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PSNC Meeting May 2019: Summary Report for Contractors and LPCs

PSNC met in London on Wednesday 22nd May and Thursday 23rd May 2019. This briefing summarises some of the key topics discussed for pharmacy contractors and LPCs.

Mandate for Funding Negotiations

PSNC Committee Members were briefed on a confidential basis on the negotiations with the Department of Health and Social Care (DHSC) and NHS England. This included the Government's priorities for the sector and the parameters for the negotiations on the Community Pharmacy Contractual Framework (CPCF) for 2019/20 and beyond.

The details of the ongoing negotiations are confidential, to enable frank and open conversations between all parties, but contractors may already be aware that topics being discussed include:

- How NHS England and DHSC want to utilise better the skillset and reach of community pharmacy to help deliver the NHS Long Term Plan. This includes proposals for urgent care, prevention and medicines safety.
- The possible roll-out of a national minor illness referral service via NHS 111, and the piloting of referrals to community pharmacy from other settings such as GPs and NHS.UK.
- The future of the Healthy Living Pharmacy (HLP) programme.
- Medicines safety interventions and the future of Medicines Use Reviews (MURs).

The negotiations are ongoing and are being led by PSNC's Negotiating Team which includes independent community pharmacy contractors, representatives of multiple pharmacy businesses, and the senior executive. The full PSNC Committee will have oversight of any agreements reached and in May the Committee spent a considerable amount of time considering aspects of the negotiations in detail to inform the process. PSNC Members reiterated the need to inform contractors and their teams of the outcomes of the negotiations and of changes being made to pharmacy services as early as possible to allow the preparations needed to implement them.

Further discussion on the wider factors influencing pharmacies' access to funding highlighted some of the barriers to engagement with Primary Care Networks (PCNs) and the need to educate NHS England local teams about how community pharmacy is funded. PSNC is continuing to work with both NHS England the other national pharmacy organisations to provide support for LPCs and, in due course, contractors, to help them with local PCN engagement work.

Serious Shortage Protocols

With changes to the pharmacy Terms of Service due to be laid before Parliament on 28th May, PSNC has been working with DHSC and with PMR system suppliers to agree the endorsements, fees and paperwork that will be associated with Serious Shortage Protocols (SSPs). PSNC considered how best to remunerate contractors for the work an SSP would entail, and it was recognised that pharmacy teams already do a lot of work to source medicines.

The PSNC Regulations Team will develop a briefing to explain exactly what community pharmacy teams will need to do if and when a serious shortage of a medicine leads to an SSP being put in place.

NHS and GPhC Consultations

The Service Development Subcommittee reviewed a paper on reducing impact of inhalers on the climate. The document, produced by the NHS Sustainable Development Unit, includes a number of aims and recommendations including requesting that patients return used inhalers to pharmacies. PSNC agreed to support this important work.

The General Pharmaceutical Council (GPhC) consultation on guidance for pharmacist prescribers was also discussed, with the Subcommittee accepting the proposals in principle. PSNC will respond to this consultation.

Vaccinations

As part of PSNC's work on the advisory group for NHS England's vaccinations review, the Service Development Subcommittee discussed the potential for commissioning of a wider range of vaccinations from community pharmacies. Whilst there was a desire to increase provision beyond flu vaccinations, the subcommittee recognised that further consideration would need to be given to how pharmacies could obtain stock – the NHS uses central procurement for many vaccines – and regarding the different requirements for vaccinating children.

NHS IT Updates

The findings of another wave of EPS Phase 4 implementation were considered by the Service Development Subcommittee. This stage has found that the green tokens used are causing confusion for busy pharmacy teams, with some getting around the problem by printing new white versions to help to identify them as tokens, rather than paper prescriptions, more easily. The cross-sector Community Pharmacy IT Group will be picking up this issue at its next meeting.

The subcommittee also heard that pilots of the Real-time Exemption Checking (RTEC) system have been well received. Up until now pharmacy teams have been given a lot of support, so there will be a slow phased rollout to support training needs as more pharmacies join.

Current Funding Issues

The Funding and Contract Subcommittee discussed the availability of Freestyle Libre and considered the impact on pharmacies. This follows a surge in prescribing and concerns that contractors are not given a discount, and nor can they claim exemption from discount deduction, on this product.

The subcommittee also received an update on fee delivery and retained margins for the year, with calculations suggesting that item volume for 2018/19 may be higher than originally forecast. PSNC will discuss current funding delivery with DHSC in order to keep levels on track.

LPC Support

The LPC and Contractor Support Subcommittee considered a draft LPC Dashboard. This is being developed to help LPCs to capture and then demonstrate key data about the LPC and the services it offers to local contractors. The subcommittee also reviewed the support that PSNC should offer around Primary Care Networks and it considered the ongoing work to ensure that LPCs are able to establish and support community pharmacy provider companies where this can support the local commissioning and provision of community pharmacy services.

Public Affairs Work

The Communications and Public Affairs Subcommittee, followed by the wider PSNC subcommittees, considered 'policy asks' for community pharmacy. These include asks such as giving pharmacies read-write access to GP-held patient records and commissioning of public health services such as smoking cessation and EHC services from pharmacies. The asks will inform PSNC's messaging to external stakeholders, particularly politicians.

The subcommittee also considered PSNC's [future of pharmacy animation](#), agreeing that this sort of digital communication could be useful in future, for instance to promote pharmacy externally to PCNs and others.

Guest Speakers

PSNC Members also had a presentation from Pharmacy2U Chief Executive Officer Mark Livingstone and Chief Operating Officer Gary Dannatt. They outlined their business model and how they see it aligning with future healthcare development. They also identified areas which they think could be improved for the benefit of pharmacy, for example, they are keen advocates of better integration of GP and pharmacy systems, are concerned about abuses of the EPS nomination process, and want to see the automated Real-Time Exemption Checking system rolled out.

For any queries about this PSNC Briefing please contact Zoe Long, PSNC Director of Communications and Public Affairs, on zoe.long@psnc.org.uk