

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), Emma Marsden (EM), Nishant Patel (NP) Vijay Pujara (VP)

Attended

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

Apologies received

Soumar Kaziz (SK)
Raj Morjaria (RM)
Dhiren Raval (DR)
Kim Wilde (KW)

Welcome and introductions

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.

1 – GOVERNANCE

▪ Acceptance of the minutes from 20th May 2026 - Attachment 1A

The minutes were agreed as a true and accurate record of the meeting held on 20th May 2026. RS signed and the minutes will be added to the website.

▪ Action points from 18th March 2026 (Action tracker) – Attachment 1B

90 - Talking Therapies - MJ to do another Podcast with Kashmeera @ Talking Therapies – focus will be on Elderly and Men next – still waiting for dates from Talking Therapies.

95 - RS to organise 1:1 with each member via Teams – RS still needs to meet with a couple of members.

104 – Update governance framework and sub-committee Terms of Reference - completed and added to the website and dates changed

105 – governance documents – added to the July agenda.

106 – change of medication brand and NMS – sent out article in the newsletter May 2026

109 – GPhC nomination guidance – newsletter article in June 2026

110 – Patient identifiable information – newsletter article July 2026 to remind contractors to delete any patient info from emails sending through to the LPC as not an NHS email address and could breach GDPR.

▪ Declarations 2026/27 to be completed – Attachment 1C

DR and SK still need to complete declarations – AE will send through email reminder.

Action: AE to send through reminder to DR and SK to return signed declarations for 2026/27 through.
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- Governance sub-committee update – DE, DR, (need new member)

DF agreed to be on the governance sub-committee – set up meetings again on an evening or maybe meet just before the LPC meeting to go through any items raised and agenda.

- Review governance documents

- Expense policy

Points 2.1 and 2.2 have been changed due to finance subcommittee being concerned that it previously stated that one person was agreeing any expenses over £300 – so changed to the executive committee.

Changing the mileage expense rate due to increase by HMRC – wording changed in the policy to say that it will be paid at the level HMRC has set in case of future increase / decrease and no need to change policy then.

Proposed by DF and seconded by VP - all members present were in agreement.

GH will backdate any mileage claims for May 2026 with the increase from 45p to 55p.

Action: GH will backdate any mileage claims for May 2026 with the increase from 45p to 55p and send through with July expenses.

- Members skills assessment

Form was sent out with meeting documents but only received a couple back. Members were asked to complete this prior to the September 2026 meeting and AE will send out a reminder. Agenda item for September 2026 committee meeting.

Action: AE to send out members skills assessment to members and ask to complete before the September 2026 committee meeting as it will be added to the agenda.

- CPE model constitution changes and approval at AGM via a SGM if committee agrees to adopt changes. Attachment 1F

Members were asked if they were in agreement that the constitution could be sent through to contractors and a SGM called at the same time as the AGM for contractors to send through their votes.

2/3 committee have to agree for it to go to contractors.

RS, VP, DF, EM, NP, DE, all agreed that were happy for the constitution changes to go to vote at a SGM to be held on 16th September 2026 at the same time as the AGM 2026. LF will read through the revised constitution and guidance documents and then send through any comments and agreement by the 27th July 2026

Action: LF will read through the revised constitution and guidance documents and then send through any comments and agreement by the 27th July 2026

Market entry

- New contract applications -routine
Nothing received

- **New contract applications - excepted**

Application with regards to a no significant change relocation

By: Prescriptions4U Ltd

From: Unit C, Broxtowe Business Park, Calverton Drive, Nottingham, NG8 6QP

To: Unit 11, Broxtowe Business Park, Calverton Drive, Strelley Nottingham, NG8 6QP

Closing date: 26th July 2026

It is within the same business park so meets regulations.

- **Contract applications received from other areas**

Nothing received

- **Litigation**

Application for unforeseen benefits

By: TW Healthcare Solutions Ltd

Refused -

Application for Distance Selling Pharmacy

By: Anthus Pharma Ltd

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

Approved

- All contract decisions and amendments are in separate document - Attachment 1G

- **NHS Resolution** – latest appeals noted.

2 – FINANCES

- **Final accounts 2025/26 and annual report – Attachment 2A**

Income - £258,487

Expenses £250,122

Operating profit – £9,250 – offsetting against the loss from last year.

£136,635 – slight increase due to employer's allowance received.

