

Pharmaceutical Services Negotiating Committee
Communications and Public Affairs (CPA) Subcommittee Agenda
22nd October 2022 at 3.15pm
Meeting to be held remotely via Zoom

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. Strategic Influencing **Appendix CPA 02/10/2022, and Annex**
6. Community Pharmacy England rebrand **Appendix CPA 03/10/2022**
7. Contractor Communications **Appendix CPA 04/10/2022**

Report

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

Subject	Strategic Influencing
Date of meeting	October 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	This paper outlines early progress following the appointment of Luther Pendragon to support our influencing work.
Proposed action(s)	The subcommittee is asked to consider the progress to date and will have the chance to hear from and to ask questions of Luther.
Author(s) of the paper	George Foote and Zoe Long

Strategic Influencing

Introduction and context

PSNC has been considering a ramped up 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 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 network of people who are influencing Ministers and senior officials. The development of the community pharmacy vision and strategy will be critically entwined with this work – with the influencing work helping to ensure that the vision lands well within the healthcare sector, and that it has an influence on policy as we start to plan for negotiations on what happens after April 2024.

After a tendering process we [appointed](#) Luther Pendragon to support this critical influencing work ahead of the next round of CPCF negotiations. We saw four agencies in total – all of whom had strong experience and recommendations in the healthcare sector – who all presented very different ideas for campaigns to support our wider work, but Luther’s pitch was exceptional in combining local and national tactics to influence officials, Ministers, and local commissioners.

Luther Pendragon plans

Luther identified and highlighted the key challenges the sector is facing, including the significance of the next CPCF negotiations; the strain on the sector; the capacity issues; and the need for Government to know that a fair, new funding arrangement is needed. They talked through what our key messages should be to meet our ambition to persuade Government of the need for this fairer funding deal, as well as considering work to move our bid for a fully funded walk-in service forwards.

Luther then outlined a suggested strategy for addressing these challenges, based on 5 key pillars of activity: changing government mindsets, local engagement, high impact media coverage, partnerships and collaborations, and public awareness. Members of the team at Luther Pendragon will join the subcommittee meeting to talk through their suggested strategy and plans.

Initial tactics and progress

Parliamentary drop-in event

On November 15th we will host a Parliamentary drop-in event to kickstart our work to get more Parliamentarians speaking out, and putting pressure on Ministers, on our behalf. MPs will be offered blood pressure checks as a way to get them interested in pharmacy and to give them something memorable, but the briefing materials we are producing for the event will have a focus on financial pressures, capacity challenges and the need for a fully-funded walk-in service to be commissioned.

We have invited LPCs to take part in this event, as a way to engage in a coordinated way with their local MPs, and we have also asked the other pharmacy organisations if they would like to attend. From a national perspective, it’s great to show MPs that we are working in a coordinated way across local and national organisations, and to start to land our key messages about the funding and capacity crisis.

LPC webinar

A longstanding criticism of our sector has been its inability to speak with one voice. We hope that over the next year our influencing work will try to tackle this, and as a first step we are holding two webinars later in October to explain our work to LPC Chief Officers (and the other pharmacy bodies) and to explain how LPCs can support this critical work.

Briefing materials

Luther has already been supporting PSNC to engage with Special Advisors and others about the possible commissioning of a fully funded walk-in service. To support the wider influencing work they are also working with George Foote to develop a toolkit of resources for LPCs and contractors. This toolkit will include an updated MP briefing and call to action, detailed MP visit guidance, a new funding and capacity briefing for the sector to draw from, and updated key messaging. We plan to publish this in time for the Parliamentary event in November.

Engaging regional press on pharmacy closures

We will begin to proactively contact LPCs who have had a disproportionately large number of closures in their area, with the view to pitching localised data to regional news outlets. We first collated this data for our 5th July parliamentary drop-in, held jointly with the other pharmacy bodies. Although there was some pickup in the national media, it focussed mainly on the total number of closures in England. We believe that by providing regions with their specific data, there will be much more interest, thus helping to spread the message that without urgent emergency funding, there are bound to be further pharmacy closures.

Next steps

Over the coming month we have a busy schedule planned with the LPC webinars following by the Parliamentary event and the publication of our toolkit to enable contractors and LPCs to support our influencing work. We also hope to take forward conversations with the Minister and with Special Advisors on our walk-in pitch, and we are currently in the process of finalising the strategy which will guide our influencing work throughout 2023 and beyond.

