

## Minutes of the Service Development Subcommittee meeting held on 29th October 2025 via Teams, commencing at 7pm

**Present:** Fin McCaul (Chair), Clare Kerr, Jay Patel, Beran Patel, Prakash Patel.

**In attendance:** Alastair Buxton, Janet Morrison, Zoe Long, David Onuoha, Vicki Roberts, Lindsey Fairbrother, Jenny Harries, Jas Heer, Tricia Kennerley, Ifti Khan, Sian Retallick, Stephen Thomas, Anil Sharma, Has Modi.

### Item 1 – Welcome from Chair

- 1.1 The Chair opened the meeting and welcomed attendees.

### Item 2 – Apologies for absence

- 2.1 Apologies for absence were received from Sami Hanna, Phil Day and Faisal Tuddy.

### Item 3 – Conflicts or declarations of interest

- 3.1 No new conflicts or declarations of interest were raised.

### Item 4 – Minutes of the September meeting and matters arising

- 4.1 The minutes of the subcommittee meeting held on 24th September 2025 were approved.
- 4.2 A request was made to advise the Services Team if there were any suggestions of IPs that they should get in touch with to gain further feedback on the Pathfinder programme.

### Item 5 – Update on work to support locally commissioned services

- 5.1 Key parts of the paper were highlighted, starting with the support provided for repurposing local authority funding for emergency contraception services. Some LPCs have reported that budgets are being re-purposed for other sexual health services, such as injectable LARC.
- 5.2 Work is ongoing to support the LPCs that have one of the 43 NNHIP sites which are experimenting with various approaches to neighbourhood working. LPC feedback indicates there are different areas of focus across the sites. The Services Team is supporting LPCs to share updates on progress with engagement with the sites and other learnings. The ongoing series of CPE webinars on the topic were highlighted, including the forthcoming webinar that

Minal Bakhai, SRO for the NNHIP at NHS England will speak at.

- 5.3 CPE is developing resources to support LPCs with engagement with neighbourhood teams and a spreadsheet will shortly be issued to allow LPCs to report local activity and any challenges where the NNHIP has been resistant to inclusion of community pharmacy.
- 5.4 An overview of some of the activity around the obesity support programmes was provided. LPCs have shared that different approaches are being taken by ICBs in bids being made to the programme.
- 5.5 An NHS England ear care initiative based on the Southwest London project was highlighted. Equipment and training are being provided by NHS England at a national level. ICBs need to provide the funding for the provision of the service. CPE will host a webinar for LPCs to assist with sharing learnings from SW London.
- 5.6 The planned LPC Learning series of webinars was described, with positive feedback received on the proposed approach.
- 5.7 It was noted that NHS England will shortly publish guidance on neighbourhood models, as highlighted in the recently published NHS Medium Term Planning guidance.
- 5.8 Questions were raised regarding how pharmacy is being engaged with the NNHIP sites. LPCs would be asked to confirm how engagement was going with their NNHIP site. At the recent meeting with the Minister, he asked to be informed of any areas where pharmacy was being excluded from engagement.
- 5.9 The different legal entities that could support local work were briefly discussed and members with further questions on this were advised to watch [the recording of the LPC webinar held on 20th August](#).
- 5.10 To assist with costing weight management services, CPE has sourced information on service timings from a number of providers of private services. This information has been shared with all the LPCs via the CLOT minutes.
- 5.11 A Committee member suggested that LPCs need to consider the issue of the local availability of prescribers if this service is only to be provided by prescribers, with considerations about the appropriate clinical skill set, what backup was available for them and whether there was appropriate insurance in place for the clinical model being

considered.

#### Item 6 – RAND Europe’s evaluation of clinical services

- 6.1 Recommendations from the report were briefly highlighted. The subcommittee was asked for feedback on the report and any potential actions that we could take.
- 6.2 Committee members noted that there were no surprises in the report but that it may be helpful that the recommendations are coming from an independent organisation.
- 6.3 A discussion was held on further work that could be carried out around the evaluation (Confidential item).

#### Item 7 – Independent prescribing: learning from the Pathfinder programme

- 7.1 An update was provided on discussions held with DHSC and NHS England regarding the future of prescribing in the CPCF and this topic was then discussed by the subcommittee (Confidential item).

#### Item 8 – Seasonal vaccination services

- 8.1 Key points from discussions with the NHS England vaccination team relating to the 2026/27 seasonal vaccination service negotiations were shared (Confidential item).
- 8.2 It was reported that Bedfordshire, Luton, Milton Keynes and Northamptonshire LPC had written to Community Pharmacy England proposing that we should fund a high-impact advertising campaign to promote community pharmacy provision of flu vaccination in 2026/27. An initial review of that proposal had been considered by the leadership team and it was believed that such a campaign would be unaffordable for the organisation’s budget.
- 8.3 The subcommittee was asked for their views on the LPC’s proposal. Several Committee members noted that the cost of such campaigns is generally grossly underestimated by those who have not had involvement in the development of high-impact, multi-platform media campaigns. It was suggested that it would be better to seek to influence the content of the Government’s national promotional campaign to better highlight community pharmacy as a provider of vaccination services.
- 8.4 A Committee member also noted the potential adverse impact that such a national

campaign may have on local inter-professional relationships and other matters.

- 8.5 Alastair would respond to the LPC to explain the conclusions that had been reached at the meeting.
- 8.6 A response from NHS England regarding compensation for the COVID-19 eligibility and booking issues had been received. They rejected our request for compensatory payments, citing the assessment of patient eligibility for vaccination being a requirement of the service. They did, however, commit to Community Pharmacy England being able to feed into their lessons learned process to inform the future approach to designing IT systems and communications to the public. The NHS England response had been discussed at the NT meeting the previous day and was discussed further by the subcommittee (Confidential item).
- 8.7 It was noted that the NHS England booking system could have been designed to better identify ineligible patients or to hold patients to account for statements made relating to eligibility for vaccination. This should be the focus of our work to seek to improve the IT systems and communications to avoid the issue happening in future.

### **Item 9 – Any other business**

- 9.1 There was no other business and the meeting closed at 9pm.