PSNC LPC and Contractor Support Subcommittee Agenda

for the meeting to be held on Wednesday 4th September 2019

at 14 Hosier Lane, London, EC1A 9LQ

commencing at 1pm

Members: Sam Fisher (Chair), Alice Hare, Fin McCaul, Lucy Morton-Channon, Umesh Patel, Indrajit Patel, Jay Patel, Sian Retallick

1. Welcome from Chair

2. Apologies for absence

3. Conflicts or declaration of interest

4. Minutes of the last meeting

5. Actions and Matters Arising

Action

6. Provider companies (**Appendix LCS 02/09/2019**)

7. LPC Dashboard (**Appendix LCS 03/09/2019**)

8. Primary Care Networks (**Appendix LCS 04/09/2019**)

9. LPC Conference 2019 (**Appendix LCS 05/09/2019**)

10. Pharmacy Quality Scheme update (**Appendix LCS 06/09/2019**)

11. Flu Vaccination Service – support for contractors (**Appendix LCS 07/09/2019**)

12. Community Pharmacist Consultation Service – support for LPCs and contractors (please see **Appendix SDS 06/09/2019**)

13. Expenses Policy Update (**Appendix LCS 08/09/2019**)

14. HMRC – Non-Statutory Clearance

Report

15. Future LPC training days (**Appendix LCS 09/09/2019**)

16. Any other business

Subject	Community Pharmacy Provider Companies
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Public
Overview	The paper sets out the ongoing development and implementation of the revised model Articles for provider companies. The Paper also provides an outline of the Provider Company workshop.
Proposed action	None
Authors of the paper	Gordon Hockey and Luvjit Kandula

Update

1. Since the last meeting, the revised model Articles for the community pharmacy provider company have been finalised; and attached as a separate attachment Annex A.

2. The revised model Articles have been provided to the five groups with whom we are rolling out this initiative:

   - Greater Manchester LPC
   - West Midlands LPCs
   - Norfolk, Suffolk and Cambridgeshire LPCs
   - Devon, Somerset and Cornwall LPCs
   - Merseyside Association of LPCs

3. There is ongoing work on the revised model Rules for the provider company which will be completed in early September; in addition, an explanatory note for the Articles will be provided to LPCs.

4. The national provider company workshop has been arranged for 24th September 2019, the day before the national LPC conference. The draft agenda is attached as Annex B.

5. This workshop will help LPCs to understand the key considerations for setting up a provider company as well as how this can be achieved in practice. There will also be an opportunity to learn from other LPCs to understand current best practice and provide a roadmap for implementation. The purpose of the provider company workshop is to support new and existing provider companies as well as providing information to those LPCs that are currently considering setting up a provider company.

6. Learning outcomes for the workshop will be as follows:

   i. An overview of provider companies and identifying key opportunities considering the emerging NHS landscape and PCN structures.
   ii. An introduction and overview of the revised model.
   iii. Financial considerations.
   iv. Key enablers and preparation to set up a provider company.
   v. The process of setting up a provider company.
   vi. Sharing best practice from other areas to identify enablers and challenges and how to overcome them.

7. The workshop will seek to assist LPCs form a new provider company or those with existing provider companies to address the relevant issues – specifically ensuring unity of all local contractors in the endeavour, reducing the business running costs of the company and giving visibility and transparency to the work of the company through a scrutiny and oversight committee of relevant LPCs.

8. All LPCs have been made aware of the revised model Articles and the workshop day on provider companies on 24th September 2019, through the usual publicity routes and PSNC website and on the LPC chief officers email group.

9. The intention is to record the presentations on the 24th September so they can be available on demand to LPCs and provider companies.