Subcommittee Action

The subcommittee will hear a short presentation from Luther Pendragon and is asked to reflect on this and to share any thoughts on our influencing plans. The Luther Pendragon team are also happy to answer any questions on this. The subcommittee is also asked to consider the priorities for our influencing strategy and work throughout 2024.

Subject	Community Pharmacy England rebrand
Date of meeting	October 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	This paper outlines early progress on the project to rebrand PSNC to Community Pharmacy England.
Proposed action(s)	The subcommittee is asked to consider the progress made and the questions at the end of the paper.
Author(s) of the paper	Melinda Mabbutt and Zoe Long

Community Pharmacy England rebrand

Introduction

This paper outlines early progress and some initial thinking about the project to rebrand PSNC to Community Pharmacy England.

Background to the Rebranding Exercise

As outlined in the Wright Review and then taken forward in the RSG Proposals, PSNC is going to be renamed as Community Pharmacy England. The intention is for the new name to come into place in April 2023. Alongside this it is expected that some further LPCs may look to rename themselves as Community Pharmacy [locality], also in line with the Wright and RSG Proposals.

The renaming of PSNC has been a long-held ambition of the Committee and it presents a significant opportunity for PSNC to relaunch itself as an organisation that listens and engages better with contractors and LPCs, and which has more authority and credibility in the wider healthcare sector and beyond. There is also an opportunity for LPCs, as they consider changes following the vote on the RSG Proposals, to align with this central brand to ensure that community pharmacy has a strong and consistent voice both locally and nationally. To ensure that we make the most of this opportunity, we are going to work with a rebranding agency and have recently tendered for this work.

The interview panel (Zoe Long, Tricia Kennerley, Alastair Buxton and Melinda Mabbutt) saw a number of agencies and, after careful consideration including seeking references, chose [IE Brand](#). IE is a brand and digital agency with demonstrable, recent and high-impact experience of working with membership, health and NHS organisations to refresh and reposition their brands. In particular, they have strong experience at managing stakeholders, a very thorough process, and a realistic approach.

Analysis of our Current Brand

During the tender process we spoke with five different agencies and heard about both the strengths and limitations of the current PSNC brand. Agencies felt that the use of the purple colour clearly set us apart from other organisations within the sector, and they recognised that our typeface and logo choices sought to present a collaborative personality to the sector. PSNC's regular appearance in the trade press was recognised as reinforcing our position as the sector's negotiator and representative.

The limitations were to be expected, as we know that the name is difficult to understand beyond the community pharmacy sector; our website is very contractor and news-focused; and we have never previously invested in expertise to help us to shape our brand. Some of the limitations identified with the current brand included:

- Pharmaceutical Services Negotiating Committee is difficult to understand and remember, and it makes us sound like a very technical organisation with a limited role.
- The logo is bland and our visual identity unremarkable. There is also some inconsistency in our visual identity across the website, annual report and social media posts.
- There is a clash between the softness in the typeface, colour and round logo versus the more authoritative tone of voice in news stories and business-like email updates.
- If PSNC had a face, based on our current brand, it would always have a suspicious squint with a slight frown. There is much scope to present as a more caring and collaborative organisation.
- PSNC is trying to talk to all its audiences with the same tone – there is no differentiation.
- PSNC's business-like communications, and even the choice to call the people we represent 'contractors', makes us seem distant and disconnected from the sector.

The Opportunity: Project Objectives

IE Brand identified all of the above and presented ways for us to develop a brand which would be much more consistent, impactful and above all representative of who we are what we do. They made a compelling case for the benefits that this could bring.

We know that as PSNC we need to step up our influencing work and capability, and to support this the rebranding exercise will help us to present a more authoritative and credible image to the wider world. We are also working to improve our dialogue with contractors and LPCs and the rebranding exercise, particularly the phase in which we listen to their views and to what they want from their negotiator and the development of our organisational values and mission, will also support this effort. Finally, as LPCs make changes as well, there is a chance to strengthen the voice of community pharmacy by aligning behind a single brand.

