



LOOK AT OUR WEBSITE

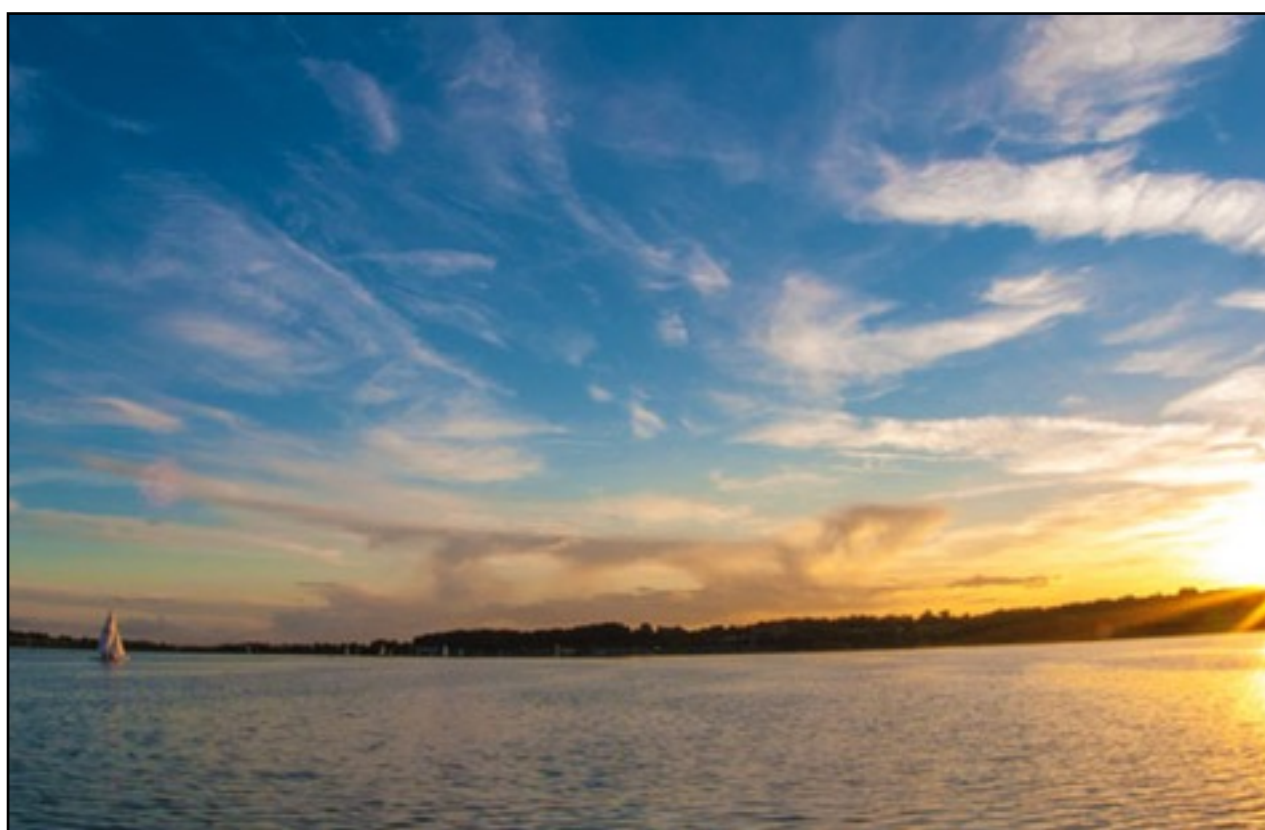


MORE GO LIVE DATES



AGM

# NORTHANTS AND MK LPC NEWS



## Your LPC makes its views known on RPS and NAPC consultation

The LPC was asked to respond to the Royal Pharmaceutical Society (RPS) and the National association of Primary Care (NAPC) joint consultation document by 9th October 2015. The document, Improving patient care through better general practice and community pharmacy integration intends to use the outcome to influence future government policy. The RPS has stated that it intends to use the results of the consultation to press for changes in primary care. The PSNC advised LPC's to look closely at their guidelines to help with an appropriate response because the plans

