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| **Minutes of** **Community Pharmacy Walsall Meeting 8th May 2024**  **held at The Beverley Hotel from 1:30pm**  **Present:**  Jas Pannu - Independent (in the Chair) Chetan Rai - CCA  Nav Matharu – Independent Onkar Singh - AIMp  Harmeet Grewal – Independent Daljit Sandhu – CCA  Officers:  Raj Ram – Treasurer Jan Nicholls - CO  Guests:  Jas Heer – CPE Regional Representative  Hema Patel – ICB Liaison  Sukhy Somal – Service Development Officer  Lesley Talbot – PH Walsall  **Apologies:** Jatin Patel, Harj Sadhra    The Chair welcomed everyone to the meeting.  **Declarations of Interests** circulated, signed documents collected by CO. All CPW members in agreement signature page to be added to CP Walsall website.  **CPE Report** – Jas Heer  Jas provided the committee with a frank update on the thinking and activities of CPE, covering planning, negotiations etc  CPE had hosted an invitation-only webinar on May 7th  **Sexual Health Service**  Lesley Talbot, PH Walsall is seeking EoIs from contractors (by end of May) to offer a new Contraceptive Services:  Chlamydia **testing** (£2) and **treatment under a national PGD** (£12.50 + drug costs)  **Condoms** (£1)  There is no lower age limit for these services  Further components may be added in future  Contractors welcomed the fees for new the service.  CPPE online training available.  Contractors will hold a bespoke contract with PH Walsall. Members felt it would be preferable if all commissioners of health-related services used the standard NHS contract.  Jas agreed to feed this view into James Wood’s team @ CPE.  **Services/ICB Report - Hema**  **CGL**  CGL have been contacted over the lack of response to messages around missed supervised consumption doses.  The SLA is to be reviewed; the suggestion from members is that the new, dated SLA be uploaded to PharmOutcomes.  Members questioned distribution of Naloxone, particularly as synthetic opiates - **Nitazines** - have been implicated in many recent over-doses.  Members have found users resistant to accepting naloxone rescue doses but have supplied family members.   * Relevant CDAO report – newsletter (previously circulated)   **All services across** BC are under review and more providers are required (with the exception of Palliative Care).  Details were published in the ICB Community Pharmacy Newsletter.  ICB are planning an advertising campaign to re-engage low income groups.  Future: scope training around BEST patient care: optimising care navigation, engaging GP staff, flow diagrams to utilise ALL services to patient/provider advantage.  **Minor Ailment Service**  Provision in Walsall is low; registration, data collection and record-keeping are time-consuming.  Drug costs cannot be truly dynamic and there have been suggestions they will be checked more frequently but losses on treatments are a persistent problem.  **CUES**  The service is not well-supported by optometrists or pharmacists. There are practical problems with the formulary eg out-of-date items and prices, leading to financial losses on supply.  LA area formularies are not aligned making cross-border supplies difficult.  Claims are via a paper-based system – live claims secure remuneration. One CPW member had been presented with a photo-copied referral form.  There is a possibility of Opticians making referrals for BP checks following eye tests – if this could be achieved via PharmOutcomes.  **POD**  No further information received (or major problems encountered) so far. Possibility practices may increase Rx intervals to manage workload, passing on difficulties to CP in terms of increased drug costs, availability, shelf space, storage etc.  Post-dated Rxs are an alternative method and simple to set up but unpopular.  NHS App advertised among patients, giving them control over ordering and collection of Rxs – saturation target 75%. Functionality to include message that Rxs re ready to collect.  **CPW Service Development Lead**  Sukhy sounded out Jaz Dhillon to replace her as Service Lead. Jaz had expressed interest in the role.   * CO to approach Jaz directly, with a view to arranging an interview with CPW members * Scope other candidates   **Training Ideas**  Sukhy considering running training on PF/established services for CP and GP teams  She has a budget sufficient to employ a technician full time and has responsibilities to liaise with GPs/LMC/PCNs  Other resources:  Hypertension training – Leicester  Train the trainer  IP Programme  DPP (3 weeks ago?)  “May Measure” BP checks May to July.  Pharmacist required for TV interview, Onkar volunteered Sammy (Darlaston)  **SC Referrals**  Trust needs more CP involvement  Barriers?  **Training/Services**  Staff/pharmacists  Timing  Topics (not exhaustive):  Contraception/BP  NHS App  DMS – in particular completion/claims  Contractor engagement, toolkit  Cardiocheck  HB1AC testing (patient pays for reagents) detailed on PharmOutcomes  **Inappropriate NHS111 Referrals**  CO asked to circulate address to report inappropriate referrals (repeat of recent newsletter)  **DoS profiles**  Essential to update 3-monthly  **IP Pathfinder**  Sites selected, IT nearly ready to go, declarations of readiness expected soon.  The group discussed the need for mentors and consider plans put in place in other areas, contact Fiona, Tania  **Vaccs**  CO had been concerned around Imms Board, which clashes with CP Walsall meetings. Neither CP attendee nor CP relevance found in notes; Peter P (Sandwell) is planning to cover the meetings.  Contractors unhappy about the delayed start to 2024 ‘flu programme (due to start in October) eating into the season. Nav to check timing. Why don’t NHS purchase vaccine?  PH Walsall pointed to BC ICB page detailing location/timing of pop-up vacc sites on the website **walsallhealthcare.nhs.net**  There are no sites near CPs in Walsall in the programme available to view at present (May, June, July).  **Pharmacy First:**  Contractors present concerned as slow-down of activity – particularly of referrals from GPs – means rates will not reach the threshold.  Discussion around high numbers of people presenting, many by verbal recommendation from surgeries, who are not eligible and the implications for CP time.  Next meeting Wednesday June 12th from 1pm @ The Bev  July venue tba.  Please confirm your attendance one week beforehand for quorum/catering purposes. |
| **AGM & SGM date: provisionally September 11th** |