

**Pharmaceutical Services Negotiating Committee**  
**Communications and Public Affairs (CPA) Subcommittee Agenda**  
**Wednesday 4th September 2019 at 3pm**  
**Aylesbury Meeting Room, 14 Hosier Lane, London EC1A 9LQ**

**Members:** David Broome, Jas Heer, Tricia Kennerley (Chair), Clare Kerr, Fin McCaul, Jay Patel, Prakash Patel, Stephen Thomas.

1. Welcome from Chair
2. Apologies for absence
3. Conflicts or declarations of interest
4. Minutes of the last meeting

**Action**

5. CPCF and wider communications planning **Appendix 02/09/2019**
6. PSNC Policy Asks **Appendix 03/09/2019**
7. PSNC Annual Report **Appendix 04/09/2019**
8. The All-Party Pharmacy Group **Appendix 05/09/2019**

**Report**

9. Pharmacy communications **Appendix 06/09/2019**
10. Parliamentary work **Appendix 07/09/2019**
11. Wider public affairs work **Appendix 08/09/2019**
12. Any other business

## Appendix CPA 02/09/2019

Subject	CPCF and Wider Communications Planning
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	This paper reports on the announcement of the five-year CPCF agreement and considers future communications work on this topic
Proposed action(s)	The subcommittee is asked to consider the questions posed at the end of this paper.
Author(s) of the paper	Jessica Ferguson, Melinda Mabbutt and Zoe Long

## Introduction

A five-year Community Pharmacy Contractual Framework (CPCF) agreement was announced on Monday 22nd July 2019. This paper summarises the communications work carried out to date and considers future plans.

## Report of the Announcement

### Briefing events

On the morning of the Community Pharmacy Contractual Framework (CPCF) announcement we held a press briefing with the Department of Health and Social Care (DHSC) and NHS England and Improvement (NHSE&I), followed by an LPC Briefing webinar.

Journalists from Chemist+Druggist, Pharmaceutical Journal, Pharmacy Business, The Pharmacist, Pharmacy Magazine, P3 Magazine, Independent Community Pharmacist and Health Service Journal all attended the press event. DHSC and NHSE&I gave an 'off record' presentation first to provide some background information on the deal. This was followed by a more detailed talk from the PSNC policy team and all attendees were given an embargoed press pack. Fifty-five LPCs tuned in to the webinar.

### Website communications

Alongside a news story and email news alert making the announcement, Simon Dukes and Negotiating Team members Gary Warner, Bharat Patel and Clare Kerr all provided statements giving some of the context to the deal. We also published a series of documents to help explain the detail of the deal:

- [PSNC Briefing 026/19: A Summary of the Five-Year Deal on the Community Pharmacy Contractual Framework](#) – a briefing summarising the deal for the future of the CPCF.
- [CPCF service development grid](#) – a matrix document setting out when each of the agreed CPCF service development pilots may be implemented during the five-year deal.
- [PSNC Briefing 027/19: Five-Year CPCF Deal – Frequently Asked Questions](#) – this is an extensive briefing answering more than 45 key questions about the future of the CPCF and the negotiations for contractors. The FAQs are being updated on a rolling basis.
- [PSNC Briefing 028/19: Information on the community pharmacy contract settlement and funding for 2019/2020 to 2023/24](#) – a briefing on the deal and pharmacy funding
- [PSNC Briefing 029/19: The Pharmacy Quality Scheme 2019/20](#) – a briefing that summarises key information on the Pharmacy Quality Scheme (formerly QPS) for 2019/20.

All of these resources, as well as the PSNC roadshows (see below) were promoted in the July edition of Community Pharmacy News (CPN) magazine.

A summary of all the press coverage of the announcement is included as **Annex 1 (pp 13)**.

## Contractor communications post-announcement

### Contractor webinar

A contractor webinar was held two days after the announcement and attracted 442 viewers out of 1,202 registrations (a 36.8% attendance rate\*). Another 600+ people have watched it on-demand since then. The feedback survey recorded that 95% found it useful, with 90% saying they would recommend watching the on-demand version to others. We received many positive comments on the webinar itself, but a common concern was the lack of detail on the Pharmacy Quality Scheme (PQS) and other new services.

\*Industry experts state that a conversion rate of anywhere between 35% and 45% is a strong result.

### PSNC CPCF Roadshows

The Chief Executive and policy team will be hosting a series of Sunday roadshow events across England to explain the context of the deal and what it means for pharmacies. The events will enable contractors and their teams to learn about the five-year deal and to ask questions directly of those who negotiated the deal. We will be explaining the context of the negotiation as well as exploring what the future holds for pharmacies, including the opportunities that lie ahead for those willing to change.

The Roadshow will visit 12 venues on 7 successive Sundays, taking in all the English regions and finishing at the Pharmacy Show on 6th October. Sundays were chosen following feedback that this would make them more accessible to contractors than weekday events, and we have worked hard to ensure that the venues are easily accessible by car and have free parking (other than central London, where we have secured a venue close to Euston railway station).

All PSNC Committee Members have been asked to attend at least one Roadshow event. A full list of dates and locations can be found at: [psnc.org.uk/events](https://psnc.org.uk/events)

### CPCF Checklist emails

The Services and Communications teams worked together to brand and launch a 'CPCF Checklist' email series to highlight on an ongoing basis what actions pharmacy teams and contractors need to be taking regarding the CPCF and what resources are available to help them with that. The emails will largely be sent by the Services Team but may include updates on funding and other matters too. The emails are automatically sent to everyone already signed up to the main PSNC newsletter mailing list, which can be signed up to at: [psnc.org.uk/email](https://psnc.org.uk/email)

### New inbox for queries

We have set up an email address so that people can contact us directly with CPCF queries. These emails will be seen by the policy team and we are aiming to reply to all correspondents. The email address is: [cpcf@psnc.org.uk](mailto:cpcf@psnc.org.uk)

### Presentation for LPC events

To support PSNC Committee Members (particularly the Regional Representatives) who have been asked to talk about the deal at upcoming LPC and contractor meetings, we have developed a PowerPoint presentation. This includes slides and speaking notes, as well as a video message from Simon Dukes, and it has been written to complement our other communications work and the roadshows. The presentation can be downloaded from: <https://www.dropbox.com/s/717nid1lavcf90s/5%20YEAR%20CPCF%20-%20Summary%20Slides%20for%20PSNC%20Committee%20Members.pptx?dl=0>

### **Messaging for the community pharmacy sector**

At the time of the announcement, PSNC issued a list of key communications messages for Committee Members and LPCs to use in any conversations with contractors. We have been refining these in response to questions and feedback from LPCs and contractors, and we plan for our key messages at the Roadshows to be as shown in **Annex 2 (pp 14-16)**

### **Plans for further communications work**

#### Communications Messages

Over the next two months the primary focuses for our contractor CPCF communications will be:

- Continuing to explain the context of the deal and what it means for pharmacies via the Roadshows, LPC meetings, our statements and press articles and interviews;
- Responding to queries both via our rolling FAQs list and directly by email;
- Using the CPCF Checklist emails to ensure that everyone in community pharmacy is ready to provide the CPCS and to meet the PQS requirements; and
- Mobilising the contractor base to start working more collaboratively both together and with Primary Care Networks (PCNs).\*

\*We will seek to carry out this last task in particular in partnership with the other national pharmacy organisations. PSNC has already convened a cross-sector call to talk about PCNs and as an action from that we are facilitating conversations between the comms teams to start thinking about shared messages and a possible joint sector mobilisation campaign.

One tactic that we would like to consider using again is some animations – these could help us to communicate both to contractors and external stakeholders. The last PSNC animation has now received almost 5,000 views and feedback in our survey on it suggests that this has been a popular way of communicating with the sector – more than three quarters of our survey respondents said they liked the look and feel of the animation and that they felt animations were a useful way for us to communicate.