As the national body representing community pharmacy contractors on NHS matters, PSNC has serious concerns about the proposal to scrap the current contractual framework and funding

to replace the current arrangements for funding , replacing it with ‘a joint population health approach to the provision of NHS care’, are alarming. The RPS and NAPC have not made it clear what is meant by this and so cannot risk contractors’ businesses being put at the mercy of untested and unknown radical changes to funding and commissioning of core pharmacy services. The NHS is already refining commissioning, with co-commissioning of some GP services. We know the NHS has its sights on extending co-commissioning to include pharmacy. While there may be some opportunities to gain through access to broader funder streams, the opposite is also true; the pharmacy pot could be susceptible to raids by Local Authorities and CCG’s. Sue Sharpe, PSNC Chief Executive, pictured right, commented as follows: “We agree with the RPS and NAPC on the need for community pharmacists to be the first port of call for people with symptoms and as we confirmed earlier this summer we had already been seeking a community minor ailments advisory service as part of the 2015/2016 funding negotiations. Where we part company with the rps and NAPC is their apparent suggestion that we can abandon provider-based commissioning. We are very concerned by the comments from the rps President stating community pharmacy has been straiqhjacketed by a ‘top down’ national contract. Far from being a straightjacket for pharmacy owners the core contractual framework and its funding has been and remains a vital protection and PSNC will battle to protect this principle.



Northamptonshire and Milton Keynes LPC were guided by the PSNC in offering their response reflecting their belief that community pharmacy clearly has a role in innovative local services. We believe that such developments take time and would not be possible without support from national core funding. We elected only to offer comment rather than select from the tick boxes which did not appear to enable elaboration on selections. We commented: “Community pharmacy can adopt many principles in this document using the current pharmacy contract and would be able to provide as advanced services. No change in contract would be beneficial to patients due to destabilisation of service and provision.”

*We need to avoid fatal shocks through ill-thought*



While community pharmacy can clearly have a role in some if not all of the multi-disciplinary care settings, a core benefit of community pharmacy is its accessibility particularly in some of the most deprived communities. For this reason exercise caution about suggestions to transfer the community pharmacy network into multi-disciplinary care settings.

The committee would like to extend their thanks to all those who attended the AGM in Flore last week. After enjoying refreshments the audience were welcomed warmly by our Chair, Sue Snelling and introduced to the committee members present. Sue outlined the transformations that the committee has undergone following a turbulent 12 months and the subsequent restructuring of the committee into four sub groups reflective of the experiences and strengths within the team. These sub committees are Governance, Finance, Contracts and Services each working within their own Terms of Reference (TOR) which can be found on our website <http://psnc.org.uk/northamptonshire-and-milton-keynes-lpc/>

The TOR was implemented to define and develop the scope of each group. The Chief Officer was then introduced and spoke briefly about Services and engagement. The improvements in communications were highlighted by the numbers attending the meeting but there is still work to be done particularly with regard to feedback . Anne-Marie was disappointed in the lack of uptake in a recent Survey Monkey designed to assist in identifying current and future need for services. This year has seen the website being improved and the publication of a monthly electronic newsletter. Very few LPC's are able to offer such a frequent newsletter.

Raja Srikakulapu, Treasurer, assisted by Daljit Poone of the finance sub committee then presented the statement of accounts and offered an explanation of the figures displayed. The accounts, verified by our accountants were sent to the contractors 30 days previously in line with our Constitution. We asked for their approval and the votes received either by post or on the night of the AGM were unanimous in favour of their acceptance. Raja went on to share the well received news that the LPC were in a position to offer a reduction in the levy for 2015/16 of 75% and in 2016/17 of 44% (assuming expenditure remains the same as in previous years). The present excess in the account is in part due to the merger of Northants with Milton Keynes to form Northamptonshire and MK LPC and is not in line with PSNC guidance to have only 50% of projected expenditure in the account. The reductions proposed will bring the monies held in our account back into line. The Finance committee described a proposal to change the accountancy firm used by the LPC during our September committee meeting. We have previously been clients of Cottons Chartered Accountants and will now be with Esitaas, 10 Flowerhill Drive, Wellingborough. NN8 4GF.

