

Pharmaceutical Services Negotiating Committee
Communications and Public Affairs (CPA) Subcommittee Agenda
Friday 22nd July 2022

Members: David Broome, Tricia Kennerley (Chair), Clare Kerr, Sunil Kochhar, 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 and update on actions

Action

5. Contractor Engagement **Appendix CPA 02/07/2022**
6. Strategic Influencing **Appendix CPA 03/07/2022**
7. Community Pharmacy England: rebranding **Appendix CPA 04/07/2022**

Report

8. Pharmacy Communications and Media Work **Appendix CPA 05/07/2022**
9. Parliamentary Engagement and Public Affairs **Confidential Appendix CPA 06/07/2022**
10. Any other business

Subject	Contractor Engagement
Date of meeting	July 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	This paper provides background information for a discussion on taking forward the RSG recommendations on contractor engagement.
Proposed action(s)	The subcommittee is asked to brainstorm plans and ideas for improving engagement.
Author(s) of the paper	Zoe Long and Melinda Mabbutt

Better engagement with contractors

Introduction

We would like to have a brainstorming discussion to think through how PSNC can better engage with community pharmacy contractors in the future. This follows the Pharmacy Representation Review Steering Group (RSG) proposals for PSNC to help it to listen better to contractors' needs (which have now been accepted by the sector). The Subcommittee is asked to consider ideas, and the next step will be for the office to work up a plan for engagement.

RSG proposals

One of the central themes of the RSG proposals, which have now been approved by the sector, was the need for PSNC to listen better to contractors at all levels. There are six related proposals:

- 26.** Create a national forum of LPC contractor representatives, to help further advise PSNC on local matters, bring a stronger local voice to national work, and join up areas of mutual interest such as governance and levy setting.
- 27.** Livestream open PSNC meetings, and provide guidance on visibility of meetings to LPCs.
- 28.** Build in systems to allow PSNC subcommittees to hear from wider contractor voices (such as on rural issues, DSPs) including working groups and cross-sector policy groups.
- 29.** Better define the role of PSNC Members to include clear standards for how Committee Members will engage with contractors and the wider sector.
- 30.** Scope and launch a regular programme of PSNC events for contractors that allow for two-way dialogue and strengthen the voice of all contractors at the heart of PSNC.
- 31.** Work with Community Pharmacy Wales to define their future representation and support requirements.

Following the vote in favour of these proposals, PSNC needs to consider how best to take them forwards. Some of these proposals will likely be covered in the wider Governance review (proposals 28, 29, 31) and the creation of the LPC Forum (proposal 26) will be considered by LCS. The subcommittee is therefore asked in the first instance to consider the livestreaming of PSNC meetings and the launch of a programme of contractor events to allow for two-way dialogue with the sector (proposals 27 and 30).

Our current engagement with contractors

In recent years PSNC has been using multiples routes to engage with the wider network of contractors. These of course run alongside the established mechanisms for contractors to influence PSNC via the Regional Representatives, nominated members, and trade associations.

Communication channels

PSNC communicates to contractors via a number of digital routes: the website, email newsletters, social media, publication of news articles and blogs, pharmacy event speaking slots and through the pharmacy press. We previously also sent a paper newsletter out to all pharmacies, but this was stopped on cost grounds. We run events (webinars) for contractors on key topics and issues (see below), regularly attend regional (and other) LPC meetings with contractors, and after the agreement of the five-year deal ran a series of PSNC Roadshows around the country.

PSNC also has several lines of communication open for contractors to engage with us: a phone line that is manned 9am-5pm, Monday to Friday; a generic info@psnc.org.uk mailbox; and a presence on various social media platforms (Twitter, Facebook and LinkedIn). These have been expanded in the

past few years to include a mailbox to reach the CEO, and several team-specific email addresses. All of this contact information is publicly available and our upgraded website aims to raise more awareness of those team emails, but there may be more work to do to ensure that contractors are aware of and using all of these channels. We have a KPI in place asking everyone at PSNC to respond to requests for help from contractors or LPCs within one working day.

Data gathering

Surveys and feedback forms that collect information from contractors are a useful way for us to get a good picture of the situation on the ground, and we have increasingly been doing this. The data gathered provides information that informs our work, negotiations with Government, and campaigning activities. Examples include the PSNC's Pressures Survey, the COVID-19 operational costs surveys, the Pharmacy Advice Audits, and medicine supply feedback forms.

PSNC events

Whilst PSNC events are primarily focussed on providing guidance on new or important topics, they are also good opportunities for contractors to engage with us by asking the team questions. We have worked to increase the number of webinars we provide, with a KPI set at holding eight digital learning events (with a usefulness rating of at least 80%) per year. Previous webinars have explained new services, as well as providing refreshers on core elements of the pharmacy contract.

Following the launch of the five-year deal, the PSNC policy team hosted Sunday roadshow events across England (and online) to outline the context of the deal and what it meant for pharmacies. The events gave contractors and their teams an opportunity to ask questions directly of those who negotiated it and to learn what to expect for the future. The events landed well with those who attended, but attendance numbers were quite small, and the burden on the team was immense.