#### The PSNC website

On the PSNC website homepage, the ‘Headline’ news category is being switched to ‘CPCF News’ to help pharmacy teams more easily find all the key information and updates that they need relating to the CPCF agreement. We are also building a collection of information and resources to create a ‘one stop’ hub for everything you need to know about the five-year CPCF (see: [psnc.org.uk/5yearCPCF](https://psnc.org.uk/5yearCPCF)).

The Communications Team and other teams are also working through the website to see which pages need updating to reflect the new deal.

The five-year deal and all the resources that are going to be published in association with it over the next few years (from Service Specifications to marketing materials for GPs) has brought into sharp focus the complexity of PSNC’s website and the need to review it once again to make sure that it is as usable for contractors as possible. This was also highlighted by LPCs in our review of communications, in which we spoke to four LPCs and all raised problems with the website’s search functionality (see a report of these conversations in [Appendix 06/09/2019](#)).

As we increasingly look to focus on strategic influencing, there is also a new need to consider whether PSNC should have a separate ‘outward-facing’ website, with information for other health professionals, commissioners and a media centre. An initial first step in this process will be for the Communications Team to carry out a scoping exercise and to seek a web developer who could help us to redesign our website and search functionality – the subcommittee is asked to consider this course of action.

#### PSNC reputation and branding

The agreement of the long-term settlement has brought with it a number of reputational issues for PSNC, some of which we have already sought to address in our communications. We need to continue to do this to continue to tackle possible reputational issues as follows:

- Highlighting the work we are doing, e.g. to demonstrate contractor costs to HM Government both through the negotiations and our wider public affairs work;

- Demonstrating that we are a truly representative committee – we could revisit the idea of publishing Committee Member interviews in CPN to help do this;
- Ensuring that contractors understand the wider context in which they are working and are making the most of all opportunities e.g. those presented by PCNs.

The announcement of the deal also presents a new reputational challenge in terms of selling all the work that we will continue to be doing on this – now that we have negotiated a deal, many contractors will quite rightly ask what we will be doing for the next five years. The Annual Reports must go some way to addressing this challenge each year, and we also need to continue to focus on communications that promote our role and successes. As a more significant step, PSNC may also now like to revisit previous plans to rebrand to Community Pharmacy England, as this could help to contribute to a new image of who we are and what we do.

## **Messaging for external audiences, including GPs**

### Contacts and reaction

Shortly after the CPCF deal was announced, we sent emails to some key external stakeholders to let them know about the deal and the changes to pharmacy services that lie ahead. This included contacting supportive MPs and some key charities. We have had feedback already from two charities (the British Lung Foundation and Parkinsons UK) sharing concerns about the decommissioning of Medicines Use Reviews. We have reassured both that this was not a PSNC decision, and we have explained NHS England & NHS Improvement's rationale re structured medication reviews in PCNs.

The Chair of the Royal College of General Practitioners (RCGP), Helen Stokes-Lampard, made a statement on the CPCF which was used in several of the national media articles. In it she praised pharmacists as highly trained healthcare professionals but warned that the CPCS would not be a silver bullet to addressing the pressure on general practice.

### Future plans and messages

The Communications Team is preparing a briefing on the CPCF for external stakeholders – there may end up being several versions, to cover GPs, MPs and other audiences. Alongside the briefing we are also working on some template slides to help LPCs to present to local stakeholders about the changes, and we will be updating our standard MP visit guidance to include new key messaging.

The subcommittee is asked below to consider what our key messages for these audiences are. A starting point might be:

- MPs: We will want to promote to Conservative MPs the new, collaborative relationship that we have built with HM Government and the great potential of community pharmacy to support the delivery of the NHS Long Term Plan. For Opposition MPs we will want to focus more on why we agreed the deal, while also highlighting all that pharmacies can do to support the NHS. For all MPs we will need to be clear that while we are a forward-looking sector seeking to use technology to make further efficiencies, more investment is needed in the sector if the NHS is to get most benefit out of services like the Community Pharmacist Consultation Service (CPCS). We should develop further messaging in line with all our policy asks (see [Appendix 03/09/2019](#)).
- GPs: We will need to persuade GPs of the value of the CPCS ahead of the expected rollout of referrals from GP practices. We should also continue to educate them about pharmacy services such as the New Medicine Service, and we should explain to them what Healthy Living Pharmacy (HLP) accreditation means pharmacies have to offer. We will need a set of messages to persuade GPs that community pharmacies should be valued partners within local PCNs.

- Others: It would be helpful to explain to patient groups what the new deal means for patients – services such as the CPCS will need to be covered, and we should promote the ability of pharmacies to support healthy living, making the case for investment in further services. We could offer briefings to charity helpline workers, so that they can correctly explain pharmacy services to patients, and may also wish to partner with Healthwatch to see if we can start to influence the thinking of PCNs through them.

Once we have agreed on the key messages, we will be able to complete these resources. Working alongside the Services Team we are also considering the following tactics to help to promote the CPCS more widely\*:

- Provision of patient-facing materials to promote the skills and training of pharmacists, e.g. posters and leaflets;
- A template presentation for LPCs to use to explain the service (and other CPCF changes) to local stakeholders;
- A leaflet to explain the service to GPs, and to use for promotion of the service to GPs at the RCGP Conference in October 2019;
- A Parliamentary briefing document about the service (and other CPCF changes);
- A Parliamentary event to ‘launch’ (i.e. explain) the service to MPs (this would highlight the expertise of community pharmacists; showcase how the sector is helping to deliver the Long Term Plan; and make the case for further investment in the sector so that it can continue to do this);
- A toolkit to help LPCs to invite local MPs to visit a local community pharmacy to learn about the new service and get local press coverage;
- A commissioners email about the service; and
- Information (e.g. a leaflet, and possible short recorded webinar) for charities to explain the new service (and other changes to the CPCF).

\*SDS and LCS will consider the detailed plans for contractor CPCS support and resources to support LPCs

### Subcommittee Action

The subcommittee is asked:

- For any feedback on the initial announcement communications and what we could do differently next time.
- For feedback on the planned key contractor messaging about the CPCF deal:
  - Is this right for the roadshows?
  - What have we missed?
- For any feedback on the planned next steps for communications work on the CPCF.
- To approve the plan for the Communications Team to go ahead with reviewing and updating PSNC’s website to help make this easier to navigate for contractors and other audiences.
- To consider whether we should use the agreement of the five-year deal as an opportunity to revisit the plans to rebrand PSNC to Community Pharmacy England.
- To consider messaging for external audiences:
  - Who do we want to tell about the deal?
  - What do we want to say to patients, GPs and MPs?
  - Are there other tactics that we should be using to get these messages across?

## Annex 1: Press coverage of the CPCF deal announcement

### **Pharmacy press**

All the pharmacy press covered the announcement and many publications published multiple stories to give more detail on different aspects.

#### *Chemist+Druggist*

[5-year pharmacy funding deal revealed with greater focus on services](#)  
[DH uses funding announcement to pledge change to hub-and-spoke law](#)  
[Contractors 'disappointed' 5-year deal doesn't address cashflow issues](#)  
[DH froze funding on belief there are still too many pharmacies](#)  
[PSNC: Delayed quality payments will mean 'slightly better' end of year](#)

#### *Pharmaceutical Journal*

[Community pharmacy contract funding frozen at £2.59bn for next five years](#)  
[Pharmacy technicians may take on greater role in dispensing under government proposals](#)  
[Government to change legislation to make 'consolidation' of pharmacies easier](#)

#### *Pharmacy Business*

[FIVE-YEAR deal for community pharmacies agreed with £13 billion funding boost](#)  
[New pharmacist consultation service offers £14 for completed consultation](#)

#### *The Pharmacist*

[English community pharmacy secures 'landmark' £13bn five-year funding deal](#)  
[Everything we know so far about the new contract](#)

#### *Pharmacy Network News (comprising Pharmacy Magazine, P3 Magazine and Independent Community Pharmacist)*

[Clinical services centre stage in landmark 5-year funding deal](#)  
[New contract: services pave way to clinical future](#)

#### *Health Service Journal*

[Real terms budget cut for community pharmacy](#)

Simon Dukes has also written a guest column for the September edition of Pharmacy Business and is due to be interviewed for a piece in P3 Magazine, both focussing on the five-year deal.

