

# Community Pharmacy IT Group (CP ITG) meeting agenda

## to be held on 21st September 2022 via videoconference

### from 10am - 12.55pm

**About CP ITG:** The Group was formed in 2017 by [PSNC](#), [NPA](#), [RPS](#), [CCA](#) and [AIMp](#). The meetings are attended by members representing these five organisations and representatives from [pharmacy system suppliers](#), [NHSBSA](#), [NHS Digital](#), [NHS England pharmacy team](#), and [NHS England's Transformation Directorate](#). Further information on the group can be found on the [PSNC website](#).

**Members:** Matthew Armstrong (Chair), Steve Ash, David Broome (Vice Chair), Darryl Dethick, David Evans, Nick Kaye, Sunil Kochhar, Fin McCaul, Graham Phillips, Darren Powell, George Radford, Ravi Sharma, Craig Spurdle, Iqbal Vorajee and Heidi Wright.

**Secretariat:** [Dan Ah-Thion](#).

**Social media:** To tweet about the group/meeting (excluding anything confidential) use the hashtag, *#cpitg*

**Meeting format:** The meeting will be divided into two sections, with a twenty-minute break from 11:10-11:30.

- Welcome from Chair** 10.00-10.05am
- Apologies for absence from voting members**  
At the time of the agenda being finalised, apologies for absence had been received from Fin McCaul and Craig Spurdle.
- Minutes of the last meeting**  
The minutes of the meeting held on 8th June 2022 were emailed to the group along with the agenda.
- Actions and Matters Arising**  
Outstanding actions have been carried forward within the workstream updates appendix.

#### Actions (session 1 of 5: Services IT and standards)

- Pharmacy IT priorities: overview** (page 4) ([Appendix CP ITG 01/09/22](#)) 10.05-10.10am
- Independent prescribing: upcoming changes** (page 4) ([Appendix CP ITG 01/09/22](#)) 10.10-10.20am
- CPCS Minor Illness Post Event Message** (page 5) ([Appendix CP ITG 02/09/22](#)) 10.20-10.30am
- Professional Record Standards Body (PRSB) update** (page 5) ([Appendix CP ITG 02/09/22](#)) 10.30-10.55am

9.	<b>CPCF IT: Toolkits</b> (pages 5-6) ( <a href="#">Appendix CP ITG 02/09/22</a> )	10.55-11.00am
10.	<b>Contraception Service technical toolkit</b> (page 6) ( <a href="#">Appendix CP ITG 02/09/22</a> )	11.00-11.10am
<b>Break</b>		<b>11:10-11.30</b>
<b>Actions</b> (session 2 of 5: Electronic health records)		
11.	<b>GP Connect: Access Records</b> (page 7) ( <a href="#">Appendix CP ITG 03/09/22</a> )	11.30-11.34am
12.	<b>Electronic Health Records</b> (page 7) ( <a href="#">Appendix CP ITG 03/09/22</a> )	11.34-11.35am
<b>Actions</b> (session 3 of 5: Payment APIs)		
13.	<b>Payment and data Manage Your Service (MYS) APIs for CPCF services</b> (page 8) ( <a href="#">Appendix CP ITG 04/09/22</a> )	11.35-11.40am
<b>Actions</b> (session 4 of 5: Referrals and appointments)		
14.	<b>Booking and Referral Standards (BaRS)</b> (page 9) ( <a href="#">Appendix CP ITG 05/09/22</a> )	11.40-11.45am
15.	<b>Cancer referrals pilot</b> (page 9) ( <a href="#">Appendix CP ITG 05/09/22</a> )	11.45-11.55am
16.	<b>Vaccinations</b> (page 10) ( <a href="#">Appendix CP ITG 05/09/22</a> )	11.55-12.05pm
17.	<b>Appointments standards</b> (page 10) ( <a href="#">Appendix CP ITG 05/09/22</a> )	12.05-12.15pm
<b>Actions</b> (session 5 of 5: EPS and authentication)		
18.	<b>Electronic Prescription Service (EPS)</b> (page 11) ( <a href="#">Appendix CP ITG 06/09/22</a> )	12.15-12.25pm
19.	<b>Real Time Exemption Checking (RTEC)</b> (pages 11-12) ( <a href="#">Appendix CP ITG 06/09/22</a> )	12.25-12.30pm
20.	<b>Smartcard admin portal</b> (page 12) ( <a href="#">Appendix CP ITG 06/09/22</a> )	12.30-12.40pm
21.	<b>Smartcard identity checking process to be digitized: Apply for Care ID'</b> (page 12) ( <a href="#">Appendix CP ITG 06/09/22</a> )	12.40-12.50pm

## Report

22. **Updates on other CP ITG workstream projects** (pages 13-19)  
([Appendix CP ITG 07/09/22](#))
23. **Post-meeting CP ITG communications, messages, upcoming consultations** 12.50-12.50pm
24. **Any other business and close** 12.50-12.55pm

## Upcoming pharmacy/healthcare IT events

- [‘Connecting with & benefitting from patient records webinar’ Thurs 8th Dec 2022](#) 9.30am-11am (provisional date for this CP ITG / NHS event): During this webinar, delegates will be given an update on the work by the NHS and Community Pharmacy IT Group’s (CP ITG) work to support increasing community pharmacy access to records. Presenters will include NHS Digital GP Connect team, and the NHS Shared Care Record (ShCR) team. Increased records access for health and care staff, including pharmacy teams, was outlined as one of the priorities of the NHS Long Term Plan.
- More listed at: [psnc.org.uk/itevents](https://psnc.org.uk/itevents); and
- [digitalhealth.net/upcoming-webinars-and-events](https://digitalhealth.net/upcoming-webinars-and-events).

