



Newsletter

Andrew takes the tiller

As newly elected Chair Gloucestershire LPC I first want to thank Chris Gifkins for his time here these past 16 years as Chair and wish him well at the interface of pharmaceutical care in his new role in GP surgery.

NHS England recognises the interface between Hospital / GP and Community Pharmacy is the one where we can add the most value to patients journey through the NHS so we need to develop a plan that puts our pharmacies and pharmacists at the centre of that pathway.

Using resources from PSNC, NPA and PV the LPC will aim to support contractors and Gloucestershire's pharmacists deliver services to the communities they serve in what will be the most financially challenging times we have seen in the NHS.

To move towards this challenge I want to create a manifesto for the LPC in Gloucestershire. We will aim to:

1. Take pressure off the local NHS by providing basic health services and treating minor ailments.
2. Ensure the right amount of pharmacies are in the right communities, so patients who need support can get the care they need when they need it.
3. Remove inefficiencies in the local pharmacy system, whilst ensuring that no patient is left behind.
4. Develop a charter of patient care to ensure our patients get the best advice when taking their medication.
5. Run a campaign to remind the communities we serve of the integral role that their local pharmacist and pharmacy play in their community.

Continued overleaf >



INSIDE THIS ISSUE

LPC and parliament.....	2
Introducing Ilyas	3
SCR for locums.....	4
NHS111 referrals.....	4
Repeat prescriptions.....	5
CPAF.....	6
MAS.....	6

Solution: does your patient need a “Sharp-Safe” Sharps Bin?

Some patients using once-weekly GLP1 agonist injections (e.g. Bydureon) have been experiencing problems in disposing of the used pen. It is recommended that they dispose of the entire pen in a sharps bin, however the pen does not fit in the standard sharps bins usually supplied on prescription!

The one litre “Sharp-Safe” bin is now included in the Drug Tariff, and will now be held in stock by Alliance (hopefully other wholesalers will follow suit soon). This is an upright container, which will take the pen complete.

Please can you review patients on this medicine and ensure that they are receiving an appropriate Sharps Bin?

Andrew takes the tiller (continued)

In essence I want to see Community Pharmacy using its commercial know how and innovation to add value to the local NHS this evidencing our value to commissioners.

It's going to be tough and will demand that each and every pharmacist and Community Pharmacy Team steps up to this challenge.

The National organisations cannot make a value case for Community Pharmacy unless we can deliver value to patients locally and evidence that value.

The LPC is there to support you in delivering that value and I look forward to the challenge in driving that strategy.

Andrew Lane

Your LPC influencing parliament

On Tuesday 24th May a **pharmacy health checks and speed briefing event** was held in Westminster to share the vital work that community pharmacies do for patients, and concerns about the proposed funding cut for the sector. MPs heard how the plans are putting some pharmacy services at risk and the impact that could have on patients. The event was well attended by MPs from all parties, including some who had not previously engaged. From Gloucestershire, Alex Chalk and Geoffrey Clifton-Brown attended (alongside Andrew Lane).

Petition submission

The NPA's 1.8 million signature petition was formally submitted by the following MPs:

- Michael Dugher MP (Labour)
- Sir Kevin Barron MP (Labour)
- Derek Thomas (Conservative)
- Norman Lamb (Lib Dem)

The NPA took multiple pictures and video interviews of the MPs, which are being released on their YouTube channel <https://www.youtube.com/user/NPA1921>

Adjournment debate

An adjournment debate for Community Pharmacies was held on the same evening and was capably lead by Michael Dugher. Footage of the debate can be found at <https://vimeo.com/168005093>

Michael Dugher landed a number of important points on the Minister who, unsurprisingly, continued to press home the points that were made originally in the Government's December letter.

Next steps

The consultation period and petition may have ended but now is the time to convert some of the goodwill we have secured with politicians into action. Here are a taste of some future possibilities being planned by *Pharmacy Voice*:

Post Westminster event briefing - regional briefings provided to all MPs who attended the event by way of follow-up, to maintain their interest and also ensure they are invited to visit a local pharmacy (if they have not already done so).

Conservative backbench lunch - this is planned for 7 June and is already over-subscribed.

The GLA Health Committee has confirmed that the first inquiry they will undertake will be focused on Community Pharmacy reforms.

Patient groups - working with Carers UK and other patient groups.

Rest assured your LPC will be playing their part wherever needed!



