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| **Minutes of** **Community Pharmacy Walsall Meeting 8th November 2023**  **Held at The Beverley Hotel from 1pm**  **Present:**  Jas Pannu - Independent (in the Chair) Chetan Rai - CCA  Nav Matharu - Independent Harj Sadhra - Governance Officer  Harmeet Grewal - Independent Onkar Singh - Independent  Daljit Sandhu - CCA Jatin Patel - Independent  Raj Ram - Treasurer Jan Nicholls - CO    **Apologies:** Hema Patel  Not present: Ranpreeth Sunder  **Guests:**  Jack Rubery, CGL    The Chair welcomed everyone to the meeting. Completed Declarations of Interests were collected, a few remain outstanding. Those members will be contacted by email.  **Planning Groups** - it was decided Planning would be deferred until January in the hope the LPC Self-Evaluation template is ready. If not, the original format will be used.  **CP Black Country Merger**  All four COs met 7th November to review progress. The planning template had been shared prior to the meeting, areas of interest: finance/HR/budgeting/services.  CP Walsall stressed the importance of governance and lack of duplication, and most members were keen to complete the process before the proposed date (April 2025). Two members of the Steering Group had experienced mergers recently.   * CO to report back to Steering Group √   **Addendum to Hospital initiated Smoking Cessation Advanced Service**  Clients who drop out of the programme - PharmOutcomes will not allow further claims against their name.   * CO to update Alison Yates   **BP Project**  No data supplied by CHS, the two Bloxwich contractors present had not received a single referral.   * CO to request data from CHS   **Hypertension Case-Finding**  CPE are increasingly concerned over the low rate of ABPM compared with initial BP readings. We expect an investigation?  **IP Pathfinder**  The BC won 4 sites, 1 per Place. All four successful BC sites had been informed.  Project supported by Dan Attry.  Chetan reminded the group that the proposed 4-hour slots could be used as clinical time but also preparation, peer review and other associated work.  **Changes to Opening Hours**  The hours offered have continued to decline, many pharmacies have reduced to their core 40 hours and 100-hour contracts can pare back to 70, resulting in little/no late evening service. The End-of-Life team previously used ASDA but earlier closing is problematic.   * Investigate reinstating **evening rota** – **ICB, NHSE, MAPCOG**   Some members have experience of the “Blue Box” method of providing end-of-life care.  This prompted a discussion on the Palliative Care service; Walsall have a generous scheme in terms of patient care but participants shared their concerns, particularly around personal safety. There is no “lone worker policy” nor provision for security cover.  The ideal solution would be a *nationally* agreed service.  **Guest Presentation:**  **Jack Rubery, CGL**  Jack has the role of Project Manager at CGL, Lichfield St. His role is funded by [OHID](https://www.gov.uk/government/organisations/office-for-health-improvement-and-disparities) to March 2025.He shared that availability of high-strength heroin seen in the summer had waned – requiring 3 shots of naloxone to counteract. (This had a pronounced fishy smell and turned red on heating.) Naloxone offered to all drug users via nasal spray/injection at first and subsequent appointments.  The service has ~ 970 clients using opiates/crack/alcohol.  Clients (predominantly white male opiate users) access the service but CGL also have an outreach programme using local facilities. They offer one-to-one and group sessions.  Jack can arrange naloxone training for CP staff.  He welcomes feedback on clients and has found CP observations useful but members had found it difficult to contact CGL – phone not answered, is there a different line/contact method for professional use? One contractor had been reported to the CDAO when unable to contact the service to alert them to a problem following a change of hours.   * CO to share Jack’s contact   Member suggestions:  CGL make stickers/cards/QR code available for regular purchasers of products containing codeine  Generic prescribing of products to avoid stock shortages  Referral from CP into CGL: name/contact number  Better contact methods - comms/messaging to report non-collection etc  Clients to be made aware of reduction of hours in CPs - a contractor had been reported to the CDAO when unable to contact the service to alert them to a change of opening hours to be communicated to clients.  Next meeting Wednesday January 10th 1pm @ The Bev |
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