Community Pharmacy Leicestershire & Rutland
LLR Committee Meeting with Anne Marie
On 24th April 2026
10:30 AM

Attendees Present	Guests
Rajshri Owen – Chief Officer Viral Patel – Chair Altaf Vaiya – Treasurer Satyan Kotecha – Vice-Chair Ron Gregson – CCA Representative Rahul Patel – Independent Contractor, IPA Member Shoaib Haji – Independent Contractor Shezad Alimahomed – CCA Representative	Lindsey Fairbrother – CPE Regional Representative Paul Gilbert – CPCL LLR ICB Meera Joshi – CPPE Regional Representative Shazia Patel Amandeep Doll Abdullah Siddiqi Katherine Watson **Apologies** Nadya Jethwa – Independent Contractor Aadil Methwa – Independent Contractor

Agenda Items:

Welcome

Rajshri Owen welcomed everyone to the meeting and thanked attendees for attending. Appreciation was extended for arranging the alternative venue, refreshments, and lunch arrangements. Members discussed the benefits of the new venue including accessibility, parking, and overall environment compared to previous venues.

The committee reaffirmed the organisation's vision and mission statements centred around advancing community pharmacy through leadership, representation, innovation, engagement, contractor empowerment, and integration within wider healthcare teams.

Declarations of Interest

Members were reminded to complete declarations of interest forms. Outstanding declarations were noted and members concerned were asked to submit them following the meeting.

Approval of Previous Minutes

The minutes from the February meeting were reviewed and approved by the committee.

Sponsorship and Event Funding

The committee discussed sponsorship support received for the current meeting and upcoming events. It was confirmed that sponsorship contributions had enabled the costs of the meeting to be covered successfully without additional financial pressure on the committee budget.

CPE and National Negotiation Update

Lindsey Fairbrother provided an update on current national negotiations with the Department of Health.

It was noted that formal negotiations commenced on 27 February 2026, however no agreement had yet been reached. Lindsey explained that negotiations remained ongoing due to dissatisfaction with proposals made by the Department of Health and that discussions were continuing weekly between CPE and the Department.

Committee members raised significant concerns regarding the recurring issue of contractors delivering services without clarity on contractual arrangements or funding settlements for the current financial year. Concerns were expressed regarding uncertainty around margin delivery, clawbacks, fluctuating medicine pricing, Category M and Category H pressures, and the inability of contractors to budget effectively.

Discussion highlighted the operational and financial instability faced by pharmacies as a result of delayed contractual settlements and unpredictable reimbursement models.

Lindsey advised that:

- Contractors remain operating under the existing contractual framework until a new agreement is finalised.
- CPE continues to press for recognition of the estimated £2 billion sector funding gap.
- Negotiations include requests for improved contractor protections regarding dispensing at excessive losses.
- Discussions are ongoing around introducing contractual protections allowing pharmacies to refuse dispensing where medicines are supplied at unsustainable losses.
- CPE continues to challenge clawback mechanisms and advocate for financial relief measures.

Abuse towards Pharmacy Teams

Extensive discussion took place regarding increasing abuse, aggression, and challenging behaviour directed toward pharmacy teams.

Members expressed concern that community pharmacies do not currently receive the same protections afforded to GP practices and other NHS settings. Concerns included:

- Lack of formal mechanisms to ban abusive patients.
- Lack of local enforcement support.
- Increasing incidents involving vulnerable, probation, and substance misuse patients.
- Safety concerns for pharmacy staff working alone or without support.

It was agreed that stronger local engagement with police forces, Police and Crime Commissioners, and partner organisations would be beneficial.

Discussion also highlighted the need for:

- A formal zero tolerance policy within contractual frameworks.
- Stronger contractor rights to refuse service where abuse occurs.
- Improved regional data collection regarding incidents of abuse.

Rajshri Owen confirmed that template communications and further engagement opportunities with local authorities and policing bodies would be explored.

CPE Engagement and Communication

The committee discussed concerns regarding communication and engagement between CPE and local contractors.

Key concerns raised included:

- Limited attendance from senior CPE representatives at local contractor events and AGMs.
- Low engagement levels at national roadshow events compared to local LPC events
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- Desire for more direct accountability and opportunities for contractors to question senior CPE representatives.
- Concerns that communication remains overly centralised and lacks meaningful contractor interaction.

Members highlighted that LLR events continue to attract significantly higher attendance than many national roadshows and stressed the value of direct contractor engagement.

