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THE 128th MEETING OF THE COMMITTEE WAS HELD AT  
LPC OFFICE, COTGRAVE BUSINESS HUB, CANDLEBY LANE, COTGRAVE  
WEDNESDAY 27<sup>TH</sup> MARCH 2019 AT 9AM

Present

In the Chair: Rob Severn (RS)

Chief Officer: Nick Hunter (NH)

Secretary: Alison Ellis (AE)

Treasurer: Gordon Heeley (GH)

Members: Raza Ali (RA), Mandip Bassi (MB), Linda Ferguson (LF), Dave Fernley (DF), Luke Hallahan (LH), Dayaram Mistry (DM), Vijay Pujara (VP), Jon Such (JONS), James Sutcliffe (JS)

Attending

- Sam Travis, NHS England
- Garry Myers, PSNC Regional Representative

Apologies

- Mindy Bassi, Chief Pharmacist, Greater Nottingham Clinical Commissioning Partnership
- Randeep Tak, LPC member
- Mike Jones, LPC member

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**CLOSED MEETING**

1.1 **Apologies for absence**

- Randeep Tak
- Mike Jones

1.2 **Acceptance of the minutes from 16<sup>th</sup> January 2019 - Attachment 1A**

The minutes from the meeting held on the 16<sup>th</sup> January 2019 were agreed as a true and accurate record. These will be added to the LPC website.

1.3 **Action points from 16<sup>th</sup> January 2019 – Attachment 1B**

1.3.1 **FMD**

Forward to next meeting – hopefully Brexit decision will have been made

**Action: If no deal Brexit then need to write to MPs to stop / delay the FMD legislation**

1.3.2 **Contractor visits**

Not completed – forward to next meeting

**Action: GH to add contractor report template to survey monkey and then link added to the members area for members to access**

### 1.3.3 Strategy

Article to remind contractors about locum FFFF code and also that locums can attend LPC training events

**Action: newsletter articles – locum FFFF code and reminder that locums are able to attend LPC training events**

### 1.3.4 Office

AE and RS have produced a MOU and checklist for the office bookings and this has been agreed by the governance sub group. Documents have been added to the LPC website members area and to be sent to anyone booking the LPC office.

### 1.3.5 Contracts

Article informing contractors that the LPC can offer guidance regarding consolidation applications was included on the last newsletter

### 1.3.6 Finances

Finance group have not reviewed the costs / risks for opening a further bank account – will be on the next sub group agenda.

**Action: Finance and Governance sub groups to review the costs / risks for opening another account**

### 1.3.7 Healthwatch report

NH has not emailed Hester @ Healthwatch regarding an update on the recent pharmacy survey – AE to contact Hester.

**Action: AE to contact Hester to see if there is an update on the survey report**

### 1.3.8 Disposal of sharps bins

Newsletter article letting contractors know that they are not contracted to take patient sharps.

## **1.4 Declarations of Interest for any item on the agenda**

- *If any member has any personal or pecuniary interest whatsoever in any matter, they should declare it or not actively contribute to the discussion unless asked by the rest of the committee to provide factual information to aid their understanding. In either case they should not vote on the item*

