comin when patier ion sharing. UR (if still a eam group. ation on PCN ors/key cont ft to CCG. Lid e may be sur to n fax usa stockings re- tending the p of change to	T scheme from Di f service. S4H siti eport (JS) will save GP word hink about if bat of printing on tok being updated t vity through CP. 3 g onboard. Phan funding for hosp vailable). Discuss Need to understo development- cacts- JS confirme in Health, 3 Villag gery movements gery movements ordering etc. d. P next. Concern the o POD. SN confirm	uation discussed kload but not CCG ches change. kens. Dry eye to include ocular Still not being macy First activity d being discharged- bital for license for tion on financing this and what happens to ed there would be ges, Wychbury likely a across boundaries.	Information gathering on PCN's when it becomes available (DA/SN)



	Details	Actions
Closed		
section		
Signad		
Signed by the	Date:	
Chair		