# Minutes of the PSNC Service Development Subcommittee meeting

# held on Wednesday 3rd February 2021

#### via Zoom

## commencing at 9am

Present: Reena Barai, Richard Bradley, Clare Kerr, Prakash Patel, Gary Warner (Chair)

In attendance: Alastair Buxton, David Onuoha, Caline Umutesi, Rosie Taylor, Daniel Ah-Thion,

Gordon Hockey, Simon Dukes, Mike Dent, Zoe Long, James Wood, Mark Burdon, David Broome, Anil Sharma, Bharat Patel, Sunil Kochhar, Sian Retallick, Indrajit Patel, Ian Cubbin, Jas Heer, Tricia Kennerley, Sam Fisher, Margaret MacRury,

Stephen Thomas, Niamh McMillan, Adrian Price, Janice Perkins, Peter Cattee.

### Item 1 – Welcome from Chair

1.1 The Chair opened the meeting and welcomed the attendees.

### Item 2 – Apologies for absence

2.1 Apologies for absence were received from Faisal Tuddy.

### Item 3 - Conflicts or declarations of interest

3.1 No new conflicts of interest or declarations were made.

### <u>Item 4 – Minutes of the last meeting</u>

4.1 The minutes of the subcommittee meeting held on 7th September 2020 were approved.

# Item 5 – Actions and Matters arising

- 5.1 The status of the final health campaign for 2020/21 was enquired about, with a suggestion that it may be better focused on supporting COVID-19 vaccination uptake. Alastair Buxton confirmed that last year we had agreed a flexible approach to the campaign topic to allow for that potential eventuality. Currently NHS England and NHS Improvement (NHSE&I) are awaiting an update from Public Health England on the current agreed campaign (Help Us Help You pharmacy) and any plans for campaigns on COVID-19 vaccination. NHSE&I are also finalising a long list of potential campaign topics for 2021/22 and they will share their proposals with PSNC as part of the wider negotiations for the year ahead.
- 5.2 <u>Distribution of COVID-19 treatments in primary care (Confidential)</u> Alastair Buxton reported that DHSC had continued to provide occasional updates on this proposal since the last subcommittee meeting.
- 5.3 There was broad agreement that continuing discussions on the development of the Pandemic Delivery Service was appropriate.



## <u>Item 6 – Redefining the Support for Self-care Service and a walk-in Community Pharmacist</u> Consultation Service option (Confidential)

- 6.1 The subcommittee considered the paper, including the suggested approach to differentiation of self-care advice and clinical consultations for the management of minor illness.
- 6.2 The approach set out in the paper was agreed and the feedback and questions were raised.
- 6.3 The approach set out in the paper will be developed into a proposal to NHSE&I and DHSC. Consideration will also be given to a financial approach for the service and proposals will be brought back to the Committee for further consideration.

# <u>Item 7 – Consideration of the potential criteria for the 2021/22 Pharmacy Quality Scheme</u> (Confidential)

7.1 The subcommittee considered the options for potential PQS criteria set out in the paper.

### Item 8 – Enhancement of substance use services

- 8.1 The subcommittee discussed the proposed service enhancement to locally commissioned substance use services.
- 8.2 The following feedback was provided:
  - i. The paper is a welcome approach to a matter which is of significant concern to contractors who have been negatively impacted.
  - ii. Given the pandemic, consideration could also be given to supporting delivery of medicines to people using Opioid Substitution Therapy (OST).
  - iii. Was commissioner/provider involvement sought before the paper was drafted? The thoughts of some of the Chief Pharmacists in the drug treatment provider organisations had been canvassed. One of the largest providers had indicated that there was a need to build on existing contracts to provide a wider service to clients and to ensure quality requirements were more clearly defined.
  - iv. The paper seeks to move the sector forward in our support for these patients, presenting a new and closer way of working with drug treatment services. It correctly identifies that communication needs to significantly improved between pharmacy and drug treatment teams, but it would be helpful to consider the practical ways in which to achieve this, including using technology.
- 8.3 The Chair commended the work of the group on producing the paper. The paper will be finalised and consideration given to what other guidance and support could be provided to help LPCs use the document locally.

### <u>Item 9 – Future service development priorities (Confidential)</u>

9.1 The subcommittee discussed the proposed approach to prioritising service developments and related work over the year ahead. The overall approach set out in the paper was agreed.



### Item 10 – COVID-19 vaccination programme (Confidential)

- 10.1 The subcommittee noted the information in the agenda. Alastair Buxton said that work was continuing with the other pharmacy bodies and a revised version of the proposal and a related paper setting out some of the considerations that would be required by any pharmacy seeking to be a vaccination provider had been submitted to NHSE&I.
- 10.2 A further meeting with NHSE&I was being held later in the day.

### Item 11 – Development of the New Medicine Service (Confidential)

11.1 The subcommittee considered the paper summarising the conclusions of the NHSE&I working group on the development of the NMS.

### <u>Item 12 – PGD bolt-on service template to augment CPCS</u>

12.1 The aim of this work is to develop a toolkit to support LPCs to get PGD bolt-on services commissioned at a local level. David Onuoha reported that work had commenced to review minor ailments services, with a particular focus on those using PGDs. Volunteers to support the work will be sought from the LPCs and an update will be provided at the next meeting of the subcommittee.

### <u>Item 13 – Pharmacy information flows: proposed enhancement of the standard</u>

13.1 The information in the agenda was noted. Alastair Buxton highlighted the opportunity for contractor engagement with the work and invited members or their organisations to engage.

## <u>Item 14 – IT update</u>

14.1 The information in the agenda was noted.

## <u>Item 15 – Any other business</u>

15.1 Alastair Buxton reported that DHSC, NHSE&I and NHS Test and Trace were continuing to work with West Yorkshire LPC on a pilot service for the distribution of COVID-19 PCR test kits. They were also starting a further pilot in another area of West Yorkshire to test pharmacy distribution of COVID-19 Lateral Flow tests, aimed at asymptomatic workers who have to work in locations with other people and cannot access regular testing via corporate arrangements, e.g. tradespeople who work in people's homes.