<p><b>2</b></p>	<p><b>Governance Items</b></p> <p>2.1 Declarations – Attachment 2A Nothing further to be updated – reminder to members that if there are any changes then should change their declaration form asap.</p> <p>2.2 <u>Office update</u></p> <ul style="list-style-type: none"> <li>➤ Quote for building work</li> </ul> <p>Robust discussion regarding the building work quotes received and feel that this is too expensive. Agreed need to have reasonable storage but not built in.</p> <ul style="list-style-type: none"> <li>- Boxes and suitable storage</li> <li>- Stationary cabinet</li> <li>- Kitchen top with legs for the tea/ coffee / buffet</li> </ul> <p>Dishwasher – need to have a plumber and electrician – decided to wait and see if need – could use disposal plates and cutlery. Cost of the storage– if under £1000 then does not need to come back to the full committee meeting</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Action: source stationery cabinets and tables etc for the office – committee agreed to spending up to £1000 if over then need to go back to the full committee</b></p> </div>
<p><b>3</b></p>	<p><b>NHS Contract Matters</b></p> <p><b><u>3.1 New contracts-Routine</u></b> None received</p> <p><b><u>3.2 New contracts-Excepted</u></b> None received</p> <p><b><u>3.3 Litigation</u></b></p> <p>3.3.1 Application offering unforeseen benefits By: Mr Nigel Vincent Morley At: within 400m from East Bridgford Medical Centre, 2 Butt Lane, Nottingham, NG13 8NY (along Butt Lane and Main Road) <b>Response sent 24.03.19 – Attachment 3b</b></p> <p><b><u>3.4 Decisions</u></b> Nothing received</p> <p><b><u>3.5 Responses received</u></b></p> <p>3.5.1 Consolidation application By: Pharmaplex Ltd From: Worsley Pharmacy, 435 High Road, Chilwell, NG9 5EA (closing) To: Grewal Pharmacy, 38-40 Chilwell Road, Beeston, Nottingham, NG9 1EJ (staying) <b>Still have not had a response regarding recent consolidation application – AE to contact PCSE</b></p> <p>3.5.2 Application for inclusion in respect of distance selling pharmacy By: RHSA Ltd At: Office 2&amp;3 Gateway House, Beechdale Road, Nottingham, NG8 3EZ Responses received – further comments by 8<sup>th</sup> April 2019 – Attachment 3a <b>No need for a further response</b></p> <p><b><u>3.6 Amendments to the list</u></b></p> <p>3.6.1 List of amendments received – Attachment 3c</p>

### 3.7 PSNC asking for views on consolidation applications received (Gordon Hockey)

- Process is too long and NHS England taking a long time to actually give a decision
- Suggestion that the consolidation should be given a 5-year protection
- Should automatically refuse applications in consolidation area

Need to have tighter, written regulations around the protection provided after consolidation

Consolidation with 100 hours pharmacies and reducing hours – should this be able to happen or not??

- Currently would have to close the 100-hour pharmacy and risk another application being submitted
- If agreed with the patients needs, businesses and NHS England then should be allowed
- Maybe there should be different core hours – currently only 40 or 100 – could be 60, 80 etc
- HWB should be the body to agree the hours as links with the PNA

#### Agreed to feedback to Gordon Hockey, PSNC

- **longer protection after consolidation**
- **Hours – agreed locally to meet patient needs in the area**
- **Needing more detail in the application to help explain what is going to happen when you move**
- **Make the contract increase core hours**

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#### Finances – GH

##### 4.1 Finances January/ February 2019 – Attachment 4A and 4B

Received payments from NHS England for blood pressure / ENT equipment that the LPC have previously ordered and paid for.

Projection will be spending around £17,500 for March 2019

Office - £632 per month including service charge

Expenses need to be in by 31<sup>st</sup> March as end of financial year

##### 4.2 Cashflow – Attachment 4C

Reserve level £105,000

End of March will be £38,000 above the reserve level

Levy fixed verses % – 11% level at the moment

**Action : GH / AE to send out the cashflow slides to members**

##### 4.3 Levy Invoice 1st Half 2019/20 – Attachment 4D and 4E

For information

##### 4.4 Accruing for office exit

Item that was raised on risk register – such things as re-painting of the office, putting everything back to when started the lease. Add onto the budget.

##### 4.5 Budget 2019/20

Changed the budget set out - separated into sections

Blue – office costs – included insurance for the office

Purple – employees

Pink – LPC meetings

Orange – sub groups – including £7,120 for spending on mp's, pcns, newsletter, depends what happens in the government over the next few months

Training events - £6,600 – if we find the sponsorship then this could be reduced

Service development - £4,500

Contractor visits – still encouraging to visit – amount will depend on any future contract changes

Yellow – all other meetings that attend

Budget = £242,300 - £11,000 more than income - reducing the reserve

All members agreed the budget and DM proposed and DF seconded.

