



Community Pharmacy Cheshire and Wirral



Meeting Minutes

For the meeting held on Wednesday 31 January 2018, 9.30am at The Forest Hills, Frodsham

1	<p>Present</p> <p>Members</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Richard Bates</td><td>Independent</td><td>RB</td></tr> <tr><td>Gordon Couper</td><td>Independent</td><td>GC</td></tr> <tr><td>Ian Cubbin</td><td>Independent</td><td>IC</td></tr> <tr><td>Stuart Dudley</td><td>Independent</td><td>SD</td></tr> <tr><td>David Eaves</td><td>CCA</td><td>DE</td></tr> <tr><td>Andrew Hodgson</td><td>Independent</td><td>AH</td></tr> <tr><td>Heather Johnson</td><td>CCA</td><td>HJ</td></tr> <tr><td>Kathy McCarthy</td><td>CCA</td><td>KM</td></tr> <tr><td>Lisa McCreesh</td><td>CCA</td><td>LM</td></tr> <tr><td>Dane Stratton-Powell</td><td>CCA</td><td>DSP</td></tr> <tr><td>Nick Thayer</td><td>CCA</td><td>NT</td></tr> <tr><td>Stephen Thomas</td><td>CCA</td><td>ST</td></tr> <tr><td>Lee Williams</td><td>Independent</td><td>LW</td></tr> </table> <p style="text-align: right;">In Attendance</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Suzanne Austin</td><td>CS&DP/LPN</td><td>SA</td></tr> <tr><td>Melanie Carrol</td><td>CS&DP</td><td>MC</td></tr> <tr><td>Helen Murphy</td><td>CEO</td><td>HM</td></tr> <tr><td>Alison Williams</td><td>BSO</td><td>AW</td></tr> <tr><td>Dr Chris Ritchieson</td><td>WC CCG</td><td>CR</td></tr> </table> <p style="text-align: right;">Apologies</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Hassan Majeed</td><td>CCA</td><td>HMa</td></tr> <tr><td>Barry McCann</td><td>CCA</td><td>BM</td></tr> </table>	Richard Bates	Independent	RB	Gordon Couper	Independent	GC	Ian Cubbin	Independent	IC	Stuart Dudley	Independent	SD	David Eaves	CCA	DE	Andrew Hodgson	Independent	AH	Heather Johnson	CCA	HJ	Kathy McCarthy	CCA	KM	Lisa McCreesh	CCA	LM	Dane Stratton-Powell	CCA	DSP	Nick Thayer	CCA	NT	Stephen Thomas	CCA	ST	Lee Williams	Independent	LW	Suzanne Austin	CS&DP/LPN	SA	Melanie Carrol	CS&DP	MC	Helen Murphy	CEO	HM	Alison Williams	BSO	AW	Dr Chris Ritchieson	WC CCG	CR	Hassan Majeed	CCA	HMa	Barry McCann	CCA	BM
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2	<p>Welcome and Apologies</p> <p>GC welcomed all members to the meeting; apologies were received from HM and BM.</p>																																																												
3	<p>Expressions of Interest</p> <p>Expressions of interest were received from IC (item 17).</p>																																																												
4	<p>Competition Law Guidance</p> <p>This was pre-circulated to all members for reference.</p>																																																												
5	<p>Dr Chris Ritchieson (CR) – GP Chair NHS West Cheshire (WC) CCG</p> <p>CR was invited to the LPC meeting to talk about how community pharmacy fits into the unified health and care commissioning approach for Cheshire. Summary of main points:</p> <ul style="list-style-type: none"> • CR thanked the committee for the invitation to attend as Chair of West Cheshire CCG, a position he has held for the previous 12 months. His colleague, Matthew Cunningham is working across the 4 CCGS but was unable to attend today. • CR is currently a GP in Frodsham, having previously worked in Ellesmere Port. • With the changes at a regional level with NHS Cheshire and Merseyside and geographically with 																																																												

Cheshire sitting between Liverpool and Manchester it important that Cheshire maintains a voice for their population.

