

Minutes of the **Somerset ICS Medicines Optimisation Committee** held via Microsoft Teams, on **Wednesday, 9th June 2021**.

Present:	Dr Andrew Tresidder (AT)	Chair, CCG GP Patient Safety Lead
	Steve Du Bois (SDB)	Chief Pharmacist, Somerset NHSFT
	Shaun Green (SG)	Deputy Director of Clinical Effectiveness and Medicines Management, CCG
	Michael Lennox (ML)	LPC Representative
	Sam Morris (SM)	Medicines Manager, CCG
	Andrew Prowse (AP)	Chief Pharmacist and Controlled Drugs Accountable Officer, YDH NHS FT
	Zoe Talbot-White (ZTW)	Prescribing Technician, CCG
	Fivos Valagiannopoulos (FV)	PCN Clinical Pharmacist representative, South Somerset West PCN & Tone Valley PCN (LPC rep for independent pharm)
	Antony Zorzi (AZ)	Chief Pharmacist, Somerset NHSFT
Guests:	Helen Stapleton	Workforce Programme Lead
	Annie Paddock	Primary Care Transformation & Sustainability Manager

1 INTRODUCTIONS & APOLOGIES FOR ABSENCE

AT welcomed Helen Stapleton (Workforce Programme Lead) and Annie Paddock (Primary Care Transformation & Sustainability Manager) to the Somerset ICS Medicines Optimisation Committee.

2 REGISTER OF MEMBERS' INTERESTS

The Somerset ICS Medicines Optimisation Committee received the Register of Members' Interests relevant to its membership.

There were no amendments to the Register.

The Somerset ICS Medicines Optimisation Committee noted the Register of Members' Interests.

3 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA

3.1 Under the CCG's arrangements for managing conflicts of interest, any member making a declaration of interest is able to participate in the discussion of the particular agenda item concerned, where appropriate, but is excluded from the decision-making and voting process if a vote is required. In these circumstances, there must be confirmation that the meeting remains quorate in order for voting to proceed. If a conflict of interest is declared by the Chairman, the agenda item in question would be chaired by a nominated member of the Somerset ICS Medicines Optimisation Committee.

There were no declarations of interest relating to items on the agenda.

4 MINUTES OF THE MEETING HELD ON 14th April 2021

4.1 The Minutes of the meeting held on 14th April were agreed as a correct record.

4.2 Review of action points

Most items were either complete or, on the agenda. The following points were specifically noted:

Action 1: Integration and Pharmacy Transformation Plans

SG did not receive any feedback for this action.

AZ will be Chief Pharmacist of Somerset NHSFT for the next 12 months.

Funding has been secured for a mental health specialist long-term plan pharmacist and technician and an antimicrobial stewardship pharmacist.

Action 2: Community Pharmacy Contractual Developments

CCG Primary Care team are putting together a board paper for system leadership future macro development with Community Pharmacy.

Concerns were expressed with the direction of travel and how teams aren't joined up.

Ask to be sent the second draft of the board paper for review and share with SG. **Action: ML**

ML informed the group that there is Primary Care Resilience fund which the LPC & CCG could submit a bid for. It is to fund medicines optimisation between Community Pharmacy and Primary Care. The funding would allow things to be done differently.

Suggestions for the funding were EMIS viewer/ SIDER acceleration, contraception pilot and outsourcing of structure medication reviews.

Bids need to be in before Thursday 17th June to ring-fence the money. SIMO agreed they were happy for ML to put in a bid.

Put in bid for funding and report back to SIMO with outcome. **Action: ML**

5 Matters Arising

5.1 Draft TOR

Draft TOR in initial stages but can't be completed until SIMO has agreed principle roles of the group. Once produced it will remain a living document to be updated as SIMO changes and matures.

5.2 **Discuss roles of SIMO eg. Medicines Value - High Cost Drugs, NICE, Community Pharmacy Contractual Developments, PCN Pharmacy Developments, Somerset Workforce NHSE plan update, Pharmacy Governance Group, MaPSLG, SPMs, RMOc.**

Proposed roles of SIMO

- Medicines value – High cost drugs: There was division among the group as some felt it would take up too much of the allocated meeting time, which they felt would be better spent focusing on transformational change within the system. Whereas some thought SIMO would be better placed than other similar committees to have these discussions and make the necessary decisions and challenges. Further discussion is needed outside of SIMO to decide which committee will hold this role.
- Pharmacy Governance Group: AP currently attends and will update SIMO with a summarised report.
- MaPSLG: SG currently attends and will update SIMO with a summarised report.
- SMPs: SG, AP & AZ currently attend and will update SIMO with a summarised report.
- RMOc attendance: It is likely that the chairs of area committees will be invited to attend RMOc. AT may not have the capacity for this role, in which case another representative will need to attend RMOc and bring back a summarised report.