Our key objectives for the project, and ultimately for the Community Pharmacy England brand, are therefore that we:

- Assert the value of community pharmacy – we need a brand that will help us to show the authority of the sector, and of Community Pharmacy England as its representative. In our negotiations we want our brand to reflect our authority, credibility and confidence.
- 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. We need a brand that the sector can be proud of and rally behind.
- Create a clear link between us and the LPCs who adopt the branding templates.

Ultimately, we want this work to help us to better engage with the community pharmacy sector and to represent its interests to Government and wider stakeholders, helping to get a better deal for pharmacies in the future.

Scope and Project Plan

The key deliverables at the end of our project will be:

- A clear new brand for Community Pharmacy England – to include our brand identity and values, and an understanding of what we and our brand convey and why.
- A clear tone of voice to match the brand – taking the brand identity into real-world application, and considering key messages for our very different audiences.
- A clear narrative about our brand, and why these changes, and the new Community Pharmacy England, are going to better support the pharmacies we represent.
- Key branding resources – strapline, logo, colour palette, messaging matrix.
- Design resources and communications templates – to cover newsletters, social media, letter headers, briefings, presentations, infographics, etc.
- A redesigned homepage for the website and new page designs to match the new brand.
- Clear brand guidelines covering not just the look but also the feel/sound of the brand – both for the internal team, and external stakeholders we work with.
- For LPCs there will be logo and other templates and guidance on becoming a partner brand at a local level, if they want to.

Next Steps

At time of writing we had just signed the contract with IE Brand and we are scheduling in our project kick-off meeting. This will allow us to map out a detailed project timeline and plan, with a view to reporting back further, and hearing from the Committee, at the November PSNC Meeting. We will also consider what we can/should start to say now about the renaming of PSNC to key stakeholders.

Subcommittee Action

The subcommittee is asked to:

- Confirm the ambitions and objectives of this project and share any further thoughts on the opportunities presented.
- Share any initial reflections on the rebrand project, or on PSNC's branding in general.
- Consider the research phase of the project – who should be involved and whose views should IE Brand be listening to?
- Share any other comments or feedback on the project or the project plan.

Subject	Contractor Communications
Date of meeting	October 2022
Committee/Subcommittee	Communications and Public Affairs
Status	Not confidential
Overview	This paper looks to review the approach to recent contractor communications and to consider the upcoming communications survey.
Proposed action(s)	The subcommittee is asked to consider the questions set out at the end of the paper.
Author(s) of the paper	Melinda Mabbutt and Zoe Long

Contractor Communications

Introduction

As part of the Transforming Pharmacy Representation (TAPR) work programme PSNC needs to consider how it can improve its engagement with contractors and with LPCs. Although formal structures to do that won't be considered until the next financial year, we will start to prepare for that via a contractor survey early in 2023. The Committee also considered this topic at the last PSNC meeting, particularly in relation to the contractor comms on Years 4/5. This paper considers recent contractor communications as well as looking ahead to the communications survey.

Communications: Recent Tone

Following the agreement of the Year 4/5 deal, the Committee expressed a clear desire for PSNC's communications to get more 'feisty' – being honest with contractors about why we are agreeing the things we are agreeing, but also making clear to Government and the NHS the frustration of the sector with its current situation and the need for further support. Our communications on the deal aimed to do this, as well as setting out PSNC's next steps and objectives. Key messages included:

- We went into these negotiations determined to do all that we could to improve the economic
- We rejected the Government's very tough initial stance, safeguarding the Transitional Payments, and gaining a £100m margin write-off.
- Agreeing to the deal allowed us to bank an extra £100m for the sector. Rejecting the deal would have meant losing this, as well as losing other benefits and the chance to engage constructively with a new Government.
- It is very disappointing that we were unable to agree a fully funded pharmacy Walk-in service, but we continue to be clear to the Government and NHS that they must not drive even more patients to pharmacies for self-care consultations without this being properly resourced.
- We have been pressing DHSC hard to resolve the Price Concession issues, which they have now committed to reviewing.
- We know these arrangements are not enough – all members of PSNC remain deeply concerned about pharmacy finances and capacity – and this is why our work continues.
- Policy-makers must understand that their refusal to uplift the five-year deal has consequences – for our businesses, our patients and local communities.