	<p><b>Action: DM proposed and DF seconded – all agreed the budget</b></p> <p><u>Mid Notts</u>  ERD – reminder cards been produced for gp /pharmacies  45 people attended the training in total - had to open up to other contractors for Newark event</p>
5	<p><b>STRATEGY, DEVELOPMENT AND WORKPLAN</b></p> <p><b>Stakeholder map – discussion (30 mins)</b>  What next??  Look at level of interest against level of influence – plotting where stakeholders are</p> <ul style="list-style-type: none"> <li>- Need to add in PCNs</li> <li>- ICS</li> <li>- Could drill down to individuals</li> </ul> <p>Align members to certain stakeholders – e.g James to LMC  Collaboration of pharmacies in PCNs  23 in Notts, 3 in Bassetlaw  Feel that the LPC need to have a strategic role on the PCNs and then pass on the information to those contractors in that area</p> <ul style="list-style-type: none"> <li>- LMC (James)</li> <li>- HWB (Raza) – high interest and high influence</li> <li>- PCNs (Mandip)</li> </ul> <p>Merging of CCGs – forming one overarching CCG although could still change  Comms sub group – stakeholder mapping next item</p> <p><b>Action: Comms Sub Group to work on the stakeholder mapping at the next meeting</b></p>
5	<p><b><u>Sub group updates (20 mins each)</u></b></p> <p>a) <u>Service Development</u></p> <p><u>Training plan 2019/20 - Attachment 5A</u>  Worked well last year  Feedback from contractors is that they find this useful and enjoy the sessions  Support proposal that we use Metaphor Development for next year. Amount in the budget is ok but rather than telephone coaching see if Liam will do a face to face development session for the committee as a whole.. Keeps ability to influence workforce changes.</p> <p><u>Flu training</u> – need to start planning and send out a notification to contractors so they are aware that the LPC are planning on providing the training again this year. Need to look at the changes needed and then adapt the training offering to meet the needs if the local contractors.</p> <p><u>VirtualOutcomes now live – Attachment 5B</u>  Being paid for by NHS England North Midlands  Advertise the training on newsletter and encourage contractors to use</p> <p><u>Transfer of Care Around Medicines (discharge info)</u> – link with another training session</p> <p><b>Action: Newsletter article advertising the VirtualOutcomes training platform.</b></p> <p><b>Action: Contact Liam and ask if he will survey contractors to see what flu training is required and then to organise the date etc with ECG again</b></p> <p>b) <u>Finance update</u></p> <ul style="list-style-type: none"> <li>- Clyde &amp; Co Employment Law Support Packages</li> </ul> <p><b>Suggested that the governance committee review at the next meeting</b></p>

c) Media / Communication

- Views on newsletter

Shorter bitesize – fortnightly – feel that it is good and being opened by more contractors. Also look at producing newsletters on specific topics

d) Governance update

LPC risk register – Attachment 5C

Members were asked to review and send through comments to JS so can be amended and then discussed at the next LPC meeting in May 2019

**Action: Discussion and agreement on the risk register and actions needed – May 2019 LPC meeting**

**Sam Travis, NHS England**

**Blood pressure/ atrial fibrillation project update**

90 community pharmacies have been accredited (Notts & Derbys) – 48 have been active – need to get the other 42 working

521 patients seen – 65% normal readings, 5 referred for low BP, 166 referred to gp for high BP, 12 urgent referrals

1/3 patients seen have had blood pressure outside normal ranges

Atrial fibrillation

10 patients have been referred (1.9%) to the gp

294 patients given dietary advice

79 patients given smoking cessation advice

256 patients given physical activity advice - Refer to MECC – they may have vouchers, offers for gyms and weight loss clinics

172 patients given alcohol intake advice

1/3 of the activity has come from 2 pharmacies

Need to get the workload up so can put a business case together for future commissioning

Download info from NHS.co.uk

Posters are being sent out this week and pharmacies are requested to display these and promote the service

**Action: Information on the BP / AF project to be sent out via next newsletter**

**Extended Pharmacy First Service (ENT & Eye)**

1628 consultations have been undertaken to date

855 for ear conditions/ 105 for nasal conditions / 597 for throat problems and 358 for eye

Only 6.6% are being referred on – pharmacy dealing with the majority of patients seen

5.7% receive medication through pharmacy first

46.1% patients receive treatment through the ENT PGD

Patient satisfaction is 100%

If can source additional funding then would open up to other pharmacies

ST looking at whether can have sites in Rushcliffe because they do not commission pharmacy first

40 max number of patients that can be seen but if send through an email to ST then can authorise for more PharmOutcomes – gp notification is low – meant to formulate a form to print off – this is not the case

- Any glitches with the system then contact Fran Barnes @ NHS England

ST will check if there is an electronic guide to the PharmOutcomes service

**Action: Highlight in the newsletter that there is a populated form to be printed off - Better to give the patient a physical copy rather than email if through to the gp as they don't always see these**