Working groups

PSNC sometimes brings together working groups to help inform specific workstreams. These groups help to ensure we hear from those directly involved with a project, pilot or element of the pharmacy contract. Current groups exist for rural pharmacies, Integrated Care Systems (ICS), plus various service and IT developments.

Joint work with other contractor representatives

PSNC also works collaboratively with the other community pharmacy representative bodies: AIM, CCA and the NPA. Like PSNC, these organisations have boards comprising pharmacy owners and so are similarly regularly engaging with contractors and driven by their interests.

We also work with LPCs, who work closely with their local contractors and are often able to identify issues at a grassroots level. The Rapid Action Team formed during the COVID-19 pandemic, which later evolved into the current PSNC-LPC Operations Team (PLOT), has been an important route for passing information back-and-forth between PSNC and local LPCs and contractors.

Future engagement with contractors

We need to consider the RSG proposals on contractor engagement, particularly around livestreaming PSNC meetings and launching a programme of contractor events. At this stage, it would be helpful to have a broad discussion and to hear any and all ideas for the future. Some areas to focus on are:

Livestreaming PSNC meetings

This will be a challenge, both from a technology and cost perspective, but also to ensure that we show contractors something useful, while also maintaining an environment that encourages frank and open exchanges, and of course does not breach confidentiality. The subcommittee may like to consider

things like which subcommittees/discussions could be suitable for livestreaming, what this would offer for contractors, and how many meetings we should be looking to make widely available.

PSNC events

Looking back at the CPCF Roadshow series and RSG engagement events, it may be beneficial to set up some regular events to hear from contractors. These may be on specific topical issues or could be part of wider discussions around the vision for the sector. The subcommittee will need to consider what the purpose of these events could be, what they would offer for contractors, what PSNC would do with the information we receive from any events (the follow-up), and the balance between digital and in-person events. If PSNC wants to host in-person events for contractors in the future, we will also need to consider the costs of delivery, and balance any benefits with resourcing challenges.

Transparency and engagement

A key part of the RSG proposals was around increasing transparency and accountability. This will be picked up in the governance workstream, but the subcommittee may like to think about how successfully we are reaching contractors with our current information. For example, we already publish our meetings agendas and minutes along with leadership team blogs – but are these reaching people, and what formats might better serve contractors?

Talking to contractors

From what we know about how contractors communicate, are there other ideas for how we should be talking to them and allowing them to talk to us? Should we be considering use of messaging apps (such as WhatsApp) or online message boards or other channels, and to what extent could we be helping them to share information and comments with each other, as well as with us? How do we think we could reach those contractors who have very little contact with us to date? And as we increase our dialogue with contractors, how should we be recording all of that and sharing it across PSNC and beyond?

Measuring success

We currently track engagement with all of our digital communications but we don't regularly ask contractors directly what they think of them. How can we assess contractors' views of our engagement on a regular basis and use their views to improve?

Subcommittee Action

The subcommittee is asked to consider:

- What works well/not so well in our current engagement with contractors?
- How can we do better in the future? *(Please feel free to be creative here!)*
- What sort of dialogue do we think contractors want to have with us in the future – and how might we make this happen? *(And here!)*
- What would be most useful for contractors from the livestreaming of PSNC meetings? How would we balance meeting their needs with maintaining confidentiality on key topics?
- What sort of engagement events could we usefully run with contractors?
- How will we measure success?

Subject	Strategic Influencing
Date of meeting	July 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	This paper sets out our thinking on working with public affairs experts to develop a new PSNC influencing strategy and campaign.
Proposed action(s)	The subcommittee is asked to give any feedback on the proposals set out, and on influencing.
Author(s) of the paper	Zoe Long

Strategic Influencing

Introduction and Objectives

PSNC needs a revamped influencing strategy to change how Government and the NHS think about community pharmacy: pharmacy policy teams already see the value and potential of the sector, which we need to continue to leverage, but neither organisation wants to invest sufficiently in the sector. The blocks are largely on the finance side – HM Treasury and NHSE finance teams – so we need to effectively influence more senior stakeholders than these, as well as continuing to make and explain the economic case more effectively across the pharmacy policy teams. As discussed at CPA in April ([CPA Agenda 02/04/22](#)), this will involve commissioning broader influencing work such as think pieces and research, and targeting a wide net of people who are influencing Ministers and senior officials.

We will need to commission external guidance – to inform the development of the new influencing plan – and resource to help achieve all of this. This paper sets out some further thoughts which we intend (pending budgetary agreement by RDF) to issue to public affairs agencies who are interested in pitching for the work to help us. We hope to have an agency in place by the autumn, so that this critical work can begin well ahead of the next round of CPCF negotiations.

Our Objectives and Key Messaging

Our ultimate goal is to change Government and NHS policy for the benefit of community pharmacies and their patients/the public. Following the end of the five-year deal we want a new and improved agreement for the sector which sees the full pharmacy service valued, services to support dispensing and clinical outcomes extended (in line with the sector's ambitions which will be determined through the vision work), and pharmacies offered a fair return for all of their investment and work.