- There are 2 pieces of integration work happening across Cheshire at the moment, both are in the early stages:
 - Looking at joining up of the commissioning of healthcare across Cheshire.
For some time the 4 Cheshire CCGs have been working together on a number of individual projects, sometimes jointly with Wirral CCG and sometimes just as Cheshire. With the number of pieces of work that they are trying to do in a joined fashion increasing they decided to try to formalise commissioning across the wider Cheshire footprint and have formed a joint committee of the CCGs which has given them a decision making body. This committee will look at particular pieces of work with a well-defined work plan eg continuing health care and complex care commissioning.
Approximately 12 months ago they went through the process of looking at procedures of limited clinical value across Cheshire and Wirral to ensure an equitable offer.
The first formal meeting took place at the end of November; it is in the early stages but it is hoped that this will provide a useful forum going forward.
 - More locally there has been talk about place based care or neighbourhood based care. Principally this is looking at where care can be integrated locally ie on a WC footprint. In the most part this should be done on the same footprint as local authority.
To avoid a fragmented approach, in WC they are working with the CCG, the Countess of Chester Hospital, Cheshire Wirral Partnership Trust and the local authority about how they provide more joined up care.
In practice this will build on work such as integrated care teams based around groups of GP practices. Over time the ambition is to involve more third sector organisations, pharmacies, other community resources.
- IC asked about the economics of 4 CCGs in such a small area. CR believes that in the coming years there will be a change to the commissioning process. There are national conversations happening around what footprint types of care should be commissioned on. It is a difficult position to have to reduce a service or change elements of care without at the same time endeavouring the make the management more efficient.
- Nationally there are mergers and joint working of CCGs; there is no agreement to do this locally but the joint committee could be the first step in that direction.
- IC asked where this model sits with working with the LA. CR stated that it is clear nationally that the steer is the integration of health and social care. There is a view locally that working closely with the LA is the right thing to do – if there is a problem with social care it can lead to health services having to compensate and the opposite can also be the case.
- A local challenge is that the LAs do not match up seamlessly to the CCGs.
- Members stated concerns that as well as there being a reduction in the national pharmacy contract funding PH and local commissioning has virtually disappeared. They stressed that there are areas, particularly within social care, that community pharmacy has a genuine impact but there is no resource provided. IC gave the example of the immensely valuable contraceptive service (including first contraception) stressing the social impact of not having such a service would have.
- CR stated the public health team seem very clear about the impact of LA cuts, the further cuts they are facing and the potential for this to affect services. Where they can it is hoped that the joining up CCG and LA commissioning might help to protect some of this.
- SA asked about the recent ICP launch session to which community pharmacy weren't invited and reiterated that community pharmacy are an essential part for the integrated approach.
- CR explained that over the last 12 months the ground work has taken place for this model, looking

	<p>at work streams that could make a difference in particular clinical areas. The launch event was just for the work stream leads and they are now in the process of getting together groups of interested parties to feed into pieces of work as appropriate, including community pharmacy. Work streams include respiratory, frail elderly, risk stratification (how they collect data and how this is used), integrated care work and general practice.</p> <ul style="list-style-type: none"> • MC request that community pharmacy is involved early in pathway design where necessary. CR agreed, as this model is about putting patients in the centre with a smooth run through the system. • RB asked for more detail as to how CR saw community pharmacy fitting into the new model. • CR imagines that community pharmacy face similar challenges to that of general practice. It will be about how they engage with pharmacy but will also be influenced by the appetite pharmacies have to be involved in integration; this will differ across the footprint and is yet to be determined. • CR talked about neighbourhood models of care and gave the example used by the 3 GP practices in Frodsham and Helsby. This model allows for the practices to work together with a rich team of district nurses, physios, pharmacists etc as well as the community (church, charitable groups, local community groups). • LW asked CR to explain the funding model and how devolved funding might fit into the integrated care model. Traditionally organisations have been paid on activity however for the last couple of years WC CCG has had a block contract with their major providers; this removes some of financial and communication barriers and makes the system flow better. • At a local level, neighbourhoods are being empowered to decide how they provide care to their patients. Over time, it may be possible for some of the funding to start to come down to a local level to develop care that is most tailored to the neighbourhood and the risk stratification work becomes critical in this process. Care closer to home is better determined at a local level. • At the moment GP clusters are working together with their integrated teams; the next step is how they join up with the other stakeholders and getting the communication right to facilitate this. • SA will write to CR to thank him and enquire what forum a local representative can attend. • MC will summarise the COPD and NT do something on the Manchester care pathway for discussion at the February meeting with a view to getting back to CR with some examples of successful pathways. • IC will be meeting with CR and Geoffrey Appleton (Chair of StH CCG) in February.
6	<p>Local Professional Network (LPN)/NHSE Update – Suzanne Austin, LPN Chair</p> <p>SA updated members on the following LPN/NHSE business:</p> <ol style="list-style-type: none"> a) SA recently met with Tony Leo, Director of Commissioning NHSE C&M (leading on Transforming Primary Care), Hassan Argomandkhah (HA) (Mersey LPN Chair), Tom Knight (TK) Bruce Prentice (BP) and Pam Soo (PS). There is a recognition that community pharmacy could help many pressure points ie self-care, urgent care, medicine optimisation. BP has been tasked with writing a paper for a project based on details provided by them all. b) The LPN have been asked for a representative to join the AMR work stream. c) SA will attend the STP BP oversight group. Tee Weinronk will attend the implementation meetings and will chair alternate meetings with HA. d) There is some consideration being given to a potential merger of the LPNs across Cheshire and Merseyside. e) PS and TK attended the kick-off event for the Cheshire West IPC. PS is leading digital front door but LPN will be supporting respiratory (MC) and frail elderly (SA). f) There is a huge amount of potential work for the Wirral sub-group of the LPN and great collaborative work is taking place.