## *Record numbers attend Northants and MK LPC AGM*



*This year has been challenging for the LPC after going through a major restructure*



*The Treasurer announced that there will be a reduction in the levy of 44%*

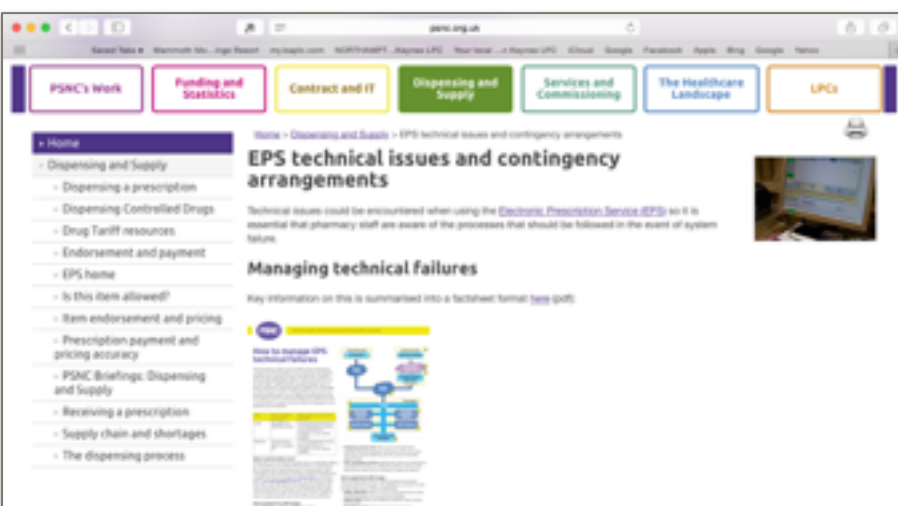
## Electronic prescription service presentation at AGM

We were delighted to host Daniel Ah-Thion, EPS Lead. Dan joined the PSNC in 2011 and leads on EPS which includes policy, liaising with stakeholders and providing information to LPC's and contractors on the subject. Dan can be contacted on 0203 1220 816. The local contact for GEMCSU is posted on our website (see under either Northants or MK and click "EPS") as well as the details for Registration Authority offices (service desk for all clinical system, RA and IT issues is 0300 123 1020)

Dan has thanked us for our hospitality and said "...very nice to attend (the AGM), hear about the great progress, and meet you all."

The presentation included an essential EPSR2 checklist and troubleshooting, how to manage EPS technical failures and EPS exemption for example getting more out of your system and avoidance of the biggest reimbursement risks e.g. exemption and expiry. Factsheets for all these key points can be found in the EPS section on PSNC website. If you attended the AGM and feel that you would like to view these I will be happy to send the details to you on request.

As I discussed in the September newsletter there are events planned on EPS training. These are free to attend and details are on the website in the latest news section (5th item along). Maybe consider going along as a refresher because as our Chair commented; "I thought that my knowledge of EPS was quite sound but even I found this masterclass beneficial."



*Daniel Ah-Thion,  
EPS Lead at PSNC  
presented at the  
AGM*



As part of your business continuity planning, it's useful to know how you would manage (and reduce risk of) issues such as broken printer, lack of ink, or an absence of token stationery (see <http://psnc.org.uk/dispensing-supply/eps/contingency-arrangements/eps-technical-issues-and-contingency-arrangements/>)

## Next practices in our area going live

As EPS introduces changes for pharmacy teams, GP practices, staff and patients, it is important to ensure that, before the system goes live, everyone involved understands and agrees how the new processes will work for them.



Nationally, 60% of GP practices are now live. The statistics for our area are 74% in MK, 41% in Nene and in Corby 60%. The next go live dates across Northants and MK for EPS are:

Penvale Park Medical Centre 6/10/15 Nene CCG

Broughton Green HC 12/10/2015 MK CCG

Wootton medical Centre 19/10/2015 Nene CCG

Nene Valley Surgery 18/11/2015 Nene CCG

Other practices expressing an interest:

Bedford St and Furzton MK CCG

Higham Ferrers Surgery Nene CCG

Burton Latimer Health Centre Nene CCG



Alison Patrick, EPS Lead for our area (01604 6512340) reminds you that the Prescription tracker has been updated and is now even better. You will find new features being added regularly. The latest version includes a new "My Site" function, which allows prescribers and dispensers to search for all prescriptions on their site. (NB not a functionality when using Virtual Local Pharmacy because this is a virtual organisation).