We are keen for agencies to advise on how we should best go about achieving this aim, but we suspect that underpinning it will be a number of key messages that we need to get across on an ongoing basis. Some of these are not always easy to land at the same time e.g. we cannot cope with current pressures, but we want to do more in the future. Some of the key themes that we believe we will need to get across very strongly to NHS and Government are:

1. **Pharmacy's value** – to the public, the NHS and more widely
2. **Pharmacy's potential** for the future – including to help Government and the NHS
3. The **extent of support that pharmacy** has – we are trusted across the NHS and public, and these people want more from us
4. **Our economic and wider challenges** – businesses are no longer sustainable, and we need help with workforce and capacity (among other things)
5. **Solutions** – this is our vision/what we are asking for

We need to find ways to keep making noise on all of these points, and think through what messaging will be most effective to influence our key senior stakeholders before they set the mandate for the next CPCF negotiations which are expected to start in a year to 18-months.

Questions for the agencies to consider

We want to take advice from our agency on the following points, and hope their pitches will cover some of this as well as the approach they would take to a campaign:

Who do we need to influence and who can help us?

We need to think about which stakeholders are going to be most important for us to target, and how best to do so, including people such as:

- Pharmacy – contractors, other bodies and LPCs
- Charities and third sector, including their networks and alliances, and patient representatives
- Ministers, MPs and peers – including influential groups like Select Committees and APPGs
- Political advisors – SPADs and PPS
- Policy teams across NHS and DHSC and HM Treasury
- Political parties
- Think tanks

We will need to think about how we influence Government and the NHS separately:

Conservatives – harnessing the media, using conferences and events plus charities and think tanks to make our case will be critical. Patient voice also useful for ministers.

Labour – as above but the influential media outlets and think tanks will be slightly different.

The NHS – patients (plus possibly charities) and other healthcare professionals will be key here; the NHS is less likely to respond to media reports and think tanks.

And we need to give careful thought to how we should be working to influence local stakeholders, in particular the 42 ICBs, but also potentially wider influencers such as local authorities, Councillors and NHSE teams. LPCs will need to lead on local engagement and relationships, not least as they will be officially recognised by the ICBs, but as ICBs take on more powers and become more influential, this could also be a growing role for PSNC, as a minimum to work on the provision of template resources and guidance for LPCs and to input into any national workstreams about this (such as the recently concluded Fuller Stocktake review).

How should we go about influencing?

There are a number of jobs that we will need to do to influence effectively such as:

- Build our evidence and messaging;
- Build support for community pharmacy and PSNC's proposals for the future of the sector among a wide network of stakeholders; and
- Empower those stakeholders to become vocal advocates for community pharmacy.

And we will need to think about what tactics are going to be most effective to do all of this. Those may include things like producing policy papers and newsletters, holding seminars and roundtables, producing speaking soundbites/toolkits, writing joint public letters, conducting patient surveys or engagement events, leveraging existing conferences, and supporting local advocacy.

What evidence/reports do we need?

We know that we need evidence to make our case, but what types of evidence will be most effective and influential for our key targets? Some ideas could include patient surveys, provocation pieces in the press, further pharmacy audits, or economic work.

What is our action plan and what are the timelines for delivery?

Ultimately, we will want to work with our chosen agency to deliver an effective influencing campaign over the next year to 18 months. They will need to set out what they believe our key actions would be, and demonstrate how these will be effective. The campaign will need a timeline, which may look something like the below (although this will be determined working with agency advisors):

Sept - Dec 2022: Phase 1

We could take this last opportunity to highlight and educate people about:

- The value of pharmacy through the pandemic – we were a critical safety net
- The extent to which the NHS and patients now rely on us – advice and new services
- The pressures that the pandemic plus the economic situation are putting on us

We will likely need to use this time to re-engage with as many stakeholders as we can, and to gain their support as advocates, while also building up all the evidence we will need for our next phase of work. We expect the Year 4/5 CPCF to be announced over the summer, and we can use this as a hook to launch a series of conversations/events with old and new stakeholders.

Q1 2023: Phase 2

Depending on the progress of the vision work, we will want to be looking ahead to help that land as impactfully as possible. That may include conversations about what wider stakeholders want from the future, alongside ramping up our public messaging to get across that:

- There is a problem within primary care – capacity, and economic constraints
- But pharmacy can help – patients, healthcare providers want more from the sector
- The sector needs a new, and improved, deal
- The impact if pharmacy is not supported would be severe – highlighting our value

The outcomes of the Government's economic review of the sector could provide useful collateral for this phase of the campaign. We could also re-run our Pressures Survey, although we may want to be more focused on the wider primary care problems and how we can help. Work on the vision for the sector will be ongoing and we will also be using this period to road-test our developing (or developed) vision ideas with our key supporters and stakeholders and to get their support for the future.