	<ul style="list-style-type: none"> g) The Care Homes announcement is much anticipated and long overdue. h) Mergers and Consolidation guidance for HWB has been written by John Hampson and SA; the draft is going to CHAMPs and the final version will be sent out to all C&M LAs. i) The third launch event for eTCP which took place on 23 January in Bromborough was well attended. No further trusts have gone live yet. j) NHSE (C&M) is very pleased with NUMSAS and HLP levels of engagement. k) AW will remind contractors of the PharmAlarm.
<p>7</p>	<p>PSNC Update – IC</p> <p>IC updated members on the following PSNC business:</p> <ul style="list-style-type: none"> a) The PSNC election call is over; IC has been returned unopposed to the position of Mersey Regional Representative. b) There is a piece of work to search for a fairer price concession system. c) A National Flu letter will send out on 5 February. d) PhAS scheme. e) Modifications on CPAF questions. f) ETP and roll out of phase 4. g) The concessions list for January is short; AH asked if this was due to contractors not reporting to PSNC. IC explained his view as to why this may be the case. h) The Judicial Review appeal date has been set for the middle of May; the appeal will focus on points of law.
<p>8</p>	<p>Feedback</p> <p><i>a) LPC Elections</i></p> <p>AW updated members on the upcoming elections.</p> <ul style="list-style-type: none"> i. Following nominations Gordon Couper, Ian Cubbin, Stuart Dudley, Andrew Hodgson and Lee Williams will take up the independent seats on the committee from 1 April 2018. ii. AW has contacted to Adria Reeves; the new CCA reps should be announced before 9 February. iii. AW has contacted Neil Slater; the new AIMp rep will be announced as soon as possible before the new committee term. <p><i>b) MALPS</i></p> <p>HM updated members that the format and frequency of MALPS was discussed; it was proposed that there would be 3 evening meetings per year and 1 joint meeting where IC will meet with the Chairs and COs.</p> <p>PharmOutcomes:</p> <ul style="list-style-type: none"> i. Liverpool, StH, Knowsley and Halton CATC service will be on PharmOutcomes over the next couple of weeks. ii. Matt Harvey is in discussions with NHSE C&M regarding the PharmOutcomes license for 2018/19. iii. There is likely to be funding in excess of the super-licence costs but after administration expenses this is likely to be low. iv. AW will be tracking MALPS work to ensure that suitable payment is received in terms of MALPS administration, PharmOutcomes, Regional Bank Account, etc. <p><i>c) Strategy Day</i></p>