Andrew Lane with Nick Jephson of Swindon and Wiltshire LPC at the MP speed briefing

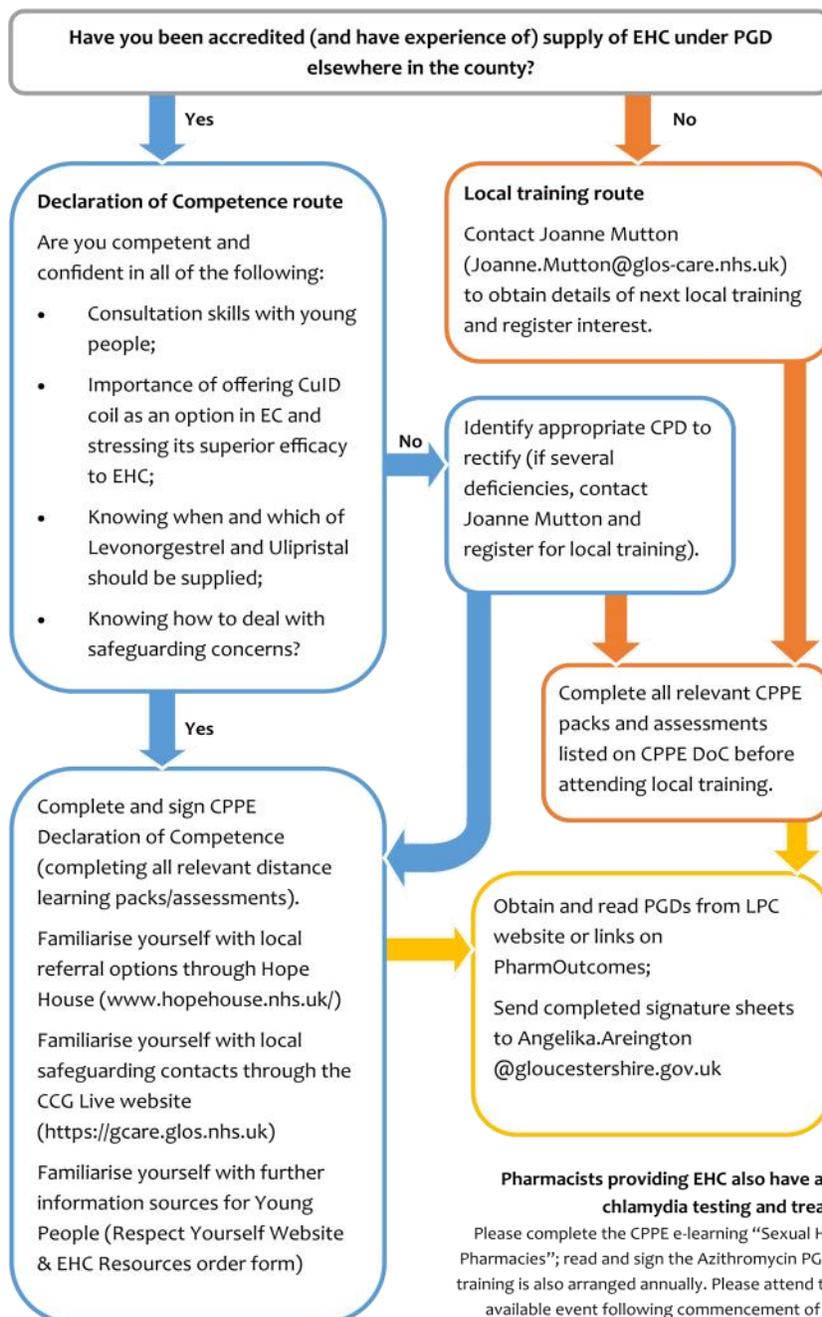
Introducing Ilyas

We are pleased to introduce Ilyas Piperdy as the new LPC Support Officer.

Ilyas will be contacting pharmacies by phone to highlight service opportunities (e.g. NMS referrals) and identify any support that you or your staff may need to deliver such services. We hope you find this individualised contact useful and look forward to any feedback that you may have.

One of Ilyas's early tasks has been making contact with pharmacies commissioned to provide EHC, but who have not been doing so. We found that identifying the Sexual Health training pathway for pharmacists new to the area was confusing. We have created a new flowchart (below) which we hope will simplify things for those looking to offer EHC under PGD. The flowchart is also available to download on our website at <http://psnc.org.uk/gloucestershire-lpc/services/sexual-health-advanced-service/>

Do not start this cycle without checking whether the pharmacy you are working in is **commissioned to provide the service!**



Ilyas Piperdy — on the phone to you soon!