### **Wider media coverage**

The national press focussed on the Community Pharmacist Consultation Service, with little mention of the rest of the agreement. All seemed to have drawn from the DHSC press release.

*iNews* – [Patients with sore throats or earache told to see their pharmacist instead of GP](#)

*The Times* – [Pharmacists take strain off GPs in five-year deal](#)

*The Telegraph* – [GP receptionists will offer patients appointments at chemists, in bid to take pressure off family doctors](#)

*The Sun* – [Sick Brits will be seen the same day by pharmacists to free up space in A&Es and GPs](#)

*The Mail* – [People ringing 111 with minor illnesses will now get a same-day appointment with their pharmacist instead of their GP or hospital in NHS scheme](#)



## **Annex 2: Key messages for the PSNC Roadshows**

### **Positives of the five-year deal**

- This deal with a £13bn investment removes ambiguity for contractors over the next five years and secures community pharmacies a future in the NHS.
- We now have a clear vision for the sector's development from our customer (Government) – this in line with our ambitions as per the Community Pharmacy Forward View.
- The launch and expansion of the Community Pharmacist Consultation Service (CPCS) will put us at the heart of primary care services with NHS 111, and eventually GP practices as well, becoming reliant on us to manage an entire cohort of patients.
- This will cement our position in primary care and give us more leverage in the future.
- A multi-year settlement was essential to provide a period of stability and certainty for community pharmacies and to allow the sector reform itself.

### **Negotiations**

- This was not the deal that PSNC wanted – we pushed hard for further investment in the sector.
- But we were unable to extract more money from Treasury, who see us as an expensive way for them to get medicines to patients.
- We outlined how rising costs were already threatening the viability of many community pharmacies warning that cost-saving tactics would reduce capacity to deliver the new services.
- Further cuts had been planned and the decommissioning of MURs and removal of the Establishment Payment gave them an easy way to do that – securing the full £2.592bn for this year was no easy task.

### **Rationale for accepting the deal**

- The Government is not interested in covering pharmacy contractors' costs; it wants to commission cost-effective services, including a significantly more efficient dispensing service.
- We believe Government no longer wants to pay for 11,600 community pharmacies: they believe there are too many pharmacies not utilising technology to the full.
- This is the approach that Government took when they implemented the funding cuts of 2016 and this was ruled lawful in the Judicial Reviews taken by PSNC and the NPA.
- Legally, our only customer is under no obligation to pay us any more than it deems to be affordable for itself: this does not put us in a strong negotiating position.
- Principally PSNC agreed this deal because of the need to secure for contractors a baseline sum for as long as possible and to protect that from the grasping hands of the Exchequer.
- We also believed it was the best deal we could get, and that it secures the sector a future.
- Walking away risked retribution eg. more severe funding cuts; a rethink of the services they wanted to commission from us; or an opening up of the market to enable remote dispensing at scale, perhaps cutting out many pharmacies from the process completely.
- We were under time pressures with an incoming Brexit-focused new Prime Minister. Failure to make a deal would have meant further Brexit delays and the possibility of new Ministers being even less sympathetic to the sector.

### **Funding**

- The deal protects funding levels, i.e. there is no funding reduction as had been planned by HM Government, and it provides certainty of core minimum funding for the next 5 years.
- Losing Medicines Use Reviews (MURs) will help free up capacity to deliver what our customer (i.e. HM Government) wants.
- The settlement provides community pharmacy with opportunities to tap into local funding. We are working with NHS England on PCN integration and the seven PCN service specs.

- We have secured money to support local engagement with PCNs.
- We have secured a commitment to explore ways to improve reimbursement and discuss new funding models.
- We have secured money for Serious Shortage Protocols (SSPs); a significant undertaking for the community pharmacy sector should they be used.

### **Services**

- Community pharmacy is getting two new national pharmacy services from October 2019.
- The deal positions community pharmacies as healthy living centres, recognising them as the place to treat minor conditions. This gives us a key role at the heart of the NHS.
- There is an opportunity to prove our capabilities through the Community Pharmacist Consultation Service (CPCS) and to make a business case for further investment in that service from 2021/22.

### **Challenges and Change**

- There are many contractors for whom the current financial situation is untenable, and we made this point repeatedly, including presenting detailed analyses of pharmacy costs.
- We absolutely are not complacent about the very difficult situation that many pharmacies will now find themselves in and we will continue to battle for them.
- We will make strong representations on pharmacies' costs and the manageability of services through the annual reviews that are built into the deal process (reviews we fought hard for).
- The deal will involve major changes for pharmacy businesses over the next five years.
- While many will embrace the move to more clinical services, the radically different service to be offered by 2023/24 will pose significant challenges for all and may prove impossible for some pharmacies without considering options such as collaboration or consolidation.

### **Next Steps**

- We will continue make the case for contractors' costs over the next four years, especially with the backdrop of 'change' and the range of new services.
- We are working flat-out to finalise details on those elements due to be introduced from October 2019 and we will share that information as soon as possible.

### **The Future**

- We know many are concerned about what the future holds, and others are angry that their businesses are already on their knees and they are now being asked to do more and told that this is a 'good deal'.
- All of this is legitimate, because the challenge that the Government is asking of us, to deliver all of these services within a flat cash settlement, is enormous.
- This deal and the services outlined within it will enable the sector to transform its offer to the NHS.
- The previous reliance on prescription volume is no longer tenable. Health policies around the world are leading to the more focussed use of medicines and initiatives such as deprescribing, and we must be aligned with that.
- This deal enables us to do that.

### **What this means for pharmacies**

- The deal guarantees the sector a future – not one that will be easy to attain, but one that does present opportunities for those who are willing to engage with it and to change.
- What that change might look like is something that all businesses will need to think about.

- It will mean looking at the dispensing process and seeing how this can be made more efficient to free up pharmacists' time to focus on clinical services.
- For large businesses it will mean some difficult decisions about the viability of some branches.
- For independent contractors, particularly those in clusters of pharmacies, it will mean some incredibly difficult conversations with other local pharmacy businesses to work through how you can deliver what the Government wants either working in partnership, or even through consolidating your businesses.
- For everyone it will mean looking at your businesses and stopping doing the things you are not paid for.
- And no matter the size of your business, it will mean coming together with other pharmacy businesses locally to ensure that you are all a part of the emerging PCNs.

### **Conclusions**

- However you feel about these sorts of changes we would urge you to read the deal document itself.
- It is arguably the most important document to the future of your business that you will read this year.
- It gives us a future, at the heart of the NHS, setting out how community pharmacy can add further value as a clinical services provider, whilst still retaining a vital role in medicines supply.
- It will better integrate us at the heart of primary care: giving community pharmacy a growing and indispensable part to play in delivering the NHS Long Term Plan, and with it, the leverage we need for future negotiations.

## Appendix CPA 03/09/2019

Subject	PSNC Policy Asks
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	A review of PSNC's policy asks
Proposed action(s)	The subcommittee are asked to review the updated policy asks.
Author(s) of the paper	Zoe Long

## Introduction and Purpose

In May 2019 all PSNC subcommittees considered a draft set of policy asks for PSNC. The purpose of the policy asks is to provide a focus for PSNC's public affairs work, giving key agreed policies which we can campaign for through our public affairs work.

