

In the Chair: Rob Severn (RS)
Chief Officer: Nick Hunter (NH)
Secretary: Alison Ellis (AE)
Treasurer: Gordon Heeley (GH)
Services officer: Mike Jones (MJ)

Members:

David Evans (DE), Linda Ferguson (LF), Dave Fernley (DF), Soumar Kaziz (SKaziz), Emma Marsden (EM), Dhiren Raval (DR)

Attending

Rebecca Dickenson, Community Pharmacy Clinical Lead, Nottingham & Nottinghamshire ICB (RD)
Lindsey Fairbrother, CPE Regional Representative (Teams)
Kirsten Atkinson, Consultant PR, Priest & Co (KA)

Apologies received

Raj Morjaria, LPC member
Nishant Patel, LPC member
Vijay Pujara, LPC member

Welcome and introductions

Introductions were not needed as guests are regular attendees and knew everyone present.

The Chair opened the meeting with a reminder regarding confidentiality and the Code of Conduct and also a fire safety briefing explaining where the fire exits and assembly point are located.

Resignation of Shazma Khira due to her new role in Milton Keynes. Thanks expressed for the time given to the LPC over the last 12+ months. CCA will be sending through details of the new CCA member asap.

Members were also asked to write any points / questions that they hoped to be discussed during the meeting on the flipchart, and these will be checked at the end of the meeting.

1 – GOVERNANCE

➤ Acceptance of the minutes from 21st January 2026 - Attachment 1A

The minutes were agreed as a true and accurate record of the meeting held on 21st January 2026. RS signed and the minutes will be added to the website.

➤ Action points from 21st January 2026 (Action tracker) – Attachment 1B

73 - KA/AE to contact the universities re having posters up and screensaver re PCS– They are happy to display the digital resources sent through and AE has also sent hard copy posters.
83 Agreed that leaflets and posters can be sent out – AE has received all posters, leaflets and envelopes and will post out in April 2026.

89 - Talking Therapies - need to share the resources and communicate to contractors in January 2026 – included in February newsletter and on the website.

90 - Talking Therapies - MJ to do another Podcast with Kashmeera @ Talking Therapies – focus will be on Elderly and Men next – reliant on Talking Therapies timescale.

91 - Podcast - INT - Jan 2026 – MJ has not been able to record a podcast with Rachael Rees due to the ICB workforce review, spoken with Fiona Callaghan and Dr Manik Arora and they are happy to do the podcast. MJ to organise over the next couple of months.

92 - NMS consultations - Podcast, newsletter – completed

93 - MJ/KA to create document / use CPE resources and localise explaining what pharmacy do etc – then members to review and vote on agreement to use and then share with contractors so all have same info to use when talking in neighbourhood meetings – MJ has already localised the CPE documents and ready for use.

95 - RS to organise 1:1 with each member via Teams – RS has contacted members and met with VP, LF DR, EM.

97. Exec team to prepare explanations for contractors and commissioners re what the LPC are doing and show value for money – service uptake from contractors and telling about influencing wins etc.

Information to go in the annual report with details of what have done over the year to increase income for pharmacies, work together

➤ Declarations 2025/26 – any changes let AE know

Members were reminded to keep declarations of interest up to date. No new declarations were raised.

Declarations for 2026/27 will be completed either prior to the May committee meeting or during the meeting.

➤ Governance sub-committee update – DE, DR. (need new member)

Reviewed the March meeting agenda and nothing to raise. No issues received from members.

Discussed a replacement member for the subcommittee due to Shazma's resignation – felt should wait until the new member has been agreed and discuss at May 2026 committee meeting.

Action: AE to add governance sub-committee members to the May 2026 committee meeting

➤ Review governance documents

➤ Self-assessment review – Attachment 1C

Members worked through the sections that were amber to update RAG rating.

LPC reporting – discussed having meeting reports included on the agenda for those that exec / members have attended – this would mean there would be a considerable amount of papers for each LPC committee meeting – NH sends through brief notes from meetings attended when he feels that an update is needed straight away or he includes on his meetings attended report at the LPC committee meeting. Keep at Amber.

Work plan - Committee meeting agendas are driven by the workplan. Delegated to Chair to manage staff team and committee members review at each meeting. Keep at Amber as do not review against budget at LPC meetings

Members competence - Skills assessment on the May 2026 committee meeting agenda, members have attended various training sessions by CPE. Still Amber.

Stakeholder mapping – ICB are still the legal entity – only clustering in Derbyshire /Lincolnshire / Nottinghamshire – others are merging – Stakeholder map meeting – only have high level at the moment and still some changes to make. Invite someone that can explain the structure to us once they are in place.

