



Date	May 11 th . 2020, 7pm-8.30pm	Chair	Dan Attry (Mob: 07973 632548) (dudleylpc@gmail.com/chair@dudleylpc.org)
Venue	Zoom online meeting	Chief Officer	Stephen Noble (Mob: 07856 309573) (ceo@dudleylpc.org)
Present	Dan Attry (DA) Stephen Noble (SN) Abul Kashem (AK) Aman Grewal (AG)	Amjid Iqbal (AI) Anjum Raza (AR) Mo Kolia (MK) Vijay Lad (VL)	Scot Taylor (ST) Thomas Thomik (TT) Stephanie Jackson (SJ)

	Details	Actions
Open section	<p>1. Welcome, apologies and Declarations of interest (DA) - DA welcomed the committee and SJ, a local GPhC inspector. There was an apology from MD and no DoI's.</p> <p>2. GPhC update (SJ) - SJ outlined the virtual meetings taking place on Zoom with SN. Acting in a supporting role, particularly to independents. Notifying contractors of social media releases, updates on website particularly notable practice on Knowledge Hub. Deliveries, volunteers, social distancing posted. No information on pre-reg's at present, but is being tackled. SJ answered question from MK on using face masks/visors, as staff are refusing to use them. Advice was to follow NHSE guidance, which links into GPhC guidance on safe working. VL thanked SJ on link to care homes, then asked about pre-reg students status moving forward. SJ said GPhC will update as soon as possible. May shape future of pharmacy degree. MK asked when inspections will be restarted- SJ said they would be restarted after a risk-assessment was made, but not at present as pharmacies are under pressure. MK also asked about when FMD would be introduced- answer was possible start of next year, but not high on agenda.</p> <p>3. Covid-19 update - DA said MD's update was on Google Drive, and covered deliveries, PPE and domestic abuse. Face shields and masks were made available from the CCG, 19 pharmacies taking part in deliveries averaging 600 deliveries per week. DA said this showed the support that the LPC was giving to contractors, and hoped it was appreciated. Domestic abuse agencies wanting for support through pharmacies- posters, using consultation rooms. DA asked the committee to share their feedback on their present situation. DA noted that WhatsApp was quieter. AG updated on his stock situation and said that things had quietened down. VL agreed and said the 2-hour 'quiet times' was valuable, things were more controlled. PBP's were working more with CP, with good comms. VL said MD was to be praised for her efforts around deliveries and PPE. MK was concerned at the impact on the bottom line through reduced income from services and reduced retail business. Getting over the impact will take time. Suggest needed support from PSNC. DA told of the opportunity to feed back business to PSNC- an ongoing issue. TT agreed with VL's comments on the breaks during the day and the difference they make. Wondered how we came to working ten-hour</p>	



days without breaks. Thought regular breaks made a difference. VL commented on the loss of revenue from EHC, minor ailments. DA commented on the current situation with patients not having to come in, but this has driven patients away. Face-to-face services have died off and won't return until lockdown eased and pharmacists have confidence to have people back in. VL told committee of an EHC incident over the Bank Holiday, of a patient who couldn't access service quickly. He had completed service, and DA had asked SN for something to be sent out to contractors to remind them of ongoing service provision and conditions. AI asked about 'phone consultations which SN said are fine. VL agreed on the conditions being relaxed.

-SN updated on his meetings- NHSE regional team meeting with Jackie Buxton and Richard Seal, Chief Regional Pharmacist. Such meetings hadn't occurred before lockdown, so was a plus. Problem with Bank Holiday info gathering and NHSE promising to send opening times out but didn't. Issues often don't get decided at those meetings. East and West Midlands all included, meeting twice-weekly. CPWM meetings weekly, hosted by Fiona Lowe CO of Coventry, Warks, and Hereford & Worcs LPC's. Reports are on Drive- PPE, testing. Moving to fortnightly meeting, with a Pharmacy Recovery Group meeting on the other week. Looking at how we get back to normal working once pandemic has eased- MUR's, NMS, relationships. Looking at good, not so good, keep or ditch. Tania Cork from North Staffs LPC has done a Covid update for the PSNC LPC review- good includes communication, co-operation, speed of working and decision-making. Not doing 'management by committee', making best decision at the time not so good. Need to have better contingency plans going forward. Recovery group include Jan from Walsall for Black Country. GPhC meetings also, with support for independents. Daily SitRep report from PharmOutcomes done daily for CCG and Public Health, giving status update of around a sixth of pharmacies. WhatsApp very successful, with STP starting their own. Being used for stock updates. Other meetings taken as they come up. CCG have been very supportive- only one instance where a pharmacy close to closing. Duncan at CCG agreed to make PBP's available to prevent any pharmacy closures. Only once instance of this happening- Morrisons, Kingswinford supported by pharmacist from Moss Grove. Put a press release together to support pharmacy and thanks from CCG and LPC done jointly. PPE moved quickly- visors and masks made available, picked up and out to contractors. SN involved in WMAHSN eRD project with Sandeep Pahal. Meeting over Zoom with Jeff Blankley was very constructive. Plan to do two webinars aimed at GP practice staff and PBP's. Asked for top hints and tips- gone back to WMAHSN to be incorporated into slides. SN invited onto expert panel to answer questions posed during both meetings. Will tailor a webinar for community pharmacy virtually. Need to get GP practices onboard first. Hope to do a report at the end, and using an eRD dashboard. Hope to be doing some work around prescription ordering in the future. DA mentioned update on May 25th Bank Holiday details- local arrangements