The policy asks document is primarily an internal document rather than being something we publish in public. We may share it with the other pharmacy organisations as there may be areas that we could collaborate on, and asks that might be for others to lead on.

Following the announcement of the five-year deal on the CPCF, there is a need to review PSNC's policy asks once again.

## Actions

CPA's proposal in May was that PSNC's policy asks remain a standing item on the PSNC agenda. The subcommittee is asked to review the updated draft policy asks set out below and these will then be shared with the full Committee in plenary on Thursday.

## Draft Policy Asks

The following policy asks discussed in May have now been largely achieved, so it is suggested that they are removed from our current list of policy asks:

- A five-year plan for funding and future NHS pharmaceutical services requirements.
- A five-year funding settlement for pharmacies so that owners can have the confidence to invest in their businesses to deliver high quality patient services in line with NHS ambitions.
- Commissioning of a national minor illness referral service from community pharmacies.
- Commissioning of a national Hypertension and Atrial Fibrillation case-finding service from community pharmacies.
- Pharmacy involvement in the development of the seven Network Contract DES service specifications being developed for PCNs.

A suggested revised set of policy asks follows.

## Community Pharmacy Contractual Framework

- Continued development of and investment in community pharmacy services in line with the five-year CPCF agreement, recognising the costs and scale of the new services.

## Pharmacy Funding (including distribution and reimbursement)

- A fair approach, based on costs and value, to funding NHS pharmaceutical services.
- A fair and transparent approach to pharmacy funding distribution that doesn't expose individual pharmacy owners to unreasonable risks.
- Exemption for all healthcare services provided in NHS community pharmacies from VAT on the basis that these are NHS healthcare services.
- Reimbursement of business rate costs for NHS pharmacies, recognising that these are healthcare premises and bringing pharmacies in line with General Practice.

## Service Development

- Commissioning of national public health services from community pharmacies, beginning with stop smoking and EHC services.
- National commissioning of a range of vaccination services from community pharmacies.

- National commissioning of the NHS Health Check service from pharmacies, to address the current patchy local commissioning. The service should include greater follow-up support for people who have agreed lifestyle changes following their check, provided by pharmacies.

#### **PCNs and Local Commissioning**

- Government to take steps to improve rural pharmaceutical services, possibly to include reopening the Essential Small Pharmacies and Local Pharmaceutical Services (ESPLPS) scheme.
- Collaborative development and joint publication of wider standard service specifications with NHSE&I and Public Health England. These specifications will then support the commissioning of local community pharmacy services by local commissioners.

#### **Integration and Enablers**

- Community pharmacies to have read-write access to local health and care records where appropriate permissions are given, including patient consent.
- Medicines for all patients with long-term conditions to be prescribed via the electronic repeat dispensing service, where this is appropriate for the individual.

#### **Medicines Supply**

- Changes to allow original pack dispensing for all prescribed items.

## Appendix CPA 04/09/2019

Subject	PSNC Annual Report
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	A draft copy of PSNC's annual report
Proposed action(s)	The subcommittee is asked to review the draft annual report and offer feedback.
Author(s) of the paper	Zoe Long

## Introduction

PSNC is this year going to publish a new-look annual report. The report will be for the financial year 2018/19.

### **Publication date and notes**

The annual report has taken a significant amount of work to gather data and information from across the executive team; distil this into readable pages; and then work on the design. The subcommittee reviewed some early draft text for the annual report at its meeting in May and we have tried to apply the principles discussed – specifically the needs to congratulate contractors on their successes and also to recognise the financial hardship being faced by many pharmacy businesses – into the report.

Unfortunately, the publication date has had to be delayed because the final accounts for PSNC last year are still not being available. There have also been a significant amount of other communications going out over the summer, so a launch then may not have been feasible anyway. For next year, the subcommittee may like to consider the merits of publishing the report earlier in the year, with accounts to follow some months later.

### **Launching the annual report**

We expect the report to be ready to publish later on in September. The report will be a digital report, published on the PSNC website with an accompanying news story, email news alert (to subscribers and LPC Members), social media coverage and press release. We will then highlight the report in Community Pharmacy News (CPN) magazine and in ongoing communications.

The Communications Team will develop a series of tweets and images that can be used on social media in the months following the report to promote both PSNC's work and the report.

### **Subcommittee Actions**

The subcommittee is asked to review and offer feedback on the (confidential) draft annual report.



## Appendix CPA 05/09/2019

Subject	The All-Party Pharmacy Group (APPG)
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	An update on the work of the APPG
Proposed action(s)	The subcommittee is asked to consider ideas for the future work of the APPG.
Author(s) of the paper	Jessica Ferguson and Zoe Long

## Introduction

This paper summarises the work of the All-Party Pharmacy Group since the last PSNC meeting. It also covers the appointment process that has been undertaken to appoint a new public affairs agency to provide the Secretariat for the group, and considers what PSNC would like the APPG to consider working on next.

## APPG meeting on the Long Term Plan

The APPG held a meeting about the NHS Long Term Plan on Tuesday 11<sup>th</sup> June, to hear about community pharmacy's perspective on the plan, six months after its publication. Witnesses included: Sandra Gidley on behalf of the RPS, Mark Lyonette on behalf of the NPA, and Malcolm Harrison on behalf of the CCA. PSNC did not give evidence as we were in negotiations at that point. Parliamentarians in attendance included: Kevin Barron MP, Julie Cooper MP and Baroness Cumberlege.

Key discussion points were:

- Clinical pharmacists and community pharmacy – the witnesses expressed some concerns that the Long Term Plan placed great emphasis on the role of pharmacists in primary care, outside the community pharmacy setting. It was stressed that community pharmacy needs to be closely involved in the new NHS structures, especially PCNs.
- Funding – this meeting took place before the five-year CPCF, but all the witnesses called for a long-term funding arrangement for community pharmacy to facilitate service planning in line with the objectives of the Long Term Plan. Concerns about financial pressure, particularly on independent contractors, were also raised.
- A vision for community pharmacy – it was noted that applications to schools of pharmacy have been dropping in recent years, by as much as 25%. The witnesses suggested that a more compelling vision for community pharmacy would help to arrest that decline, and that changes are needed in skill mix, so that pharmacists in community pharmacies are able to spend less time checking prescriptions and more time providing clinical services.

## Appointment of the APPG Secretariat

As reported previously, the five sponsors of the APPG Secretariat (AIM, CCA, NPA, PSNC and RPS) have been holding an appointment process to check we are getting value for money from our spend on the Secretariat. In June, we heard pitches from our four shortlisted public affairs agencies: Lexington Communications, FleishmanHillard Fishburn, Luther Pendragon, and The Whitehouse Consultancy.

The public affairs teams felt unanimously that Lexington gave the most compelling pitch. They gave a polished opening presentation on the NHS Long-Term Plan and how the APPG should respond to it, as well as an informed view on where community pharmacy is with government, mistakes we have made in the past, and what our strategy should be going forwards. The team also have a breadth of experience which will be helpful for delivering the service needed from us, and they offered a fresh perspective on boosting engagement with the APPG, as well as linking in with wider policy issues.

On this basis, Lexington Communications have been appointed to provide the Secretariat for the APPG for one year. The contract is just being finalised, but we have agreed a £50k fee for which they will offer a full Secretariat function including a series of meetings and events and increased social media and media output. PSNC has also negotiated for this fee to include the development of a new website.

