Community Pharmacy IT Group: Purpose and terms of reference

About CP ITG: The Group was formed in 2017 by PSNC, NPA, RPS, CCA and AIMp. The meetings are attended by members representing the five organisations and representatives from pharmacy system suppliers and NHS Digital. Further information on the group can be found on the PSNC website.

Purpose

The purpose of this Group is to:

- Bring together colleagues across the whole sector to:
  - develop a shared vision for the optimum use of digital technology in community pharmacy in England;
  - provide a forum to discuss new digital technologies which may have a future impact on community pharmacy practice;
  - support the development of user-led recommendations which can be considered by suppliers; and
  - provide a credible, respected forum for sector-wide engagement with NHS Digital and other national bodies on the vision, strategy and operational plans for delivering optimum use of digital technology in community pharmacy.
- Enable members to share experience and expertise and to develop and test options for achieving the sector’s ambitions and requirements with regard to optimum use of digital technology in community pharmacy.
- Develop an implementation strategy for delivering optimum use of digital technology in community pharmacy and oversee a joint work-programme to deliver it.
- Provide, through its member organisations, recommendations and advice to community pharmacy and other healthcare organisations.

Note that professional guidelines and data standards remain the responsibility of the RPS and negotiation of pharmacy contract issues remains the responsibility of PSNC – although the CP ITG should feed into and inform the discharge of these responsibilities. It is expected that there will be close contact, including exchange of minutes, between this Group and the RPS PhDf.

Terms of reference

1. Appointment of Representatives, Deputies, Observers, Quorum and Meetings

   a. A Member shall be defined as each of the following groups: AIM, CCA, NPA, PSNC and RPS.

   b. Each Member shall have the right to appoint three Representatives to the Group. Members shall be entitled to appoint deputies for Representatives who are unable to attend a meeting.

   c. The quorum for each meeting shall be not less than one representative from each Member. Attendance at meetings may be in person or by telephone (or using other technology). Where representatives are unable to attend a meeting (in person or by deputy) and this will mean that the meeting will not be quorate, they can waive the right to attend, in writing (including electronically) and the meeting will then be quorate. Representatives not attending any meeting may supply the joint secretariat with any relevant comments that they wish to be considered or reflected in the discussions in advance.
d. Suppliers (i.e. any company which provides IT products or solutions to the sector) and relevant NHS bodies may send Observers to the group. Each Supplier will normally be able to send one Observer to each meeting, but additional observers may attend meetings with the agreement of the Chair.

e. Other interested parties, nominated by a Member, may attend meetings as Observers, upon the agreement of the Chair from time to time.

f. Observers will be able to participate in the meetings of the Group, except where the members decide that a meeting or part-meeting of the group should be held without the attendance of Observers.

g. Each meeting will be convened and the Group supported by a joint NPA/PSNC secretariat. The joint secretariat will:
   
   • Agree agenda items with the chair and vice-chair, taking account of issues raised by the Group
   • Distribute an agenda and relevant papers, normally at least 7 calendar days in advance of a meeting.
   • Prepare minutes as soon as possible after the meeting and, once initially approved by the Chair, circulate them to the Group.
   • Ensure formal approval of the minutes at the start of the following meeting. Minutes will be considered draft up to that point.
   • Make available copies of the minutes to the Members (on a “confidential basis” until formally approved).

h. Venues, timings and frequency of Group meetings are a matter for the Group, but would be expected to be not less than four times per calendar year, such dates to be decided and published in good time.

i. The Chair will aim to get the Group to form views by consensus. Representatives should seek to represent a view that will benefit all Members (and not just their nominating Member) and any choice or preferred option, among a number, shall be made objectively.

j. Where appropriate, the Group may commission projects and outputs from relevant experts/task and finish groups, to support particular aspects of the implementation strategy and work programme.

k. The Group should maintain an awareness of activity in its sphere of interest occurring in the other nations of the United Kingdom and share information appropriately.

l. Payments to representatives or other attendees in respect of time, travel or other expenses incurred as a result of attending or being part of this Group are the responsibility of the organisation they represent or their employer.

m. The joint secretariat is responsible for reporting to the Group on any discussions held between meetings and for receiving, co-ordinating, and forwarding (as appropriate) any matters of interest and concern to representatives and members.
n. CP ITG members and regular attendees will also be added to the CP ITG and Community Pharmacy Digital Email group mailing lists so that IT and meeting updates may be provided to them.

2. Chair and Vice Chair

a. At its first meeting, the Representatives or their deputies shall appoint a Chair and a Vice-chair from amongst the Representatives, by simple majority vote. The Chair and Vice-chair will remain in post for TWO years, after which time the representatives will again appoint a Chair and Vice-chair from amongst the Representatives.

b. The Chair and Vice-chair shall not be from the same Member organisations.