- > Governance Framework – May 2026 committee meeting
- > Subcommittee Terms of Reference – May 2026 committee meeting
- > Skills Matrix – July 2026 committee meeting
- > Risk Register – July 2026 committee meeting
- > Expense Policy – July 2026 committee meeting

Most of the governance documents need to be completed in May / July 2026.

Action: AE will ensure that the governance documents are included on the July LPC committee agenda.

Market entry

▪ **New contract applications - excepted**

Application for Distance Selling Pharmacy

By: Healthnest Pharma Ltd

At: 205 Ilkeston Road, Lenton, NG7 3FW

Approved.

Contractors were not sent the application for comments – listed as interested parties but not sent to them. Raised with everyone that could, contracted individual contractors, ICB and relevant bodies.

▪ **Litigation**

Application for unforeseen benefits

By: TW Healthcare Solutions Ltd

At: Berry Hill, Between Nottingham Rd and Southwell Rd, Mansfield, NG18 4TE

Closing date: 25th March 2026

Response: Remind that there is a footpath through to Tesco and it is not in a deprived area – include details of types of housing etc.

Application for Distance Selling Pharmacy

By: Priority Assets Ltd

At: Office 32 Chelsea House, Chelsea Street, Nottingham, NG7 7HP

Awaiting decision

Application for Distance Selling Pharmacy

By: Meadows18 Ltd

At: 13a Wilford Crescent, Meadows, Nottingham, NG2 2EZ

Awaiting decision

Application for Distance Selling Pharmacy

By: Anthus Pharma Ltd

At: 12 Toton Close, Long Eaton, NG10 3TP

Comments sent – awaiting decision

▪ **All contract decisions and amendments are in separate document - [Attachment 1D](#)**

For information

▪ **NHS Resolution**

Nothing to raise

2 – FINANCES

- January / February 2026 accounts – [Attachment 2A, 2B, 2C and 2D](#)

January 2026

Income

Levy for January was received in December but received February levy in January - £17,999.98
 PharmOutcomes licence money from NHS East Midlands - £61,149.20
 Transfer from Project fund - £7,535.81
 Refund from Amazon - £30.35
 Interest received - £52.70
 Total = £86,768.04

Expenditure

Additional salary costs due to back payments - £15,457.17
 Usual Office costs – £994.99
 Expenses for January meeting – £4,211.71
 PharmOutcomes licence invoice paid - £60,649.20
 CPC levy - £7,993

Total expenditure - £86,463.22
 Balance - £165,199.14

Project fund - £91,760.16

February 2026

Income

Levy for February was received in January but received March levy in February - £18,000.01
 Project fund transfer - £3,141.13
 Interest - £41.86

Total - £21,183.00

Expenditure

Usual salary costs - £12,097.53
 Usual Office costs – £1,035.40
 Expenses for exec team and meetings - £1,026.51
 Paid for Solicitor re Lease on the office - £480
 CPE levy - £7,993

Total expenditure - £25,708.48
 Balance - £160,673.66

Project fund - £88,619.03

- Budget vs actual spend 2025/26 – [Attachment 2A](#)

Projecting that end the year with £143,039 – this means there will be 5 months reserves in the account – target was 4.5 months. Not enough to give a levy payment holiday.

- Budget for 2026/27 – discuss and approve – [Attachment 2B](#)

- Proposing no change in levy - £216,000 a year
- Still have £88,000 in project fund account

Commented [NH1]: @Rob Severn not sure we should include specific reference to an individuals salary in the minutes – especially thinking about these minutes get published.

Commented [AE2R1]: I have taken out reference to mike

Staff costs - £130,700 this year.

- Employers allowance - £10,500 – still getting unless there are changes implemented by Government.
- CPE levy – increased by 1% - £97,042. No change to levy collected from contractors.
- Reduction in the reserve by £21,459.

There will be no funding from NHSE.

Action: GH / AE to send the final budget to Liz Gundell, NHS England asap.

▪ Finance Checklist

Actions on the list were

Fraudulent activities – CPE sent through examples and issued guidance,

- Staff handbook is on the website

Dual approval is being completed for transactions from February 2026.

- Prescriptions dispensed data for November and December 2025 – Attachment 2C and 2D

For information

3 – CPE UPDATE

Lindsey Fairbrother, CPE Regional Representative

▪ CPE update

- Negotiations

Have started – 3 evening meetings last week and also met prior to the negotiations.

Pressures survey – highlight that need to complete to help with negotiations.

- Full committee

RS and NH were invited to observe the meeting along with other colleagues in East Midlands LPCs.