LPC Provider Company Event

Tuesday 24th September 2019

Woburn House, Tavistock Square, Kings Cross, WC1H 9HQ

Draft Agenda

10am – 4pm

10:00 **Welcome and overview of provider companies**
Gordon Hockey – Director of Operations and Support, PSNC

10:10 **Revised Model Articles and Rules and the issues they seek to resolve**
Gordon Hockey – Director of Operations and Support, PSNC

11.00 **Coffee Break**

11.15 **Setting up a provider company set up – practical considerations and checklist**
Paul Nightingale -

12.00 **Running a successful provider company – Avon LPC Case study**
Richard Brown – Chief Executive Officer, Avon LPC

12.45 **Workshop and Q&A - Steps for your LPC - to start or revise an existing Provider Company**
Gordon Hockey, Paul Nightingale, Richard Brown

13.00 **Lunch**

14.00 **Tendering, Costing Services and Financial Considerations**
Mike Dent, Director of Finance and Funding

14.45 **Running a Provider Company and key financial considerations**
Katie Collin, Partner, Ramsey and Brown

15.30 **LPC sharing experiences**
Ruth Buchan - Chief Executive Officer, CPWY
Fin McCaul - MD Prestwich Pharmacy, GM LPC member and PSNC Regional Representative

16.00 **Closing Remarks**
Gordon Hockey – Director of Operations and Support (PSNC)

Subject	LPC Dashboard
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Public
Overview	This paper provides an overview of the summary and progress to date.
Proposed action	To review progress and updates relating to the LPC Dashboard and agree and review the proposed next steps outlined in the paper.
Author of the paper	Luvjit Kandula

Background

An LPC Dashboard is a way for LPCs to capture key information about the LPC (staff, levy rates and other financial information for example) providing a way for the LPC to demonstrate to their contractors in a more transparent way, key data about the LPC and the service it provides. The Dashboard would also provide at a glance management data for LPC members to help support their role. The LPC Dashboard is a natural extension of the self-assessment tool which is being updated.

The Purpose of the LPC dashboard

1. To ensure the LPC can demonstrate value to contractors by ensuring that LPC funds are used effectively for contractor benefit.
2. To enable LPCs to use the dashboard as a self-evaluation tool to inform planning and changes in LPC management using comparator LPC data.

Current Activity

The LPC dashboard has been developed with the Finance team, LCS subcommittee and some LPC members through several meetings and teleconferences. Once the dashboard is finalised, a few LPCs have volunteered to review the dashboard before it is launched in the September LPC conference.

The latest version has now included MUR, Flu vaccination and NMS data allowing a comparison of performance between similar sized LPCs. It has been agreed that locally enhanced services data will not be included due to the lack of consistent data availability. The last updated copy has been shared with the review group at the last teleconference meeting that took place.

The finance team have also provided LPC financial data based on the approved accounts ending March 2018. This will be integrated into the dashboard to minimise administrative burden on LPCs however the breakdown of some specific LPC finance data is still required to complete the dataset.

In addition, there needs to be registration process for access to the LPC data to ensure this is controlled and tracking of access can occur.

Next Steps

- An online form is being set-up to collect data from LPCs to complete the dashboard.
- The available Finance data is currently being integrated and added to the dashboard.
- LPCs to review the dashboard have been identified.

Future developments under consideration further to the last meeting

- To amend the LPC finance section to minimise the administrative burden on LPCs to provide key financial data relating to LPC finances which will be obtained through the completion of an online form via the PSNC site.
- To consider adding data from CPCF, PQS, CPCS and eRD data to allow further value and usage for LPCs to support contractors.
- To consider automated reports to contractors as a tool to support performance and compliance to national requirements.

Key limitations

- The provision of data is a useful starting point for discussions however the data needs to be interpreted in the context of the local area. e.g. some affluent areas have contactors who dispense low numbers of prescription and therefore the opportunity to provide national services is much lower than other areas.
- The data would need to be based on audited accounts for the previous year to ensure the data is correct and all LPCs provide data for the same period.

Measuring the value of an LPC

- There was feedback that LPCs should be ranked in order of performance however this could limit engagement and create distrust within the network.
- In addition, there is also a question about the basis on which LPCs are ranked. i.e. how do you measure the value of an LPC considering its role and function as a representative body and therefore not being directly accountable for the performance of independents, AIM or CCA contractors.
- The activity of an LPC is not solely quantitatively measurable (e.g. mitigation, stakeholder engagement, training, communications). This may require a wider discussion to clearly define the expectations of an LPC and ensure there is a fair and equitable assessment of LPC performance based on agreed parameters should this be required in the near future.