## Future meetings

Weds 16th November 2022  
Weds 7th June 2023

Weds 8th March 2023  
Weds 20th September 2023

Subject	Pharmacy IT priorities and upcoming independent prescribing changes
Date/time of meeting	21st September 2022: 10.05-10.20
Status	Public
Presenters	Gemma Ramsay and Libby Pink (both NHS England)
Overview	NHS policy makers highlighted pharmacy IT priorities. Changes to independent prescribing arrangements are anticipated from next year.
Proposed action	The group is to be updated and to discuss developments.

#### **a. Pharmacy IT priorities: overview** (10.05-10.10)

Following a joint letter from pharmacy system suppliers to DHSC and NHS bodies, a [joint reply was provided by the NHSE&I pharmacy team and NHSTD, NHSBSA, and DHSC about proposals for community pharmacy IT priorities](#). This outlined priority areas:

- i. PRSB Community Pharmacy Data Standard / Community Pharmacy Contractual Framework (CPCF) IT;
- ii. records access via GP Connect and Shared Care Records (ShCRs);
- iii. payment and data APIs
- iv. Booking and Referral Standards (BaRS); and
- v. EPS next generation.

(Note: The items on this list are in no particular order.)

Over the summer, PSNC conducted a poll of system suppliers in order to capture their detailed feedback about these topics to support further progress.

These priorities align with the [CP ITG's vision](#) and [CP ITG's paper about digital transformation within the NHS](#). The CP ITG has and will continued to be supportive of these priorities and will work with the NHS on the next steps to progress these areas. The group's September meeting will be structured to focus on the priority areas.

Initial feedback indicates that an extra priority could be considered for adding: easing the login burden by expanding the 'Login with NHSmail' and transitioning towards 'Care Identity Service 2' to enable the pharmacy sector to move away from using physical NHS Smartcards.

Gemma Ramsay (NHS England) will provide an update on the key NHS IT priorities for pharmacy.

#### **b. Independent prescribing** (10.10-10.20)

The General Pharmaceutical Council (GPhC) has consulted and reported on [changes to the requirements for entry to independent prescribing courses](#), and the Pharmaceutical Journal has reported that [independent prescribing piloting may begin across England from 2023](#).

Libby Pink (NHS England) will provide an update about any IT implications associated with the upcoming independent prescribing developments.

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Subject	Priority 1/5: Community Pharmacy Data Standard and CPCF IT
Date/time of meeting	21st September 2022: 10.20-11.10am
Status	Public
Presenters	Fleur Bradley (NHS Digital), Claire Hobbs (NHS England pharmacy team), Zoeta Brown (NHS England's Transformation Directorate), and Martin Orton (PRSB)
Overview	The current and future use of the PRSB's relevant standards will be explored – including the Community Pharmacy Data Standard.
Proposed actions	The group is to be updated and to discuss developments.

#### [a. NHS Digital update on CPCS Minor Illness Post Event Message](#) (10.20-10.30)

Fleur Bradley (NHS Digital) will provide an update about NHS Digital's recent and upcoming work in this area.

#### [b. Update from Professional Record Standards Body \(PRSB\)](#) (10.30-10.55)

Community pharmacies now offer an expanded range of services to support patients and members of the public. The Professional Record Standards Body's (PRSB's) [Community Pharmacy Data Standard](#) defines the subset of information that should be sent to the GP record for specific services. NHS Digital has now updated its information about notifications from pharmacy to GP systems using the [Community Pharmacy Data Standard](#).

The PRSB Director of Delivery & Development, Martin Orton, will provide an update on the following topics:

- i. Work that confirmed the [Core Information Standard](#) is suitable for Shared Care Records (ShCRs) for the PODAC (Pharmacy, Optometry, Dentistry, Ambulance and Community Care) settings.
- ii. [111 Referral](#) as part of Booking and Referral Standard (BaRS) for 111 to community pharmacy.
- iii. New developments due to start for GP and GP Online Consultation referral to community pharmacy.
- iv. Work to revise and future-proof the Community Pharmacy Data Standard and support implementation.
- v. [Standards Partnership Scheme](#): Working with suppliers to support implementation of standards.
- vi. Other standards relevant to community pharmacy.

There will be an opportunity for questions and answers.

#### [c. CPCF IT: Toolkits](#) (10.55-11.00)

NHS England has commissioned work to create technical toolkits to support the development of IT for CPCF clinical services.

The toolkits have been published in draft format for:

- [Blood Pressure Check technical toolkit](#);
- [Smoking Cessation technical toolkit](#);
- [Contraception Management technical toolkit](#);
- [Discharge Medicines Service technical toolkit](#); and
- [New Medicine Service technical toolkit](#).