Q2-3 2023: Phase 3

Having established that there is a problem, with how pharmacy is being treated, and with wider primary care capacity, we can provide the answer and build support for that. This will be the moment to get as many people as we can to advocate on our behalf and to shout about our vision and why this must be implemented. We will need to publish our vision and to make a very strong case for investment in pharmacy, as well as using our advocates and the patient voice to call for full implementation of the sector vision.

How will we measure success?

As for any work, we will need to demonstrate the impact that we are having and to show successes as we move throughout the campaign. Although the negotiating output is the ultimate goal, we will also want to look at measures like media mentions, Parliamentary activity, and wider engagement on

pharmacy and the key issues. Clearly a key theme for the agencies will need to be demonstrating the value for money that they would offer.

Next Steps

The next step is for us to share a version of these objectives and initial planning thoughts (in the form of a tender document) with public affairs agencies, with a view to selecting a partner by the autumn.

Subcommittee Action

The subcommittee is asked to consider the content of this paper and to provide any feedback on the likely tender process or our planned influencing campaign. In particular, the subcommittee is asked:

- Are the objectives and key themes as set out in this document right?
- Are there any further questions that we should ask the agencies, or any further considerations for the tender process?
- To what extent should PSNC be focused on local engagement – how can we support LPCs on this, particularly around engagement with the ICBs?
- Are there any other agencies that anyone would recommend?

Subject	Community Pharmacy England: rebranding
Date of meeting	July 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	The RSG proposals recommended that PSNC renames itself as Community Pharmacy England. This paper sets out some initial considerations for the project.
Proposed action(s)	The subcommittee is asked to review and feedback on the contents of the paper.
Author(s) of the paper	Zoe Long

Community Pharmacy England: rebranding

Introduction

PSNC had previously been working towards a name-change to Community Pharmacy England (CPE), but this work was paused following a change in Chief Executive, and then pending the outcomes of the independent review into community pharmacy contractor support and representation. The Review Steering Group (RSG) proposals included one for this name change to go ahead, and it was agreed at the PSNC Meeting on July 6th that this project should go ahead. This paper sets out initial thinking on the renaming/rebranding project.

RSG Proposals

The RSG set out a group of proposals aimed at developing a new national vision and strategy for community pharmacy, and one of these was as follows:

22. Rename PSNC committee and executive as ‘Community Pharmacy England (CPE)’. [PSNC]

Objectives of the project

We are at a critical point for the community pharmacy sector as we emerge from the immediate crisis of the COVID-19 pandemic and look ahead to what comes after the end of the current five-year deal. Pharmacies, like the rest of the healthcare sector, are facing unprecedented pressures and challenges, but opportunities for the sector also lie ahead, particularly as General Practice continues to struggle. We know that as PSNC we need to step up our influencing work and capability, and changing to a name (and associated brand) that is easily understandable to the outside world (to politicians, patients, third sector partners, and the media) would help us to do this.

We want the renaming of PSNC to Community Pharmacy England to help to:

- Assert the value of community pharmacy – we need a brand that will help us to show the authority of the sector.
- Reflect the fundamental role played by community pharmacy and its value to patients and the wider health system.
- Reflect the professional, clinical and trusted values of our sector and the part it plays in every local community in England.
- Position us – both within the sector, and outside of it – as the leadership organisation and voice for community pharmacies in England.
- Raise awareness of the significance of our organisation and the important role it plays in representing the whole community pharmacy sector.
- Give us a stronger and more credible platform from which to influence Government and the NHS, and a stronger voice across wider policy-making and discussion forums.

Ultimately, we hope all of this will help us to represent the community pharmacy sector’s interests to Government and wider stakeholders with more credibility, confidence and authority, helping us to get a better deal for contractors.

Scope of the rebrand project

Although a key part of this project will be the naming of PSNC – and there will be some decisions to take about the mechanics of this, including whether we seek changes to formal documents with DHSC

– by far the bigger part of the project will be the rebranding exercise. This will seek to define what ‘Community Pharmacy England’ is, what it stands for, and how it talks to and comes across in the outside world. This work will involve defining what it is that we do and our brand values, and then designing branding materials that convey that and help us to meet our objectives.

In terms of key outputs, by the end of the project we would expect to have:

- A clear new brand – to include our brand identity and values, and an understanding of what our brand conveys and why.
- A clear narrative about our brand, and why this change is important.
- Key branding resources – strapline, logo, colour palette.
- Key design resources and communications templates – to cover website, newsletters (i.e. contractor and LPC), social media, letter headers, briefings, presentations, infographics, etc.
- Clear brand guidelines – both for the internal team, and external stakeholders wanting to use our logo.

We also want the project to think about the wider sector – so that the new Community Pharmacy England brand is best placed to represent the sector. This may include discussion of wider resources that position community pharmacies, as well as CPE – such as the Heart of our Community logo produced previously. And it could also cover LPCs, if we want to provide template local branding materials for them to use, to further strengthen all of our brands and the position of community pharmacy.