### **Locally Commissioned Emergency Supply service**

Pharmacies to be reminded that from April 1<sup>st</sup> gabapentin and pregabalin will become Schedule 3 controlled drugs and will no longer be eligible to be supplied via either this local service (or NUMSAS) 8400 supplies of medicines were made during this financial year via the local scheme

### **EPS – controlled drugs**

EMIS practices going live by Friday 5<sup>th</sup> April 2019  
SystemOne practices are already live

### **Flu**

Good flu season – excess of 40,000 vacs completed in pharmacies  
However, a high number (over 1100) potential errors have been picked up from NHSBSA.  
Pharmacies have declared that they have given TIV (instead of aTIV) vaccines  
To date the team have verified that 880 of these were actually recording errors by the claiming pharmacy  
ST highlighted the need for greater accuracy in reporting next year as this level of recording errors is unacceptable  
Flu letter has gone out today regarding which vaccines have been approved for 2019/2020 flu season

**Action: Emphasise on the newsletter accuracy of recording for vaccinations on PharmOutcomes / BSA data**

### **DMIRs**

Disappointing numbers – 146 referrals into Nottinghamshire pharmacies since November  
Members pointed out some of the problems they have been encountering. NHS England offered to go into call centres to train DHU staff – but DHU refused this support.

### **Primary care networks (PCNs)**

ST highlighted that there may be opportunities ahead in terms of funding being given to PCNs for more preventative services – including early cancer diagnosis and CVD prevention in future years  
Bigger focus on prevention  
1<sup>st</sup> year – extended access  
2020 onwards - Network service contracts – CVD, cancer,  
Lots of opportunities for pharmacy

### **New leads on ICS**

David Ainsworth – Mid Notts  
Sharon Pickett – Greater Notts  
Healthy.io - Looking at funding to be able to do

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### **Contract development**

- Quality Payment Scheme update – Attachment 6A

Started at 140 contractors with unvalidated points  
At review date 15.03.19 there were only 19 (including DSPs) with unvalidated points

**It has taken a significant amount of work to do this**

- Healthy Living Pharmacy – update
  - HLP Champion training 21.01.19

No quality payment declaration for the next 6 months  
Still need to work towards HLP with campaigns  
Need to get contractors providing the same level of service otherwise will not get any services commissioned through pharmacy.

	<p>LPC represent all contractors and need to raise the level of service standard</p> <p><b>DMIRS update</b> Attachment 6B</p> <ul style="list-style-type: none"> <li>• DMIRS feedback meeting with PSNC 26/2</li> <li>• DMIRS conference call 27/2</li> <li>• DMIRS reference group 07/03</li> </ul> <p>Call handlers are the cause of the problem regarding few or wrong referrals - DHU are struggling with capacity. Nothing that pharmacy has done.</p> <p>NH / RS are meeting with Richard Stratton – looking at gp referred DMIRs in Nottinghamshire – reviewing pilot sites in Notts – will be nationally commissioned by NHS England.</p> <p>Wishing to move NHS111 service on so that patient is given a reference number and then can go to any pharmacy they choose and the pharmacist logs in.</p> <p>Use as evidence to show what pharmacy can do and what referrals are reducing</p> <p>NH is feeding information directly to NHSE Central through the DMIRs national group</p> <p>Need to engage with DMIRs before care navigation is embedded – Bassetlaw</p> <p>Needs to be built into the service that pharmacy can refer back to the gp practice – looking at electronic referral service</p> <p><b>eRD</b></p> <ul style="list-style-type: none"> <li>➤ GH update</li> <li>➤ Training sessions – 25.02.19 and 12.03.19</li> </ul> <p><b>Brexit</b></p> <ul style="list-style-type: none"> <li>➤ <u>Brexit contingency planning – Attachment 6d, 6e and 6f</u></li> </ul> <p>For Information</p> <p><b>FMD</b></p> <ul style="list-style-type: none"> <li>➤ <u>Advice Notice on EU Falsified Medicines Directive (FMD) – Attachment 6C</u></li> </ul> <p>For Information</p>
<p><b>7</b></p>	<p><b>Tenders and bids / Consultations / Service Opportunities</b></p> <ul style="list-style-type: none"> <li>➤ NHSE Items which should not be routinely prescribed in primary care consultation – Attachment 7A</li> </ul> <p><b>Information -</b></p> <ul style="list-style-type: none"> <li>➤ <u>BP service</u> ST updated earlier in the meeting</li> <li>➤ <u>ENT</u> ST updated earlier in the meeting</li> <li>➤ <u>Referral Incentive Scheme – Private Health Checks (Parkwood)</u> Pay for referrals into health checks – paid £5 per referral</li> <li>➤ <u>NUH Hep C screen and treat proposal – Attachment 7B</u> <ol style="list-style-type: none"> <li>1) City council with drug team</li> <li>2) NUH</li> </ol> </li> </ul> <p>Not sure what will look like as a service – meeting in April 2019 – update at the May 2019 lpc meeting</p> <p>Change of chief pharmacist at NUH – Judith Gregory has taken on interim role</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Action: GH to attend the Hep screen and treat service meeting and update at the May 2019 LPC meeting</b></p> </div>
<p><b>8</b></p>	<p><b>PSNC Events</b></p> <p>8.1 <u>National meeting of LPCs – 20<sup>th</sup> March 2019</u></p> <ul style="list-style-type: none"> <li>➤ RS / NH verbal update</li> </ul> <p>Simon Dukes presented – very upbeat</p>