The [Community Pharmacist Consultation Service \(CPCS\) technical toolkit](#) is also available from the [NHSBSA website](#).

A [prior information notice](#) was issued to suppliers asking them to review and comment on the specific toolkit requirements. PSNC communicated with suppliers about these drafts.

NHS England hosted multiple engagement sessions on the toolkits with suppliers – joint and one-to-one meetings – the CP ITG secretariat also attended these. NHS England’s Transformation Directorate produced a log to capture and address comments. All the questions from suppliers have been collated, and NHS England has prepared a FAQs document, which was distributed to suppliers during early September 2022 by:

- the National Procurement Hub: to those suppliers which had responded to the prior information notice; and
- CP ITG secretariat: to CP ITG suppliers.

Zoeta Brown (NHS England’s Transformation Directorate) is to provide a verbal update.

#### [d. Contraception Service technical toolkit](#) (11.00-11.10)

Claire Hobbs (NHS England) will provide an update about the work on the [Contraception Service technical toolkit](#).

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Subject	Priority 2/5: Electronic health records
Date/time of meeting	21st September 2022: 11.30-11.35
Status	Public
Presenters	NHS Digital and Dan Ah-Thion (PSNC)
Overview	The GP Connect Access Record programme continues to develop. A pharmacy records event will be held later this calendar year to which the group, LPCs and others will be invited.
Proposed actions	The group is to be updated and to discuss developments.

#### **a. GP Connect** (11.30-11.34)

[GP Connect](#) enables GPs and other authorised health care organisations to link in with GP system information, enabling those authorised to use functionality including “Access Record”. The GP Connect Access Record programme allows authorised clinicians access to GP patient records in a HTML read-only format or an editable format. The minutes and [slides](#) from the group’s previous meeting outline additional developments concerning the GP Connect Access Record. The group has requested for the NHS Digital GP Connect team to share the full GP Connect Access Record Pharmacy Dataset.

A verbal update will be provided by James Palmer (NHS Digital).

#### **b. Electronic health records event** (11.34-11.35)

The CP ITG, together with NHS England’s Transformation Directorate, are hosting a ‘Connecting with & benefitting from patient records webinar’ on Thurs 8th Dec 2022 for LPCs and CP ITG focused on records future and improving contractors’ access to Shared Care Records (ShCRs), GP Connect Records and other records. All [CP ITG attendees and LPC Chief Officers are encouraged to attend. LPC members and contractors with an interest in improving contractor access to records are encouraged to also register to attend this event.](#) Dan Ah-Thion and NHS England’s Transformation Directorate will provide a short verbal update about this event.

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Subject	Priority 3/5: Payment and data Manage Your Service (MYS) APIs for CPCS services
Date/time of meeting	21st September 2022: 11.35-11.40
Status	Public
Presenters	Ben Tindale (both NHSBSA)
Overview	NHSBSA have issued draft MYS API documents to suppliers (Hypertension Case-Finding and Discharge Medicines Service). NHSBSA are seeking further supplier comments.
Proposed actions	The group is to be updated and to discuss developments.

NHS England and PSNC have been keen for suppliers to be given information about the service, including the IT implications and dataset requirements. NHSBSA and NHS England have further developed the Hypertension case-finding (Blood Pressure Check) and Discharge Medicines Service (DMS) Manage Your Service (NHSBSA MYS) APIs. The NHSBSA has issued this to suppliers. Suppliers have been invited to share any feedback with NHSBSA by email ([nhsbsa.mys-platform@nhs.net](mailto:nhsbsa.mys-platform@nhs.net)). NHSBSA continues to encourage suppliers to share feedback if they have not already done so. Only one supplier has shared substantive feedback with the NHSBSA so far. The API documents for these services will help the future development of other API documents.

CP ITG action:

- Suppliers are encouraged to comment on the draft DMS and HCF API documents and send feedback to NHSBSA.
- Ben Tindale (NHSBSA) will provide a verbal update.

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Subject	Priority 4/5: Referrals and appointments
Date/time of meeting	21st September 2022: 11.40-12.15
Status	Public
Presenters	Wasim Baqir, Mark Bougard and Marta Senger
Overview	A variety of referral and appointment systems/standards continue to be developed.
Proposed actions	The group is to be updated and to discuss developments.

#### **a. Booking and Referral Standards (BaRS) (11.40-11.45)**

[NHS Digital's BaRS programme](#) aims to enable [booking and referral information to be sent between NHS service providers in a format useful to clinicians](#). The intention is that BaRS will eventually be available in all care settings. Pharmacy use cases for the standard are currently being considered – including the potential for referrals from NHS 111 to community pharmacy. NHS England's Transformation Directorate IT standards roadmap highlights BaRS as a priority.

The BaRS formal standard was published in June 2022, starting with a standard deployed for use between NHS 111 and emergency departments, 999 and Clinical Assessment Services, and at other key interfaces in the urgent and emergency care system (target date March 2025). The Pharmacy Integration team, along with others such as the Community Pharmacy IT Group, are supporting the development of pharmacy use cases.