Key points for discussion by the subcommittee

- Some LPCs have raised concerns about the tool being used to monitor LPCs as a policing tool. This was also raised as a concern at the previous LCS meeting. LCS to advise on the communications strategy and approach to address these concerns
- LCS to approve the dashboard for review and rollout.
- To agree that that the LPC dashboard can be launched with the data already included but request further data from LPC for inclusion which can be added at a later date.
- LCS to agree the scope of the future developments and the scope of the dashboard
- LCS to advise what should be included in future iterations.

Subject	Primary Care Networks
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Public
Overview	This paper provides an update on support provided to LPCs to support engagement with Primary Care Networks and other local structures.

The paper also provides an overview and summary of the LPC local integration discovery tool results which has been developed by Michael Lennox, the Communications team and Luvjit Kandula. |
| Proposed action | To review the proposal and support for LPC/contractor engagement with PCNs.

To review the results of the survey to inform agreed actions to support PCN engagement. |
| Author of the paper | Luvjit Kandula |

Introduction

Since the May LCS meeting, Primary Care Network engagement now been included in the new CPCF (Community Pharmacy Contractual Framework) as part of the Pharmacy Quality Scheme (PQS).

The Quality criteria to be met is as follows;

"Demonstrate that pharmacies in a PCN area have agreed a collaborative approach to engaging with their PCN, including agreement on a single channel of communication, e.g. by appointing a lead representative for all community pharmacies in the PCN footprint to engage in discussions with the PCN"

In response to LPCs request for support and to ensure LPCs are engaging with Primary Care Network engagement, a number of resources and tools have been developed to provide direction and support LPCs with their engagement work. A number of visits have been made to LPCs and regional meetings to promote the need to inform and engage contractors with the upcoming changes.

We are currently awaiting further details on the PQS criteria to ensure any support and advice provided is line with updated guidance from NHSE. This information will inform future planning and development of support.

Current Landscape

LPCs have currently been advised to focus primarily on the mobilisation phase of the implementation roadmap which has been developed in line with the guidance issues from NHSE Guidance for LPCs - PCN engagement.

This involves LPCs taking the following actions:

1. Ensure contractors are educated and informed of the NHS Long Term Plan and the development Primary care networks through comms and engagement events.

2. LPCs to gather intelligence on PCN geographical boundaries.

3. To build good relationships with the LMC and other NHS Stakeholders.

4. LPCs to start engaging with Primary Care networks to build relationships to build a foundation for integrated working with multidisciplinary teams as per NHSE guidance.

5. To set up community pharmacy networks aligned to PCN boundaries.

6. To identify Community Pharmacy leads to represent the Community Pharmacy Network with a single voice.

To date, the level of LPC engagement with Primary Care networks is highly variable. This can range from LPCs having reported not having knowledge of their local Primary Care Network boundaries to those who have started discussing opportunities for collaborative proposal development in the near future.

The main reasons for LPC engagement being delayed are as follows:

1. The LPCs needed to develop action plans and review their finances, resource and capacity to support mobilisation and engagement with PCNs.

2. The PCNs were in the process of setting up the PCN network structures and governance processes in line with guidance from NHSE in partnership with CCGs, oversight structures (e.g. ICS) and the LMC.

3. The LPCs required knowledge of the PCN geographical boundaries in order to set up the Community Pharmacy network and identify leads to align to this structure. This is currently information that is not readily available in all areas.

4. Primary care networks are not ready to engage with wider stakeholders at this time.

Local Integration Discovery tool

In response to the variability of engagement, the local integration discovery tool survey has been designed to assess baseline activity, understand the challenges and identify ways we can provide the support that LPCs require mobilisation and engagement.

Primary research and engagement had been conducted through contacting LPCs to develop the basis of the discovery tool. The tool has also been promoted through LPC visits and calls and was subsequently reviewed, co-designed, and implemented by the wider PSNC team.

The Survey questions have asked LPCs questions based on the following themes:
*   To Detail the level and scale of system complexity in their local area;
*   To Reflect upon the challenges and barriers to successful integration;
*   To Specify the support, they need to overcome those barriers;
*   To Summarise the progress towards integration they have made to date;
*   To Collate useful materials for sharing with others; and
*   To Tell us how LPC officers are feeling about local integration.

The results of the Survey will be reviewed to assess baseline activity, obtain resources from LPCs to share across the network and review what specific resource and support is required for LPCs to achieve the PQS criteria in line with NHSE criteria guidance (once details are available).

