

# PSNC Service Development Subcommittee Minutes

for the meeting held on Tuesday 9<sup>th</sup> July 2013

at Grand Harbour Hotel, West Quay Road, Southampton, SO15 1AG

**Present:** Stephen Banks, David Evans, Elisabeth Hopkins, Indrajit Patel, Janice Perkins, Alan Robinson, Gary Warner (Chairman)

**In attendance:** Christine Burbage, Mark Burdon, Alastair Buxton, Peter Cattee, Harpreet Chana, Liz Colling, Mark Collins, Ian Cubbin, Shine Daley, Mike Dent, Peter Dixon, John Evans, Mark Griffiths, Kirstie Hepburn, Trish Kennerley, Andrew Lane, Steve Lutener, Margaret MacRury, Raj Morjaria, Andy Murdock, Garry Myers, Barbara Parsons, Komal Patel, Adrian Price, Sue Sharpe, Zoe Smeaton.

## 1. Apologies for absence

No apologies for absence were received.

## 2. Minutes

The minutes of the meeting held on 14th May 2013 were approved.

## 3. Matters arising

None.

## 4. Work Plan

The progress made against the 2013 work plan was considered and approved by the subcommittee.

The progress on Minor Ailments was raised, and a useful discussion between PSNC, NHS England and NHS Employers was reported, where a national specification with a small number of ailments that GPs would not object to was suggested. This is to be pursued and Barbara Parsons will be working up a specification for discussion at the October meeting. Minor ailments will also form part of PSNC's lobbying on urgent care at the political party conferences. Any useful information should be fed back to Barbara Parsons.

## ACTION / RATIFICATION

## 5. Pharmacy consumer survey

The proposal is for a survey to support work with NHS England as part of their development of a strategy for the NHS. The results would highlight what services patients and consumers would like to see commissioned through pharmacies. It is hoped that information from the survey will be available to use in lobbying at the political party conferences.

Some CCA members have carried out consumer surveys in the past and it may be possible to use some of this work in the lobbying of NHS England.

PSNC will be looking at a very simple survey with approximately five key questions which would be available on pharmacy counters as a pad and which would take minimal time to complete. This would provide a wealth of patient feedback acting as a large sounding of consumers across the pharmacy estate. The draft questions will be circulated to the subcommittee by email to enable rapid feedback.

The subcommittee supported the principle of undertaking the survey.

## 6. Rural Working Group

The subcommittee agreed to appoint the two proposed members.

## 7. PSNC's vision for community pharmacy

The subcommittee agreed that the document was well drafted and a good narrative of the PSNC vision, setting out how it may be possible to develop the contract in the future. It will be used to engage NHS England in discussions on the development of the contract. It deliberately sets out broad proposals as the details of service development would have to be considered collaboratively with NHS England.

The following points were discussed:

- The easy access to pharmacies across the country should be emphasised;
- Data capture – paper or electronic? The vision is electronic data capture. Setting out a vision for the development of the contract may assist system suppliers to consider how PMR systems need to be developed;
- The what and how will need to be worked through, e.g. patient registration could result in a proposal for capitation based payments. The difficulty of moving from a volume based system to a service based system was discussed; and
- Timing for publication - NHS England are beginning to plan the future strategy for the NHS and the primary care framework, so it is important to be able to use the document to influence this work, both nationally and for use by LPCs at a local level.

## 8. Public Health England

It was noted that issues between the national contract and local commissioning need to be teased out more, and it is unclear as yet what influence over commissioning PHE will be able to exert. It was however recognised that it is good to have a positive commitment to use of community pharmacy from someone at a senior level in PHE. Discussions with PHE will continue.

## 9. PSNC Evidence Awards proposal

The proposal was discussed and agreed. The amount to be awarded was raised with a suggestion to increase the amount, and the issue of what the award could be spent on was also discussed.

Ian Cubbin identified the possibility of a grant to support the awards. Suggestions for the name of the awards should be sent to Barbara Parsons. The Committee will review whether the awards should be ongoing; if so they will be developed further next year using lessons learned from this year.

**It was recommended that:**

- **The two awards should be taken forward.**

## 10. EPS – Change of pharmacy ownership and patients' consent for nominations to carry over

The changes to this guidance were considered and the proposed alternative PSNC text at Option 3 was agreed on the understanding that HSCIC are amenable to change.

**It was recommended that:**

- **Option 3 is put forward as the proposed text to be included in the guidance.**

## 11. Developing quality measures for inclusion in the CPCF

This is to be discussed at the Group session on Wednesday 10<sup>th</sup> July.

## REPORT

## 12. Monitor review of GP services

This was a matter of report with replies to be sent to Alastair Buxton by the 15<sup>th</sup> July.

### **13. Urgent and Emergency Care Services**

This was a matter of report.

### **14. Pharmacy and Public Health Forum**

This was a matter of report.

### **15. New Medicine Service**

This was a matter of report.

### **16. Sustainable Development**

This was a matter of report. A suggestion was agreed that PSNC should be alert to opportunities to use sustainable development arguments such as carbon cost.

### **17. HEE/HSCIC Primary Care Workforce data collection**

This was a matter of report.

### **18. Report of a meeting with NHS England on IT**

This was a matter of report.

### **19. Any other business**

NHS Protect - Janice Perkins highlighted the amount of work needed to undertake the NHS Protect questionnaire if a pharmacy is being commissioned to provide a service via the NHS Standard Contract.

Steve Lutener responded that NHS England has agreed to discuss modification of the NHS Standard Contract for community pharmacy and that attempts will be made to remove this element of the contract in discussion with NHS England.

Alastair Buxton suggested that whilst this work is being undertaken and the mandatory NHS Standard contract remains unchanged, contractors could ask whether the CCG would issue a comfort letter to recognise that the questionnaire is not really relevant for community pharmacy contractors and need not be completed.