

LPC Conference 2016 – Marina Muirhead’s summary notes from afternoon discussion session

What could work better?

1. Relationship with commissioners at a local level, LPCs reporting little engagement with CCGs and NHSE Local offices
2. LPCs recognised that they need to have a way of gathering data which demonstrates to commissioners the level of activity running through pharmacy
3. Want to be round the table at MCP and other new contractual ways of working that are being developed via STPs - as there is GP provider voice in STPs can pharmacy be replicated.

Workforce Development/change Management

Pathway Working

- Joint Workforce training
- Link into GP Federations
- Link into Head of primary Care or advocate on Board
- Use Local Professional Network
- Communication
- Provider Arm – employ pharmacists for portfolio work
- “Day in the Life of ...” understand each other’s role

Culture

Case studies of success (inspirational)

- Focus on benefits /outcomes
 - o Patient
 - o Pharmacy
 - o System
 - o Other HLPs
 - o Others can relate to the case study
 - o What did it achieve?

Walk in my shoes initiative; Multi-disciplinary training.

Challenge / question

How has the IG challenge of giving pharmacists read/write access to GP systems?

1. Lead by example – ‘promote mixing it up’ - get everyone to see the world from the others’ perspective
2. Steal with pride – share and react quickly – with evidence based insights
3. 3. Understand their needs, where on “change cycle” they are so they can influence effectively.
4. Be persistent

Changing Behaviours

- To change the behaviour, we need to have a sense of urgency
- Never waste a good crisis open this will – bring about change
- Adaptability – move from dispensing to services
- Intra and Inter professional respect
- Embrace the need for investment