Sub-Committees meet during the day but surrounded by the whole committee who can suggest things –

Lindsey and other colleagues have asked if this can be changed so can meet separately and then report back.

- Cat H

Reduced the number of items – doesn't help with running the business.

- Cat M – potential changes

Not reasonable to have to provide a drug and not know if going to receive the correct reimbursement .

Terms of Service require pharmacies to dispense with reasonable promptness.

- Abuse letter around support that pharmacy should receive by the police to be sent to the Police Commissioner

KA put together the letter – Lindsey will chase up with Vicky and James to see if being sent out to LPCs for them to use. Need to raise locally and nationally.

Commented [NH3]: @Rob Severn I've made some suggested changes but wonder if even more of this section should be deleted due to the confidential nature of the regional rep updates, and we are still in negotiations.

Looking at getting regulatory change so can refuse to provide the service as at the moment can ban from the premises but still need to provide the prescription.

Not sure it is the right time to send the letter due to the current investigation that is going on for local police.

- Regional meetings

June dates to avoid school holidays.

- Altered constitution – from 24 to 26 members

New independent member joined the Regs sub committee

- Public Affairs tender

6 companies expressed an interest.

- CPE levy uplift

only covered the increases – no more extra money

- 75,000 less pharmacy opening hours per week since 2023

mainly late evening and weekend provision that has disappeared

- Upcoming budget changes expected to add significant extra costs to contractors from April 2026

Supply is still the main income with the way community pharmacy is funded.

Need to stabilise the sector for 2026/27.

Positive re Emergency Contraception being part of contraception service.

LPCs are reducing hours and staff

- Neighbourhoods

Not ICB led – provider led.

- Elections – independent regional reps – would like each committee to have someone nominated to take over from Lindsey. Lindsey finishes with CPE at the end April 2026.

- [TAPR and CPE survey – Attachment 3B](#)

Discussed and completed as full committee and AE to send through comments via online form.

Action: AE to send through the comments captured during the discussion via the CPE online form

4 - COMMUNICATIONS

Kirsten Atkinson, Communications / Marketing Consultant, Priest & Co

- [Communications plan update – Attachment 4A](#)

PCS is trending.

Impetigo, earache and sore throat is the main search to take through to the Pharmacy First website.

Maybe use graphics in socials explaining that seeing these trends being searched .

Mandatory contraception campaign – need to confirm that participated by 21st April 2026.

- Promoting Contraception service – Attachment 4C

PCS in Nottinghamshire schools – Lauren Burns – sent through digital assets to be used by all teachers etc.

Also, Emma Marsden has created some videos that have been used on the NTU TikTok (89,000 followers).

- AE to add onto the website page and share on the WhatsApp groups

Action: AE to add the contraception video onto the LPC website page and also share on the WhatsApp groups

➤ Podcasts

- Next recording and titles
 - Changes to supervision – in future – how do we use the resources

INTs – Rachael Rees discussion on what is happening in Nottinghamshire – MJ is now working with Dr Manik Arora and Fiona Callaghan.

- Getting to know CPN members

DF gave a 5-minute talk on family and career background for members.

- Any other topics you wish to include and interested in being part of?

Nothing raised

5- SERVICE DEVELOPMENT

Nottingham and Nottinghamshire ICB PCARP Data January 2026 – Attachment 5A

➤ **Pharmacy First**

- Numbers not completing threshold etc.

July 2025 there was a spike – Insect bite – 140% up on 2025 and 2024

Dropped in Jan from December – winter pressures so was expected – now back to November level.

Threshold payments – less met in January than December – this maybe because of Bank Holidays as patients have less access to GPs so December would have been a busier month for all pharmacies.

Those that are independent prescribers are more likely to convert consultations into PF – background training increases confidence.

➤ **Pharmacy Contraception Service and local sexual health services**

-

Increasing over last few months.

1/3 of all consultations is for Emergency Contraception.

Initiation is also increasing monthly too.

Distribution across Nottinghamshire is better– 68 signed up to the local service and now have 202 registered for the national service.

Working with the PH teams with the data that we have as they no longer have access to this data now nationally.

Do we / can we check if GP prescribing has gone down per month – compared to the increase in pharmacy consultations - MJ to check.

EC - Glasshouse Street and Boots Parliament St – sexual health clinic and student population 25% consultations being provided by these 2 pharmacies.

Spoken to Mansfield and Nottingham health hubs – can alleviate the workload and refer into the pharmacies for EC but need confidence that they will be able to offer this for all the time they are open.

Do we use the GPhC standards as the tool to support contractors to understand what they should and shouldn't be doing. Locums refusing do the service (have they signed up for the PGD)?