Committee accepted the financial report and agreed to send out to contractors for them to vote and approve at the AGM. RS proposed and NP seconded – unanimous decision

- **May / June 2026 accounts – Attachment 2B, 2C, 2D, 2E**

All been covered at the finance committee meeting previously. For information

- **Budget vs actual spend 2026/27**

In line with the budget set – 4.5 reserve estimate for end year 2026/27

- **Prescriptions dispensed data for March 2026 – Attachment 2F**

For information

- **VAT and Corporation Tax queries**

Requested some official advice around how NHS funding is treated re income and tax purposes. Corporation tax is 19% and then 25% if over £250,000 profit.

Thanks given to GH for his work in getting the accounts ready for the accountant and also for organising the meeting with tax advisors around corporation tax and VAT registration.

3 – CPE UPDATE

- Rahul Sharda, Regional Representative
 - CPE Update – Attachment 3A

Reform for next year

Period of treatment is one of the main topics.

Service development

Men B – problems with stock availability and bookings – second week delivery has been found to be better.

IP services – lots of governance that wasn't factored in – heard that will be other side of Autumn for the start of this service.

Money that is unspent on services can be moved as in the contract Global Sum and not separate funding.

If not using skills will the foundation students need to do training before the Pharmacy First plus services start?

Legal & regulations sub committee

Taken out some of the regs.

Gordon Hockey working on wording – supply medication with reasonable promptness - trying to add in 'if appropriate' – so not expected to dispense at a loss.

Should be picked up by Scheme M and W – MHRA have visibility of both.

Comms & PA

Communicate in different ways – WhatsApp etc

Next steps after negotiations

Not sure if the changes with new prime minister and cabinet ministers will have an effect on the scheduled meetings.

Polling

- Pressures

Constant communications with ministers throughout the year not just at negotiating the contract once a year.

- Abuse and violence

Sit under the leisure and retail sector – need to have information shared between surgery and pharmacy re problem / abusive patients. Nowhere that pharmacy can note if had problems where other pharmacies can receive this information.

Alex Norris MP – could be useful in his new role.

CPE elections

Independent member place will now have declaration of interest that needs to be made available for voters.

Need to review the contractor list.

Q&A

Should have been an interim period where existing pharmacies could provide the IP service under PGD at the same time. Looks like it is going to be a two-tier contract – needs to be transition period.

Cost it out before agreeing to provide the IP service. Reviewing with peers – funded but don't feel it is enough to cover when paying Cleo etc.

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

For information

- [CPE events](#)

- CPE regional contractor event feedback

Contractors that spoken to who attended said it was a good event.

- CPE/LPC conference – 26th November 2026 – who attending?

RS, NP, DE, NH, DF, expressed interest in attending. DR sent through interest via email after the meeting.

May need to have some sort of selection process.

- Chairs Forum 15th June – RS report

Good meeting – Minister Kinnock present following funding announcement.

Afternoon reception regarding Neighbourhoods was ok – good to see Lilian Greenwood MP attended following our letter to her office.

- CPE audit results – none received
- Community Pharmacy Workforce Survey: summary data – Attachment 3B

For information

4 - COMMUNICATIONS

Kirsten Atkinson, Communications / Marketing Consultant, Priest & Co

- [Social media update – Attachment 4B](#)

LinkedIn – 7000 impressions 1601 followers

PF website

718 impressions – PCS - Trends up over the weekend – impressions are unique visits

757 impressions - BP

Sinusitis, impetigo – gone up last week, infected insect bites trending

MenB vaccine – pop up banner on the PF website. Also will do the same for flu when the service is live.

Could we add Covid? – not sure it is the right demographic that are going on the website.

RS asked KA if can provide a graph to show the increases in social media use and PF website activity.

Action: KA to produce a graph to show the increases in social media use and PF website activity.

- [Podcasts](#)

DMS – recorded the latest of the series – will be going live at end of month

Recording 3rd – need contractors to ask how they are doing the numbers and how they have built into their working day / week.

Neighbourhood health – recorded with Dr Manik Arora.

YourNottsHealth – recorded and will be going live soon.

Mencap – not received the funding that applied for.

Know Your Numbers – awareness of BP in black community and carers of learning disabilities - Phil Pyatt, CEO of **Blood Pressure UK**.

Rob Shirley would like some patient stories for TV / radio – if anyone presents for bp check over next 4-6 weeks and discover AF etc – ask if willing to be interviewed. Need to have names etc by end August 2026.

7th - 13th September – Know your Numbers week – invite MPs to pharmacy for BP check ?

