



Date Time	April 12 th . 2021, 7.30-9.15pm	Chair	Dan Attry (Mob: 07973 632548) (dudleypc@gmail.com/chair@dudleypc.org)
Venue	Zoom online meeting	Chief Officer	Stephen Noble (Mob: 07856 309573) (ceo@dudleypc.org)
Present	Dan Attry (DA) Stephen Noble (SN) Nick Holden (NH) Thomas Thomik (TT)	Aman Grewal (AG) Amjid Iqbal (AI) Abul Kashem (AK)	Sabrina Kaur (SK) Mo Kolia (MK) Scot Taylor (ST) Vijay Lad (VL)

	Details	Actions
Open & Closed section	<p>1. Welcome, apologies and Declarations of interest (DA) - MD gave her apologies, there were no Dol's</p> <p>2. Principle Trial- Prof. Mahendra Patel (MP) - MP gave a presentation on the Principle trial on long-Covid symptoms. The trial is open to over 65's or over 50's with an underlying health condition, and experiencing symptoms following a Covid infection. He felt that this was an important opportunity for pharmacy, and perhaps for a pilot at Dudley LPC. MK said that Knight's has extensive experience in phase-three clinical trials but thought that it would take time and effort for pharmacists to engage with patients, with a fitting payments scheme. He thought that pharmacists and Oxford University needed to work together to produce something more worthwhile than just a poster campaign. MP agreed that pharmacy should not be doing something for nothing, but smaller trials might lead to remuneration. DA said that pharmacies had already taken part in small-scale trials, with tried-and -tested models that were financed. MP said that it would be worth looking at a model already done, and DA suggested it was all discussed further with Michelle Dyoss (MD), and proposals brought back to MP. After MP left the meeting, MK thought that he should have come to the meeting with some concrete proposals. DA thought MD should look at working with patients and drug companies.</p> <p>3. CPDO update (SN) - SN said that MD had little to report as she had been off for three weeks. LFT service was still going well despite a drop, to around 1,000 per week and 70-80 offsite in churches. This was due to take-home tests but still had the confidence of Dudley PH. There was a national map showing both LFT services, but SN didn't find it useful. MD had attended the recent 'flu meeting, with the council service likely to be repeated. This was despite Walsall taking the lead on 'flu.</p> <p>4. Chief Officer update (SN) - SN showed the committee the Easter and Bank Holiday details on the LPC website. Governance issues such as Dol's had been updated together with a link to a request for meeting agendas on the meeting dates webpage. The last three years accounts were also on the site. Google Analytics showed the website had increased traffic by 292% at 15,600 people viewing the site. This might be due to searches for LFT. SN also</p>	<p>DA/SN to discuss possible ways forward with MD and contact MP</p>



showed the committee the business continuity planning form from a recent incident that he had received. This showed that the system was working as planned. Bank Holiday Eol's had gone out to contractors. A VirtualOutcomes report showed which pharmacies were using the service, Dudley being one of the poorest performing areas, but this had improved over the last month. This might be due to DMS training. SN also mentioned that Dudley pharmacists were being given the opportunity to piggyback on GP-CPCS, DMS and Extended Care training put on by BSol and Wolverhampton LPC's. The first session was on the following evening on clinical confidence in the Extended Care service. Only three people had signed up for this first session, this giving an idea on likely take-up of any sessions that the LPC might plan. He also mentioned that the session was being recorded and would be available to view from the LPC website. This 'bite-sized' format might be good going forward. SN mentioned that he and MD had been looking at venues for the AGM. They both felt that Himley Hall would be a good place to use, but it was quickly being booked up for weddings. A September evening was available, in a nicer setting than the usual hotel. He also felt that just appropriate sponsors with displays rather than having speakers would be more fitting, given the circumstances with Covid over the past year. It meant that attendees would have the opportunity to meet up and mingle. SN gave a short update on GP-CPCS, Dudley being the only LPC in the Black Country having an Eol for one of its' PCN's.

5. Committee meetings

a. Chairs and Chief Officer's meeting (PSNC)

- DA updated the committee on the March virtual meeting. He talked about the RSG steering group formed after the Wright review. PSNC had made savings of £90k and put into funding for the group. It was looking at LPC's matching that, with a sum around £1,300. DA asked TT and NH to look out for the original February letter mentioning this. PSNC were still waiting for funding talks around a write-off of Covid advances. He thought that contractors would be asked to pay some of the money back. A further meeting was planned for June.

b. Area Clinical Effectiveness committee

- MK briefed the committee on an end-of-life care plan, wanting it to be the basis of something to send out to contractors. He felt he needed to first edit it to be more relevant. Steroid treatment cards available from pharmacies was another topic discussed and showed one that could be printed out. Proton- pump inhibitors (PPI) prescribing was also shown in a flowchart, and MK had received permission for it to be shared within community pharmacy.

c. Primary Care Commissioning

-DA said that with the resignation of TT from the committee, someone needed to take his position on the Primary Care Commissioning committee. As no-one volunteered to take the position, DA said he would be approaching members with the view to them taking on the role.

Committee to look at AGM venues for May decision

NH and TT to find original PSNC funding letter

MK to work on end-of-life care plan document for distribution out to contractors

SN to update March minutes



d. Prescribing & Medicines Management committee

- VL said the meeting on March 16th. was poorly attended. The committee was interested in the progress of DMS and GP-CPCS. Discontinuation of Phyllocontin, steroid treatment cards, stoma care, Parkinson's Kinetograph, the POD and palliative care was also discussed. This was being decommissioned from hospitals from the end of April. DA confirmed that Jhoots, Brierley Hill, were still supplying palliative care medicines in the community.

6. Minutes of last meeting (DA)

- the minutes were read and approved, after an alteration on a page two action point- PSC meeting to PCC meeting.