Refer to Annex C – Summary of Local Integration Discovery Tool Survey Results (separate attachment)

PSNC

Summary of Local Discovery Integration Survey Results as of 21st August 2019

58 LPCs have responded to the survey as of 21/08/2019. Since then, the remaining LPCs have been followed up and it is highly likely we will have a dataset which is reflective of the entire LPC network.

Total responses: 58/70
80% LPCs operate in one STP area
57 LPCs operate in 1-9 LPCS
57 LPCs operate in 1-9 LA footprints

PCN areas
57 LPCs operate within 1-60 PCNs for their LPC area
24 LPCs operate within 11-20 PCNs (21%)
9 LPCs operate within 21-30 PCNs (16%)
6 LPCs operate within 31-40 PCNs (10.5%)
4 LPCS operate within 41-50 PCNs (7%)
2 LPCs operate within 51-60 PCNs (2%)

Challenges and barriers
In terms of challenges and barriers; resistance to inclusion of CP in the local NHS system and LPC capacity/resource to support PCN engagement were ranked highly. The overall themes in terms of additional comments related to contractor mobilisation and engagement relating to challenges to gain support for engagement due to motivation, capacity and operational pressures. The quality and consistent level of delivery of commissioned services was also cited several times.

Other overarching themes included LPC resource and funding, operational pressures and capacity to support PCN engagement, set up and oversight of the community pharmacy network and a coordinated communications campaign from national leadership bodies as a collective.

In addition, the readiness of PCNs to engage and local NHS systems being willing to accept community pharmacy as a key partner but not necessarily being able to fund commissioned services has also been identified as a key challenge.

The system has been described as complex and navigation to find key information to support PCN engagement is also key to successful engagement.

Support Actions
The LPCs ranked funding to support the LPC to engage with PCNs and co-ordinated support from national leadership bodies collectively as actions to support LPCs on the journey to integrated working with PCNs as the top two support actions.

Additional support actions identified by LPCs included the development of a key resources such as national service specifications and Person specification for the PCN lead. LPCs have identified they need further support from the collective National leadership organisations to support through a marketing and communications campaigns to support contractor mobilisation and engagement to raise the profile of Community Pharmacy. In addition, training and support for PCN leads was identified as a need to support effective engagement and collaboration.

Further risks such as LPC capacity to support engagement, funding for PCN leads and a lack of capacity in pharmacies to deliver services which may risk the sustainability of the CP network.

Integration

- **78%** of LPCs have obtained detailed knowledge of the local PCN structures and CDs.
- **33%** LPCs are included as a key contributor at STP-ICS level with 33% in development.
- **13%** LPCs have an LPC/LPM partnership to support PCN development and 40% in development.
- **6%** have included CP as a key partner with the PCN and 52% in development.

Measuring Influence

- **22%** of LPCs have developed and integrated a CP strategy into wider strategic plans with 43% in development.
- **7%** of LPCs have obtained funding to support Community Pharmacy PCN engagement and integration with 13% of LPCs in development.
- **7%** of LPCs has commissioned a CPs service with 9% LPCs in development.

Measuring Capacity

- **35%** of LPCs have developed a local integration plan aligned to PSNC guidance with 53% in development.
- **33%** of LPCs have conducted an engagement event on PCNs, the NHS Long term plan and integration. 50% are currently in development.
- **22%** of LPCs have set up CP networks to mirror emerging PCNs with 70% in development.
- **4%** have facilitated contact between PCN CDs and local Community Pharmacy Network leads with 61% in development.

Measuring Capability

- **26%** of the LPCs have reviewed the skills and resources required to successfully deliver on its local integration plan with 41% in development.
- **60%** of LPCs have connected with neighbouring LPCs to consider collaborative working and sharing of resources with 28% in development.
- **43%** of LPCs believe they are viewed as a valuable system-supporting thought partner and is included in the development of system leadership plans with 22% in development and 36% not included.
- **7%** of LPCs have commenced delivering a training programme for the CP Network leads in the PCN AND 37% in development and 56% not started.

Optimism for the future (scored out of 10)

- The overall score was 5/10

To what extent do you agree that positive change is happening?

- The overall score is 49/50

To what extent do you agree that new partnerships and collaboration is happening?