	<p>Ed Waller, Senior Commissioner at NHSE - very competent, robust answers – asking for consistency across pharmacy          Talked about PCNs          Everyone else has same frustrations / concerns          Provider companies were discussed again – guidance available for this          Communication and public affairs – party political conferences          8.2 LPC member days         <ul style="list-style-type: none"> <li>▪ 27th March in Leeds</li> <li>▪ 1st May in Coventry – DF, NM, MB attending</li> </ul>         8.3 LPC Treasurers         <ul style="list-style-type: none"> <li>• Wednesday 15th May in Manchester (JS, GH)</li> </ul> <b>GH to book places</b></p>
	<p>Garry Myers, PSNC Regional Representative - Confidential member update including funding and contract development</p>
<p><b>9</b></p>	<p><b>Standing items</b>          9.1 ICS          9.1.1 SYB ICS 569 million reasons campaign – Attachment 9e          9.1.2 ICS Board Summary Briefing - January 2019 and February 2019 – Attachment 9A and 9B          9.1.3 ICS Partnership Forum report 26.02.19 – Attachment 9C          9.1.4 ICS CSS Clinical Design Group – RS slides (10 mins)          Looked at 20 pathways – scored based on cost and number of patients          Currently have 6 services that have been selected to focus on          Sub group working – 3 day-long workshops being run          Pathways should start with prevention rather than treatment – that is where community pharmacy can be involved          Only influence at top level - at the moment getting community pharmacy thought about          Members to be involved in the sub groups          AF/BP pilot work – need to demonstrate that contributes to health needs – use as evidence – stroke prevention.          Committee happy for RS to carry on the work he has been doing and attending the meetings          Members have offered to attend more meetings to spread the workload          Training sub group need to be involved in some of this work – may need to upskill the pharmacy workforce          9.1.5 SYB ICS CVD Prevention Task Group – Attachment 9D          9.1.6 Midlands PCN event notes 11.03.19 (NH)          9.1.7 ICS clinical strategy workshop 19.03.19 (NH / RS) – Attachment 9F          9.1.8 SYB ICS UEC 18.03.19 (NH)          9.1.9 ICS Deprescribing committee meeting          All for information</p>
<p><b>10</b></p>	<p><b>Chief Officer / Chair reports:</b>  <b>Chair report</b> – RS will forward his report after the meeting          Attended Derbyshire LPC          Mapping PCNs and then mapping pharmacies to these – ongoing work          ➤ <u>RS / NH met with patient rep from APC 04.03.19</u>          Notts Uni stakeholder event          Concerned that pharmacy were getting work passed onto them but no training to help or funding          Training session on skin conditions and wound care – NH to pass through the details to the Training Academy</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Action: NH to send through the details and contacts for skin conditions / wound care training session to the training academy</b></p> </div>