Letter gone to MPs re flu jab and pharmacy visit – Alex Norris is attending Vantage Pharmacy

- Independent pharmacy awards
- Submitted application

- Getting to know CPN members

Nishant will do a 5-minute talk on family and career background (5 mins)

5- INTEGRATED NEIGHBOURHOODS

- Next steps for the INT strategy following the release this week of the latest update document attached.

Only 2 INTs are in City.

MJ sits on organisation board – moving to 2 new INTs in City – no funding at the moment and trying to find pots of funding to bid for.

54million opportunities in East Midlands of people taking 10 meds and over 75 who need review – could pharmacy do this? Pharmacy can increase capacity rather than taking over the service.

ICB will be given money to commission neighbourhood health – when EOI come in need them to be aware of pharmacy so included in bids.

Frail patients – don't always see these – delivery patients, not attending for services. Possibly NMS and DMS may be the best route.

Incentives to encourage collaborating and improves patient outcomes – smoother running.

- Community health centres proposal for discussion – Attachment 5A and 5B

Doesn't mention community pharmacy in the document. Need to be aware of these conversations.

One per 50,000. Will be using the existing health centres (old LIFT buildings) rather than building new.

Need to look at the criteria for consultation room size.

Needing to let patients be aware that less likely to be able to just see pharmacist in the consultation room as the room is being used for services now.

Is there a role for the LPC to promote best practice – newsletter article - make sure you consider how running vaccination services (booking service??) as well as fit in other services, is your consultation room adequate?

Action: newsletter article – consultation room and best practice - make sure you consider how running vaccination services (booking service??) as well as fit in other services, is your consultation room adequate?

If have one ill-prepared contractor then affects other contractors in the area – they will get the disgruntled patients attending when they have not been able to see a pharmacist who is not organised.

LPC need to educate around what is happening around contractors working well in their communities – highlight how East Leake and Bilsthorpe work with surgery.
LPC need to be engaged with the locality to make sure the relationship build is equitable.

Poster / document - top tips / gems of info for flu season. Example – providing 1-hour slot just for substance misuse clients so that the consultation room is free and not having to wait or come back.
Not just winter pressures that is access related – one of busiest months is July!
PNA – system document that says the pharmacies are in the right place – need to keep pushing this.

Action: Poster / document with top tips / gems of info for flu season, Example – providing 1 hour slot just for substance misuse clients so that the consultation room is free and not having to wait or come back – KA/MJ

6 - SERVICE DEVELOPMENT

Mike Jones, Service Implementation Lead
Nottingham and Nottinghamshire ICB PCARP Data April 2026 – Attachment 6A

➤ Pharmacy First

Not had specific numbers for threshold payments this time and not sure if will get the same type of information through on a monthly basis now the regional NHSE team are no longer around.
Numbers are still increasing each month.

- Pharmacy Contraception Service and local sexual health services
 - Contractors not providing any contraception consultations
 - Emergency contraception compared to local service

Increasing again and EC is still increasing – question where they were going for EC before this service?

Working with Dr Manik Arora in Bilborough – going to send through an email / text from surgery to patients asking them to go to pharmacy for pill check.

- Hypertension Case Finding Service
 - Contractors not providing any ABPMs

CVD strategy for England been released and forms the basis for how the ICB clusters then commissions for the place.

Next cohort of patients after frailty – BP checks and ABPMs. Think that GPs may send through to pharmacies for ABPMs as they don't get paid for this work.

Should be able to claim for work that GPs are asking for pharmacies to do if they are not accepting ABPMs and ask for other readings.

Know Your Numbers 7th – 13th September – last year ICB had some money to spend but nothing this year.

- MenB vaccine service
 - Members experience so far in setting up – any support/info we need to share

Nothing really to discuss – seems to be working fine now after the 1st delivery.

- Flu vaccine service

Members thoughts on support and promotion

7 - OFFICER REPORTS

* Chair – Attachment 7A

Employer Responsibilities

Everything is up to date re appraisals etc and contracts

Member 1-2-1

Continued and have found these beneficial.

MP Communication

Next letter has been worked up with Kirsten – I will be writing and inviting all MPs to have their Flu jab at a pharmacy in their constituency.

Service & LPN funding

Still reminding that any work they request a LPC to undertake that is out of scope of the constitution needs funding – working with Gordon and involving CPE around potential tax implications, to ensure that this is included in any funding.

ICS/ICB/Services

Continued support of key work streams:

Men B update to Pharmacy First website

Project Compass – ongoing

Continue to support Mike with the Integrated Neighbourhood Teams work – invited to NUH conference on joint working – very disappointed, this was in reality a what NUH can deliver and nothing around joint working.