### TOP TIPS

- Identify named contact points at the gp practice and pharmacy for queries and ensure regular two-way communication
- Allocate someone to take notes of the session, so that everyone has a copy of any agreed decisions.
- Book a series of catch-up meetings to review the previous seven days.
- Arrange reciprocal visits to walk through the processes and improve understanding within the GP practice and pharmacy.
- Proactively alert patients to the introduction of new ways of working and ask for their support and patience during early days

## GP's going live before pharmacy ready.

- NHSE should reject a go live from a GP if:
- the proposed implementation date included in the application provides less than 8 weeks notice;
- the applying organisation has not yet confirmed that relevant LPC's have been engaged or;
- smartcards and dispensing tokens are not available for all relevant pharmacies affected by the planned go live.

The LPC also might delay GP go lives as a last resort in some scenarios e.g. by two weeks

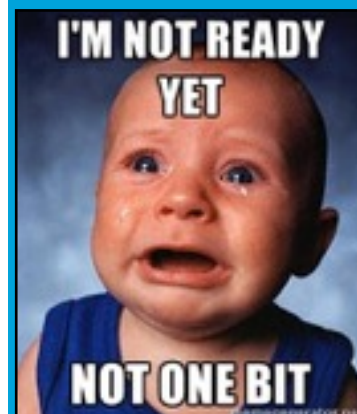
## Abuse of Nomination setting

As part of NHSE work on direction of prescriptions, the PSNC has been encouraging them to develop processes for identifying instances of large scale setting of EPS nominations and taking action where there is evidence that patient's consent has not been obtained when setting nominations. NHSE is working with HSCIC to identify the tools it needs and Steve Lutener, Director of Regulation and Support at PSNC has been asked to identify any cases of large scale setting of nominations in circumstances where the patient has not consented. Please let the Chief Officer know of any recent examples of where you are aware of large numbers of nominations being set unexpectedly. You do not need to include patient details. I will just forward your F code to Steve who would then compare and contrast the unexpected loss of patients against a corresponding rise in nominations at another pharmacy (would also require their F code). I would also need the month in which there was some abuse.

## Access Pfizer

[www.accesspfizer.co.uk](http://www.accesspfizer.co.uk) is a website for Pfizer Healthy Partnerships with access to resources to benefit your patients and connect you to professional support. For example you will find patient materials and training to engage with patients to enhance the patient experience. You can order smoking cessation materials to help patients during STOPTOBER and beyond. Encourage effective use of NHS Services with the Right Route: Right Care campaign which is endorsed by Pharmacy Voice and order your toolkit now. The Medicines Optimisation scratch card is also available from the website and is a great resource to engage patients in MURs and NMSs.

*Can NHSE reject a GP go-live?*



## Disposal of unwanted medicines

Jane Bray, Support Contract Manager, NHSE Area Team would like you to double check that you have a purple-lid bin in your pharmacy. if you do not have such a bin (for cytotoxic/cytostatic waste then please get in touch with Jane. her direct dial is 0113 824 8830 or [janebray2@nhs.net](mailto:janebray2@nhs.net) Cytostatic is a word some doctors and researchers use to describe the way some anti cancer drugs work. Many cancer drugs aim to kill cancer cells. The word cytotoxic means toxic to cells, or cell killing. So chemotherapy is cytotoxic therapy. Other treatments do not aim to kill cancer cells. They work by stopping the cancer cells from multiplying. So they stop the cancer growing. This is cytostatic therapy. Cytostatic means cell stopping. For example, hormone therapies used to treat breast cancer are cytostatic therapies. Cancers grow because receptors on the cancer cells are triggered. The cancer cells then begin to divide into 2 new cells. By blocking these receptors with drugs like tamoxifen, the treatment stops the cancer from growing.

