Minutes of Community Pharmacy Kent Committee Meeting 12th May 2026

Officers			
P	Mark Anyaegbuna	CEO	Kent LPC
Aps	Amish Patel (Chair)	Chair	Independent
P	David Entwistle (DE)	Vice Chair	CCA
Members			
P	Sachin Mehta (SM)	Member	IPA
Aps	Sunil Chopra (SC)	Member	Independent
P	David Apata (DA)	Member	CCA
Aps	Samantha Grieve (SG)	Member	CCA
P	Shirley Walker (SW)	Member	CCA
P	Maureen Aruede (MA)	Member	Independent
P	Mike Rudin (MR)	Member	IPA
Aps	Olabimpe Kunlipe (OK)	Member	Independent
P	Mark Donaghy	Member	IPA
LPC Staff			
P	Adeyinka Jolaoso (AJ)	Service Development Manager	
P	Priya Mattu (PM)	Project Manager	
P	Natalia Bejan (NB)	LPC Office Administrator	
Guest			
P	Chloe Young	Trividia Health UK	
P	Ruth Simmonds (RS) Chris Beale (CB), Danille Miller (DM)	Kent County Council	
P	BThemba Mhlanga (MH)	ICB Commissioning Hub	
P	Michael Lenox (ML)	National Pharmacy Association	

p	Present	Pm	part of the meeting only	Aps	apologies sent	Apns	Apologies not sent

Meeting commenced at 09:30am

Welcome and Apologies

The meeting was chaired by DE (Vice Chair), as the Chair sent his apology.

The Vice Chair welcomed all committee members. AP, SC, SG and OK sent their apologies.

Minutes and actions

Minutes of the last meeting were signed with no amendments.

1. CEO Updates

CEO shared the slides as attached.

Key Highlights

- CEO highlighted the importance of data insight and performance monitoring tools, including the CCA dashboard and the newly introduced CPE clinical dashboard. Members were encouraged to utilise the dashboards to support service improvement and operational performance.
- CEO confirmed that Ade and Priya had attended training on the CPE clinical dashboard to strengthen organisational capability in data analysis and performance monitoring.
- CEO advised that Priya had also attended CPE leadership and account management training to support organisational development.
- CEO shared that £60k Teach and Treat funding has been paid, and £17,367 Research and Development funding will be paid into the Provider Company account.
- CEO thanked Mike for providing strategic financial guidance and acknowledged Sam's work in ensuring financial records and reporting remained up to date.
- CEO shared a 2026 Community Pharmacy Technician Apprenticeship funding opportunity of £15,505 per PTPT per year.
- CEO noted the significant workload currently being managed across the organisation and thanked staff and committee members for their continued support and contribution.
- CEO updated the Committee regarding a governance consultation document, advising that due to the length and complexity of the document, a concise LPC response would be prepared and submitted following the meeting.

Action: CEO and team to prepare and submit the LPC governance response document to CPE.

2. Service Development Updates

Key Highlights

AJ shared the presentation slides as attached.

- AJ presented year-on-year performance data for the Minor Illness service, clinical Conditions and the urgent supply.
- AJ explained that one of the key contributing factors to the decline was the system transition from PharmOutcomes to Pharmacy Services, which created referral pathway challenges between GP practices and community pharmacies.
- AJ reported that during the transition period many contractors experienced difficulties receiving GP referrals electronically, directly affecting the number of Minor Illness claims submitted and completed.
- AJ advised that Minor Illness consultations require a formal GP referral in order for pharmacies to claim payment for the service, unlike Clinical Conditions consultations which currently attract greater contractor focus and financial incentive.

- AJ highlighted that Clinical Conditions consultations have increased significantly across the region.
- AJ informed the Committee that inappropriate referrals also continue to affect completion rates, particularly where patients referred by GP practices fall outside the age or gateway criteria for specific clinical pathways.
- AJ advised that LPC representatives continue to reinforce with GP practices and medicines optimisation teams the importance of electronic referrals rather than verbal signposting to pharmacies.
- AJ highlighted that electronic referrals provide benefits to both primary care and community pharmacy by:
    - Improving clinical tracking and patient outcomes
    - Supporting service visibility and audit trails
    - Ensuring pharmacies receive appropriate remuneration for consultations delivered
- AJ noted that GP practice capacity and receptionist workload remain barriers to consistent referral generation.
- AJ presented comparative South East regional performance data for January and confirmed that Kent performance is now very close to the leading area for Clinical Conditions activity for the first time in a significant period.
- AJ reported that Kent is currently outperforming several neighbouring areas in Urgent Supply and Minor Illness service activity.
- AJ shared contractor threshold achievement data, confirming a steady increase in the number of pharmacies reaching the 30-consultation threshold: October 123 contractors, November 127 contractors and December 173 contractors.
- AJ advised that winter pressures and seasonal demand contributed positively to December performance figures, although further improvement work remains necessary.
- AJ confirmed that contractor engagement activity remains ongoing, including direct support emails, outreach, and performance monitoring.