- The overall score is 45/50

To what extent do you agree that new role and revenue-stream for your contractors is emerging?

- The overall score is 33/50

To what extent to do you agree that PSNC is making a positive support difference to your future success?

- The overall score is 47/50

Overall, there are many positive developments and actions that LPCs have taken to proactively engage with PCNs including engagement events, setting up networks and identifying leads as per national guidance. LPCs have also started successful engagement at system, place and PCN level.

The overall stage of engagement is early as PCNs are not necessarily ready to discuss and engage with Community Pharmacy and wider stakeholders as they are still setting up governance structures, recruiting staff and managing change.

Contractor resilience and capacity as well as the motivation to engage has been identified as recurring theme in the document. There is a risk that contractors may not deliver the services that are commissioned which may further risk local engagement and the CP network.

The LPCs have identified that the local NHS do recognise community pharmacy as a valued system partner but funding for commissioned services are perceived to be unavailable and likely to stay within the GP network. LPCs have identified that the funding to sustain on-going support for PCN engagement is a key risk.

There are a number of requests for wider support from national bodies collectively to support mobilisation, raise the profile of community pharmacy as well as engaging contractors to help them understand the importance of engagement with PCNs as outlined in the national guidance.

Support to date

Whilst the main page explains how PCNs are being developed, the resources page PCN Resources and Guidance contains:

- A briefing explaining what PCNs are and their role in the NHS;
- A briefing summarising the Network Contract Directed Enhanced Service specification which enables GPs to take a leading role in PCNs;
- A list of suggested actions that LPCs can take to engage with PCNs and help contractors to do the same;
- A presentation on PCNs to use at a contractor meeting; and
- Guidance from the National Association of Primary Care (NAPC).
- LPC member page which contains access for sign up to NHSE Futures Collaboration platform, NHSE resources/webinars, national guidance, Erd toolkits and access to data sources to support identification of local health population needs.
- The development of an implementation roadmap to support LPCs to map their progress and identify what steps they can take and specify what resources are available to support them.
- Locally adaptable two-page promotion piece templates for engagement with Primary Care Networks outlining the community pharmacy offer.
- Locally adaptable template for engagement with local stakeholders to explain how the LPC will be engaging with CP networks outlining the setup of the Community Pharmacy network and identification of network leads.
- 6-minute introductory webinar to PCNs
- A vast range of communications support through press releases, social media templates and promotion through various channels.

Current actions (ongoing)
- To visit LPCs and ensure LPCs are aware of currently available guidance and support and ensure delivery of key messages to contractors as agreed by PSNC.

- To encourage PSNC and other CP leads to share LPC activity/updates on social media which would encourage PCN leaders in local and national areas to engage.

- To ensure any best practice is shared across the network.

- A cross sector call with national leadership body representatives (PSNC, NPA, RPS, CCA) was held in August 2019 to discuss potential collaborative approaches and cross organisational communications to support mobilisation and engagement. The next call will take place in September 2019. Actions include reviewing the Local integration survey data and designing a core set of messages for organisations to base their future communications on.

Future Developments

- A memorandum of understanding is being developed with the team to address competition conflict and ensure that the Community Pharmacy Network lead adheres to a set of principles to ensure that they perform the role for the benefit of the collective Community Pharmacy Network in a PCN geographical boundary.

- A Job description and Person Specification is being developed to ensure the Community Pharmacy Network lead has a clear job purpose, role and accountabilities.

- Further briefings and resources and communications support is being planned and developed to support contractors with CPCF, CPCS and PQS in line with available NHSE guidance.

- Further briefings and planning support for LPCs and contractors will be further defined based on the results from the local integration discovery tool survey and NHSE specific criteria guidance.

LCS Actions

- LCS is asked to review the current and planned support and identify any possible further actions.

- LCS to discuss results of the survey to agree next steps and actions to inform future support provided to facilitate PCN engagement to meet the PQS.

- LCS is requested to provide any feedback and views on current PCN engagement in the network for consideration and inclusion.

Subject	LPC Conference 2019
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Public
Overview	Providing an overview of the LPC Conference 2019
Proposed action	Review the agenda of the LPC conference to be held on 25th September 2019.
Author of the paper	Luvjit Kandula

LPC Conference

The LPC Conference will be held on 25th September 2019 at the Congress Centre Congress Centre, 28 Great Russell Street, London WC1B 3LS held from 10-4pm.