SN to get comms out to contractors on current EHC provision and guidelines



likely to be put in place, with opening intentions likely to be put on spreadsheet. DA confirmed this was not likely to be paid for, as a normal Bank Holiday. NHSE would hope that enough pharmacies will be open

4. Committee meetings

a. Prescribing sub-committee

- VL confirmed there would be a virtual meeting taking place with Jag Sangha (JS). Likely to be an SOP on Covid-19 for CP. DA stated that version two is currently being used- contained an hour-adjustment provision. Didn't see a reason for another one. SOP should give a general guideline, and not specific to a pharmacy tailored locally. Following SOP from PSNC for whole country (from PSNC site). TT said that the national SOP should be followed, anything else would create confusion. SN stated Covid-19 folder in Drive has everything on continuity plans, SOP's etc. MK didn't know why work was being created for the sake of this, DA, AI and AK agreed. DA suggested the delivery service was highlighted. The committee agreed that contractors were working together in an unprecedented manner, with MD's work, WhatsApp messaging to be highlighted. AI said the LPC should be proud of how it's working with contractors, and SN told of how contractors in other areas were not supported by their LPC's.

b. ACE committee meeting

- details due out in a few days

5. AOB

- there was no other business

Signed
by the
Chair

-----Date:-----



	<i>Details</i>	<i>Actions</i>
<i>Closed section</i>	<p>1. Minutes of last meeting (DA) - DA went through the minutes of the last meeting with no objections</p> <p>2. Action points arising and discussion (DA) - audit trail for contractor's deliveries (SN) - link to financial details went out on newsletter - two PCN area replacements for BH and SCG: no response to invites. MK asked about submission from pharmacist at Holly Hall, SN reminded committee that the PCN lead should work within that PCN boundary area. New pharmacist for SCG will be starting in June, can be considered by contractors in that area. MK happy to deputise in the interim. Nothing from BH- VL said that he wasn't interested in moving into the role. AI has two pharmacists who could be considered for BH, but pharmacy lies within KW PCN area. DA said he felt there will be a push for PCN involvement out of the pandemic. Those people nominated for PCN 'buddy' roles could step up in the interim, but SN agreed that he would send out new details for the two areas. SN shared a story on leadership within PCN's.</p> <p>3. Updates -there were no further updates</p> <p>4. Contract application sub-committee report (SN) - nothing new had come through, as there is an embargo on new applications</p> <p>5. Finance, accounts and budgeting (TT) - current balance of £77,449.29 in bank. Clyde Co. supplying employment support package, but some LPC's use other services. SN can find out more details. DA said could consider others, but not worth considering for cost basis. Should be kept for another year and paid by TT. Need to get accounts to auditors ready for AGM in September. TT said he would liaise with Diane Walker before end of month.</p> <p>6. AOB - SN said Diane Walker and Chetan Parmar have both resigned. Advised not to reappoint as upcoming PSNC/LPC review may change things. A date in June was likely to be when a virtual meeting with PSNC takes place, with two LPC places. Full meeting due September. New expenses spreadsheet on Drive with a 1.5hour meeting available. SN said Minesh Parbat from CCG moving to Solihull, committee said he would be missed. VL mentioned Xmas rota will need to be sorted.</p> <p>7. Details of next meeting - June 8th. 2020 on Zoom</p>	<p>SN to send out new details of PCN lead vacancies for the BH and SCG areas.</p> <p>Develop Xmas rota for next meeting</p>
<i>Signed by the Chair</i>	-----Date: -----	