The public affairs team are in the process of setting KPIs for Lexington which will be attached to the contract, but broadly, our shared objectives for them for the year are:

- Increase the number of MPs and Peers who are engaged with and members of the APPG and facilitate their participation in at least three relevant Parliamentary debates each year.
- Develop a number of MPs and Peers as proactive advocates for pharmacy.
- Position the APPG as a respected voice in Parliament so that it can act as a platform to effectively scrutinise and influence Government policy related to pharmacy, and to positively raise the profile of the sector.
- Raise the profile of key issues relevant to pharmacy, including the potential of pharmacy to help support patients and the NHS in line with Government policy, with a wider range of influential stakeholders (eg Ministers; policy-makers; GPs; patient groups; etc).
- Raise the profile of pharmacy and the APPG across Parliament and beyond, including by increasing the group's media and social media activity and holding Parliamentary events.
- Hold a programme of events which lead to the development of proactive, collaborative policy recommendations, then build support for these to ensure that best use is made of pharmacies to support key NHS and Government priorities (eg prevention, the Long Term Plan, reducing pressure on urgent care, etc).
- Scrutinise pharmacy policy and work constructively to offer solutions where they are needed and to collaboratively hold Ministers and policy-makers to account for delivering pharmacy policies that are in the best interests of patients.
- Identify and react to wider policy and legislation issues that will impact pharmacy (eg Brexit), raising awareness and offering solutions to any issues identified, and where necessary campaigning to ensure that pharmacy is not negatively impacted by these.

We are looking forward to working with Lexington to achieve these objectives. Lexington will also be responsible for ensuring that the Group has Officers appointed – this will be particularly pressing if and when a General Election is called as our Chair, Kevin Barron, intends to stand down at that point.

### **APPG Workplan 2019/20**

To help promote the APPG and achieve our objectives, Lexington pitched an initial workplan with ideas for events throughout 2019/20, including:

- An inquiry on digital technology in pharmacy;
- A meeting to discuss workforce and the NHS Long Term Plan;
- A meeting to discuss pharmacy's role in the prevention agenda; and
- A summer reception.

Considering priorities in light of the five-year CCPF deal, the public affairs teams have posed some alternative suggestions for inquiry topics or meetings to be considered by the Lexington and the MPs. Priorities that PSNC might support include:

- Community Pharmacist Consultation Service (CPCS) Parliamentary launch – a drop-in session to mark the launch of the CPCS might be a good way to showcase pharmacy's expanding role to MPs and to start making the case for future further investment in the sector.
- New technologies – building on Lexington's initial suggestion, an inquiry into technology would need to be carefully considered, but could explore how digital developments such as apps and fitness trackers might eventually influence pharmacy.
- An inquiry into local health structures (Primary Care Networks – PCNs) – this could be a useful exercise to pull in external stakeholders (such as GPs and local Healthwatch branches) to explore how PCNs are engaging with and making use of community pharmacies. Previous

APPG inquiries of this type have resulted in letters from MPs to local commissioning structured to promote pharmacy, and if timed and pitched correctly, this may be helpful with PCNs too.

- A CCPF one year on session, to explore with ministers and NHS officials what progress is being made on delivering the five year deal – this could be helpful if we want MPs to explore the annual review process and to support further investment in the sector.

Ultimately the workplan is approved by the MPs, so it may change. However, ideas to feed into the initial development are welcome.

### **Subcommittee Action**

The subcommittee is asked:

- For any feedback on the shared objectives for the APPG or the appointment process.
- For feedback and any further ideas for the APPG's proposed workplan:
  - What are the priority issues the APPG should tackle?
  - How can the APPG help to support PSNC's policy objectives?

## Appendix CPA 06/09/2019

Subject	Pharmacy Communications
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	An update on PSNC's communications for community pharmacy contractors and their teams, and on media work.
Proposed action(s)	None
Author(s) of the paper	Melinda Mabbutt

## Introduction

Below is a round-up of the communications work undertaken by the PSNC Communications and Public Affairs Team since the last PSNC meeting.

## Webinars and videos

We held a joint webinar with the NHS Business Services Authority (NHSBSA) in June on 'Understanding your Schedule of Payments'. Whilst NHSBSA talked viewers through the different sections of the schedule, our Dispensing and Supply Team illustrated why monthly payments may fluctuate and how to use the schedule to monitor performance. 97% of webinar attendees who completed the feedback survey said they had found it useful.

July saw the introduction of Serious Shortage Protocols (SSPs) legislation, and with that came a webinar presented by PSNC Director of Operations and Support Gordon Hockey and Drug Tariff and Reimbursement Manager Suraj Shah. Our feedback survey found that 98% of attendees thought the webinar was useful and 98% were likely to use what they have learnt in the future.

Information about our LPC and contractor webinars on the five-year Community Pharmacy Contractual Framework (CPCF) deal can be found in [Appendix 02/09/19](#).

## Proactive communications and pharmacy press coverage

In the past few months the Communications Team has provided comments to the pharmacy press on a range of topics including the five-year CPCF deal, an increase in Category M reimbursement prices, medicine supply issues and Primary Care Networks (PCNs).

In June, PSNC Chief Executive Simon Dukes wrote about the importance of PCNs and their relevance for community pharmacy. He told readers: "You may well be thinking that primary care networks (PCNs) is just another primary care shake-up. In some ways it is – but there are some important ways in which this one is different for us."

The Communications Team supported Luvjit Kandula with the production of her PCN roadmap for LPCs – this included a reference list of all the resources available to LPCs on this topic – and we also wrote a feature about PCNs for [Pharmacy Business](#). In this we explained how these new networks will require closer collaboration and cooperation between all community healthcare professionals, including pharmacy teams. We also coordinated a cross-sector teleconference on PCNs in August – one action from this was for the communications teams to consider a cross-sector campaign to help mobilise contractors to engage with PCNs; we have already picked this up with the NPA and CCA.

## Other media work

Aside from coverage on the Community Pharmacist Consultation Service (see [Appendix 02/09/19](#)), the issue of medicine shortages has raised its head again in the national media.

Following reports of shortages of HRT products in August, PSNC CEO Simon Dukes was interviewed by BBC Health Editor Hugh Pym (for a piece that appeared on the BBC Six O'Clock and Ten O'Clock News programmes) and later by Radio 5 Live (featuring on both their [Drive](#) and [Breakfast](#) shows). Simon discussed wider supply issues and highlighted the work that community pharmacy teams are doing on a daily basis to make sure that patients get their medicines when they need them. Mike Dent also gave a comment to [Pulse magazine](#) in response to concerns that GPs are spending more time amending prescriptions due to drug shortages.

Elsewhere, the [King's Fund](#) referenced the Future of Pharmacy Animation in their Health Management and Policy Blog and [PR Week](#) reported the delay in delivery of materials for the children's oral health campaign.

### Briefings report

Topics covered in Briefings published since the last committee meeting included information about the CPCF agreement, the Pharmacy Quality Scheme (PQS) and Community Pharmacy Assurance Framework (CPAF) screening process, as well as guidance on SSPs

For more information on any of these briefings, please visit PSNC's Briefings Database at: [psnc.org.uk/briefings](https://psnc.org.uk/briefings)

### PSNC digital communications reports

**May 2019 overview:** Information about an upcoming children's oral health campaign and a recent briefing about dispensing Controlled Drugs on EPS gained the most interest this month. There were peaks in website numbers on Wednesday 1st, Monday 20th and Wednesday 29th. These correspond with dates that we sent email newsletters out to our mailing list.

**June 2019 overview:** Popular topics included SSPs, the exemption of Freestyle Libre Sensors from the discount deduction lists, and the CPAF screening process. There were peaks in website numbers on Monday 17th and Friday 28th. These correspond with dates that we sent email newsletters and an alert on SSPs.

**July 2019 overview:** Aside from considerable interest in the CPCF agreement, website visitors were also interested in a retrospective price adjustment for melatonin and SSPs this month. Our largest peak in website numbers was on Monday 22nd, the day we announced the agreement of a five-year deal for community pharmacy.