	<p>Members should feedback comments to the strategy document to HM.</p> <p>Members agreed that strategy days are incredibly useful as they allow for focus outside of normal LPC business.</p> <p>The strategy day will be repeated annually in January; AW will add when the 2019 meeting dates are scheduled in September.</p> <p><i>d) Regional Work</i></p> <p>HSHK, Liverpool and Sefton LPCs are happy with the level of work activity reporting that they are receiving however the report has been amended to include more details.</p> <p>HM outlined the current key work areas:</p> <ul style="list-style-type: none"> i. There will be an Area Manager meeting on 6 February. ii. There are 2 training sessions planned to tie in with embedding with HLP and making every contact counts - Physical Activity and Stress and Resilience. Members requested 2 venues for the LPC footprint and for the training to take place in April – The Holiday Inn, Ellesmere Port and Chimney House Hotel, Sandbach (HM will share this request with Lisa Manning (regional training lead)). <p>AW suggested gaining attendee feedback from training events including a free text question about what training people want and need (HM).</p> <p>MC requested a list of attendees training to facilitate their engagement with contractors (HM).</p> <p>Bertha Brown will be retiring on 31 March and there are arrangements in place to cover the work streams that she currently leads on.</p> <p><i>e) Learning from a Critical Incident</i></p> <p>LM gave a summary of a recent incident and learning from the situation and members discussed this fully.</p> <p><i>f) Winter Wellness – Cheshire East CCG</i></p> <p>LW updated members following his interview about Winter Wellness for CE CCG.</p>
9	<p>‘New’ Colours</p> <p>Members should bring the completed Coloured Thinking forms to the February meeting; LM will lead an item.</p>
10	<p>LPC Work Plan</p> <p>HM pre-circulated a revised work plan. Actions and matters arising:</p> <ul style="list-style-type: none"> a) HM asked members to prioritise activities on the revised work plan; HM will collate and give feedback at the February meeting.
11	<p>Topics for Debate</p> <ul style="list-style-type: none"> a) <i>PR Policy Statements?</i> There are no topics requiring a statement at this time. b) <i>Reflection post Medicines Stock Article</i> Members discussed feedback following the publication of the article across Cheshire and Wirral in December. The news article has been made copyright free and is available for other LPCs to download from the PSNC website. It is understood that the article was reproduced a number of times nationally. A number of MPs have acknowledged the article, including Frank Field MP who has suggested writing to Jeremy Hunt. GC/HM will draft a response letter to Jeremy Hunt.

- c) *National Meeting of LPC Representative*
 AW will register for GC and HM to attend.
- d) *Regional Medicines Optimisation Committee*
 Members unanimously agreed not to support the request for funding for a member of GMLPC to attend the Regional Medicines Optimisation Committee. HM will respond.
- e) *Warrington Blister Pack Guidance*
 HM pre-circulated some guidance. Members generally supported the document however would like a question added about who MCA's are for?
 HM will respond, seek permission to amend the document to use elsewhere and highlight that the link to the stability website is difficult to find and there needs to be a user guide.
- f) *HealthWatch Report*
 The LPC were not made aware of an exercise by Healthwatch Cheshire East who have conducted patient surveys in pharmacies and have subsequently produced a report; SA has a meeting arranged with the Service Lead, Rachel Cornes, to discuss.
 HM stated that Warrington are doing a survey, aligned to the PNA, which they will share with the LPC when complete.
- g) *GP Online Ordering*
 KM made members aware of an issue regarding a number of GP online apps which direct users to specific pharmacies; other members were not aware of it.
 Matt Harvey (Liverpool LPC) is looking into this and information will be shared when available for onward sharing with contractors.
- h) *Health Centre Pharmacies and EPS*
 KM shared anecdotal evidence of the potential direction of prescriptions which MC will raise with the LMC.
- i) *Draft Contractor Support Guidance*
 HM asked for clarity about what was needed.
 This will be revisited at the February meeting (AW) based on what members believe are the LPC priorities for the next 12 months (item 10a).
- j) *Update on Falsified Medicines Directive (FMD) (ST)*
 A press release has been published today and ST outlined the process and regulatory requirements.
 'The Way Forward' document (available on <http://fmdsource.co.uk/>) describes the things that contractors need to think about regarding FMD. Contractors should be encouraged to contact their PMR suppliers to request that they start to look at FMD.
 Standalone system options are currently being investigated.
- k) *Wirral Sharps Service*
 Everyone who is willing to provide the service is signed up. The service will be reviewed and the LPC is keen to get a 3 year contract with annual reviews.
 HM/MC met with Boots to discuss the contract and the way it is written.
- l) *NHSE Sharps Service*
 NHSE has renegotiated with their supplier to provide larger, foldable cardboard boxes rather than the yellow bins. Feedback from members is that these boxes are not particularly strong.
- m) *Revalidation Process (ST)*
 Revalidation process information will be made available on the GPhC website imminently.