See: <https://psnc.org.uk/our-news/contractor-announcement-cpcf-arrangements-for-2022-23-and-2023-24-agreed/>

In recent weeks PSNC has also issued:

- Very clear demands on Price Concessions: <https://psnc.org.uk/our-news/psnc-to-seek-overhaul-of-pricing-concessions-system/>
- Updates on TAPR progress: <https://psnc.org.uk/our-news/tapr-update-psnc-takes-initial-governance-levy-and-influencing-decisions/>
- An update following the PSNC Meeting: <https://psnc.org.uk/our-news/psnc-demands-price-concession-fix-and-wider-help-for-contractors/>

Contractor webinars have been held on concessions, Discount Deduction and the Cpcf deal, and we are preparing an update on our negotiations, including the variety of easements that have been requested from NHS England. James and Janet have also been presenting some of our key messages at LPC AGMs and at the Pharmacy Show, and this was covered in depth by Janet at the LPC Conference.

Communications: What Next?

We would be interested to hear feedback from the subcommittee on the tone of our Y4/5 and Price Concessions communications – was this right, or is there scope to be feistier/more assertive? We are also thinking about what topics contractor want to hear from us about next – we have had a suggestion that we try to better explain margin so that contractors can have a future outlook rather than always being told what has happened to them six months late, but would welcome thoughts on other topics.

Our webinars continue to get good feedback (as reported later in [Appendix 05/10/22](#)) and the reaction to the CPCF deal announcement was mixed, though we would be interested to hear from Regional Representatives about how this has been for them and what we could do better next time.

Looking ahead, we continue to hear from contactors concerned about the financial situation, and from some about PSNC and how it could better represent them. We need to keep finding new and engaging ways to communicate our work to the sector and to hear from contractors. The vision and strategy and project, as well as the rebranding exercise, will both provide opportunities to engage the wider sector in our work and we need to make the most of these to show that we are open to working in an open and collaborative way. We would be interested in subcommittee views on this.

Finally, there have been a few suggestions that PSNC should have WhatsApp groups – for example to gather data on price rises – but we are very conscious of the tendency for communications on WhatsApp to be less than constructive, and also about our limited capacity to monitor and respond to large volumes of new communications. This is something that we could look at as part of the survey and/or for Community Pharmacy England to consider.

Subcommittee Action

The subcommittee is asked to consider:

- Whether the recent communications on CPCF Years 4 and 5 successfully conveyed the messages that the Committee wanted it to. What could we do better next time?
- What topics do contractors want to hear more from us on?
- How do contractors want to engage with PSNC – WhatsApp, other routes? What are the risks and benefits of these? How would we monitor them?
- What further options should we consider for our survey on communications next year?
- How can we maximise the opportunities presented by the vision and rebrand projects to engage better with contractors?
- Share any other comments or feedback on contractor communications.

Subject	Pharmacy Communications and Media Work
Date of meeting	October 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.

Death of HM Queen

Following news of the Queen's death, as a mark of respect PSNC paused its communications (other than for a very small number of business-critical updates for contractors and LPCs) for the first few days. A news story, black banner and black logo were added on the website in line with other organisations, along with black logos on our social media accounts.

The Comms Team also worked with Gordon Hockey, Suraj Shah and Dan Ah-Thion to co-ordinate messaging from NHS England and NHS Digital about arrangements for instalment dispensing of controlled drugs and the need to update pharmacy opening hours on NHS Profile Manager.

CPCF Negotiations Announcements

With no sign of an announcement on CPCF negotiations in sight, we took the decision to [update contractors](#) ahead of the summer Parliamentary break, letting contractors and LPCs know that PSNC had been pushing for urgent resolution but that changes in ministerial teams had slowed progress.

Following the meeting of the PSNC Committee in September, agreement for Years 4 and 5 was reached and announced. Our communications outlined why the Committee felt that it must accept this deal (retaining the £100m in excess margin was vital), but were clear that PSNC knew it must continue to push for urgent additional funding and capacity-releasing measures for the sector.

[CPCF arrangements for 2022/23 and 2023/24 agreed](#) [PSNC Briefing 029/22: CPCF Arrangements for 2022/23 and 2023/24](#)

The Leadership Team hosted a webinar on the CPCF arrangements giving contractors a chance to ask questions of the team. This was held on Tuesday 4th October – it was attended live by 189 people and a further 200 have since watched the [on-demand version](#). More than 90% of attendees said they had found it 'useful' or 'very useful' with 88% saying they would recommend the webinar to others.

