

2015/16

# Annual Report



Fiona Castle

Gloucestershire Local Pharmaceutical Committee

# Chief Officer Report 2015-16

## Strategy

In November 2014, a strategy/action plan was developed which was reviewed in March 2015 to guide the LPC work through the financial year. This included objectives in the following areas

### Governance

- The committee will have a clear strategic agenda which is visible to contractors
- Appropriate training opportunities for members will be identified and taken up
- The LPC Self-Assessment devised by PSNC will be reviewed every 6 months and appropriate actions agreed

### Communications and Relationships

- A useful and current website will be maintained
- The LPC will be seen and known at Health and Wellbeing Board meetings
- The whole LPC will engage with a stakeholder guest at each LPC meeting
- A stakeholder environment will be created where Community Pharmacy can flourish

### Service Development

- Work with the CCG will continue to develop URMS, Minor Ailments and Palliative Care
- Work with Public Health will continue to develop Sexual Health and Substance Misuse services (including Stop Smoking and Alcohol awareness)
- Engagement with NHS England will continue of flu vaccination and rotas
- Work with the LPN will be done on cross-sector initiatives including Hospital Discharge projects

### Contractor Support

- The LPC will support PSNC national negotiations and disseminate local information and support to contractors
- A database of useful information to help contractors deliver local services will be built and shared through the website
- Contractor meetings and communications will be supported
- Advice and support will be provided to (groups of) contractors interested in setting up a local Provider Company
- Relevant information will be disseminated to support roll-out and effective use of EPS2
- Opportunities for increasing targeted MUR and NMS will be identified

### Healthy Living Pharmacy

- The LPC will engage with all parties to deliver 54 accredited pharmacies by December 2015
- Support will be given for well-planned and effective Health Promotion Campaigns
- Embed recognition of HLP status in development of commissioned services
- Promote benefits of HLP to commissioners, demonstrating value to lead to further commissioning

## Notable Achievements within Strategy

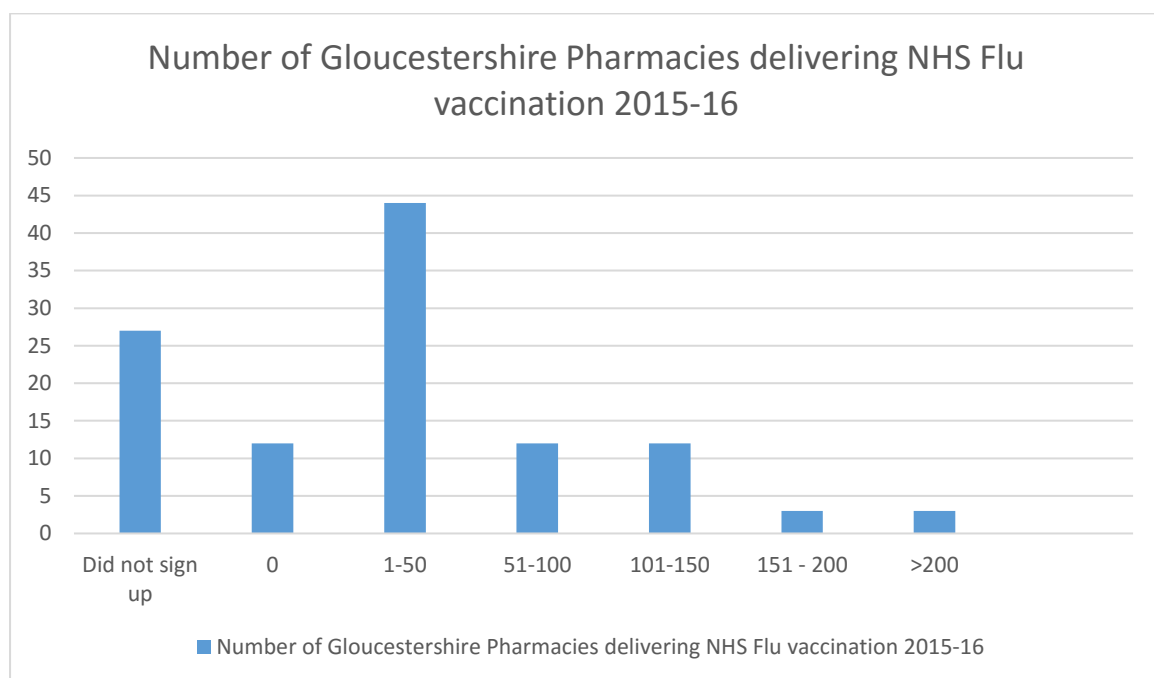
- The LPC website has been updated and refreshed; information to support locally commissioned services is clear and concise.
- LPC representatives are known by councillors attending “Health and Wellbeing” and “Health Overview and Scrutiny” committees. Support for Community Pharmacy has been voiced publicly
- Training requirement for the Sexual Health services have been reviewed; inclusion of the use of CPPE Declaration of Competence for pharmacists experienced elsewhere has been included as an accreditation route
- Ordering of condoms for the condom distribution scheme has been simplified using a PharmOutcomes service
- The LPC has been actively involved in discussions leading to the Substance Misuse tender and Healthy Behaviours tender by Gloucestershire County Council
- Claims for NRT vouchers were moved to PharmOutcomes, which protected the service when the department who had been processing the paperwork closed
- Despite no LPN being formed, a referral scheme for NMS on patients whose anticoagulation is started by the TIA clinic was negotiated directly with clinicians
- Urgent Repeat Medicines service is thriving – the LPC has worked with the appropriate team to have this as an option appear to NHS111 operatives
- The Minor Ailments Scheme has been rolled out across the whole of Gloucestershire
- Contractor meetings were organised on the following themes
  - Annual EHC update (in conjunction with Gloucestershire Care)
  - Respiratory MUR & Inhaler technique
  - Exploring whether a Provider Company is worth creating locally
  - Winter Pressures (flu vaccination & minor ailments)
  - Anticoagulant NMS
  - Supporting Urgent Care / Risking Happiness
- The LPC has worked closely with the EPS Implementation team, trying to avoid implementations around Christmas; highlighting system problems where the GP Practice has errors on their systems; encouraging a focus on Repeat Dispensing
- The LPC has worked with the “Don’t Wait to Anticoagulate” project by WEASHN and Gloucestershire CCG to promote the role of NMS when patients are newly prescribed or changed anticoagulant
- The Healthy Living Pharmacy project was supported by
  - Work of Barbara Workman
  - Organisation of Healthy Living Champion Training
  - Organisation of Pharmacy Leadership Training
  - An evaluation of the outcomes/benefits of the project to date