	<p>An email will be set to registrants advising them to look out for an April letter which will include instructions on how to log into 'My GPhC' portal which will allow access to all electronic resources.</p> <p>If membership expires on 31 December by 31 October members will have to pay the fee and have completed 4 CPD cycles (2 planned and 2 unplanned) unless they will fall off the register.</p> <p>ST explained the changes to members.</p> <p>AW will book CPCW contractor training at the Chimney House, Sandbach and Holiday Inn, Ellesmere Port for a Tue/Wed in May (7pm for 7.30pm). GPhC are keen to support and attend events.</p> <p>n) <i>Strategy for CCA</i></p> <p>HM will ask AMs, at their upcoming meeting, how CCA companies should be supported by the LPC. CCA companies who are no represented at that meeting will be contacted separately to discuss their support needs.</p> <p>o) <i>Wholesaler Service Level</i></p> <p>AH asked members for their thoughts on the service level that contractors are receiving from wholesalers at a national level which has been deteriorating.</p> <p>After discussion AH will draft a letter which will be shared amongst independent members for comment; GC will send the final version of the letter to PSNC as well as the 3 main wholesalers.</p>
12	<p>Sub-Group Actions</p> <p>Full sub-group minutes and actions will be distributed when available (AW).</p>
13	<p>Minutes of CPCW Meeting – 29 November 2017</p> <p>a) The minutes were accepted and signed.</p> <p>b) Outstanding actions and matters arising:</p> <p>i. Item 13biii – LM informed the committee that the GPhC inspectors are planning to have completed the first round of inspections (completion of at least one inspection in all pharmacies) by May.</p>
14	<p>Chief Officer Report – HM</p> <p>A report was pre-circulated to members. There were no actions and matters arising.</p>
15	<p>CSDP Report – SA</p> <p>A report was pre-circulated to members. Actions and matters arising:</p> <p>a) Members discussed what constitutes a pharmacy message on prescriptions and what doesn't; SA will seek further guidance and this will be fed back to Janet Kenyon.</p> <p>b) Following a role change, Joanne Sutton (CEC) now has the remit covering adult service and care homes and carers; SA has requested a meeting with her.</p> <p>c) NT asked SA for clarification about ECCCCG Primary Care Group asking if the LPC supports the pharmacies being profiled for MAS conditions. SA explained that this related to the DOS system and what it displays that the pharmacy is able to treat ie eye conditions.</p>
16	<p>CSDP Report – MC</p> <p>A report was pre-circulated to members. Actions and matters arising:</p> <p>a) MC has met with Bruce Taylor, Lead GP for Beacon practices for Wirral BP, who is looking to use pharmacies beacon practice pharmacies to engage with patients (similar to the British Heart Foundation BP pilot).</p> <p>b) The Urgent Care Board that MC sits on has raised issues about rapid access medication for</p>