The NHS Digital BaRS user research team are conducting interviews with health and care staff to inform the programme of work and support future business cases for expansion of the standard. [PSNC and NHS Digital are encouraging community pharmacy teams to share their views about bookings and referrals](#). The BaRS team would like to hear the view of pharmacists, pharmacy technicians, dispensers and pharmacy counter assistants. To date, the feedback submitted has only been from pharmacists. The BaRS team are conducting interviews (usually lasting 30-45 minutes) to hear more about the current experiences and the future preferences concerning sending and receiving referral messages.

CP ITG feedback has indicated that the BaRS programme should be expanded to incorporate NHS appointments standards.

NHS Digital will provide a verbal update.

#### **b. Cancer referrals pilot (11.45-11.55)**

The NHS Long Term Plan committed to increasing the proportion of cancers caught early, when they are easier to treat, from half to three in four. NHS England previously created a plan for pilots.

Wasim Baqir (NHS England) will provide an update about the pilot planning and IT implications.

### c. Vaccinations (11.55-12.05)

Following patients booking COVID-19 vaccination appointments via [the NHS National Booking Service \(NBS\)](#), NHS England are running a 'proof of concept' to explore expanding NBS into community pharmacy trial sites to enable patients to book seasonal flu vaccination appointments.

It is also planned that patients from March 2024 will be able to book a flu vaccine appointment using NHS App or nhs.uk.

Mark Bougard (NHS Digital) will provide an update.

### d. Appointments standards (12.05-12.15)

The group previously considered the management of appointments using IT systems. Some past feedback from the group is below:

- Integration is required across appointment systems.
- Avoidance of the management of multi appointment systems.
- Patients should receive sight of appointments information.
- The BaRS programme should incorporate appointment standards.
- Appointment systems should seek to reduce the login burden.

CP ITG action: The group will discuss whether:

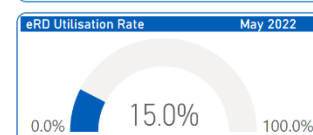
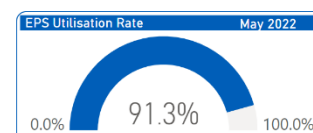
- i. Community pharmacy appointment systems should align with the NHS App?
- ii. The principles that should govern the next steps regarding the development of IT for pharmacy appointments.
- iii. Any other comments about NHS appointment standards.

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Subject	Priority 5/5: EPS and authentication
Date/time of meeting	21st September 2022: 12.15-12.50
Status	Public
Presenters	EPS: Rebecca Jarratt (Programme Head, EPS Next Generation, NHS Digital) RTEC: Dan Ah-Thion Smartcard admin portal: Jeremy Wickremer and Benjamin Turner (both from the NHS Digital) Apply for Care ID: Will Turner / Eoin Byrne (both from NHS Digital)
Overview	NHS Digital will provide an update to the group.
Proposed actions	The group is to be updated and to discuss developments.

#### a. Electronic Prescription Service (EPS) (12.15-12.25)

- NHS Digital EPS and eRD utilisation rate statistics (for the May 2022 dispensing month) are set out on the right.
- NHS Digital would like to talk to pharmacy team members about their experience using EPS. User feedback is essential to inform future improvements and the next generation of the system. Please could pharmacy EPS users within the group take part and provide views, by signing up at [https://feedback.digital.nhs.uk/jfe/form/SV\\_eu4jQRNbJooQxoO](https://feedback.digital.nhs.uk/jfe/form/SV_eu4jQRNbJooQxoO). This may involve a short telephone interview.
- [The content on the eRD page of the PSNC website has recently been fully refreshed](#). Alongside the updated content on the webpage, several new materials have been published, covering:
  - [The benefits of eRD to contractors, general practice and patients](#);
  - [How the eRD cycle works](#);
  - [Working with GP practices to roll out eRD and optimise its use](#);
  - [Business change workshop actions list template](#); and
  - [Repeat medicines synchronisation form](#).
- LPCs will soon receive a regular breakdown of eRD performance within their area from PSNC.



Rebecca Jarratt (Programme Head, EPS Next Generation) from NHS Digital, will update the group. The group is to discuss developments.

#### b. Real Time Exemption Checking (RTEC) (12.25-12.30)

The NHSBSA continues to lead the RTEC project. The NHSBSA, DWP and the RTEC steering group plan has supported the expansion of the DWP RTEC functionality to additional pharmacy contractors. [PSNC communicated during July 2022 that RTEC DWP roll-out had reached over 80% of pharmacies](#). Contractors using RTEC should now be able to use the RTEC DWP feature. PSNC and other RTEC steering group members are exploring what should be added to the RTEC roadmap. Examples requested before included:

- if patient updates address at GP, NHSBSA get this, to reduce RTEC unknowns confirmed instead of 'RTEC yes'
- patients have a 'checker' which uses same info as presented in RTEC, to reduce scenarios where

patient believes must pay charge, but PMR says 'RTEC yes'

Note: Both these examples would require significant technical change to be addressed. Dan Ah-Thion will ask the group whether there are additional items which should be considered for the RTEC roadmap.

CP ITG action:

- The group may suggest items for the RTEC development roadmap.