Flu: will you?

We already know that a Flu Vaccination Advanced Service will be commissioned from Community Pharmacy under the same terms and conditions as last year.

The LPC is getting enquiries from training providers about the need for local training events – so it would be helpful to know what demand there might be.

We would also like to know which pharmacies are likely to offer the service and who definitely won't offer the service.

Area Managers and independent pharmacy contractors are encouraged to complete our flu survey — you should have received a link via email, but if not, find the form at

<http://psnc.org.uk/gloucestershire-lpc/our-news/flu-vaccination-advanced-service-2016-17/>



SCR access for locum pharmacists

If you use the Locum Code on your smartcard (i.e. you are a pharmacist whose smartcard will work in any pharmacy), you need to contact HSCIC to have the SCR access code added to your smartcard.

The ability to access the SCR is really important to help you make appropriate decisions on supply of Emergency Medicines (URMS). NHS 111 and the Out of Hours team in Gloucestershire are pushing all requests for Urgent Supplies

of Repeat Medicine towards the locally commissioned pharmacy scheme. Please take action now – and get access through your smartcard.

HSCIC contact details are:

0300 303 5678 or email
enquiries@hscic.gov.uk

This may affect cards where the pharmacist has a regular role with a pharmacy and the locum code as well.

The ability to access the SCR is really important to help you make appropriate decisions on supply of Emergency Medicines (URMS)

Changes to LPC levy

The LPC is funded through a levy on all NHS Community Pharmacy Contracts. The amount each contractor pays is related to the total Net Ingredient Cost (NIC) of the NHS items dispensed by each pharmacy. Currently each contractor pays 10p for every £100 reimbursement of drug costs (0.1%)

As NIC is variable month to month and year to year, this makes budgeting difficult!

Gloucestershire LPC has decided to come into line with the majority of other LPCs and is changing the way levy is collected to a flat monthly sum. Each individual contractor's share will still be related to their total Net Ingredient Cost ensuring the same proportionality.

Gloucestershire LPC will be requesting the same annual amount as received last year.

If you have any questions about this, or the work of the LPC, please do not hesitate to get in touch with Lis or Fiona.

NHS 111 referrals

An independent community pharmacist was contacted by NHS 111 one Saturday morning to determine whether that pharmacy would be able to provide an urgent repeat medicine for a particular patient, recently discharged from hospital (not a regular patient for that pharmacy). NHS 111 told the pharmacist that they were “one of two pharmacies on the rota for that day able to provide the URMS service under the PGD”.

To better explain this statement: in signposting callers to the URMS, NHS 111 will offer patients the service at one of the two pharmacies geographically closest to their home postcode (not necessarily their usual pharmacy).

If the patient called 111 from their home address and there are two pharmacies closer to the address than their usual pharmacy, then their usual pharmacy won't return.

If this happens to you, a couple of factors should be borne in mind:

- The Summary Care Record can help in making informed decisions about supply;
- NHS 111 is not sophisticated enough to filter out Emergency Medicines Supplies which cannot be handled by Community Pharmacy (e.g. Controlled Drugs). The pharmacist should try to contact Out of Hours via the clinical helpline rather than sending the patient back to NHS 111 if at all possible.



NHS 111 call handler at work



Does your pharmacy provide a repeat prescription service?

Repeat Prescription ordering

Nationally, we are noticing a trend of GP surgeries refusing to accept ANY prescription requests that come via pharmacies. This affects not just managed repeat schemes, but also where patients drop in repeat slips to you.

What would be the impact on your pharmacy, if this happened in your locality? What would be the impact on your patients?

The BEST way to ensure that patients can easily collect the medicines they need from your pharmacy is

- Get them signed up to EPS – so that the prescription comes to you whether they have let you know to expect it or not;
- Work with GPs to implement Repeat Dispensing.

When signing patients up to EPS in your pharmacy, please ensure that they UNDERSTAND what they are signing up to. They need to be aware that they are choosing you as their regular pharmacy! Poorly informed consent gives the whole sector a bad name with patients and other professionals. There is nothing more infuriating for a patient/carer than going to pick up a prescription and finding that it is somewhere else!