Invitations and booking sites were set up in June 2019. The number of confirmed attendees is 115.

A number of guest speakers have been approached including the GPC, Minister of Pharmacy and NHSE. We are awaiting confirmation of attendance.

The draft agenda is outlined below for reference purposes.

The agenda has been designed in line with the feedback from last year's LPC conference ensuring there is enough time for directors' updates and a Q&A session. The sessions have been designed to ensure the content and focus is relevant to the current challenges and focus for the coming months.

Actions

FYI

National Meeting of Local Pharmaceutical Committees

Wednesday 25th September 2019

Congress Centre, 28 Great Russell Street, London, WC1B 3LN

Agenda

10:00 **Welcome**
PSNC Chair, Sue Killen

10:10 **Introduction and overview**
PSNC CEO, Simon Dukes

10:30 **A view from General Practice**
Dr Krishna Kasaraneni, BMA General Practitioners Committee

11.10 **Director's Updates and Q&A**

➢ Communications and Public Affairs *Zoe Long, Director of Communications and Public Affairs*
➢ Reimbursement and remuneration *Mike Dent, Director of Pharmacy Funding*
➢ Technology, access and Regulations *Gordon Hockey, Director of Operations and Support*
➢ Services and IT *Alastair Buxton, Director of NHS Services*

12:30 **Lunch**

13:30 **[Title needed – awaiting response]**
Jo Churchill MP, Parliamentary Under-Secretary of State, DHSC

14:00 **Community Pharmacist Consultation**
Anne Joshua, Head of Pharmacy Integration, NHSE&I
Clare Kerr, Head of Healthcare Strategy and Policy, McKesson UK and PSNC Member

14.40 **Collaborative Working and Community Pharmacy – LPC Learning Exchange and action planning**
Luvjit Kandula, Head of LPC Engagement and Collaboration
Michael Lennox, PCN Integration Lead, Chief Officer Somerset LPC
Claire Ward, CEO of the Institute of Collaborative Working
Fin McCaul, MD Prestwich Pharmacy, GM LPC member and PSNC Regional Representative

16.00 **Close**
PSNC Chair, Sue Killen

Subject	Pharmacy Quality Scheme update
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Not confidential
Overview	This report provides a summary of the support that the PSNC Services Team has provided to contractors and the support that is planned to assist them going forward, with all aspects of the Scheme.
Proposed actions	Identify any options for further support which could be provided to contractors.
Author of the paper	Rosie Taylor

Introduction

The Pharmacy Quality Scheme (PQS), formerly known as the Quality Payments Scheme, was announced as part of the five-year deal for community pharmacy. Since the announcement, the Services Team has been working closely with NHS England and NHS Improvement (NHSE&I) and the Department of Health and Social Care (DHSC) to finalise the details of the Scheme.

Updates

Resources that have been published

A Briefing on PQS was published as part of the announcement communications, which provided a summary of key information on PQS.

A new section has been created on the PSNC website for PQS, which links to several other pages, e.g. Aspiration payment, how to register for the Manage Your Service (MYS) application, FAQs, etc.

News stories and news alerts have been published on the following topics:
- Registering for the Manage Your Service (MYS application) – Contractors have been encouraged to register for MYS as the first step for participating in PQS.
- CPPE learning and e-assessments – CPPE has published their main learning and assessments linked to PQS so pharmacy professionals have been encouraged to start working their way through these.

The Services Team has also published record sheets for the four main CPPE learning and e-assessments (safeguarding, risk management, sepsis and look-alike, sound-alike (LASA) errors), which contractors can choose to use to keep a record of the pharmacy professionals who have undertaken the learning and e-assessments.