Full statistics reports are included overleaf.

### Communications Review

In February the subcommittee considered the need to review PSNC and LPC communications to ensure that duplication of effort is being minimised and that PSNC is doing all that it can to support LPCs with their communications work. May's paper included feedback from Zoe Long's conversations with two LPC communications managers. Since then, the team has spoken to an additional four communications leads representing six LPCs about their communications work: Suffolk LPC; Coventry, Warwickshire, Herefordshire and Worcestershire LPCs; Hertfordshire LPC; and Community Pharmacy West Yorkshire.

The interviews revealed a number of points about PSNC's existing resources, as well as some suggestions for further work:

- All the LPCs said they find the website a useful resource, but all reported difficulties with the search function. They said it was often hard to find specific content and that older pages often appeared ahead of more recent ones. It was suggested that having an option to sort pages by date of publication would help this. Similar improvements were also suggested for the Services Database.
- All LPCs felt PSNC's news alerts and weekly newsletter were excellent resources and most found CPN very useful. One LPC didn't get much use out of it, but this is due to the fact they are generally very engaged with PSNC's news content before it is published in CPN.

- All of the LPCs generally share PSNC’s resources as they are published, although some make tweaks according to locality.
- Two of the LPCs cited an example where they had produced a resource, only for PSNC to publish similar content soon after. To avoid duplications and wasted time, it was suggested that PSNC could share this sort of information further in advance and produce a schedule to help LPCs develop their own local plans.

Two of the LPC communication leads were Chief Officers, and the other two were employed in a communications role. The results from this round of interviews were similar to that reported in the last paper. It was frequently suggested the website could be updated and this is considered in [Appendix 02/09/2019](#). The Communications Team will also consider how they can better update LPCs about the resources they are planning to work on, to try to avoid duplication of efforts.

### **Conclusion**

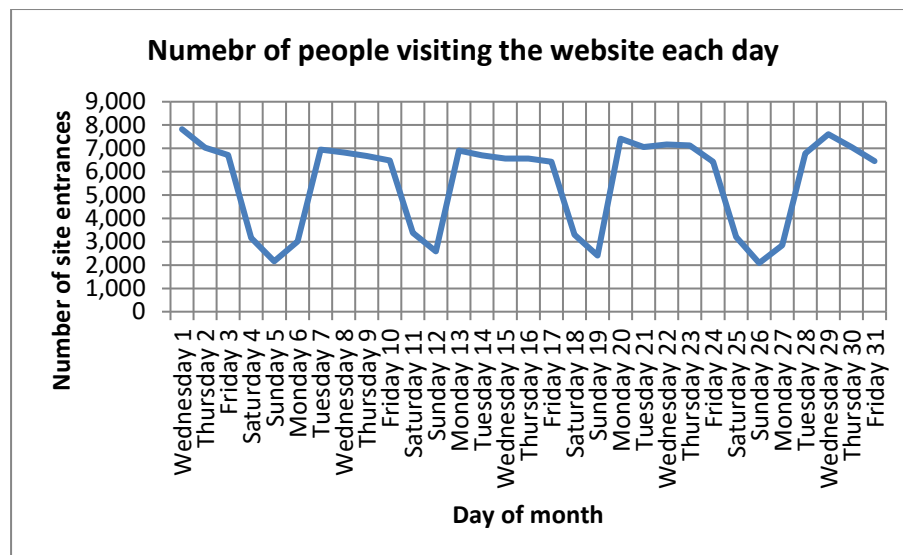
This paper has been created just for review; no action is required. However, subcommittee members are welcome to share their feedback or questions on any of the above.



## May 2019: PSNC comms statistics report

### PSNC Website

Audience	May 2019	Apr 2019
Number of unique visitors (site entrances)	<b>172,904</b>	177,647
Number of unique pageviews	<b>283,856</b>	301,094



Pages	Views
Price concessions and NCSO	28,857
Controlled Drug prescription forms and validity	6,861
EPS Prescription Tracker	6,837
Medicines Use Review (MUR)	4,674
Exemptions from the prescription charge	3,630

News stories	Date	Views
Children's oral health campaign requirement	29 Apr	2,730
NHS Choices now referred to as the NHS website	21 Aug 2018	2,532
Delay in distribution of oral health campaign materials	10 May	1,358
Pregabalin and gabapentin to be controlled drugs	7 Jan	1,275
May edition of CPN magazine is out now	24 May	1,237

PSNC Briefings	Views
030/15: Services Factsheet – National Target Groups for MURs	831
016/19: EPS Controlled Drugs (CD) FAQs	479
033/15: Services Factsheet – NMS Medicines List	445
016/14: Advanced Services (MURs and the NMS)	335
019/19: Dispensing & Supply monthly update (April 2019)	237

Webinars	Plays
Data Security and Protection (IG) Toolkit Workshop	5
Prescription charge exemptions and switching	4
Price concessions webinar	1

### PSNC Emails

PSNC Newsletter	May	April	Other health newsletters
Open rate	<b>32%</b>	32%	23%
Click rate	<b>5%</b>	5%	6%
Clicks to opens	<b>16%</b>	14%	20%

LPC News	May	April
Open rate	<b>37%</b>	35%
Click rate	<b>6%</b>	5%
Clicks to opens	<b>16%</b>	15%

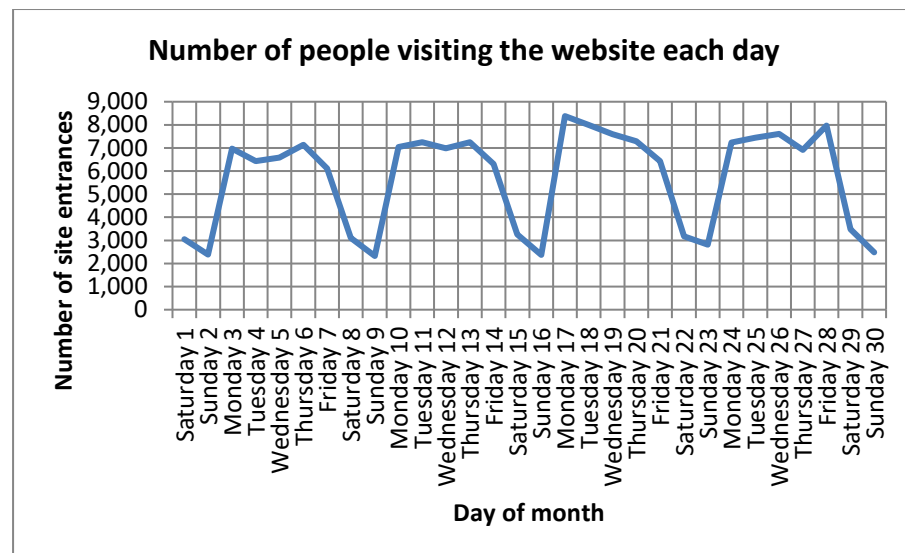
### Social media

	May	April
Twitter reach	<b>125,500</b>	107,600
Twitter interactions	<b>1,642</b>	1,448
Facebook reach	<b>9,798</b>	3,279
Facebook interactions	<b>1,334</b>	281
LinkedIn reach	<b>5,160</b>	3,319
LinkedIn interactions	<b>384</b>	381

## June 2019: PSNC comms statistics report

### PSNC Website

Audience	June 2019	May 2019
Number of unique visitors (site entrances)	<b>171,383</b>	172,904
Number of unique pageviews	<b>284,072</b>	283,856



Pages	Views
Price concessions and NCSO	25,465
EPS Prescription Tracker	6,200
Controlled Drug prescription forms and validity	5,556
Medicines Use Review (MUR)	3,818
Exemptions from the prescription charge	3,464