Tendering for the project

In our tender document, and then in more detail throughout the initial stages of the project, we will need to explain to prospective agencies and to explore:

- **Who we are:** our remit and what we do, our ambitions and key objectives, and information on how we operate and our values.
- **Our key stakeholders:** this will need to cover the pharmacy sector, including an explanation of the national pharmacy representative bodies – how do we differ, and what roles are specific to us. But it will also need to be outwards focused – who are trying to influence, and what wider stakeholders do we want to know us and to understand what we do?
- **Our key messages and ambitions:** what is it that we are trying to achieve, and how could a rebrand help with that? What do we want to convey to our key stakeholders?

We will ask the agencies to respond setting out:

- Their track record in delivering a creative branding process for similar professional or not for profit bodies.
- Their approach and the key steps they would take as part of the process to successfully design a new brand proposition that will be supported by PSNC.
- The team who would be involved.
- Costs – the project will need to be completed within our budget.

We will also ask them to present to us on the following questions:

What are their thoughts on our current name and brand?

We know that people outside of the community pharmacy sector struggle to understand our role and what we do; and this is largely down to our name. But it would be good to hear what newcomers think

of our brand in the round, including our name, our website and other communication channels, our media presence and positioning, and our work.

How will a rebrand to Community Pharmacy England help us to meet our objectives?

We want to hear their initial ideas and thoughts about how a rebrand could support us and help us to meet our objectives for community pharmacy. How would they achieve maximum benefits for us from a rebranding exercise?

How will a rebrand support the sector more widely?

The renaming of PSNC to Community Pharmacy England is primarily being doing to help us to more effectively influence and make the case on behalf of the community pharmacy sector. Agencies should be able to demonstrate how they will maximise this positive impact, and also to explain how they might look to link to renaming to wider work across the sector e.g. through provision of more general branded resources for contractors and others to use.

How will we measure success?

As part of the project, before sign-off, we expect to test the new branding with small groups of our key stakeholders, to ensure that the new Community Pharmacy England brand is conveying what we want it to. We are also keen to hear from the agencies about what longer-term measures of success we might want to consider for example to track brand awareness – of CPE, and perhaps of pharmacy more widely – in the future.

Next Steps, Timing and Oversight

As a next step the office will prepare a final tender document and seek pitches from agencies with experience handling successful rebrands. Following a pitch day, an agency will be selected to take the project forwards. They need to demonstrate value for money, their understanding of the scope of the project, their initial ideas for our rebrand and how they would work through the project with us, and of course that the project will be completed within the budget.

We think it is feasible to complete the rebrand project in time for PSNC's name to change from 1st April 2023, to coincide with new Committee Members joining following elections and nominations (this was proposed by Committee Members at the PSNC Meeting in July). We are keen to hear from any Subcommittee Members (or other PSNC Members) willing to help the rebrand with a view to putting together a small working group and seeking approval from PSNC for them to oversee this project.

Subcommittee Action

The subcommittee is asked to consider:

- Are the objectives and key themes as set out in this document right?
- Are there any further questions that we should ask the agencies, or any further considerations for the tender process?
- Is the timing of the rebrand as proposed at the recent PSNC meeting – to go live in April 2023 – right?
- How far should PSNC's rebranding project go – should we also consider provision of rebranded templates for LPCs?
- Should we consider resources for contractors such as those that were previously provided (the Heart of the Community logo) or others?

Subject	Pharmacy Communications and Media Work
Date of meeting	July 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	An update on PSNC's communications with contractors, pharmacy teams and LPCs, including our digital statistics reports, and a report of national and pharmacy media work.
Proposed action(s)	None
Author(s) of the paper	Melinda Mabbutt and Jamie Gilliam

Pharmacy Communications and Media Work

Introduction

This paper provides an update on work to communicate with community pharmacy contractors, pharmacy teams and LPCs. It also contains monthly statistics on PSNC's digital communications and an update on both trade and national media work.

PSNC response to RSG vote result

Following the announcement of the contractor vote on the Review Steering Group's (RSG's) proposals, [PSNC issued its initial response](#). With a clear outcome in favour of implementing the proposals, the statement from PSNC CEO Janet Morrison was positive about the future of PSNC and LPCs. Janet made clear that progress would be made with the Committee meeting and discussing this in the coming weeks and months, although she also noted that some things would not be able to change until the additional levy money for PSNC began to come through.

The Committee used much of its July meeting to discuss next steps on key parts of the RSG proposals. The policy team are looking to update contractors (and LPCs) on PSNC's action plan shortly and to finalise timelines and an action plan ready to share over the autumn.

2022 PSNC Pharmacy Advice Audit

The findings of PSNC's 2022 Pharmacy Advice Audit were published in late June, highlighting the increasing number of consultations that community pharmacy teams are carrying out. The results will be of great benefit to our campaigning and lobbying work in the coming months, and a short summary and infographics were published alongside the results to help contractors and LPCs share the findings.

Whilst the data from the audit had already been used in negotiations, we timed the public release to follow an [exclusive article in the Sunday Telegraph](#) (see national media coverage section below). We also shared data with MPs ahead of the Parliamentary debate on pharmacy held in the same week.