Planned resources

The Services Team is planning to publish the following resources to support contractors with all aspects of the Scheme:

Topic	Resource
General	- PSNC Briefing – What to get started on. - Recorded presentation to go with the above Briefing, which talks contractors through what they can get started on. - Live webinar (October) once the NHSE&I guidance has been published to talk contractors through the whole scheme. - Work with Pinnacle to see if the previous Quality Payments Scheme service can be updated on PharmOutcomes for PQS. - Review and re-publish PSNC resources Briefing. - Review and re-publish evidence checklist Briefing. - Publish weekly FAQs as a news story and continue to add to the PQS FAQs web page
Manage Your Service (MYS)	- Weekly report which lists contractors who have requested access to MYS – to be shared with LPCs so they can target support. - Reminder news stories/news alerts to encourage people to register (communications on the Flu Vaccination Service and the Community Pharmacy Consultation Service (CPCS) will also

	support this as MYS will need to be used by contractors who wish to claim payment for the Flu Vaccination Service and notifying readiness to provide CPCS.
Gateway criteria	
General	• New webpage for each of the Gateway criteria explaining how to meet the criterion.
Advanced Services	• No planned resources.
NHSmail	• Review and re-publish Briefing on meeting the NHSmail Gateway criterion.
NHS website	• News stories and news alerts planned to alert contractors to when they can update their NHS website profiles, where to find guidance on how to do this and how to update passwords, etc. Will also publish reminder comms throughout the period when contractors can update their profiles.
Safeguarding	• No further planned resources (see 'Resources that have been published' section).
Quality criteria	
General	• New webpage for each of the Quality criteria explaining how to meet the criterion.
CPPE risk management	• No further planned resources (see 'Resources that have been published' section).
CPPE sepsis	• No further planned resources (see 'Resources that have been published' section).
Risk review	• The Services Team is currently working with NHSE&I and the Community Pharmacy Patient Safety Group on updating the resources for this criterion. • Work with Pinnacle to see if a service can be added to PharmOutcomes for this criterion.
CPPE look-alike, sound-alike (LASA) training	• No further planned resources (see 'Resources that have been published' section).
Safety report	• The Services Team is currently working with NHSE&I and the Community Pharmacy Patient Safety Group on updating the resources for this criterion.
Lithium	• The Services Team is currently working with NHSE&I and the Community Pharmacy Patient Safety Group on resources for this criterion.

	• Work with Pinnacle to see if a service can be added to PharmOutcomes for this criterion.
Valproate	• The Services Team is currently working with NHSE&I and the Community Pharmacy Patient Safety Group on resources for this criterion. • Work with Pinnacle to see if a service can be added to PharmOutcomes for this criterion.
NSAID audit	• Work with Pinnacle to see if the previous NSAID audit for the Quality Payments Scheme can be updated on PharmOutcomes for this criterion.
Healthy Living Pharmacy	• Review and re-publish Briefing on how to become an HLP Level 1.
Dementia Friends	• Review and re-publish Briefing on how to become a Dementia Friend. • Update record sheet.
Dementia Friends checklist	• The Services Team is currently working with NHSE&I on this criterion; therefore, planned resources have not been confirmed yet.
Patients with diabetes	• The Services Team is still in discussion with NHSE&I around the requirements of this criterion; therefore, planned resources have not been confirmed yet.
Sugar sweetened beverages	• No planned resources.
Primary Care Networks	• The Services Team is still in discussion with NHSE&I around the requirements of this criterion; therefore, planned resources have not been confirmed yet.

Quality criterion: Asthma	• Review and re-publish:
	  ○ asthma referrals briefing;
	  ○ suggested processes;
	  ○ data collection forms;
	  ○ GP practice briefing documents;
	  ○ template letter for GPs; and
	  ○ community pharmacy referral form.
	• Work with Pinnacle to see if the previous asthma service for the Quality Payments Scheme can be updated on PharmOutcomes for this criterion.

Quality criterion: NHS 111 DoS	• News stories and news alerts planned to alert contractors to when they can update their NHS 111 DoS Profiler, where to find guidance on how to do this, etc. We will also publish reminder

	comms throughout the period when contractors can update their profiles.
Quality criterion: Access to SCR	• No planned resources.

Subject	Flu Vaccination Scheme Update
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Open
Overview	This report provides a summary of the support that the PSNC Services Team has provided to contractors and the support that is planned to assist them with all aspects of the Flu Vaccination Service.
Proposed actions	Identify any options for further support which could be provided to contractors.
Author of the paper	Rosie Taylor

Introduction

The NHS Flu Vaccination Service is due to start on 1st September 2019. At the time of writing, NHS England and NHS Improvement (NHSE&I) has not published the service specification and Patient Group Direction; however, the Services Team has reviewed both documents and NHSE&I has confirmed that both documents have now gone through their internal gateway processes. Therefore, both documents should be published soon.