11	<p><b>MEMBER UPDATES</b></p> <p>11.1 <u>Member / contractor allocation contact</u></p> <ul style="list-style-type: none"> <li>➤ Visit report – Attachment 11A (previously sent via email)</li> <li>➤ Allocation list – Attachment 11B (previously sent by email)</li> </ul> <p>Nothing to report this time</p> <p>11.2 <u>Meetings attended</u></p> <p>No other meetings attended other than those already reported on</p> <p><b>11.3 <u>Health literacy – JonS</u></b></p> <p>Jon attended - very interesting and useful</p>
12a	<p><b>LOCAL AUTHORITY REPORTS</b></p> <ul style="list-style-type: none"> <li>▪ <b>PUBLIC HEALTH COUNTY</b></li> <li>▪ <b>PUBLIC HEALTH CITY</b> <ul style="list-style-type: none"> <li>➤ LCPHS Pharmacy Sexual Health Services 2019 - 2022</li> </ul> </li> </ul> <p><a href="https://procontract.due-north.com/Advert?advertId=066e261c-eb38-e911-80f2-005056b64545&amp;p=527b4bbd-5c58-e511-80ef-000c29c9ba21">https://procontract.due-north.com/Advert?advertId=066e261c-eb38-e911-80f2-005056b64545&amp;p=527b4bbd-5c58-e511-80ef-000c29c9ba21</a></p> <p>any qualified provider – now expired. Sent out by email to all pharmacies previously</p> <ul style="list-style-type: none"> <li>➤ City substance misuse and sexual health event 27/2 (GH) – Attachment 12J</li> <li>▪ <b>HWB COUNTY</b> <a href="http://www.nottinghamshire.gov.uk/dms/Meetings.aspx">http://www.nottinghamshire.gov.uk/dms/Meetings.aspx</a> <ul style="list-style-type: none"> <li>➤ Summary <ul style="list-style-type: none"> <li>▪ Next meeting date <b>24<sup>th</sup> April 2019 2pm</b> @ County Hall, Loughborough Rd, West Bridgford</li> <li>▪ Next meeting date <b>5<sup>th</sup> June 2019 2pm</b> @ County Hall, Loughborough Rd, West Bridgford</li> </ul> </li> </ul> </li> <li>▪ <b>HWB CITY</b> <a href="http://committee.nottinghamcity.gov.uk/ieListMeetings.aspx?CommitteId=185">http://committee.nottinghamcity.gov.uk/ieListMeetings.aspx?CommitteId=185</a> <ul style="list-style-type: none"> <li>▪ Next meeting date: <b>27<sup>th</sup> March 2019 2pm</b> @ Loxley House</li> </ul> </li> </ul>
12b	<p><b>NHS England Area Teams</b></p> <ul style="list-style-type: none"> <li>➤ CD LIN meeting 6th Feb report – Attachment 12A</li> </ul> <p>Opioids – concerns re patients who have been on for a long time</p> <ul style="list-style-type: none"> <li>➤ Pregabalin and Gabapentin Briefing Note – Attachment 12B</li> </ul> <p><b>Info – discussed earlier in the meeting</b></p> <p><b>LPN meeting – Friday 29<sup>th</sup> March</b></p> <p><b>LPN Funding meeting – Friday 29<sup>th</sup> march</b></p> <p><b>SYB LPC meeting – 29.01.19 – Attachment 12C</b></p> <p>For information</p>
12c	<p><b>CCG updates</b></p> <ul style="list-style-type: none"> <li>➤ Bassetlaw CCG Brand Prescribing requests</li> <li>➤ Bassetlaw care navigation update 12.03.19</li> <li>➤ Seasonal Flu meeting 11.02.19 – Attachment 12D</li> </ul> <p><b>For information</b></p> <p><b>Mid Notts</b></p> <ul style="list-style-type: none"> <li>➤ Meds optimisation meeting 7th Feb report – Attachment 12E</li> <li>➤ Mid Notts Prescribing sub group – 20<sup>th</sup> March 19 (DF)</li> </ul> <p><b>Virtually the same as previous meetings – blaming pharmacy for overspend and shortages</b></p> <p><b>Greater Notts</b></p> <ul style="list-style-type: none"> <li>▪ Greater Notts Meds Opt Committee 24.01.19 – Attachment 12F, 12G, 12H</li> <li>▪ NHS Greater Nottingham: Prescribing Hints &amp; Tips Newsletter March 2019 – Attachment 12I</li> </ul> <p><b>For information</b></p> <p><b>Area Prescribing Committee</b></p> <ul style="list-style-type: none"> <li>➤ 21<sup>st</sup> March 2019 – MJ/ NH - Attachment 12K and 12L</li> </ul>