7. Action points arising and discussion (DA)

- LFT packs funding was approved and gone ahead with by MD. TT was still to circulate PCC meeting dates (but see Actions). EHC training was still ongoing and awaiting numbers. POD issues were still ongoing. SCG PCN pharmacy lead position was carried forward. DA mentioned that he thought the PCN leads' contracts had expired. AI asked about the PCN survey, and whether people were continuing in those roles. DA thought it would be in the next PQS contract. DA had drafted and issued a ToR for the finance committee. DA requested that the sub- committees from the self-evaluation document be moved to the May meeting. SK had spoken to Rebecca Butterworth, and would chase up outcomes on needle exchange, palliative care, and minor ailments services.

- the finance and governance sub-committees had been set up and had met. Both needed to ratify their Terms of Reference, and both were agreed with by their committees. DA showed the committee the finance ToR and notes. Options for accounting software were being reviewed by TT and NH. DA said that late submission of expense claims had prompted the sub-committee to propose that any claim for meeting attendance should be made within a 7-day limit. AI thought 7-days was too restrictive and should be 14 days. VL asked if there was an easier way to claim, DA reminding him to use the spreadsheet provided. AI thought accounting software might be easier to use. SK wanted a confirming e-mail that claims had been received. NH said that accuracy of claims prompted the 7-day window. MK thought a 14-day window more appropriate, but AI said a window up to the next meeting would be more appropriate. DA added that he had been guilty of batching claims but has got better. He wanted to get to where the treasurer comes to meetings with an up-to-date balance sheet, so proposed a 14-day window. He didn't want a 'mopping-up' operation as far as invoices and expenses were concerned. ST and AI both approved this 14-day approach. SK asked if the first month could be used as a trial. DA said using a spreadsheet meant that claims could be changed and updated, but AI wondered whether Google Forms could be used instead. DA told the committee that TT hadn't claimed his own expenses for some time and was asked to bring relevant and agreed outstanding claims to the committee.

SN to brief c'ttee on new PCC dates/arrangements. MK to update c'ttee on PCN lead interest, and c'ttee to look at PCN contract. Sub-committees to be reviewed by c'ttee SK to brief c'ttee on Rebecca Butterworth update

TT and NH to report back on accounting software packages

SN to look at a Google Forms solution to expense claims



This would have an impact on the budget, but it was suggested it was put in 2020-21 accounts. TT thought that around six months claims were due.

- the governance sub-committee notes were shown of a meeting between DA, MK, and AK. DA said that he shouldn't be on that committee according to the rules, so asked if someone else would like to fill that role. AI and ST volunteered, with ST being chosen and MK saying he would chair that sub-committee. DA suggested that a new DoI/confidentiality form be sent to members, with them declaring their interests at the next meeting. DA said that this needed doing yearly every April. Any attendees to LPC meetings should also sign a confidentiality agreement ahead of the meeting. MK said that assets should be recorded for GDPR requirements, to which SN had responded. TT said there were files associated with banking and finances, which held data that may have to be declared, which MK agreed would need to be. He could update the workbook and send it to SN.

- the finance sub-committee had proposed a 1% pay increase to both SN and MD's salaries, effective from this April. Comments received back endorsed this, with DA going on to say how much their efforts during the pandemic had been appreciated. He felt this was in line with what contractors were paying their staff.

- DA and SN had attended a meeting with Michelle Haddock (MH) from Russells Hall Hospital. An early May relaunch for DMS was being proposed, with six discharges per day. GP-CPCS EoI had been put in for the Dudley area, but it was for NHSE&I to launch this. The recent training events put on by BSol/Wolves on DMS, CPCS and Extended Care would be reviewed, and the committee would decide on future training opportunities. The deadline was June 30th. to claim for payments, so a May event was likely.

- needle exchange and supervised consumption EoI's had gone out. DA, SN, and VL had met and discussed the inadequate fees for NX and supervision and put this to Anji Burford (AB) from CGL. She agreed to pass this up to her superiors. As ten pharmacies had already agreed to the new reduced fee, CGL felt they had sufficient cover. CGL were looking at the services with PSNC on a national basis, and DA and SN had a meeting that afternoon with the CGL chief pharmacist. A retainer and/or uplift to fees was needed, but CGL had spoken to other LPC's and had wanted a national solution. DA stated he was unhappy with the response by the other service contractors. There were no comments on any of these by the committee.

- a new Champix PGD has been produced for circulation.

8. Contract application sub-committee report (SN)

- there had been no new applications, only a confirmation of change of hours of Village Pharmacy, Kingswinford.

9. Finance, accounts, and budgeting (TT/NH)

-the levy holiday is in place until a review is made. Current balance at the bank was £93,834.94, and the PSNC levy had been paid. TT

SN to circulate new DoI/confidentiality agreements to committee

MK to update GDPR workbook when all assets declared and send to SN

DA to send SN the updated Champix PGD, who would circulate to contractors



and NH were going to decide on accounting software, then communicate this to SN who would circulate this to the committee.

10. AOB

- DA mentioned that Murrays were in the process of merging with PCT Healthcare, based in Chesterfield, to form a larger group. The new group would consist of around 150 pharmacies. This would put Murrays back in AIMp from being a regional independent.

- the four Black Country LPC Chairs and Chief Officers were meeting after the four local CCGs had merged from April. They needed to consider what impact this might have on their operations. They may need to merge following what might come out of the Wright review but would keep the committee informed.

11. Details of next meeting

- the next meeting was set for Monday, May 10th. 2021 at 7.30pm

TT/NH to choose accounting software and update SN

SN to inform Neil Slater at AIMp on Murrays move

*Signed
by the
Chair*

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