

## Minutes of the PSNC Service Development Subcommittee meeting

held on Wednesday 22nd May 2019

at 14 Hosier Lane, London, EC1A 9LQ

Present: Richard Bradley, Clare Kerr, Sunil Kochhar, Faisal Tuddy, Gary Warner (Chair)

In attendance: Sian Retallick, Alice Hare, Mark Burdon, Garry Myers, Bharat Patel, Fin McCaul, Indrajit Patel, Mark Griffiths, David Broome, Anil Sharma, Margaret MacRury, Alastair Buxton, Zainab Al-Kharsan, Melinda Mabbutt.

### Item 1 – Welcome from Chair

### Item 2 – Apologies for absence

2.1. Apologies for absence were received from Prakash Patel.

### Item 3 – Conflicts or declarations of interest

3.1. No new conflicts of interest were declared.

### Item 4 – Minutes of the last meeting

4.1. The minutes of the subcommittee meeting held on 6th February 2019 were agreed.

### Item 5 – Actions and Matters arising

5.1. Actions 1 to 3 had been completed. Action 4 – a discussion with the Community Pharmacy patient safety group on the removal of information on maternity exemption claims due to the implementation of Real Time Exemption Checking (RTEC) will take place at the group's next meeting on 29th May 2019.

### Item 6 – General Pharmaceutical Council consultation on guidance for pharmacist prescribers

6.1. The subcommittee considered the GPhC consultation document and agreed that the guidance covered all the key issues and a supportive response to the consultation will be submitted to GPhC.

**Action 1: Submit a response to the GPhC consultation on behalf of PSNC (Alastair Buxton).**

### Item 7 – Reducing the climate change impact of inhalers

7.1 The subcommittee reviewed the NHS Sustainable Development Unit's paper on reducing the climate change impact of inhalers. The proposals seemed sensible and it was appropriate for community pharmacy to play its part in addressing this environmental issue, starting with more focus on encouraging patients to safely dispose of their pMDI inhaler canisters.

**Recommendation: The subcommittee recommended that PSNC should endorse the NHS Sustainable Development Unit's paper on reducing the climate change impact of inhalers.**

#### Item 8 – Vaccination and Immunisations Review

8.1 The subcommittee considered the information in the agenda paper and then discussed which vaccinations should be considered for discussing with NHS England and Public Health England (PHE), as vaccines that community pharmacists could potentially administer as part of an NHS service.

8.2 The challenge of some vaccines being centrally procured was considered, but it was decided that this should not be seen as a block to pharmacy potentially being able to administer these vaccines. It was agreed that any of the vaccines in the schedule being administered to adults and children from one year old could be included in the scope of a community pharmacy service.

8.3 The issue will be raised with NHS England in the prevention discussions within the current negotiations.

**Action 2: Raise community pharmacy's potential to participate in administering the full range of vaccinations in the current round of negotiations (Alastair Buxton).**

#### Item 9 – Update on NHS IT projects

9.1 The subcommittee noted the information in the agenda paper. Alastair Buxton provided an update on recent discussions with NHS Digital which had occurred after the agenda paper was finalised.

9.2 It was expected that authority for Positive Solutions Ltd. to roll out RTEC to all its community pharmacy customers would be granted shortly after the initial pilot had been deemed a success. The office had supported this move on the condition that there was further monitoring of the first wave of pharmacies to receive the update, to ensure no problems were identified with the software changes as part of the wider deployment.

9.3 In the EPS Phase 4 pilot, a further wave of 37 general practices is going live up to 10th June 2019 to help determine recommendations for national deployment. In order to address the issue with confusion between EPS tokens caused by the GP tokens being printed on green FP10 forms, NHS Digital have reported that some pharmacies are printing white dispensing tokens for the prescriptions and are shredding the green EPS Phase 4 tokens. NHS Digital is continuing work on this issue to seek a resolution.

9.4 While there is a range of EPS usage levels in the pilot practices, some of them were now using EPS for around 95% of all prescriptions. NHS Digital are continuing work to look at what causes EPS not to be used in the pilot practices.

9.5 NHS Digital had shared the following draft timetable for rollout of EPS Phase 4, should the pilot be deemed a success by all stakeholders, including PSNC:

- Additional pilot sites live by mid-June 2019;
- Pilot evaluation period commences 17th June 2019;
- Pilot evaluation period completes 19th July 2019;

- Key stakeholders (PSNC, Joint GP IT Group, NHSBSA, DHSC and NHS England) agree whether national deployment can commence by 31st July 2019;
- NHS Digital will undertake independent activity to stakeholder involvement to grant Full Rollout Approval (FRA) to prescribing system suppliers by 31st July 2019;
- National deployment commences 2nd September 2019; and
- National deployment completes by 31st March 2020.

9.6 This timetable will require PSNC to make a decision on whether it is content for Phase 4 rollout to commence before the next scheduled Committee meeting. Alastair Buxton asked the subcommittee whether it would be content to:

- a) delegate the decision on rollout to its IT group members (David Broome, Fin McCaul and Sunil Kochhar) plus three multiple representatives; or alternatively
- b) for David Broome, Fin McCaul and Sunil Kochhar to continue to provide detailed scrutiny of the pilot, with input from the joint Community Pharmacy IT Group, but a final decision on rollout is made remotely by the Committee - a written report would be provided by NHS Digital summarising the findings of the pilot, including actions taken to address any problems identified. A Zoom meeting would then be held for all those Committee members that wish to discuss the findings from the pilot and rollout, followed by a decision on whether to approve rollout being made by email.

**Action 3: Ask the Committee at the plenary meeting on 23rd May 2019, which option it wishes to adopt (Gary Warner).**

9.7 The ongoing issue with mixed scripts containing “normal” items and Controlled Drugs was noted; GPhC had expressed concern about this in recent inspection reports. The concern of the regulator could be used in seeking to persuade NHS Digital to require changes to be made to the GP clinical systems so CDs are issued on separate scripts.

#### Item 10 – Any other business

10.1 The subcommittee considered the draft PSNC policy asks which had previously been reviewed by the Communications and Public Affairs subcommittee.

10.2 The Service Development asks looked appropriate, but they could be made a little broader, e.g. commissioning of national public health services, starting with stop smoking and EHC services. The reference to a “screening service” should be changed to a “case-finding service”.

On the PCNs and Local Commissioning asks, the wording of the first ask should be clarified to make it clear that it is referring to the development of service specifications for the network Directed Enhanced Services. On the second ask, the wording could be edited to make it clear that the aim was for there to be collaborative development of such service specifications by PSNC, NHS England and PHE, with an expectation that these are then used in local commissioning by local authorities.

The point on records access should be amended to just refer to local health and care records.