**LPC Meeting – Wednesday 8th February 2017**

14a High Street, Staple Hill, Bristol, BS16 5HP

9am – 5pm

Present: Lisa Fisher, Richard Brown, Tanzil Ahmed, Chris Howland-Harris (PM), Jerry Long, Sadik Al-Hassan, Roger Herbert, Hilary Collyer, Anna White, Stuart Moul, Matthew Robinson.

Apologies – Alan Smith, Jenny Herdman, David Tomlinson

Declarations of Interest – None

CCA nomination for report – N/A

Amendments to Training Log – None.

Review of January Minutes & Action Points.

Minutes agreed and will be posted on the website.

Contract applications.

No applications.

Admin – Update LPC Personnel file

The folder was updated and confidentiality statements signed.

Treasurers Update and Approval of Budget.

Review of current finances and of draft budget from January’s meeting. Discussion around independents not seeing any change in funding, although a decrease was expected. PSNC special levy has been paid.

Budget 17/18 – reviewed and agreed draft budget proposal. Proposed by Stuart Moul, seconded by Sadik Al-Hassan.

Discussion around whether fees paid to committee members cover backfill (locum) costs appropriately. No proposal made for a change right now, committee agreed not something we will act upon - but mindful of locum rates.

Break Out Groups

Groups reviewing the Strategic Plan and to define the actions for 2017/2018. Another group working on the newsletter.

Professor Margaret Watson & Lyn Hanning – University of Bath

*Professor Margaret (Mags) Watson – Professor of health services research*

Raise awareness that they are our local pharmacy department, and want to increase research activity currently undertaken. Want to undertake meaningful research – address both questions and issues raised in local pharmacy areas, and bigger national issues. Types of themes currently:

* Meds optimisation - safe & efficient use of meds, particularly in vulnerable patient groups i.e pregnant, elderly, those with sensory impairment
* Quality of OTC consultations
* Self-care
* Move demand away from emergency & general practice to community pharmacy
* Minor Ailment Schemes – looked at top 4 conditions being accessed either via pharmacy, GP or emergency services – saw no difference 2 weeks after issue resolution, no matter where the patient received resolution from

Discussed research which is currently being done in Inverclyde (MAS is a national scheme in Scotland) – in Inverclyde this is being offered to all patient groups with no exclusion criteria.

Mags is attending chief pharmacists meeting in Devon – will be involved in a prioritisation exercise looking at what questions can be answered by the universities research.

Offered to visit our local pharmacies to discuss at greater lengths the opportunities available.

GW4 (the 4 unis at Bath, Exeter, Bristol and Cardiff) work closely together to pull together bigger pieces of work around social prescribing. Discussed possibility of Mags visiting some of our HLPs – will be arranged with Judith.

*Lyn Hanning – director of practice based learning*

New degree introduced April 2016. Opportunity to enhance learning in practice for students, and chance to make most of opportunities available for practice based learning. ‘New’ 2nd year students have a week long placement in community pharmacy – look at how uni can make easier for 500 students to get into work. Would like our feedback to education advisory groups as to what content to put in new course (new course much more integrated than previously), and open up links for placement opportunities. Would like more sites for their student placements.

Looking for around 100 placements – next intake 13th March – keen to grow local “good” placements – i.e. HLPs.

New curriculum & workbooks for students, small fee paid for placements. Tie into careers evening events – use webinar tutorials to make more accessible (i.e to people travelling long distances & can’t make evening events)

Break Out Groups.

* The committee telephoned all the independent pharmacies to discuss HLP – if they are going for HLP, if aware of/attending training events, if using the QPS assessment tool on PharmOutcomes & if they need any more support from LPC (i.e. visits from Jerry).
* Jerry, Stuart and Tanzil reviewed the accounts and ensured there was resilience in the LPC process.

Quality Payment Update – Jerry Long

10 workshops held so far, 2 more in February around HLP. Over 100 people have attended, encouraging turn out so far.

We have been awarded a grant to provide HLP leadership & champion training (inc. exam) for free to contractors (training provided via AHS). Refunds will be given to those who have already paid. Event in March full – Bristol struggling due to the number of HLPs already in the area.

Gateway criteria update -

NHS choices will send emails from 7th Feb, contractors need to respond to this and edit/amend their NHS choices details as necessary. Everyone should now have registered for NHS email – deadline has now passed. IG for 16/17 needs to be submitted ASAP. Dementia friends – if more than 2 pharmacies registering, use company name. First check point date 28th April 2017. Only 20 pharmacies using new QPS self-assessment – Jerry has contacted those using the old one.

New service on PharmOutcomes looked at – Prescribing intervention service. If GP is contacted because of an issue with rx, can record info around what harm may have been caused if no intervention was carried out, or if details are queried etc. Looked at annual patient safety service on PO, and the report that is generated.

The focus is on getting as many people to get the maximum points available in April.

Summary Care Record feedback update –

Very few people using, too ‘scared’ to. Most people in training said they would not use it. Reviewed case studies – lot of discussion regarding why you would/ would not in certain circumstances access SCR. Prolonged consent can be given by patient i.e. 6months duration

Chief Officer’s Update

Minor Ailments

MAS will not be re-commissioned. Continue to commission emergency supply service.

Less optimistic that there will be a MAS anywhere across BNSSG.

Discussion regarding branded generics and the things we do for free/potentially at a loss i.e. delivery, dosette boxes; committee asked to give consideration to what type of message we want to share. What can we do to try and counter some of the issues, if anything? Feeling is very little we can do to counter Branded generics – therefore do we look at what we do for free & we stop doing?

PNA’s

Starting refresh programme, due to be signed off again March 2018. Year long program – £5,000 from BNSSG, and £1,500 from BANES to do their data collection. Same template will be used as previously, and data collection will be via PharmOutcomes.

AOB

Actions – RB contact Mike Dent regarding branded generics