Action: Exec team to review resources for EC that contractors could consider using

Action: MJ will work on data alongside contacting pharmacies re sending info to the 30 that are signed up and not providing the service.

Pill checks – Mansfield and Notts West – been asked by clinical lead if pharmacy can do all the pill checks in these areas.

Every 200 continuations saves 1 week of clinical team time in surgery.

- **Hypertension Case Finding Service**
 - Know your numbers evaluation – Attachment 5B

For information

- **NMS**
 - Doubling of numbers
 - Reached 91% - creeping closer to the number which means completing two conversations
 - A cost saving

- **DMS**

Letters being sent out by the EMPCT – Attachment 5B, 5C, 5D, 5E

Causing concern – working closely with the hospital

IT upgraded to Nerve Centre resulted in a 20% reduction in referrals.

Seeing more referrals that are not being dealt with on PharmOutcomes – now receiving the referral and completion data.

Impact on patient health – taking wrong / double medication and readmittance to hospital.

Reinforce that it is an essential service.

Need to be completed in 72 hours.

Remuneration that pharmacies are missing out on when doing the work but not completing on PharmOutcomes and claiming on MYS.

Problems raised by members:

- Needs to be an automatic transfer when complete to go through the completed
- Significant numbers are not being received by referral and find out from the patient or GP and the work is being done but for no funding.

Action: RS to contact CPE (Alastair) and raise the issues that David Evans highlighted around pharmacies being able add discharge summaries on themselves when receive through from patients / GPs.



6 - OFFICER REPORTS

Chair – Attachment 6A

- Chairs forum update (11.03.26)

Focused on LPC function and governance,

Observing CPE Committee meeting 4th & 5th Feb

- MP Communications

As CPE are now in negotiations there has been limited opportunity for dialogue. Continued pressure re business rates, inflationary pressure along with NI pressure. Recent calculations are that we are £800m down on last 6 years in real terms – pressure from all trade bodies to emphasise this.

- IP Pathfinder

IP project will be continued locally (time limited) –nationally around 80% of IP pathfinder sites will continue in some format temporally – ICB restructure appears to have derailed the ongoing commissioning of IP across the cluster, nationally ICBs have been told they should be commissioning but the reality is sadly different.

- Vaccination Services – no further update since last report.
- Project Compass – introduced the project team to some further pharmacies.
- Continue to support Mike with the Integrated Neighbourhood Teams work

Webinars – done across cluster - evenings – not had great numbers - all aimed at improving tangible benefits to contractors.

- Chief Officer – Attachment 6B

A lot of contractor queries coming through at the moment.

- NMS webinar – 12.02.26

Went well – not many attended.

- PF gateways and threshold challenge webinar – 12.03.26

Those that attended gave good feedback.

Future webinars – April - social media, June – DMS.

▪ Contractor event – May 2026 – Money Matters, David Broome
Oversubscribed in SY and WY – spoken to Lindsey F and she fully supports this and will attend if free.

- House of Lords Medicines supply fragility report
<https://committees.parliament.uk/committee/430/public-services-committee/news/208874/lords-committee-looks-at-medicines-security-prediction-and-prevention-of-medicine-supply/>

(For noting and for members to use)

NH has used in meetings to help support that the supply problems are a national issue and not the fault of individual pharmacies.

Branded Generics – CLOT meeting – [Attachment 6C](#) (not included in the folder – confidential)

James Davies – CPE – provides research, analysis for negotiations, Previous Director for England of RPS.

7– OTHER INFORMATION / MEETINGS

> NHS England / Nottingham and Nottinghamshire ICB / DLN

- NHS Medium Term Planning
- DLN Prescribing Outcomes Scheme 2026-27 – [Attachment 7A](#)
- Palliative Care Drug Stockist Service contract update
- East Midlands Primary Care Team meeting
- Bank Holiday rota
- Prescribing Hints and Tips Newsletter – [Attachment 7B](#)
- Controlled Drugs team February 2026 newsletter – Feb 2026
<https://sway.cloud.microsoft/yhqM3DiTH80RxK6t?ref=Link>
- Community Pharmacy IP pathfinder evaluation -
[20251110_FINAL_Report_agreed_version.pdf](#)
- DLN structure wave 2 – [Attachment 7C](#)

> Community Pharmacy England

- CPE newsletters received (link to CPE website) - [Newsletter archive - Community Pharmacy England \(cpe.org.uk\)](#)
- [CPE events](#)

- Media training for LPC Chairs and CO – 31.03.26 RS booked
- CPE regional contractor event (East & North Midlands) – 10th June 2026
- CPE December 2025 audit results – Attachment 7D

➤ Healthwatch

- February 2026 newsletter – Attachment 7E

➤ CCA

- CCA Matters February 2026 - Attachment 7F

8 – OPEN MEETING

Rebecca Dickenson, Community Pharmacy Clinical Lead, NHS Nottingham and Nottinghamshire ICB

➤ PF sore throat campaign,

AI notes taken – Heidi

Some use ChatGPT to do notes – give details and then it puts the information into patient record notes format. Obviously need to read through and check.