## Flu Vaccination

The LPC submitted business cases and lobbied commissioners and stakeholders with the evidence for commissioning a flu vaccination service through Community Pharmacy.

NHS England locally had decided not to proceed with a locally commissioned flu vaccination service for at risk groups, however the national service was commissioned and well supported by local contractors.

The LPC also negotiated a “voucher scheme” for occupational health vaccinations identified by Gloucestershire County Council. The council distributed 480 vouchers to eligible staff



Gloucestershire pharmacies claimed a total of 4993 NHS flu vaccinations and a further 161 through the Gloucestershire County Council voucher scheme.

## Healthy Living Pharmacy

In total 46 pharmacies had achieved HLP1 accreditation by the end of the financial year. An additional wave, including many Lloyds Pharmacies commenced the journey at end of 2015-16 and received Champion and Leadership training.

An analysis of the impact of HLP on the Wave 1 pharmacies' participation in public health services was carried out and concluded

“Pharmacies achieving accreditation for Healthy Living Pharmacy have demonstrated their commitment to engaging in locally commissioned services. They have generally maintained or increased the number of clients for services which require pro-active engagement to deliver successfully.

It is noted that recruitment for services such as Stop Smoking have become more difficult recently, either because many remaining smokers are “hard-core” or because many are choosing to use vaping as a harm reduction alternative.

Many services are also location/demand lead. The data suggests that the HLP Project has supported pharmacy engagement and availability of services within the pharmacy. Further work on promoting the services available should now be explored, since a “critical mass” of HLP Accredited/Engaged pharmacies has now been reached.”

Going forward the accreditation process for HLP1 status will follow the national self-accreditation model.

## Finance Report

### Gloucestershire LPC Income and Expenditure Financial year 2015-16

<b>INCOME</b>	£	£
Levy	152668.06	
HLP - PharmOutcomes	18033.00	
HLP - Other	13377.58	
Industry Sponsorship	890.75	
Interest	711.38	
Service Funding	0.00	
Service Management Fees	0.00	
Unspecified	150.00	
		185830.77
<b>EXPENDITURE</b>	£	£
Committee Administration	69301.56	
Governance	2764.39	
Communications/Relationships	4131.11	
Service Development	12164.47	
Contractor Support	58589.89	
HLP	24859.41	
		171810.83
Surplus		14019.94
<b>BANK CONTROL</b>	£	£
Actual Balance	89399.98	
Variance to balance (excl. outstanding)	0.00	
Reserve	89399.98	