Be pro-active with GP relationships on Repeat Prescribing and Dispensing.

The only way that we will hold off bans on managed repeats (and potentially any ordering by patients via Community Pharmacy) is for these relationships to be rock solid.

You may be aware of these changes in other parts of the country – sometimes known as the “Coventry model” or the “Luton model” where CCGs believe that they can make savings on waste by changing the patient interface for the ordering of Repeat Medicines. The LPC believe that this leads to confused patients, and greater numbers of requests for Emergency Supplies. However it is important that you work with your local surgeries to ensure they understand that you are part of the solution in managing Repeats and not the problem!

The LPC we would like to offer to facilitate any meetings between practices and pharmacies where there is perceived to be poor practice around managed repeats. These meetings are useful as it is soon realised that the issues around repeat management are multi-factorial and not down to one party. Do get in touch with Lis or Fiona.

Gloucestershire Local
Pharmaceutical
Committee represents
contractors locally and
nationally to create an
environment for
community pharmacy
to flourish.

Please get in touch if
there are any questions
or issues that we can help
you with.

We'd love to know what
you think about our
newsletter; if you have
any feedback, please
contact Lis Jardine.

Chief Officer

Fiona Castle
Tel: 07565 537319
fiona.castle@lpcoffice.org.uk

Communications Officer

Lis Jardine
lis.jardine@lpcoffice.org.uk

LPC Support Officer

Ilyas Piperdy
Tel/text: 07985 308539
support@lpcoffice.org.uk

Committee

Chair: Andrew Lane

Vice-Chair: Phillip Lewis

Treasurer: Aitzol Calleja

Members:

Mike Powis
Gary Barber
Magdalena Bogdan
Wayne Ryan
Peter Badham
Pete Arthur
Pat Quinn
Iqbal Topia
Sian Williams



CPAF arrangements for 2016/17

Following the success of the process for 2015/16, the process for 2016/17 will follow the same format, but will start earlier in the year to align with the usual compliance timeframes and to avoid pressure points. Pharmacies will be asked to complete the screening questionnaire during June 2016.

The NHS Business Services Authority (BSA) will carry out the administration of both the screening questionnaire and the full CPAF at a national level on our behalf and this is facilitated through a secure on-line mechanism to allow pharmacy contractors to complete their returns.

You will have four weeks to complete the screening questionnaire which will be available from Monday 6 June 2016 with a closure date of Sunday 3 July 2016. The questionnaire should only take around 20 minutes to complete and you will receive information and instructions on how to access and complete the questionnaire from the BSA in advance of the availability date.

Once you have submitted the completed questionnaire you will have the facility to save, print or access your responses for further reference.

The BSA will contact you shortly with instructions on how to access and complete the CPAF questionnaire.

Please ensure that NHS England have an email address for your pharmacy which is regularly checked!

If you have any queries in the meantime, please contact the relevant office for your area:

Sharon Hodges: Sharon.hodges2@nhs.net 0113 8253512 (Gloucestershire and Swindon)

Minor Ailments Service spreads like emollient on dry skin

Gloucestershire is becoming a more healthy place to live, as more and more pharmacies sign up to offer the Minor Ailments Service. After the hugely successful pilot in Gloucester and Tewkesbury, the service rolled out to the rest of the county in April 2016.

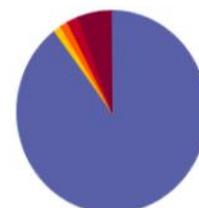
Pharmacies who have since registered and become active are:

Cotswold Pharmacy, Lloyds Pharmacy Abbeydale, Badham Pharmacy Hewlett Road, Badham Pharmacy in Newnham, A D Byers Pharmacy, Badham Pharmacy St Pauls, St Marks Pharmacy, Wymans Brook Pharmacy, Badham Pharmacy Church Road, and Dudley Taylor Pharmacy in South Cerney.

Well done to you all!

If you are interested in joining the scheme, take a look at our MAS info (including a 'getting started' guide) at <http://psnc.org.uk/gloucestershire-lpc/services/minor-ailments-service/>

TOP TIP: encourage your local GP practices to refer **hay-fever enquiries** to pharmacy!



■ Would have gone to GP
■ Would have gone to A and E
■ Would have gone to Walk-in Centre
■ Would have gone to OOH medical service
■ Other

89% of patients using the MAS scheme would have gone to their GP otherwise — we are saving the NHS thousands!