<p><b>13</b></p>	<p><b>Information received from various sources</b>  <b>If members wish to discuss any of the items below at the LPC meeting then please let the chair know before lunchtime and this will be discussed under AOB.</b></p> <p><i>Members are advised that many PSNC communications are now communicated electronically and repeated on the PSNC website. It is recommended that members regularly visit the PSNC website 'LPC members' area to access the latest information available on <a href="http://www.psn.org.uk">www.psn.org.uk</a></i></p> <p><b>13.1 PSNC briefings / newsletters</b>  13.1.1 List of PSNC newsletters received since the last LPC meeting – Attachment 13A  Link to the PSNC webpage - <a href="https://psnc.org.uk/">https://psnc.org.uk/</a> - briefings found on each drop down section of the website</p> <p><b>13.2 PSNC Pricing audit reports</b>  Nothing received</p> <p><b>13.3 PSNC Regional Meeting –</b>  EMS + Y&amp;H joint LPCs regional meeting – 16.05.19</p> <p><b>13.4 NHS Digital</b>  ➤ <u>Controlled drugs in EPS: comms toolkit – Attachment 13c</u>  For information</p> <p><b>13.5 Healthwatch Nottinghamshire</b>  ➤ Nothing received</p> <p><b>13.6 CCA / AIMp Communication</b>  ➤ Members to do report after meeting and remember yearly return to be completed</p> <p><b>13.7 CPPE</b>  Nothing received</p> <p><b>13.8 LMC</b>  LMC conference 29.01.19 (RS and NH)  Spoke to Michael Wright, Chief Officer - Looking to see if the LPC can signpost pharmacists / pharmacy staff to crisis counselling etc – may be able to buy into this service – NH gathering more information. CPPE have a process in place to refer for mental health / crisis counselling</p> <p><b>13.9 Health Education England</b>  Blood pressure training webinar – 26<sup>th</sup>, 27<sup>th</sup> and 28<sup>th</sup> March 2019</p> <p><b>13.11 PCSE</b>  March bulletin – Attachment 13b</p>
<p><b>14</b></p>	<p><b>Any other business (raised by lunchtime)</b>  <b>14.1 discharge medication via NUH</b>  Phone call at Newark</p> <ul style="list-style-type: none"> <li>- No longer going to ring the pharmacy for MDS patient</li> <li>- Going to send the patient out with a 7-day MDS and a letter to give to the pharmacy</li> <li>- Should be sending through referral by PharmOutcomes but they are not doing this – integrated system now is live</li> <li>- Gp's contract states that they will action a discharge note after 7 days</li> <li>- NH is going to chase up Mindy regarding the SLA and length of treatment that NUH should be providing</li> <li>- Had some discharge summaries through which look like need to do a MUR – need to accept the note and then can write in details and state not completed as not needed</li> <li>-</li> </ul> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p><b>Action: NH to discuss the length of treatment that NUH are contracted to provide and check with Sam if NUH should be using PharmOutcomes for discharge information</b></p> </div>
	<p><b>Strategy plan</b>  <b>Review governance policies – need to check when these are due</b></p>

<b>Details of future meetings</b>		
Bi-monthly		
<b>15<sup>th</sup> May 2019</b>	9.30am – 5pm	<i>Office at Cotgrave, Candleby Lane, NG12 3JQ</i>
<b>17<sup>th</sup> July 2019</b>	9.30am – 5pm	<i>Office at Cotgrave, Candleby Lane, NG12 3JQ</i>
<b>18<sup>th</sup> September 2019</b>	9.30am – 5pm	<i>Office at Cotgrave, Candleby Lane, NG12 3JQ</i>
<b>20<sup>th</sup> November 2019</b>	9.30am – 5pm	<i>Office at Cotgrave, Candleby Lane, NG12 3JQ</i>

**Next meeting is on Wednesday 15<sup>th</sup> May 2019 @ LPC office, Candleby Lane, Cotgrave**

*Minutes agreed as true and accurate record of the LPC meeting held on Wednesday 27<sup>th</sup> March 2019*

Signed: \_\_\_\_\_ *original signed by Rob Severn* Date 15.05.19  
 Rob Severn, Chair, Nottinghamshire LPC