Statements relating to economic issues

Over the summer financial concerns worsened, and PSNC continued to receive emails from contractors concerned about the pressures they and their teams are experiencing, particularly in regard to price concessions. The team has been responding to these queries on an individual basis as well as working to raise awareness of PSNC's work on funding and pressures.

Communications included [a call for help with utility bills](#) as an increase to the energy price cap was announced, and disappointment that [an NHS pay rise announcement](#) didn't mention any extra funding for community pharmacies. PSNC CEO Janet Morrison also released a [written blog](#) and later a [video update](#) acknowledging the extreme pressures on pharmacy teams and her ambitions to improve the situation.

To help with external messaging, we have also now released a [Pharmacy Pressures Animation](#) which uses data from our Pharmacy Pressures Survey earlier this year.

Price Concessions Communications

Medicine supply and pricing issues reached an all-time high over the summer. PSNC issued an [update for contractors](#) which included an updated patient leaflet and a series of practical tips; scheduled a webinar to explain how the process works; and shared [PSNC's work seeking to improve the system](#). Following the September PSNC meeting, we made a further [demand for a price concession fix and wider help for contractors](#).

More than 700 people registered for the webinar, which received an 87% usefulness rating. The event was well received with several attendees thanking us for understanding and taking the time to explain the intricacies of the system that PSNC is negotiating within.

Discount Deduction Announcement

The [announcement of changes to the discount deduction scale](#) caused much concern amongst contractors. Unfortunately, due to the complexity of the changes, there were some misunderstandings that PSNC quickly sought to address. The release of our [impact calculator tool](#), alongside some further information and context, brought some reassurances for contractors. The Funding Team have also very recently held a [webinar](#) to explain the changes in more detail and answer contractors' queries. 109 people attended this webinar with 96% saying they had found it useful.

2021/22 Annual Report

[The report has now been published](#), as a digital report (styled as a mini website), a flipbook reader, and a downloadable PDF version. It will be promoted in our email newsletters and on social media over the next few months.

Pharmacy press queries

Recent topics we have been asked about include negotiations progress, temporary closures, medicine supply and pricing issues, flu vaccination preparation, clawback of excess margin, workforce pressures, potential for strike action, rising energy bills, discount deduction changes, and the TAPR programme. We continue to issue press statements and commentary on a regular basis.

National media work

There were concerns about a shortage of flu jabs following the NHS changing its mind to include 50 to 64-year-olds in the eligibility cohorts again at short notice. Alastair Buxton was quoted in both [The Telegraph](#) and [The Sun](#) saying the sudden U-turn would add to pharmacy teams' workload.

In August, Mike Dent was quoted in several papers about medicine supply issues, with Committee Member Fin McCaul making an appearance on LBC Radio's Drivetime programme to discuss the issue.

This month (October 2022), Channel 4 News reported on the increasing price of medicines and the effect this is having on high street pharmacies who are being forced to absorb the additional costs. Though PSNC was not directly referenced in the report, the Channel 4 Team did make use of the briefing materials provided by PSNC, including on pharmacy pressures.

PSNC were also contacted by the BBC Look North Team in October about the rate of pharmacy closures. We have provided them with pharmacy closures data for Yorkshire and the Humber and at the point of writing are waiting to see if this leads to some coverage.

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
29/07/22	Fri	17:51	LPC News: July 2022	48.8%	12.8%	26.3%
01/09/22	Thu	18.01	LPC News: August 2022	48.9%	15.3%	31.4%

Updates to the LPC Members' Area

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

- Following the publication of the declaration data for the 2021/22 Pharmacy Quality Scheme (PQS), PSNC's Services Team has published an infographic template for LPCs alongside a PSNC infographic on the outcomes of the scheme.
- A template LPC version of PSNC's Briefing on the Outcomes of the 2021/22 PQS has been published.
- PSNC's LPC insurance page has been updated to include the LPC Professional Indemnity Insurance Policy for 2022/23 and other relevant information.
- An infographic containing information on the number of Advanced services provided by community pharmacy teams in England during 2021/22 has been published along with a template version so that LPCs can create their own infographic.

PSNC digital communications report (full report overleaf)

July 2022: The most popular topics this month were price concessions and the New Medicine Service (NMS). The Medicine Supply Notification for Alendronic acid tablets was also popular. The largest number of visitors to the website this month was on Tuesday 19th July. This was the day that PSNC published its [response](#) to the NHS Pay Review Announcement.