#### [c. Smartcard admin portal](#) (12.30-12.40)

Currently pharmacy contractors use the Care Identity Service (CIS) portal to administer their NHS Smartcards. Example functionality includes the ability to register to be able to 'self-unlock' and the ability to request new Smartcards. The Care Identity Management (CIM) portal is being developed so that more Smartcard users can use the portal to administer their Smartcards. The current plan is to close the CIS portal, and to transition Smartcard users to the CIM portal.

CP ITG action:

- NHS Digital are seeking additional feedback from pharmacy teams about the existing portal:
  - i. How do and your teams you usually go about unlocking Smartcards?
  - ii. What do you think could be improved?
- Jeremy Wickremer and Benjamin Turner (both from the NHS Digital Smartcard admin portal) will provide an update.
- CP ITG pharmacy representatives, contractors and team members are encouraged to participate in user research by emailing [iamplatforms@nhs.net](mailto:iamplatforms@nhs.net) using the subject title "CIM research".

#### [d. Smartcard identity checking process to be digitized: Apply for Care ID](#) (12.40-12.50)

Pharmacy team members must authenticate their identities to be linked to their Smartcards. Prior to the pandemic, pharmacy team members had to attend face-to-face meetings with local Registration Authority (RA) staff. The NHS implemented emergency policies throughout the pandemic so that staff could authenticate themselves remotely, e.g., via video calls. These emergency policies will end shortly.

NHS Digital hopes that a successful pilot will lead to the rollout of 'Apply for Care ID'. This programme will enable health care staff use an NHS authenticator app as an alternative to a face-to-face visit to the RA. The service has been in pilot since April and the project team has incorporated feedback from PSNC in their plans. Further pilot work will involve participating organisations (including pharmacy contractors) inviting individuals to go through the steps. Extra pharmacy team and head office views are needed to support the discovery and business cases for a process which could involve pharmacy teams being given an offer to authenticate themselves via a phone app. The pilot learning should consider technical aspects (device standards, browser standards and public cloud access), procedural aspects (what documentation is required), and the people aspects. The minutes and [slides](#) from the group's previous meeting set out additional developments about Apply for Care ID.

CP ITG action:

- CP ITG pharmacy representatives, pharmacy contractors and team members are encouraged to participate in the user research by emailing [iamplatforms@nhs.net](mailto:iamplatforms@nhs.net) using the subject title "Apply for Care ID research".
- Will Turner and Eoin Byrne (both from NHS Digital) will provide an update.

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Subject	For report: Updates on other CP ITG work streams
Date/time of meeting	21st September 2022
Status	Public
Overview	This appendix provides a status report on other <a href="#">work plan areas</a> which will not be covered in detail during the meeting due to time constraints. The group members are asked to consider the reports, take appropriate actions on the next steps and provide comments on these by emailing Dan Ah-Thion ( <a href="mailto:it@psnc.org.uk">it@psnc.org.uk</a> ) before, or after the meeting, or by commenting during the 'any other business' section of the meeting, if time. The group is also asked to send concerns about any of the next steps proposed before the meeting to <a href="mailto:it@psnc.org.uk">it@psnc.org.uk</a> . If no objections are received, the group will move forward under the assumption that the members agree.

1a

## Supporting the development of interoperability/integration

Relevant webpages include: [/interoperability](#) and [/dosesyntax](#)

### NHS Profile Manager

- Previously, community pharmacy contractors used two different NHS systems to ensure their pharmacy details were up to date in the Directory of Services (DoS) and on the NHS website: the NHS website profile editor and the DoS Profile Updater.
- A new tool, [NHS Profile Manager](#) launched to replace both the DoS Updater and the NHS website editor during late June 2022.
- A series of [NHS Profile Manager video tutorials](#) from NHS Digital can be used to support pharmacy teams with using the tool.
- PSNC has been a member of the NHS Profile Manager steering group since June 2021 and continues to participate in related sub-groups to help with the project rollout and any deployment hurdles.
- PSNC published a news item about [use of NHS Profile Manager regarding the 19th September 2022 bank holiday](#).

### Next steps:

- Multiples head office staff that use NHS Profile Manager should create a personal NHSmail account if they have not already done so. Advice is available within the '*NHSmail personal accounts: creation and linking*' section of PSNC's [NHSmail](#) webpage.
- NHS Digital will be working with the pharmacy multiples regarding the NHS website and DoS Application programming interface (API).
- If the group wants to discuss the [potential enhancements on the wishlist](#), please contact [it@psnc.org.uk](mailto:it@psnc.org.uk).

### Shared Care Records (ShCR): status

- Shared Care Records (ShCR), formerly 'Local health and shared care records', are patients' electronic health records. ShCRs include information from multiple care settings, e.g. GP practice and secondary care. Most English patients live within an area with a records project ongoing. Shared care records are emerging across the country and the IT has been maturing so that over time more health and care professionals can access these. LPCs and/or local contractors can

continue to take steps to gain pharmacy access and should use the guidance set out at the 'Engagement' section of the [community pharmacy and ShCRs webpage](#).