Action: AJ to circulate updated guidance at the next meeting regarding Pharmacy First payment triggers, walk-in consultations, referral requirements, and claim eligibility criteria.

3.Project Updates

PM shared the project update slide

Key Highlights

- PM provided an update on the Discharge Medicines Service advising that Kent and Medway are currently ranked 22nd out of 42 ICBs nationally, showing slight improvement since the previous meeting.

- PM presented a new patient-facing Pharmacy First leaflet designed to support awareness, referrals, and signposting within UTCs and GP practices. The leaflet includes inclusion/exclusion criteria, condition information, and QR code access to pharmacy services.
- PM reported that 36 expressions of interest had been received from IP candidates, with ongoing recruitment and engagement for Designated Prescribing Practitioners (DPPs).
- PM confirmed that webinars are being held to support applicants, clarify responsibilities, and ensure consistency across the programme.
- PM updated the Committee on NIHR research activity, confirming that a £17,367 research bid had been awarded to support community pharmacy research participation and workforce development.
- PM advised that contractor expressions of interest will be sought for participation in the research programmed, with reduced KPI expectations agreed due to funding limitations.
- PM reported that additional research opportunities are being explored in areas including pharmacogenomics, medicines waste reduction, and end-of-life care support.
- PM provided an update on the upcoming Private Services Training Day on 7 June, covering travel health and weight management services, with full sponsorship secured for venue and catering costs.
- PM concluded with an update on the LPC social media strategy, focusing on increasing stakeholder engagement, service promotion, and public awareness through LinkedIn, Instagram, and Facebook.

Action: PM to circulate the final approved Pharmacy First leaflet once governance approval processes have been completed.

4.Finance Sub-Committee Updates

Key Highlights

- MR confirmed the LPC outperformed its budgeted deficit by £20k, improving the overall financial position
- MR advised this is part of a planned three-year strategy to reduce deficits and move towards a more sustainable financial position without reducing reserves below prudent levels.
- MR confirmed reserves remain broadly in line with recommended levels (around £136k), ensuring operational stability.
- MR reported that no contractor levy increase is required this year due to the improved outturn.

5. Performance Sub-committee

Key Highlights

- DE proposed moving to monthly Performance Subcommittee meetings to support quicker decision-making on service and system changes.
- DE confirmed the Terms of Reference have been updated to reflect this change and improve responsiveness to NHS developments.
- DE noted discussion on social media strategy, including plans for short educational videos to support contractors and reduce queries.

  Action: Approval sought to move Performance Subcommittee to monthly meetings under updated Terms of Reference.

6. Trividia Health UK

Key Highlights

- CY presented the A1C Now point-of-care HbA1c testing device for diabetes monitoring, diagnosis support, and pre-diabetes identification and proposed a working group to address operational barriers and support wider adoption of the product.

7. Kent County Council

Key Highlights

- Primary Care Programs Team confirmed ongoing support for community pharmacy services including smoking cessation and wider service delivery across Kent.
- CB advised support is available for operational queries, sign-up processes, portal navigation and service delivery guidance.
- CB confirmed that each contracted pharmacy will have a named project manager for ongoing support covering delivery, invoice, payments and training.
- CB advised that data capture and outcome reporting is being strengthened to better link referrals with service outcomes and improve health check evaluation.

8. ICB Commissioning Hub

Key Highlights

- BM shared that contractors are reminded to complete and submit their DSP Toolkit declarations by the June deadline.
- BM highlighted discussions around pharmacy opening and closure arrangements over the Christmas/Boxing Day bank holiday period.
- BM shared that pharmacies wishing to close during bank holidays must still follow the formal application/change process.
- BM highlighted feedback regarding workforce pressures and the need for earlier communication to support planning.
- BM shared positive feedback on the pharmacy contact information circulated recently, which has been useful for contractor queries.

9. National Pharmacy Association

Key Highlights

- ML shared that the NPA is actively involved in shaping and understanding the future direction of prescribing within community pharmacy, ensuring it is practical, properly funded, and sustainable for members.
- ML highlighted collaborative working at PCN/ICB level, showcasing examples where GPs and community pharmacies are working closely together on areas such as hypertension, ABPM, contraception services, and medicines optimisation.
- ML shared positive examples of developing integrated neighbourhood working, where open dialogue between general practice and pharmacy teams is improving service delivery and reducing system pressures.
- ML highlighted the importance of capturing and sharing case studies of successful collaboration, noting plans to build a repository of best practice and encourage poster presentations to showcase local innovation.
- ML shared that supporting and scaling these models of collaboration is a key priority for the NPA, with a focus on spreading good practice across regions.

- ML highlighted ongoing engagement with stakeholders, including discussions on barriers to clinical expansion such as insurance and cost considerations, which will be taken forward with NHS colleagues.

10. AOB

None raised.

Meeting ended at 16:10

Upcoming LPC meeting 2026/2027

- 14th July 2026
- 8th September 202
- 10th November 2026
- 19th January 2027
- 2nd March 2027

All meetings will be taking place face to face at Holiday Inn Maidstone / Sevenoaks, London Road, Kent, TN15 7RS