August 2022: This month, the most popular topics were price concessions and Serious Shortage Protocols (SSPs). The news stories announcing the publication of the service specification for the 2022/23 flu vaccination service and the changes to the training requirements for this service were also popular. Our largest peak in website numbers this month was on Monday 1st August.

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.

July 2022 digital communications report

PSNC Website

Audience	July	June
Number of unique visitors (site entrances)	202,206	217,192
Number of unique pageviews	305,168	344,145



Most popular

Pages	Views
Price Concessions	44,046
New Medicine Service	6,184
Hypertension Case-Finding Service	5,301
Controlled Drug Prescription Forms and Validity	5,016
Serious Shortage Protocols	4,338

News stories	Date	Views
Medicine Supply Notice: Alendronic acid 70mg tablets	14/07	5,677
C-19 vac autumn booster programme	30/06	3,563
MSN: Promethazine hydrochloride 25mg tablets	07/07	1,842
June 2022 Price Concessions Final Update	30/06	1,723
Smartcard deadline approaching	10/06	1,887

PSNC Briefings	Views
016/22: Contractor checklist ahead of EOI for C-19 Vac Service	1,228
018/22: Pharmacy opening hours for 2022 and 2023	674
017/22: CPAF screening process for 2022/23	456
008/16: EPS factsheet – Reconcile EPS prescription figures	295
041/21: Guidance on the Hypertension Case-Finding Service	233

Webinars/videos	Plays
GP CPCS animation	1,151
Part 2 PQS 2020/21 Digital Guide	438
Value of pharmacy animation	318
The NHS CPCS for NHS 111	193
SCR views from P and S Chemist (extract from NHS Digital PSNC webinar)	149

PSNC Emails

Averages each month	Opens	Clicks	Clicks to opens
PSNC Newsletter	39.06%	5.25%	12.15%
LPC News	48.8%	12.8%	26.3%

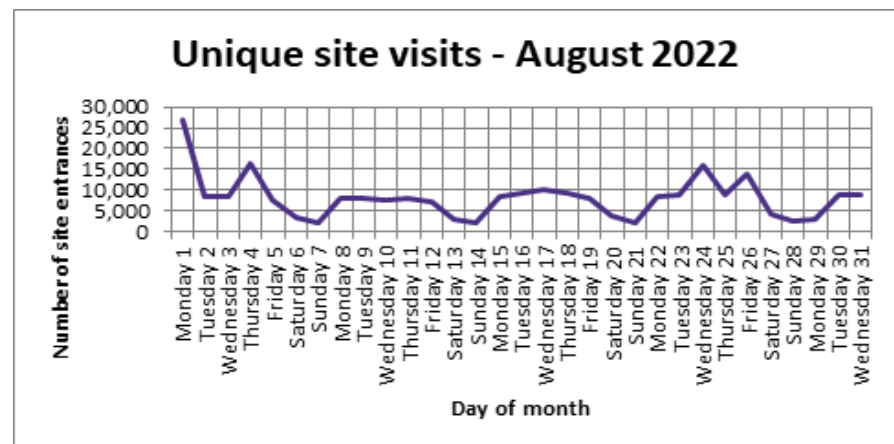
Social Media

	July	June
Twitter reach	50,423	36,875
Twitter interactions	3,098	1,933
Facebook reach	333	257
Facebook interactions	27	4
LinkedIn reach	3,663	2,012
LinkedIn interactions	23	7

August 2022 digital communications report

PSNC Website

Audience	August	July
Number of unique visitors (site entrances)	251,973	202,206
Number of unique pageviews	368,605	305,168



Most popular

Pages	Views
Price Concessions	68,848
Serious Shortage Protocols	21,195
Controlled Drug prescription forms and validity	5,859
New Medicine Service	5,497
Price Concessions	68,848

News stories	Date	Views
Medicine Supply Notice: Aripiprazole 10mg tablets	03/08	4,409
Flu vac: service spec published	16/08	2,863
Flu vac: changes to training requirements for 2022/23	16/08	2,772
Managing a temporary pharmacy closure	05/08	2,360
Changes to discount deduction arrangements	26/08	2,161