News stories	Date	Views
NHS Choices now referred to as the NHS website	21 Aug 2018	3,854
Regulatory changes include provision for SSPs	7 Jun	2,366
FreeStyle Libre exempted from discount deduction	26 Jun	1,321
Pregabalin and gabapentin to be controlled drugs	7 Jan	1,165
CPAF screening process to start in June	17 May	1,117

PSNC Briefings	Views
023/19: Serious Shortage Protocols (SSPs) – A guide for pharmacy teams	1,660
021/19: CPAF screening process for 2019/20	846
030/15: Services Factsheet – National Target Groups for MURs	745
033/15: Services Factsheet – NMS Medicines List	447
016/19: EPS Controlled Drugs (CD) FAQs	401

Webinars	Plays
Understanding your Schedule of Payments webinar	559
Price concessions webinar	6

### PSNC Emails

PSNC Newsletter	June	May	Other health newsletters
Open rate	<b>35%</b>	32%	23%
Click rate	<b>8%</b>	5%	6%
Clicks to opens	<b>21%</b>	16%	20%

LPC News	June	May
Open rate	<b>36%</b>	37%
Click rate	<b>6%</b>	6%
Clicks to opens	<b>17%</b>	16%

### Social media

	June	May
Twitter reach	<b>103,100</b>	125,500
Twitter interactions	<b>1,182</b>	1,642
Facebook reach	<b>3,895</b>	9,798
Facebook interactions	<b>334</b>	1,334
LinkedIn reach	<b>3,511</b>	5,160
LinkedIn interactions	<b>162</b>	384

## July 2019: PSNC comms statistics report

### PSNC Website

Audience	July 2019	June 2019
Number of unique visitors (site entrances)	<b>185,011</b>	171,383
Number of unique pageviews	<b>309,282</b>	284,072



Pages	Views
Price concessions and NCSO	24,028
EPS Prescription Tracker	6,397
Medicines Use Review (MUR)	6,235
Controlled Drug prescription forms and validity	4,841
CPCF settlement: 2019/20 to 2023/24	4,007

News stories	Date	Views
Funding negotiations result in five-year CPCF deal	22 Jul	4,358
NHS Choices now referred to as the NHS website	21 Aug 2018	4,126
Contractor Update: Serious Shortage Protocols	28 Jun	1,827
Melatonin solution: retrospective price adjustment	11 Jul	1,157
Category M prices to increase from August	15 Jul	950

PSNC Briefings	Views
023/19: Serious Shortage Protocols (SSPs) – A guide for pharmacy teams	2,617
026/19: A Summary of the Five-Year Deal on the CPCF	1,339
028/19: Information on the CPCF and funding for 2019/2020 to 2023/24	1,257
029/19: The Pharmacy Quality Scheme 2019/20	1,175
027/19: Five-Year CPCF Deal - Frequently Asked Questions	945

Webinars	Plays
Five-Year Deal on CPCF webinar	826
Serious Shortage Protocols (SSPs) webinar	290
Understanding your Schedule of Payments webinar	39
Price concessions webinar	4

### PSNC Emails

PSNC Newsletter	July	June	Other health newsletters
Open rate	<b>32%</b>	35%	23%
Click rate	<b>5%</b>	8%	6%
Clicks to opens	<b>15%</b>	21%	20%

LPC News	July	June
Open rate	<b>37%</b>	36%
Click rate	<b>8%</b>	6%
Clicks to opens	<b>21%</b>	17%

### Social media

	July	June
Twitter reach	<b>157,500</b>	103,100
Twitter interactions	<b>2,337</b>	1,182
Facebook reach	<b>5,106</b>	3,895
Facebook interactions	<b>504</b>	334
LinkedIn reach	<b>5,217</b>	3,511
LinkedIn interactions	<b>280</b>	162

## Appendix CPA 07/09/2019

Subject	Parliamentary Work
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	An update on any Parliamentary business concerning community pharmacy
Proposed action(s)	None
Author(s) of the paper	Jessica Ferguson

## Introduction

Below is a summary of any Parliamentary business concerning community pharmacy that has taken place since the last meeting.

## New appointment

A cabinet reshuffle by the new Prime Minister saw the previous pharmacy minister, Seema Kennedy MP, move to the Home Office. Jo Churchill is now the minister responsible for pharmacy as part of her new role as Parliamentary Under-Secretary of State for Prevention, Public Health and Primary Care. Jo has been the Conservative MP for Bury St Edmunds, in Suffolk, since 2015.

Shortly after Jo's appointment, an introductory letter was sent from the Chief Executive and we are working to find a suitable date to meet with the Minister. She was also invited to the LPC Conference.

Other ministerial changes at the Department of Health and Social Care include: Nadine Dorries, MP for Mid Bedfordshire, appointed as the Parliamentary Under Secretary of State for Mental Health, Suicide Prevention and Patient Safety (replacing Jackie Doyle-Price MP), and Chris Skidmore, MP for Kingswood, appointed as the Minister of State for Health (replacing Stephen Hammond MP).

## Parliamentary Engagement

The Conservative leadership contest dominated most of July, and Parliament is now in recess until September, but despite this some good engagement with Parliamentarians has taken place.

- **Health Questions**

We briefed MPs ahead of Seema Kennedy's first Health Questions in May, and Julie Cooper discussed medicines shortages and community pharmacy.

- **MP Visit Guidance and LPC Support**

LPCs are still hosting successful MP visits and the team is providing assistance where necessary. We are currently working to update the MP visit guidance now that the five-year Community Pharmacy Contractual Framework has been announced.

- **Debate – Vaccinations and Public Health**

In June, PSNC briefed Chris Green, Conservative MP for Bolton West, ahead of a debate he hosted on vaccinations and public health. Chris called for action to increase levels of immunisation in the UK. Specifically, he suggested that a wider range of vaccinations could be made available through community pharmacies, following the success of the flu vaccination programme. He thanked PSNC for our help in his speech.

- **Inquiry – Penalty Charge Notices in Healthcare**

The Public Accounts Committee launched an inquiry into Penalty Charge Notices in healthcare. PSNC submitted written evidence to this inquiry, and in oral evidence pharmacy was discussed as follows:

**Anne Marie Morris:** Do pharmacists have some training on this?

**Keith Ridge:** Pharmacists will have training, yes, because contractors will have an incentive, if you like, to make sure their staff are well trained; and, indeed, I would expect them to be well trained in this area. It is similar for other professionals, in my view, but certainly for pharmacy, too. In terms of the professional regulatory regime which surrounds pharmacy practice regulated by the General Pharmaceutical Council, there are standards which are directly relevant here: providing patient-centred care, to help people, and to guide them through the system. So, I guess the pharmacy world is doing its best to implement the system as set out.

**Anne Marie Morris:** Don't you think that is asking a bit much, actually, of the pharmacist, whereas if you had a nice easy-to-use computer screen, which, according to Mr Brown, takes three minutes to complete, you would solve the problem, because you must have the internet and if you are there, and the system is there, your knowledge isn't the key issue? It is how good the system is that you are using.

**Keith Ridge:** Again, I am sure that is possible, but I would emphasise what is a pilot around the real-time exemption checking, which is going very well. The staff like it. Okay, it is a small number of pharmacies, but, as Chris said, it will be 1,000 or more later this year, and then it will roll out, I am sure, in due course, where you will be able to exemption-check someone's status in less than a second. So, I think that, for me, feels like the future, where that will help a great deal. And, indeed, in the initial evaluation with a small number of pharmacists it is doing well.

## Parliamentary Questions

A number of questions concerning pharmacy and medicines have been raised in recent months, including:

- Kevan Jones, Labour MP for North Durham, asking what the Secretary of State's policy on community pharmacy closures.
- James Frith, Labour MP for Bury North, asking about the availability of medicines post-Brexit.
- Baroness Redfern, Conservative peer, asking what steps are being taken to increase the range of vaccination sources that could be provided in community pharmacies.
- Chris Evans, Labour MP for Islwyn, asking the Treasury about efficiencies being delivered in the pharmacy sector.