- PSNC published a new ShCR case study during July 2022: [Somerset Shared Care Record case study \(SIDeR\)](#). Digitalhealth.net reported that [Somerset Integrated Digital ShCR is now being used 13,000 times a month](#) (by a mixture of healthcare settings).
- PSNC continues to work with the NHS Transformation Directorate and other relevant stakeholders on the actions set out within the [Shared Care Record \(ShCR/LHCR\) NHS Transformation Directorate and pharmacy outputs](#) and [actions](#) documents. LPCs, ShCR project teams and other parties supporting ShCR pharmacy deployment are encouraged to contact [it@psnc.org.uk](mailto:it@psnc.org.uk) with any technical ShCR information so that supplier and IT support helpdesks can authorize multiple ShCR domains simultaneously.

## Records

- [SCR AI changes continued beyond COVID-19 legislation which expired at the end of June 2022](#). PSNC and the Community Pharmacy IT Group have campaigned for pharmacy teams' access to SCR AI to be extended beyond the pandemic by sharing case study information. If you have any examples of how SCR with AI has enhanced patient care, in comparison to the normal SCR access, please contact [it@psnc.org.uk](mailto:it@psnc.org.uk), as such examples could be used to support the case for permanent access to SCR with AI and other health records for pharmacy.
- PSNC conducted some interviews with pharmacists that frequently used ShCR systems. Some of the comments about ShCR and GP Connect Access Record included the below:
  - If there is integration with both, this provides continuity if one system experiences an outage.
  - ShCRs and GP Connect each have some of their own benefits and challenges.
  - ShCR records can include structured information from across multi sectors e.g. helping with the delivery of Discharge Medicines Service (DMS) when discharge information can reach the pharmacy before the GP Practice.
  - GP Connect records are useful for a lot of dispensing work, but record data from other settings does not always impact the GP record swiftly and in a structured way.

## Standards and interoperability

- NHS Digital's Programme Head for GP Data outlined [the benefits and challenges of health data sharing](#).
- At a previous meeting, the group agreed to support the capability for anonymised data to be accessible, so that pharmacy teams' interventions can start to be auditable, and the value of community pharmacy can be better demonstrated. If PMR systems were to be adapted to allow such data sharing, it would require the development of a roadmap and a standard approach to data provision, which may benefit from use of SNOMED CT clinical terms. If you would like to help with this work, please contact [it@psnc.org.uk](mailto:it@psnc.org.uk).

## Recommended minimum transfer dataset for pharmacies switching from one patient medication record (PMR) system to another

PSNC previously supported developing a recommended minimum dataset for cases where a pharmacy contractor has switched from one PMR system to another. For the sake of continuity of patient care, it is critical for some patient information to be transferred from the old to the new system. A [dataset](#) is being developed incorporating the comments from previous group meetings and suppliers. An [associated specification document](#) is also being developed. A working group of supplier representatives chaired by PSNC has conducted monthly meetings to discuss the detail of the proposed documents. This work is identifying areas where PMRs may wish to consider future proofing by exploring opportunities to align the way data is stored within the local PMR to various national standards. PSNC is aligning this further

with individual NHS data dictionary standards to support the next steps. The working group is to meet again once the dataset is further developed.

1b	<b>Supporting NHSmail</b>
	Relevant webpage(s) include: <a href="#">/NHSmail</a>

- The [Virtual Visits tool](#) provides pharmacy contractors with an appointments system so that they can notify patients and better manage appointments. Pharmacy teams can also use the Virtual Visits tool to conduct face to face or virtual patient consultations (audio or video).
- The Virtual Visits tool works in conjunction with NHSmail Microsoft Teams and the Microsoft Booking platform. To participate in the pilot, you must have an active personal NHSmail account, access to a shared NHSmail inbox, MS Teams installed on a computer or tablet and a computer or device with a webcam. [Contractors that have not done so should register interest with taking part in the Virtual Visits pilot via this webform.](#)
- Since the recent launch of the NHS Profile Manager tool, which uses NHSmail accounts to allow pharmacy team members to login to it, both PSNC and the NHSmail team have received an increasing number of questions from pharmacy contractors regarding NHSmail. A selection of NHSmail queries that have been submitted by contractors are available within a [new PSNC NHSmail FAQs briefing factsheet](#).

1c	<b>Supporting maintenance and demonstration of data security and information governance arrangements</b>
	Relevant webpage(s) include: <a href="#">/ds</a>

### Data Security and Protection Toolkit (DSPTK)

PSNC updated its Data security and information governance hub and published new guidance for the 2021/22 Toolkit submission. Additionally, PSNC and NHS Digital jointly presented a webinar on the topic, with around 500 people registered to attend the webinar on the night. The webinar was subsequently made available on demand. PSNC and NHS Digital are working on the arrangements for the community pharmacy toolkit publication ahead of the next June 2023 deadline. If you would like to feed into the development of the 2022/23 toolkit, please email [it@psnc.org.uk](mailto:it@psnc.org.uk).

### Other data security updates

- NHS Digital blogged about how [networking, and the NHS Cyber Associates Network \(CAN\), plays a part in mitigating cyber threats](#).
- [The UK government called for views from the tech industry on enhanced security and privacy requirements for firms running app stores and developers making apps. The UK government's review into the app store ecosystem from December 2020 to March 2022](#) found that malicious and poorly developed apps continue to be accessible to users, therefore it is evident that some developers are not following best practice when creating apps.
- The National Cyber Security Centre (NCSC) published a report on [app store risks](#).
- A cybersecurity expert considered the [ransomware attacks threatening the NHS](#).
- Hsj.co.uk provided [tips about building resilience against major cyber-attacks](#).