New PSNC website

Following a period of user testing during the Beta phase, the new and improved PSNC website was fully launched on Tuesday 14th June. As part of our communications around this, the Comms Team published a [short introductory guide](#) highlighting some of the new and improved elements in more detail for those interested. Also, the previous website has been saved as a publicly available archive to preserve older content: archive.psnc.org.uk

We worked closely with the developers at Make to monitor the performance of the new website in the first few days after the switchover. Some users initially experienced issues accessing the LPC Members' Area, but we worked through the problem with Make and this has now been resolved. Going forwards, our maintenance contract with Make ensures that the website will continue to be updated and developments made as needed. For example, there are a few improvements on our list that could be beneficial for PSNC staff managing website content.

The Comms Team is also pleased to report that all the new LPC websites are now live. We have launched a series of 'Hints & Tips' newsletters for LPC site administrators to support them to make best use of the new functionality available to them, and this will continue as a monthly email.

2021/22 Annual Report

The Comms Team has been working with all PSNC teams to compile content and data for inclusion in the annual report. We have also considered some of the key themes and messaging that we want the annual report to cover:

- **We are collecting more data than ever before to support our negotiating and campaigning work, and listening to contractors and their teams** – e.g. launching the Pharmacy Pressures Survey and running the 2022 Pharmacy Advice Audit.
- **We pressed hard for more support for community pharmacy teams during a difficult winter** – e.g. LFT supply and C-19 vacs media work, HGV driver/fuel crisis.
- **We are continuing to argue for more investment in the sector** – e.g. COVID costs deal, PSNC's funding bid and the CPCF Annual Review process.
- **We are looking to the future, positioning pharmacy as a clinical services provider (and building on pharmacy's excellent work during the pandemic response)** – e.g. introduction of DMS, SCS and HCF, plus expansion of NMS.
- **We are working to improve how PSNC and the LPCs operate** – e.g. RSG work.

The report will continue to be presented in a digital first format via the micro website. Whilst a PDF version will be made available for those who do want a printed copy, PSNC won't be sending hard copies out. We are currently deciding whether to use animations to share some of the summary information again. Whilst these can be useful, last year's were possibly too short to be beneficial, and a longer animation presenting the key themes of the report may be more effective and impactful.

Production schedule

The annual report needs to be published within six months of the end of the financial year (i.e. by 1st October) and the Comms Team has put together the following timeline to meet that:

Early July	Meeting with designer to discuss formats and design, information gathering and page planning (completed)
Late July	Draft first page spreads and review design layout (in progress)
Early August	Draft further page spreads
Late August	Draft final page spreads, share early drafts with relevant PSNC teams
Early September	Full proofread and accuracy check by comms team, share updated drafts with relevant teams and with CPA, and prepare launch comms
Late September	Final review and publication

Page plan

Information gathered from across PSNC's teams has been used to inform the following page plan:

- **p.2-3, Comments from PSNC's CEO & Chair** – Messages summarising the year.
- **p.4-5, The Year at PSNC** – Timeline of significant moments in 2021/22.
- **p.6-7, Supporting Pharmacy** – our work to support pharmacies during another difficult year, and trying to make things better for the future.
- **p.8-9, Calling for Investment** – the COVID costs deal and our bid for more funding, as well as ongoing reimbursement support and services income.
- **p.10, Strengthening our Evidence Base** – covering our Pressures Survey and 2022 Advice Audit, as well as the CPCF Annual Review and looking ahead to the agreed economic review.
- **p.11, Raising Awareness** – our work to engage with external stakeholders (e.g. Parliamentarians and national press) on important issues for pharmacy.
- **p.12-13, PSNC's Annual Accounts** – our financial statements.
- **p.14-15, Preparing for the Future** – to look at the year ahead, including covering the vote on the RSG proposals and our planned next steps on that, and the vision work and strategy.

Responding to contractor concerns

In recent weeks PSNC has received a number of emails from contractors concerned about the pressures they and their teams are experiencing, including problems staffing their pharmacies and facing verbal abuse from patients due to medicine supply issues. The team has been responding to these queries on an individual basis but is also considering proactive work to help reassure contractors that PSNC is not only aware of the situation, but actively trying to do something about it – including through our ongoing Parliamentary and national media work. Plans are underway to communicate with contractors about the medicines supply situation and price concessions (an issue which has already been raised with DHSC), and we are considering further work on the wider pressures.

Supporting other PSNC teams

The Communications Team continues to support other PSNC teams by promoting key news, information and reminders through the email newsletter and social media. Work since the last subcommittee meeting has included:

- Coordinating with the Services Team to contribute their piece about the success of the Hypertension Case-Finding Service to the new Inclusive Pharmacy Practice newsletter managed by NHSE&I.
- Drafting news articles for the Regulations Team on PSNC's response to the DHSC's Hub and Spoke consultation and the updating of the list of pharmacies eligible for PhAS.
- Helping the IT Policy Manager to promote PSNC's guidance on completing the Data Security and Protection Toolkit, and issue reminders about the upcoming renewal of a large number of Smartcards.