A discussion needs to be held outside of this meeting to finalise what roles SIMO will hold.

Email SG with views on which roles SIMO should hold in future meetings.

Action: All

5.3 **Integration and Pharmacy Transformation Plans**

This is a living document which SIMO will use to drive agenda.

SIMO decided that the plan needs a further update and reshuffle.

The strategy should make up the first few pages, ideally five key priorities offering a significant benefit. They should include things that we can talk about as a system and support each other with to make a difference. The bulk of the document should then become an appendix to support the strategies. SG needs to be provided with this information for inclusion within the document.

Email SG with priorities and key missions for inclusion in the transformation plan.

Action: All

5.4 **Covid Vaccination**

A number of PCN sites are being decommissioned; however more Community Pharmacy sites are being commissioned to fill these gaps.

SFT has faced challenges with availability of vaccine and workforce issues and are planning for the vaccination programme to continue throughout winter.

PCNs are concerned about the start of the flu vaccination programme alongside the continuation of the covid vaccination programme. Trials are currently being carried out to determine if the two vaccines can be safely co-administered.

YDH have been running high risk allergy patient clinics with a varied reaction rate.

Despite challenges and concerns everyone involved in the vaccination programme has delivered amazing results.

6 Other Issues for Discussion

6.1 **PHE: National CVD Prevention Programme Team Update**

-Noted

6.2 **CCG commissioned PBR excluded drugs.**

Trust arrangements in place for 2021: Increased trust drugs budget, Monitoring of spend and appropriate use, Cost Improvement plans etc.
Not discussed

7 Other Issues for Noting

7.1 **Clinical Pharmacy Practice: A Strategic Overview**

-Noted

7.2 **SW Regional Pharmacist Update-May 21**

-Noted

7.3 **RMOC Update - RMOC Terms of Reference - National Consultation**

-Noted

8 Partners – 2021 Medicines Optimisation priorities

8.1 **CCG**

Nothing to note

8.2 **LPC**

Nothing to note

8.3 **YDH**

Nothing to note

8.4 **SomersetFT**

Nothing to note

8.5 PCNs

Nothing to note

9 System Medicines Optimisation Work Stream Feedback

9.1 Update from Digital

David Chalkley (aCCIO / Digital Clinical Delivery & Innovation Lead at Somerset FT) and STF have a work programme already established with plans to make it Somerset wide. The TOR and membership are being updated to reflect these plans.

Send updated TOR to SIMO.

Action: AP

Invite David Chalkley to attend August SIMO meeting.

Action: AP

9.2 Pharmacy System Workforce Update

Helen presented a summary of where the current workforce is, where we want it to be in the future and ideas of how to get to that position.

A major issue is that Somerset is undertraining. The South West has the worst fill rate in the country at only 28.74%.

Somerset needs to offer something different to improve fill rates. Initial thoughts are to develop a collaborative training offer.

Concerns raised by the group:

- The workforce is currently so sparse it is difficult to find staff to facilitate the training.
- Trainee pharmacists are allocated to the area and often don't want to stay.
- Many pharmacists move from Trusts or Community Pharmacy to PCN roles as they can offer more favourable packages.

Further ideas offered by the group:

- Community Pharmacy need to offer the independent prescriber course and protected training time within employment.
- Upskilling of technicians to pharmacists. If Somerset was support this it could help retain people that are already settled in the area.
- Apprenticeships. However many in the industry are against this route of training.
- Bursaries, work experience and school/college fairs.

A specific workforce forum is needed. This forum will report into SIMO for support.

The workforce should include:

- Michael Lennox, Helen Stapleton, Anne Cole.
- Workforce leads from the Trusts.
- Technician representation from Trusts and/or community mental health.
- PCN pharmacist (Fivos tentatively agreed to be involved).

- Primary Care team representative (Annie Paddock may continue to be involved with this but ids to be decided outside of this meeting).

SIMO thanked Helen for her presentation.

Create a workforce forum and TOR. Report back to SIMO with updates.

Action: ML & Helen Stapleton

9.3 Work stream proposal for the next meeting: Medicine Safety Officers

SIMO requested a more in-depth update from Digital for the August meeting and the MSOs to attend at the following meeting.

Invite the MSOs to attend October SIMO meeting.

Action: SG

10 Regional Medicines Value Work Stream

Nothing to note

11 Risks Review and Management

Nothing to note

12 Any other business

Nothing to note

DATE OF NEXT MEETINGS

11th August 2021

13th October 2021

8th December 2021

16th February 2022

6th April 2022

15th June 2022