2a	<b>Support reduced burden through tackling issues related to the practical use of pharmacy IT and promoting good IT practices</b>
	Relevant webpages include: <a href="#">/itworkflow</a>

- NHS Digital ran [wireless tech trials to improve health and care service processes](#).

## Usability

- NHS Digital blogged about [a new approach to supporting product development involving measuring the development team’s maturity](#).
- NHS Digital blogged about [Why creating an online service is more than just digitising a form](#).

3a	<b>Supporting the development of pharmacy systems</b>
<i>Relevant webpages include: <a href="#">/systems</a></i>	

- The group’s “[CP ITG- Use and development of pharmacy systems - requested features](#)” list was updated during September 2022 – this is accessible on [PSNC’s system usage webpage](#).

3b	<b>Supporting Electronic Prescription Service and its enhancements</b>
<i>Relevant webpages include: <a href="#">/eps</a>, <a href="#">/rtec</a> and <a href="#">/itfuture</a></i>	

- NHS Digital is conducting a review of [EPS nomination reporting](#). The review will involve a data cleanse, removing nominations which are of deceased, superseded, invalid, and test patients from the reported figures. The date of this change will be Monday 3rd October 2022. The change will affect the count of nominations only - the format of the data will remain unchanged.

4a	<b>Consider the development of apps, wearables and technologies in healthcare</b>
<i>Relevant webpages include: <a href="#">/apps</a></i>	

## NHS App

- NHS Digital blogged about how [suppliers could start to more easily integrate with the NHS App](#).
- The NHS App team are continuing to work on existing and future features including:
  - *Booking or managing a vaccination* - Currently patients can book or manage their vaccination appointments using the National Booking Service. As part of this service, they are required to answer questions about their health circumstances and are then offered a vaccination appointment based on the results.
  - *Personal Health Records* integration with the NHS App.
  - *Notifications and messages* direct to the NHS App: a pilot with 7 GP practices was concluded successfully with positive feedback from members of the public, GPs and communication service providers. Messages could include reminders for appointments or online consultations.
  - *Access to GP health records*. From late 2022, patients with online accounts such as through the NHS App will be able to read new entries in their health record. This applies to patients whose practices use the TPP and EMIS systems.

## NHS account

- The NHS website has adjusted its use of terminology used regarding accessing certain NHS services online. The NHS website now call this ‘logging into the NHS account’, whether by NHS App or the NHS website.
- [PSNC updated its information about NHS account](#).



- The NHS account team provided updates about the changes made to NHS account functionality. This includes the latest updates, bug fixes and new features. See: [NHS account release notes](#).

5a	To support useful and usable IT beyond pharmacy PMR systems and EPS
	Relevant webpages include: <a href="#">/itfuture</a>

### IT policy: organisational changes

- [Sajid Javid resigned a week after the digital health and care plan had been published](#).
- [Steve Barclay was appointed Secretary of State for Health and Social Care](#).
- [Mike Potter was appointed as the government’s chief digital officer](#).
- [NHS Digital launched an Innovation Framework for GP IT suppliers](#).
- [Two NHS trusts will end their partnership with health tech company Babylon](#).
- [NHS England chief executive spoke on plans to make the organisation ‘30 to 40 percent smaller’](#).

### Artificial Intelligence (AI)

- Digitalhealth.net reported on [AI bias within systems, and how to avoid it](#).
- An AI expert set out [the pros and cons of implementing AI within healthcare](#).
- [Trust in AI among healthcare staff and patients ‘will improve with regulation’](#) according to a report produced by law firm DAC Beachcroft.
- The Government published a policy paper, [Establishing a pro-innovation approach to regulating AI principles for AI regulation](#).
- HSJ.co.uk reviewed the recent work from [the NHS AI lab](#).
- NHS AI Lab produced a report: [Understanding healthcare workers’ confidence in AI](#).

### IT policy: priorities, reports and the future

- NHS Digital signed a deal with Netcompany to deliver [improvements to NHS Digital’s Personal Demographic Service](#). The work involves “several initiatives targeted at increasing the use of NHS number across digital services by making it easier to look up through APIs.
- Research indicates a survey’s respondents views within Trusts indicated that [Legacy systems and lack of tech expertise and leadership pose major barriers to NHS transformation](#).
- [American health giant UnitedHealth Group has said it will acquire EMIS Group](#).
- The [government called for evidence on discrimination within medical devices](#) - based on patients’ social or demographic characteristics.
- NHS Digital published [a new standard for creating online health content](#).
- NICE published [Evidence standards framework \(ESF\) for digital health technologies](#).
- NHS Digital blogged about the [lessons for IT projects from the COVID-19 home testing rollout](#).
- NHS Providers published the fifth part of its guide to boost board member’s confidence in digital: *It set out [principles for successful digital delivery](#) and outlines practical take-aways for trust leaders, as well as [a factsheet](#) and highlighting key considerations that board members should be aware of when building and deploying digital services. The eight ‘how to’ principles are:*
  1. *Deliver things that patients and staff need*
  2. *Set clear, realistic goals*
  3. *Test, measure and learn how it is working*
  4. *Think long term, deliver short term*
  5. *Invest in a dedicated, cross-functional inhouse digital team*
  6. *Get the best out of technology suppliers*
  7. *Build trust not barriers*
  8. *Not sticking to the wrong plan.*