Pharmacy press queries

Recent topics we have been asked about include: Sajid Javid's overhaul of primary care; the Fuller stocktake report; use of blister packs/dosette boxes; a cancer referrals pilot in pharmacies; an evaluation of PQS; the updated PhAS eligibility list; the number of pharmacy closures; and the new Health Secretary. We continue to issue press statements and commentary on a regular basis.

National media work

The findings of PSNC's 2022 Pharmacy Advice Audit were published in late June, timed to follow an [exclusive article in the Sunday Telegraph](#) that we secured through a journalist contact. In hard copy, the article appeared on page 2. The article focussed on the value of pharmacy advice to the NHS, particularly in terms of releasing capacity in general practice.

LPC Communications and Support

PSNC's Communications Team continues to work closely with the Contractor and LPC Support Team. Here is a round-up of joint work to communicate to LPCs in recent months.

LPC News

The Contractor and LPC Support Team at PSNC produces a monthly newsletter for LPC Chief Officers and their teams. Information on the open and click rate for the latest editions of LPC news is included below.

Date	Day	Time	Subject	Opens	Clicks	Clicks to opens
1/07/22	Fri	17:22	LPC News: June 2022	48.6%	14.5%	29.8%
Averages each month				48.6%	14.5%	29.8%

Updates to the LPC Members' Area

In recent months the following additions have been made to the LPC Members' Area:

- The declaration data for the 2021/22 Pharmacy Quality Scheme has been added to the LPC Members' Area. A column has been added to the data to allow filtering by LPC area.

PSNC digital communications reports (full report overleaf)

June 2022: This month, the most popular topics were Price Concessions and the measures put in place to deal with the ongoing shortages of some Hormone Replacement Therapy (HRT) medicines. The largest number of visitors to the website this month was on Monday 20th June. This was the weekend after the announcement of the launch of the new PSNC website.

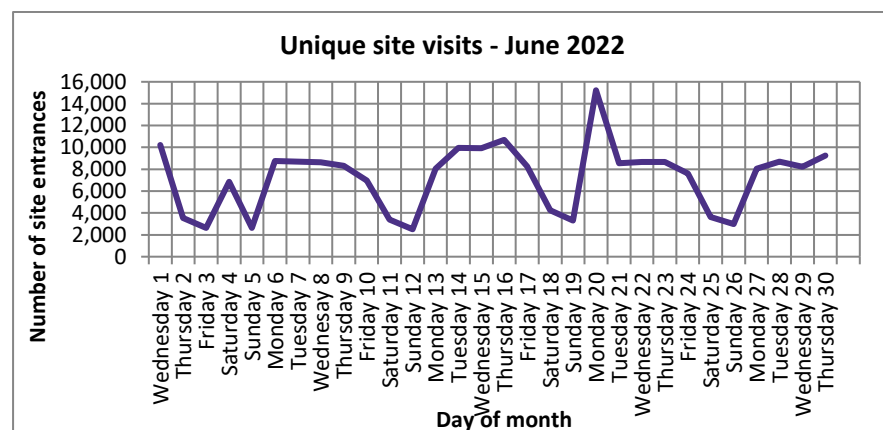
Conclusion

This paper has been created just for review; no action is required. However, we would welcome feedback or questions on any of the above from subcommittee members.

June 2022 digital communications report

PSNC Website

Audience	June	May
Number of unique visitors (site entrances)	217,192	212,881
Number of unique pageviews	344,145	337,103



Most popular

Pages	Views
Price Concessions	20,005
Serious Shortage Protocols	8,183
Generic Shortages	7,159
New Medicine Service	4,779
Hypertension Case-Finding Service	3,460

News stories	Date	Views
Three new SSPs introduced for HRT medicines	29/04	3,741
Ten more SSPs issued for HRT medicines	20/05	3,571
Medicine Supply Notification: Estradiol pump pack gel	03/05	2,723
Medicine Supply Notification: Estradiol gel sachets	25/05	2,029
Smartcard deadline approaching	10/06	1,887

PSNC Briefings	Views
Using Care Identity Service (CIS) to better manage Smartcards factsheet (updated November 2019)	1,197
Serious Shortage Protocols (SSPs) – A guide for community pharmacy teams (June 2019)	269
PSNC Briefing 041/21: Guidance on the Community Pharmacy Hypertension Case-Finding Advanced Service	193
Briefing for general practice teams – the Community Pharmacy Hypertension Case-Finding Advanced Service	180
Pharmacy Quality Scheme – Summary of the training requirements for the 2021/22 Scheme	151

Webinars/videos	Plays
NHS Digital Weight Management Programme Demo Referral Video	3,724
GP CPCS Animation	1,516
Value of Pharmacy Animation	655
Future of Pharmacy Animation	241
CPCS for NHS111	200

PSNC Emails

PSNC Newsletter	Opens	Clicks	Clicks to opens
Averages each month	36.26%	2.69%	7.41%

Social Media

	June	May
Twitter reach	36,875	34,815
Twitter interactions	1,933	1,963
Facebook reach	257	473
Facebook interactions	4	8
LinkedIn reach	2,012	1,861
LinkedIn interactions	7	60

Subject	Parliamentary Engagement and Public Affairs
Date of meeting	July 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	A summary of PSNC's Parliamentary engagement work since the last subcommittee meeting.
Proposed action(s)	None
Author(s) of the paper	George Foote

Parliamentary Engagement and Public Affairs

This paper presents an overview of parliamentary engagement and public affairs work since the last subcommittee meeting.