PSNC Briefings	Views
024/22: Emergency closure checklist for community pharmacy	1,215
017/22: CPAF screening process for 2022/23	818
023/22: How the price concession system operates	810
025/22: Guidance on 2022/23 Flu Vaccination Advanced Service	518
008/16: EPS factsheet – Reconcile EPS prescription figures	513

Webinars/videos	Plays
GP CPCS Animation	1,100
Part 2 2020/21 Digital Guide	365
Value of Pharmacy Animation	309
Future of Pharmacy Animation	171
SCR views from P and S Chemist (extract from NHS Digital PSNC webinar)	155

PSNC Emails

Averages each month	Opens	Clicks	Clicks to opens
PSNC Newsletter	35.71%	3.59%	10.08%
LPC News	48.9%	15.3%	31.4%

Social Media

	August	July
Twitter reach	36,231	50,423
Twitter interactions	2,425	3,098
Facebook reach	1,010	333
Facebook interactions	42	27
LinkedIn reach	5,604	3,663
LinkedIn interactions	29	23

Subject	Parliamentary Engagement and Public Affairs
Date of meeting	October 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

APPG for pharmacy

Following the appointment of Liz Truss MP as Prime Minister in September, the Chair of the APPG, Jackie Doyle-Price, was appointed a government minister, meaning she was required to resign as Chair of the APPG. The APPG has begun the process to select a new Chair.

Ministerial communications

The CEO wrote to both the Prime Minister as well as the Health Secretary shortly after their appointments. We welcomed them to their posts and outlined some of the key issues that we and the Government need to prioritise – including the pressures on the sector, and the need for a fully-funded walk-in service. The CEO has also had an introductory meeting with Pharmacy Minister Will Quince MP, as previously reported to the Committee.

MP meetings

PSNC is due to meet shortly with Steve Double MP and Paul Homes MP. These meetings will be held jointly with the relevant LPC Chief Officers. This will be an opportunity to brief the MPs on the current challenges the sector is facing from both a national and local perspective. It will also allow us build support for our wider influencing objectives.

Wider Public Affairs Work

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 Telegraph. The petition recently surpassed 100,000 signatures and we are now looking for relevant national media opportunities.

Think tank engagement

PSNC recently met with Robert Ede, Head of Health and Social Care at the think tank 'Policy Exchange'. Dr Sean Phillips, Research Fellow, Health and Social Care Unit was also on the call and gave an overview of their forthcoming report focussing on vaccination policy in primary care. Supported by the Services Team, we briefed them on the current challenges the community pharmacy sector is facing and talked through various policy areas that were of interest. It was a very positive meeting and we have offered to support them in any relevant future work.

As part of our wider influencing strategy, we hope to start to build relationships with other influential think tanks in the coming months.

Health Select Committee inquiry on Integrated Care Systems

We made a joint primary care submission to the Health and Social Care Select Committee inquiry into Integrated Care Systems: autonomy and accountability. This has now been [published](#).

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 the coming weeks we will be launching a new toolkit of resources to help LPCs to engage with our key target MPs and we are holding webinars on Wednesday 26th October to discuss our new influencing plans with

them. We have met with the chief officers of the LPCs who represent the constituencies of both Liz Truss MP and Therese Coffey MP, to discuss what engagement action may be beneficial.

Weekly public affairs meeting

PSNC continues to meet weekly with representatives of CCA, AIM, NPA, RPS to share ongoing priorities and relevant workstreams.

Party conferences

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

Next Steps

Parliamentary drop-in

As outlined in the Strategic Influencing paper, we are holding a Parliamentary drop-in event on Tuesday 15th of November. This will be an opportunity to demonstrate the hypertension case-finding service as well as talk to MPs about the extraordinary challenges the sector is currently experiencing. We have invited representatives of all LPCs to join us, and we hope that the British Heart Foundation, will also be involved in this event.

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. We are working on an updated version of the pharmacy funding and capacity briefing that will focus on pressures. This will be published as part of a package of resources including slides and MP briefings (for LPCs and others), as well as a concise briefing for MPs.

Supporting LPC engagement

We are continuing to offer LPCs support with their MP engagement, and the winter pressures/vaccination season always provides a good opportunity to do this. We are in the process of updating resources to help with this, including an update to our MP visits guidance, key messages and post-pharmacy visit press releases for both MPs and LPCs.

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.