## IT policy: Integrated Care Systems (ICS)

- techUK published a report on [What should ICS prioritise to make digital, data and technology work for them and their populations? \(pdf report\)](#). The report was written in collaboration with techUK's Health and Social Care Council, the supplier community. It includes case studies and five key recommendations for ICS. [UKauthority.com reported on the techUK's work](#).
- HSJ.co.uk opined on [how ICSs could best benefit from digital technology](#).
- [Better's Chief Technology Officer commented on the digital challenges with ICSs achieving integrated care](#).
- [Integrating Digital Health and Care 2022 webinars were made available as videos on-demand](#). These videos explored the digital innovation and integration taking place and the latest in the development of ICSs.

## IT policy: health and care around the globe

- HealthcareITnews.com opined on [What can Europe do to bridge the digital health divide](#).
- Weforum.org considered [How can countries achieve digital maturity in healthcare](#). And compared digital maturity across multi countries.
- [Apple set out its current and future plans for healthcare](#).
- [Google faces a lawsuit regarding use of millions of UK citizen's medical data](#).
- [Amazon is set to acquire primary care tech provider, One Medical](#).

## IT policy (future)

- Digitalhealth.net opined on [What the end of Control Of Patient Information \(COPI\) emergency measure could mean for digital health innovation](#).
- Health Tech Trends hypothesised on [what digital primary care will look like in two, five and ten years](#).
- Alcideon's Chief Technology Officer argued that [the future of health care systems may lie in open standards and open APIs](#).
- Loadbalancer.org set out [improvements that might be made to patient care through the use of technology](#).
- The Medical Futurist speculated about a possible [increased role for lifestyle medicine](#).

## Innovation

- [PRSB launched the #CareAboutMe campaign](#) to raise awareness of the About Me standard.
- [Boots completed a test flight from Portsmouth to the Isle of Wight which involved prescription-only-medicines being delivered by drone](#).
- [NHS is to pilot smart goggles for community nurses to free up their time](#).
- Mhealthintelligence.com explained [What Are Digital Therapeutics and Their Use Cases?](#)
- GPonline.com reported on [NHS England piloting online patient registration for GP practices](#).

## Genomics

- [Pharmacy professionals were invited to use a new Genomics Centre for Pharmacy Postgraduate Education \(CPPE\) learning portal](#).
- A study suggested that [Genome screening within Primary Care may be feasible](#).
- The NHS England Genomics team have produced draft and other materials:
  - [Guidance genomics document](#)
  - [Easier read genomics guidance document](#)

- [Draft revised genomics service specification](#)
- [Integrated impact assessment - genomics](#)
- [Stakeholder testing engagement report - genomics](#)
- [Current service specification - genomics](#)
- [NHS England are consulting on their genomics strategy](#) and what may be missing from it. The consultation was originally due to close 30th September 2022, but an extension until mid-October 2022 is expected. A webinar is expected for healthcare professionals, policymakers and others (originally scheduled 12 September 2022, but this is being re-scheduled). Any CP ITG participants who are considering completing a consultation response may wish to consider the [RPS position statement on 'The Role of Pharmacy in Pharmacogenomics'](#).

### IT policy (general)

- [NHS England published its 2022/23 business plan](#) which includes a “strategy for technology in health and care to digitise services, connect them to support greater integration and, with these foundations, enable service transformation”.
- [Department of Health and Social Care published a plan for digital health and social care](#). Reactions to the plan included [The King's Fund](#); [Sector](#); [HSJ.co.uk](#); and [HealthcareITnews](#).
- Cala Health opined on [the main drivers for patient adoption of digital health technologies](#).
- CP ITG published its [Pharmacy IT quarterly round-up](#) after the group's last meeting.
- CP ITG were previously asked to explore the supplier interest with some Drug Tariff IT workshops on: implementation of SSPs; future Drug Tariff reforms; and Hormone replacement therapy (HRT) NHS Prescription Prepayment Certificates (PPCs). Suppliers have fed back to CP ITG secretariat that there is interest with potentially joining two to four CP ITG supplier calls per year on these topics. PSNC are exploring the scope for a Drug Tariff IT call with Department of Health and Social Care. Suppliers will be updated in due course.
- NHS Digital blogged about how their team working on the developer hub ensured that [the hub would not exclude people with accessibility needs](#).
- [NHS launched a review into the digital readiness of the nursing profession](#).
- [Survey results suggested that half of NHS frontline staff respondents felt that the lack of tech investment is harming their wellbeing and their job performance](#).
- Health Tech Trends 2022 analysed survey results to identify [what can we learn about digital transformation from the past year?](#)

Oth	Other
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- The group’s [Terms of Reference](#) were updated following amendments made at the last meeting.

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