	discharge and they are working with the Wirral LPN sub-group to look at discharge and the eTCP is part of that work.																		
17	<p>Business Support Officer Report – AW</p> <p>A report was pre-circulated to members. Actions and matters arising</p> <p>a) AW will respond to 4 contract applications.</p> <p>b) AW will update the dashboard of activity document and circulate.</p>																		
18	<p>Treasurer’s Report</p> <p>a) CPCW total money is £234,014.95</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding-left: 20px;">Lloyds Bank Current Account – <i>balance</i></td> <td></td> </tr> <tr> <td style="padding-left: 40px;"><i>at 30 January 2018</i></td> <td style="text-align: right;">£179,743.06</td> </tr> <tr> <td style="padding-left: 20px;">Close Brothers (12 month account)</td> <td style="text-align: right;">£81,522.89</td> </tr> <tr> <td style="padding-left: 20px;"><i>Less Holding Money</i></td> <td style="text-align: right;">- £27,251.00</td> </tr> <tr> <td style="padding-left: 40px;">• <i>Estates</i></td> <td style="text-align: right;"><i>£11,677</i></td> </tr> <tr> <td style="padding-left: 40px;">• <i>Inhaler Training</i></td> <td style="text-align: right;"><i>£5,834</i></td> </tr> <tr> <td style="padding-left: 40px;">• <i>Warrington Alcohol Pilot</i></td> <td style="text-align: right;"><i>£4,500</i></td> </tr> <tr> <td style="padding-left: 40px;">• <i>EPS Round-Off Event</i></td> <td style="text-align: right;"><i>£240</i></td> </tr> <tr> <td style="padding-left: 40px;">• <i>CWC PH Campaign Resources</i></td> <td style="text-align: right;"><i>£5,000</i></td> </tr> </table> <p>b) The PSNC has not increased the levy for the third year running and for CPCW this will be £81,456.00 (2 instalments of £41,728.00 due on 1 April and 1 October 2018).</p> <p>c) Q3 accounts have been produced and reviewed by the Governance and Finance committee; there are no recommendations at this time.</p> <p>d) The LPC contractor levy level will be reviewed at the February LPC meeting (AW) with a view to reducing it at the start of the next financial year.</p>	Lloyds Bank Current Account – <i>balance</i>		<i>at 30 January 2018</i>	£179,743.06	Close Brothers (12 month account)	£81,522.89	<i>Less Holding Money</i>	- £27,251.00	• <i>Estates</i>	<i>£11,677</i>	• <i>Inhaler Training</i>	<i>£5,834</i>	• <i>Warrington Alcohol Pilot</i>	<i>£4,500</i>	• <i>EPS Round-Off Event</i>	<i>£240</i>	• <i>CWC PH Campaign Resources</i>	<i>£5,000</i>
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19	<p>Date and Time of Next Meeting</p> <p>Wednesday 28 February 2018 – Forest Hills Hotel, Frodsham.</p>																		

Action List

NOTE: Shaded rows indicate an action carried forward from the last meeting(s)

Min	Action	Person	Update
5	SA will write to CR to thank him and enquire what forum a local representative can attend	SA	Complete
5	MC will summarise the COPD and NT do something on the Manchester care pathway for discussion at the February meeting	MC/NT	
6k	AW will remind contractors of the PharmAlarm	AW	Complete
8c	Members should feedback comments to the strategy document to HM	Members	
8c	AW will add when the 2019 meeting dates are scheduled in September	AW	Complete – Noted
8d	HM will contact Lisa Manning: <ul style="list-style-type: none"> • CPCW training dates and venues • Feedback forms after training • List of attendees to be shared 	HM	
9	LM will lead a Colours item at the February meeting	LM	On Agenda
10	HM will collate work plan activity priorities and give feedback at the February meeting	HM	On Agenda
11b	GC/HM will draft a response letter to Jeremy Hunt	GC/HM	
11c	AW will register for GC and HM to attend the LPC Representatives conference	AW	Complete
11d	HM will respond to Adam Irvine re funding for the Regional Medicines Optimisation Committee	HM	Complete
11e	HM will send comments on the Warrington Blister Pack guidance document and seek permission to amend the document to use elsewhere	HM	
11h	MC will raise issues with a potential direction of prescriptions with the LMC	MC	
11i	Draft Contractor Support Guidance will be reviewed at the February meeting	AW	Complete – On Agenda
11m	AW will book CPCW contractor revalidation training at the Chimney House, Sandbach and Holiday Inn, Ellesmere Port for a Tue/Wed in May (7pm for 7.30pm)	AW	Complete
11n	HM will ask AMs, at their upcoming meeting, how CCA companies should be supported by the LPC	HM	
11o	AH will draft a letter re wholesaler service levels which will be shared amongst independent members for comment; GC will send the final version of the letter to PSNC as well as the	AH	

	3 main wholesalers	GC	
15a	SA will seek further guidance on what constitutes a pharmacy message on prescription and this will be fed back to Janet Kenyon	SA	
17a	AW will respond to 4 contract applications	AW	<i>Complete</i>
17b	AW will update the dashboard of activity document and circulate	AW	<i>Complete</i>
18d	The LPC contractor levy level will be reviewed at the February LPC meeting (AW) with a view to reducing it for the start of the next financial year	AW	<i>Complete - On Agenda</i>