Lindsey Fairbrother acknowledged the feedback and agreed to raise concerns directly with CPE leadership, including discussions around improving participation at local AGM events, either in person or virtually.

Discussion also covered the importance of regular reviews of CPE communication, marketing, and public affairs strategies.

Service Development and Future Pharmacy Services

The committee discussed future service development opportunities and the direction of travel for community pharmacy services.

Vaccination services were highlighted as a strong example of successful pharmacy-led delivery.

Considerable discussion focused on Independent Prescribing (IP), including:

- The growing importance of IP within future pharmacy services.
- Workforce readiness challenges.
- The need for additional Designated Prescribing Practitioners (DPPs).
- Concerns that current funding models do not appropriately reflect the complexity and risk associated with IP services.

Lindsey Fairbrother confirmed that CPE had communicated concerns nationally that IP services cannot simply be delivered under existing Pharmacy First-style funding arrangements without appropriate investment.

Members agreed that pharmacies should continue preparing strategically for the wider adoption of IP services despite uncertainty regarding contractual implementation timelines.

The committee also discussed the importance of private services in maintaining contractor viability and acknowledged that many pharmacies are increasingly dependent on non-NHS income streams.

Contractor Support and Upcoming Events

The committee discussed ongoing contractor support initiatives and the importance of educational events for newer contractors.

The upcoming contractor event scheduled for Sunday was discussed positively, with strong registration numbers confirmed.

Members highlighted the importance of providing practical contractor education around:

- Pharmacy finances.
- Drug tariff understanding.
- Service thresholds.

- Margin management.
- Operational sustainability.

Performance Dashboard and Data Monitoring

Rajshri Owen introduced the new CCA performance dashboard now available to the organisation. The dashboard provides retrospective NHS BSA data intended to support improved operational oversight and performance management.

The committee discussed the benefits of enhanced data visibility including:

- Regional performance comparisons.
- Month-on-month tracking.
- National benchmarking.
- Service utilisation analysis.

Members acknowledged that the improved data tools would support more targeted contractor engagement and service improvement activity.

Pharmacy First and Threshold Performance

The committee reviewed Pharmacy First performance data and threshold achievement rates across the region.

It was noted that:

- Approximately 61% of pharmacies are achieving the required activity thresholds.
- Significant opportunities remain for contractors who are narrowly missing threshold targets.
- A number of contractors are losing income opportunities due to administrative or tracking issues rather than service delivery capability.

Rajshri Owen confirmed that targeted contractor support work had already commenced with Vin focusing specifically on contractors narrowly missing payment thresholds.

The committee discussed the value of proactive intervention and agreed that modest investment in contractor support could generate substantial additional income for contractors across the region.

Positive feedback was provided regarding Vin's contractor engagement work and supportive approach.

ABPM and Hypertension Services

Extensive discussion took place regarding Ambulatory Blood Pressure Monitoring (ABPM) service delivery.

Key concerns included:

- Low uptake of ABPM services across many pharmacies.
- Contractors claiming service readiness without possessing functioning ABPM machines.
- Lack of equipment availability.
- Workflow pressures within pharmacies.
- Limited contractor engagement with hypertension pathways.

Members expressed concern regarding service compliance and quality assurance, with some discussion around the potential risks of post-payment verification activity.

The committee explored several barriers affecting ABPM delivery including:

- Lack of equipment.
- Existing diary and appointment limitations.
- Patient reluctance to wear monitors.
- Pharmacies referring patients back to GPs instead of completing ABPM pathways.
- Lack of staff confidence and operational capacity.

Suggestions discussed included:

- Conducting contractor surveys to identify barriers.
- Greater utilisation of pharmacy technicians and counter staff in hypertension pathways.
- Increased training for wider pharmacy teams.
- Better collaboration with GP practices.
- Exploring referral pathway opportunities through PharmOutcomes and other systems.

Members also reflected positively on previous pilot programmes that successfully increased hypertension service activity through stronger GP engagement and structured referral systems.

Finance and Governance Matters

The committee agreed to proceed with an increase of £2,000 per month within the discussed budgetary arrangements.

Additional discussion took place regarding banking signatories and governance arrangements. It was agreed that additional signatory support would improve operational flexibility while maintaining governance controls requiring dual authorisation.

Closing Remarks

The meeting concluded with agreement on the importance of continuing contractor engagement, strengthening operational support, improving communication with national bodies, and maintaining focus on service sustainability and contractor viability.

The committee thanked Lindsey Fairbrother for attending and providing detailed national updates and thanked all members and guests for their contributions throughout the meeting.