The text of these PQs is included below for reference.

**Chris Evans (Lab) (Islwyn):** To ask the Secretary of State for Health and Social Care, whether the Government has plans to bring forward legislative proposals to reform the pharmacy sector to support the delivery of the NHS Long-Term Plan.

**Seema Kennedy (Con) (South Ribble):** The Department, with NHS England and NHS Improvement, is currently working with the Pharmaceutical Services Negotiating Committee (PSNC) to determine the Community Pharmacy Contractual Framework settlement for 2019/20 and beyond. These are confidential negotiations and as such we are unable to provide any detail on these discussions at this time. The Government is, however, committed to working with the PSNC to deliver a fair settlement for the NHS services community pharmacies provide, and one which will enable us to deliver the NHS Long Term Plan.

**Baroness Redfern (Con):** To ask Her Majesty's Government what steps they are taking to increase the range of vaccination sources that could be provided in community pharmacies through the NHS.

**Baroness Barran (Con):** Vaccination is one of the world's most clinically effective public health interventions. Community pharmacies already provide National Health Service flu vaccination. During the 2018/19 flu season 1,431,538 vaccinations were provided in community pharmacy. NHS England and NHS Improvement are currently undertaking a review of all vaccinations and immunisations and community pharmacy is represented in that review.

**Mr Kevan Jones (Lab) (North Durham):** To ask the Secretary of State for Education, if he will publish the responses to the Institute for Apprenticeship and Technical Education's consultation on the introduction of a five-year pharmacy apprenticeship scheme.

**Anne Milton (Con) (Guildford):** This is a matter for the Institute for Apprenticeships and Technical Education. I have asked its Chief Executive, Sir Gerry Berragan, to write to the hon. Member for North Durham and a copy of his reply will be placed in the Libraries of both Houses.

**Mr Kevan Jones (Lab) (North Durham):** To ask the Secretary of State for Health and Social Care, with reference to recent trends in the number of community pharmacies closing, what his policy is on community pharmacy.

**Seema Kennedy (Con) (South Ribble):** The Department is closely monitoring the market to identify and address issues that may impact patient access to pharmacy services. Access to National Health Service pharmaceutical services remains good: there are over 11,500 pharmacies in England, an increase of approximately 12% in the last decade.

In December 2016, as part of a wider package of reforms and to maintain access to NHS pharmaceutical services, the Government introduced the Pharmacy Access Scheme, which helps to support the financial viability of pharmacies in areas with fewer pharmacies.

**James Frith (Lab) (Bury North):** To ask the Secretary of State for Health and Social Care, what steps he is taking to ensure the availability of medicines after the UK leaves the EU.

**Stephen Hammond (Con) (Wimbledon):** The Government remains committed to leaving the European Union with a deal. However, as a responsible Government, we will continue to prepare to minimise any disruption to the supply of medicines and medical products in a potential 'no deal' scenario.

We are continuing to work with trade bodies and other stakeholders to carefully review the implications of the extension to the Article 50 period until 31 October at the latest before sharing further guidance with industry at the earliest opportunity. On 26 April we wrote to suppliers advising that, until further guidance is provided, all no-deal measures, including stockpiles and plans to route away from the short straits, should remain in place but on hold.

**Steve Double (Con) (St Austell and Newquay):** To ask the Secretary of State for Health and Social Care, how much of the funding allocated to support the roll-out of electronic prescribing and medicines administration systems across the NHS will be allocated during the financial year 2019-2020.

**Caroline Dinenage (Con) (Gosport):** For the financial year 2019-20, £20 million of funding has been allocated to support the implementation of Electronic Prescribing and Medicines Administrations Systems (EPMA) in provider trusts.

Allocations (between trusts and between systems) are based on a bidding process as usual. NHS Improvement have already received some bids for EPMA funding, which were of a high quality. Trusts have been informed that decisions can be expected in summer.

## Conclusion

This paper has been created just for review; no action is required. However, subcommittee members are welcome to share their feedback or questions on any of the above.

## Appendix CPA 08/09/2019

Subject	Wider Public Affairs Work
Date of meeting	September 2019
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	An update on any wider public affairs work with charities and patient organisations
Proposed action(s)	None
Author(s) of the paper	Jessica Ferguson



## Introduction

Below is a round-up of stakeholder engagement undertaken by the PSNC Communications and Public Affairs Team since the last PSNC meeting.

## Party Conference Events

PSNC, along with the NPA, CCA and AIM, are co-hosting roundtable dinner events at the Labour and Conservative conferences in September. The PDA had sought to be involved in these events but their proposal was rejected by the CCA.

The autumn party conferences remain a useful meeting point for MPs and all those seeking to influence them, giving an opportunity for PSNC both to promote its key messages about community pharmacy and to network across the health and social care sector. The events will enable us to engage with a wide range of stakeholders, including some MPs, who could potentially influence policy makers on our behalf.

## Theme

Prevention was agreed as the theme for both events, as one of the key areas of the Long Term Plan which we can contribute to as well as being one of the Health Secretary's priorities. We are currently producing a joint policy paper on the topic to provide the basis of our discussions at the events. This will highlight examples and case studies of how community pharmacy prevention services can help achieve the aims of the NHS Long Term Plan. We also may use it to help to coordinate a joint response to the Prevention Green Paper, the Government's consultation on how to advance preventative healthcare (SDS are discussing this response, in the first instance).

## Attendees

Final guest lists are still being confirmed, but currently we have the following attendees confirmed:

- Moira Auchterlonie, Chief Executive, Family Doctor Association
- Rachel Power, Chief Executive, Patient Association
- Shirley Cramer, Chief Executive, Royal Society for Public Health
- Jeremy Hughes, Chief Executive, Alzheimer's Society
- James Kingsland, President, National Association of Primary Care
- Dr Sohail Munshi, Chief Medical Officer, Manchester Local Care Organisation
- Graham Parsons, Chief Pharmacist, Turning Point
- Martin Sawyer, Executive Director, Healthcare Distribution Association
- Julia Manning, Chief Executive, 2020 Health

The Chief Executive and Director of Communications and Public Affairs will attend both the Labour and Conservative events and conferences.

## RCGP Conference

We will also be exhibiting at the Royal College of General Practitioners' Annual Conference in Liverpool on 24-26 October 2019. In the past, we have found that this conference is a good opportunity to engage with GPs and to promote key messages about community pharmacy to that audience. In previous years we have co-funded a stand with CPW, CPS and CPNI, and this year we will be doing so again. From PSNC, Zoe Long and Melinda Mabbutt will be attending, and we will be preparing resources for the conference as outlined in [Appendix 02/09/2019](#).

## British Lung Foundation

Following the publication of their Taskforce for Lung Health five-year plan, we received a letter asking if we would take expansion of MUR/NMS into negotiations (as discussed in the previous meeting). In June, a

meeting was held with the Chief Executive and Director of Communications and Public Affairs to discuss community pharmacy's role in delivering the NHS Long Term Plan and how the charity could support the profession more generally. This has led to Rosie Taylor being asked to join a medicines optimisation working group of the charity's Taskforce for Lung Health, and the charity remains in contact and will attend our party conference events.

### **Healthwatch England**

Rosie Taylor and Zoe Long had a constructive meeting with Genevieve Ileris, External Affairs Manager at Healthwatch England. We discussed possible ways to work together to better link up LPCs with local Healthwatch branches, and to help the branches to understand all that community pharmacy has to offer, and we will pick this joint work up in the autumn.

### **Conclusion**

This paper has been created just for review; no action is required. However, subcommittee members are welcome to share their feedback or questions on any of the above.