LPC Strategy

Ongoing need to flex and respond to the current changes in ICB/NHS staffing – stakeholder map is a constant evolving picture – key for all members to feed back any news/info they hear.

Collaboration with other LPCs

Regional exec meeting held online. This meeting again supports collaboration. Currently we still meet with LLR and Northamptonshire – this may change as we focus more on DLN cluster – Notts LPC members need to consider what the future may be and also what we think our contractors need/want all based on best value.

GPHC and NHS Contractor monitoring

Meeting with EMPCT – improved relationships and hopefully a clear direction on how this team will change following ICB clustering/mergers

Annual Report

All now in final draft.

* Chief Officer

NHSmail

When outage with PharmOutcomes then will get referral sent through via NHSmail – this can be anytime so need to ensure that pharmacies are checking regularly.

Problem currently with pharmacies not being able to access NHSmail

MDS – Dr Andy Summers, Mansfield

There is a genuine need for a small number of patients – it is a reasonable adjustment – most will be MAR charts.

Need to keep on working on the frail elderly – pathfinder working may be?

- Admin
 - AGM 2026 – Would members like an event on evening of the LPC meeting at the office – vote on accounts and meet the LPC and ask questions of the committee?

Meet your LPC – members agreed that this may be useful and should hold in the evening when contractors can attend.

Move the LPC meeting to 11.30am start and carry on until 6pm and then the AGM will run from 7.15pm with buffet from 6.45pm.

GUEST

Rebecca Dickenson, CPCL, NHS Nottingham and Nottinghamshire ICB

➢ HCFS

Agreed but not published as need to go through GP groups – if GP refers standard BP to pharmacy to be done when already been diagnosed this will now be stopping. Also stop the 6 monthly repeat requests. Can refer in ABPMs to be completed still from GP surgeries.

When CPE send through the information then will add to the newsletter.

Guidance was not clear – referred to Nice (5 years) but then NHS added to website that 6 monthly checks

Action: Newsletter article and socials when new HCFS service guidance comes out from CPE

PQS – palliative care

Make sure that if keeping drugs then needs to be added to the DoS profile – otherwise will not get paid PQS. Reviewing the service locally but not sure where are in the process.

Antibiotic campaign

Looking at a local public health campaign

Ear training

Nothing been heard about needing the training

Structure update

Chief Pharmacist recruitment being done at the moment and then the other staff levels will be recruited to.

8 – OTHER INFORMATION / MEETINGS

- NHS England / Nottingham and Nottinghamshire ICB / DLN

- DLN LPC Liaison meeting – 15.07.26

Nothing to update on

- Public Health / Councils

Nothing to update on

- East Midlands Exec Team

Meeting held 9th July 2026

Covered in other areas of the agenda

- Healthwatch
 - June 2026 newsletter – Attachment 8A

For information

- CCA
 - CCA Matters May 2026 - Attachment 8B
 - CCA questions Qt 3 (July-September) Rep Support Doc FYI – Attachment 8C

For information

- NPA
 - Connect newsletter – nothing received

9 – STRATEGY

- Strategy 2026/27 – Attachment 9A

- Discuss DLN clustering, structure and ask for member feedback on how we think we should be working jointly

LPC working – RS is asked all the time when the LPCs in DLN are going to merge.

Review the work and meetings that each LPC do and look at the similarities and differences in working.

Probably better to do in autumn when other changes have taken place and some of the joint meetings have met again.

Looking at Places – Derbyshire, Lincolnshire and Notts are separate and therefore we are aligned at the moment. Need to work more collaboratively and efficiently.

New constitution – states that can structure the back-office staff across LPCs.

Look at other LPCs who have merged recently

- Stakeholder map review – constant change currently
Review at the DLN LPC meeting in September 2026

10 – ANY OTHER BUSINESS

Obesity service with funding – nearest would be Leicestershire – actual payment was low

Next committee meeting

Wednesday 16 th September 2026	11.30am – 6pm	LPC office, Cotgrave
Wednesday 16 th September 2026 – AGM / SGM	7.15pm – 9pm	LPC office, Cotgrave
Wednesday 18 th November 2026	9.30am – 5pm	LPC Office, Cotgrave



**Community
Pharmacy
Nottinghamshire**

Minutes agreed as true and accurate record of the LPC meeting held on Wednesday 16th September 2026

Signed: _____

Date 16/9/26

Rob Severn, Chair, Nottinghamshire LPC