Parliamentary Engagement Work

Briefings and events

We have continued to brief parliamentarians via personalised and regional briefings on the funding and capacity constraints within the sector. We jointly wrote to Jeremy Hunt MP, the Chair of the Health and Social Care Select Committee, along with CCA, NPA, and AIM, to outline the challenges the sector faces with the current workforce issues. Our news story on this can be found [here](#).

Janet Morrison also attended a CCA parliamentary roundtable, along with senior pharmacy representatives and MPs, to discuss: 'Delivering a community pharmacy fit for the future.' And we have continued to support contractors and LPCs with their Parliamentary engagement work, including drafting a note to the Shadow Health Secretary.

Westminster Hall Debate: The future of community pharmacies

Our news story of the debate can be found [here](#).

Parliamentary drop-in event

We worked with the other pharmacy bodies (CCA, AIM, NPA, RPA) to hold a drop-in style parliamentary event on 'busting the backlog,' pharmacy closures and current pressures. The event was well attended with 54 parliamentarians attending throughout the day. PSNC provided constituency specific data on pharmacy closures and prevalence of disease, which MPs said they found particularly useful. Additionally, 24 MPs also signed a letter to the Prime Minister calling for an urgent funding uplift as well as action to end the threat of pharmacy closures. Our news story of the event, including the text of the letter, can be found [here](#).

Following on from this event, we are writing to all 54 people who attended with our latest funding briefing, and seeking a meeting to discuss both pressures, and the potential of the sector to do more to support wider primary care. We have shared the list of MPs who attended with LPCs and are preparing some resources to help them follow up locally if they want to, and a video will be released.

Change.org petition on pharmacy abuse

PSNC has been working with the other pharmacy bodies (AIM, CCA, NPA, RPS), to organise a Change.org petition to highlight the unacceptable abuse that pharmacists and their teams are currently experiencing. This follows on from the findings of our Pressures Survey. We are working with Mike Hewitson who was recently interviewed about the issue for the Times. He will lead the petition, which we hope will secure tens of thousands of signatures.

Health Select Committee inquiry on Integrated Care Systems

We are currently working on a submission to the recently announced select committee inquiry into Integrated care systems: autonomy and accountability. We have also approached other primary care professions to determine if there is appetite for a joint submission.

Wider Public Affairs Work

Joint briefings and events

We continue to work closely with other sector bodies to coordinate joint work where we can. We are currently working with AIM (Association of Independent Multiple Pharmacies), CCA (Company

Chemists' Association) and the NPA (National Pharmacy Association) on following up with additional evidence to the Health Committee regarding their recent workforce inquiry hearings.

All-Party Pharmacy Group

We work closely with the other sector bodies to support the secretariat of the APPG on Pharmacy. The APPG plans to hold a roundtable with policymakers in the Autumn. Following on from this, the APPG will publish a manifesto of recommendations drawn from the inquiry sessions as well as all the information that was submitted in response to its call for evidence.

Supporting LPCs

We continue to work closely with LPCs to advise them on the current key national messages and provide ad-hoc briefings on request, including in preparation for MP pharmacy visits. In recent weeks we worked closely with LPCs in the areas of target MPs to encourage their attendance at the upcoming pharmacy events. This often leads to increased local MP engagement in the community pharmacy sector. We have also provided template emails for LPCs to use in their MP engagement.

Next Steps

Autumn Events

With the summer recess rapidly approaching, the next Parliamentary events for us to plan for will be in the autumn. These will include the APPG roundtable, and the pharmacy event on the hypertension case-finding service. We have begun planning the latter, including making contact with the British Heart Foundation to seek their support and attendance at the event.

Party conferences

GF will attend both the Labour and Conservative conferences, on behalf of PSNC. He will attend both official and fringe events and meet with relevant stakeholders and representatives from the health sector, including politicians.

Briefings

There are a number of critical and worsening issues for pharmacies at the moment – including the funding pressures, the operational challenges as COVID cases increase again, and ongoing volatility in the medicines supply market. Over the summer we will work on briefings for MPs ready to talk to them about these issues as soon as the House returns. This will include briefing them on the Year 4 CPCR deal which we may want to do through a series of both written briefs and meetings.

Supporting LPC engagement

As ever, we will need to offer LPCs support with the MP engagement, and the winter pressures/vaccination season always provides a good opportunity to do this. We will consider resources to help with this, including an update to our MP visits guidance.

Conclusion

This paper has been created just for review; no action is required. However, we would welcome feedback or questions on any of the above from subcommittee members.