## Frequency of collection

In Milton Keynes the company called SRCL are responsible for uplifting your medicines waste. The contract is arranged with NHSE and is 4 weekly (13 times a year). Unfortunately SRCL cannot be specific about their collection day but may phone you when they are e.g. an hour away as a courtesy. In Northamptonshire the contract is held with PHS and the arrangements for collection do vary. they may be monthly, bi-monthly or less frequent. if you feel that unwanted medicines are causing a hazard in your premises e.g. blocking fire exits and passageways then please get in touch with Jane (as above) and she will endeavour to help you perhaps by arranging a more frequent collection to meet your needs. PHS are trying to update their records to improve their service which is why you may be asked for your telephone number. When their new system is updated and live the driver will then be able to phone the day before to let your site know that they are doing a collection. Jane will pass on your telephone numbers to PHS. For general information and guidance on all aspects of waste management please refer to the comprehensive section at [www.psn.org](http://www.psn.org) which should answer all your questions. <http://psnc.org.uk/services-commissioning/essential-services/disposal-of-unwanted-medicines/>

*Dispose of  
Cytotoxic or  
cytostatic in the  
purple lid bin*



*Please  
remember to  
encourage  
“Don’t just tick  
the box”*

## Care with levonorgestrel

Janet Corbett is Head of Prescribing and Medicines Management at MK CCG and has highlighted an issue regarding levonorgestrel 52mg T-shaped IUS releasing approx. 20mcg/24hr when prescribed generically. Following at least one patient in MK receiving the wrong device GP's are being urged to prescribe this by brand name and community pharmacies being asked to check which product is intended if they receive a generically written prescription. If prescribed generically there are two options i.e Mirena or Levosert and whilst both meet the generic description they are different because the Mirena needs to be replaced after 5 years and the Levosert after only 3. Please follow this good practice guidance and exercise caution.

## Milton Keynes Council Carers

Just a reminder that from 18th October 2015, pharmacies in MK will be asked to print a MARs chart when medications are dispensed for Homecare patients. Medications will be dispensed in the usual manner with GP's being contacted to ensure that patients have their medicines aligned prior to the switch. Prescriptions for regular medications should be for 28 days. Please contact Anne-Marie (07889412690) in the first instance with queries who can then forward appropriately. At the present time there is no funding for this service although the LPC will continue to explore the possibilities in the future. If you cannot trace the original notification of this amended service then please check your inbox for 16/9/2015. If still in the dark then contact Anne-Marie who will resend the communication.

## Carer-friendly flu jabs

We said good bye to Alan Chappell last week as he left the Carers Trust for pastures new. Julia Ellis is our new contact and will be speaking at The Pharmacy Show 18-19th October at NEC Birmingham. Julia is supporting community pharmacies as we offer NHS flu vaccinations to Carers. I have had a few questions from pharmacies around determining the identification and eligibility of this important cohort. Julia has signposted me to the following webpage which may be helpful to you <https://professionals.carers.org/flu-vaccinations-carers-guidance-community-pharmacies>

*Mirena or Levosert? Do not assume*



*Follow the 60 second flu chat developed for busy pharmacy teams by The Carers Trust.*



## Milton Keynes Services to tackle problem drug use

Last week Jordan Soondar's engagement event at Acorn was well received and very well attended. Hannah Kaim-Caudle spoke about a forthcoming change to the ordering system which will save time and therefore money while at the same time being of benefit to the way in which pharmacies and Compass work. Hannah will become our primary contact in November and as of November 2nd it is proposed to move from manual to fully automated stock control (as part of the neo360 system). The savings will come as a result of the major stock holding being at Frontier rather than pharmacies or Compass and so stock is replenished Just In Time (JIT). The new way of working will also see the additional benefit of faster dissemination of current information e.g. on leaflets in packs and may include information on alternatives to injecting, Compass services and steroids. The aim will be to introduce seamless integration between neo360 and Frontier systems.

### What you need to do

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In the week commencing 26 October Frontier would like to visit the store and check your current stock

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From 30th October you will cease to order manually the needle exchange packs or paraphernalia

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Any concerns to be directed to Hannah Kaim-Caudle

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Hannah's landline is 01908 250730 and mobile 07841938841 [hannah.kaim-caudle@compass-uk.org](mailto:hannah.kaim-caudle@compass-uk.org)

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### Compass' expectations from you

- It is very important to enter needle exchange transactions at the time of the transaction or at the very latest the same day
- Prior to the go-live on 2nd November all pharmacies will be reminded via the neo news item feature. There will be minimal interaction with you



As always we value your feedback on the newsletter or on anything else. The Chief Officer can be contacted on 07889412690 or [chiefofficer@pharmacynorthamptonshire.co.uk](mailto:chiefofficer@pharmacynorthamptonshire.co.uk)

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