GP contract change

Line in contract that they have to ensure prescriptions go to all pharmacies.
All referrals for clinical services need to be able to go to all pharmacies.

None of the GPs have used the BaRS – this could be a reason for the ICB to push the GPs to implement BaRS.

ABPMs

Some cases where the readings were high but saying normal in the notes – admin at the GP practice then file this on the records and nothing is done.

Neighbourhood health

Framework has finally arrived – lots of mention of pharmacy and IP included – no funding for this yet.

IP pathfinder

Cap of 30 consultations or nothing at all.
At the moment there is no funding allocated through the framework.

30 consultations per month - £25 per consultation.

Cleo is being funded as part of this – if national service then will be a provider pays option.

DLN transformation fund

Large pot of money available for any provider to design service that will meet the Cluster strategic aims and conditions of bidding.

Bid needs to be in by 1st April and then the review of what planned to deliver is May 2026

ICB are moving to a strategic commissioner and will be less hands on.

It is not clear what could constitute complying with these criteria yet.

Nick's comments

Needs to be a collaborative bid which is across primary and secondary care.

- Have provider organisations in Notts already for GP's – CityCare, PICS, GP Alliance,

We need to speak to the bid owner to be involved and be part of their bid not a separate one.

- Elective care – better use of community pharmacy then releases capacity to do elective care - bids need to be cash releasing.

2 bids from Derbyshire.

Mid Notts and North Notts are considering bidding.

Tracey is also working with their Provider Alliance who are doing a bid for Lincolnshire.

10 – STRATEGY

- **Strategy – 2025/26 deliverables – Attachment 9A**

Review and agree deliverables for 2026/27

Committee worked through the strategy and made some amendments

Page 3

Mission statement - add in contribution community pharmacy makes to the local NHS and **stakeholders**

Page 4

We will section - Add in **collaborate**

Page 5

Guiding principles

We do what gives most value **and tangible benefits**

We work as a partner with the NHS and **appropriate stakeholders**

Page 6

Strategy section - Nothing to change

Relationships & Collaboration - GPS/PCNS / **Neighbourhoods**

Page 7

Communication - nothing to change

Governance - **Sign up to all CPE governance**

Page 8

Change to 2026

1) Change from PF to **National Advanced services**
Focus on integrating **services** into local pathways

2) Take out local services and add in **neighbourhood health** – Mike to send through action notes

List of abbreviations – they are **initialisms**

Finalise at the May committee meeting

- What could CP do in supporting CVD priority in neighbourhoods? – Mike leading

Moved to May 2026

- Revisit the stakeholder map due to ICB restructure and clustering with DLN

Moved to July 2026

10 – REVIEW POST IT NOTES / FLIPCHART COMMENTS

No comments or questions were received

11 – ANY OTHER BUSINESS

1) [GP Surgeries using Emma \(AI\) program who speaks to patients rather than reception](#)

Some practices are now using AI triage. Various ones available – however, not all include signposting to community pharmacy, and none are currently “allowed” to formally refer to community pharmacy under the criteria for P1.

2) [LPN funding](#)

Community Pharmacy Lincolnshire have submitted a bid for the LPN funding and added back in to include support integration and transformation – what we have previously done – paying for people’s time – Lincolnshire have an LPN chair so they can sign off any plans, but Nottinghamshire don’t so have to go through NHSE. Notts have used the funding for IP pathfinder this year but need to put in bid for 2026/27 – ask Lincolnshire if we can use their plan.

Action: NH to ask Community Pharmacy Lincolnshire if we can use their bid as a template for 2026/27 LPN funding bid.

[Next committee meeting](#)

Wednesday 20th May 2026	9.30am – 5pm	LPC office, Cotgrave
Wednesday 22nd July 2026	9.30am – 5pm	LPC office, Cotgrave
Wednesday 17th September 2026	9.30am – 5pm	LPC office, Cotgrave
Wednesday 18th November 2026	9.30am – 5pm	LPC Office, Cotgrave



Minutes agreed as true and accurate record of the LPC meeting held on Wednesday 18th March 2026

Signed: 

Date 20/05/2026

Rob Severn, Chair, Nottinghamshire LPC