The Amendment Directions for the Flu Vaccination Service have also been agreed but, again, at the time of writing, these have not yet been published, but the Department of Health and Social Care (DHSC) is on track for publishing them ahead of the service commencing on 1st September 2019.

Resources published so far

The Services Team has published several news stories ahead of the launch of the Flu Vaccination Service:

- Vaccine supply – Highlighting the letter that was published by Public Health England and NHSE&I regarding the supply of quadrivalent flu vaccines and the potential of a delayed supply.
- Flu Vaccination Service training requirements – reminder news story to pharmacists that they need to complete face-to-face training for both injection technique and basic life support every three years, but that their Declaration of Competence (DoC) needs to be completed every two years.

Updated DoC – Advising pharmacists that the Vaccination Service DoC has been updated. The learning and assessment options included in the DoC have been reviewed and the CPPE Immunisation programme has been withdrawn and replaced with key modules from e-Learning for Healthcare on Flu Immunisation.

Planned resources

The Services Team will be publishing the following resources to support contractors with all aspects of the Flu Vaccination Scheme:

Topic	Resource
General	PSNC Briefing – Main PSNC guidance. Recorded presentation covering all aspects of the service. Work with Pinnacle and Sonar to get daily updates of flu vaccinations provided to keep a running total of vaccinations administered. Publish weekly FAQs as a news story and continue to add to the flu FAQs web page.
Resources for pharmacy teams	Review and re-republish the following Briefings: The benefits of a community pharmacy service; and Eligible groups for the Flu Vaccination Service.
Promoting the service to patients	News story highlighting the resources that are available to promote the service to patients Review and re-publish: Flu vaccination letter for patients; and Letter from contractors to local providers.
Identifying carers	News story highlighting the resources available for promoting flu vaccinations to carers.

Subject	Expenses Policy Update
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Public
Overview	This paper summarises the guidance provided by HMRC related to expenses claims.
Proposed action	Review the guidance provided by HMRC and review next steps relating to the HMRC guidance and the template expenses policy.
Author of the paper	Luvjit Kandula

Introduction
A number of issues have been raised in relation to the PSNC template LPC expenses policy.

Recently, tax specialists have been consulted to clarify whether LPCs need to operate PAYE for Payments to LPC members who are employed or self-employed.

The HMRC have been consulted by Nick Bustin, a tax specialist with Haysmacintyre to clarify whether LPCs need to operate PAYE for payments to LPC members.

Response sent to the LPC CO gaggle group dated 31/07/2019

As many of you will be aware, I have been seeking an answer to the vexed question of whether LPCs need to operate PAYE for payments to LPC members.

We sought advice from Nick Bustin, a tax specialist with Haysmacintyre, and in the end took the step of raising the issue with HMRC. Attached is HMRC's response.

This helpfully clarifies that the current approach of many LPCs – which is to make payments without applying PAYE – is appropriate both for those who are employees and those who are self-employed or in partnership, subject to certain caveats and conditions.

The letter from HMRC requires a careful read and perhaps what I note in particular is that the responsibility/liability of the LPC is dependent on how an LPC member accounts for the payment her or she has received. If the member retains the payment as personal income it should be (in effect - it should have been) taxed under PAYE. Discussing this with those dealing with LMCs, they indicated that this has led some LMCs to operate PAYE even though, technically, they do not have to. I wouldn't necessarily be that cautious, but clearly it is something to consider and there is a need to mitigate this risk.

I am sure that the attached letter from HMRC won't answer every question you may have, and Nick is happy to offer his services (for a fee!) to those LPCs wanting more specific advice.

Refer to Annex D (separate attachment) for the HMRC response.

Updates
HMRC have confirmed that payments can be made to LPC members without applying PAYE. This is appropriate for both those who are employees and those who are self-employed or in partnership, subject to certain caveats and conditions.

The responsibility/liability of the LPC is dependent on how the LPC member accounts for the payment received. If payment is retained as personal income, then this should be taxed under PAYE. This has led some LMCs (who operate in a similar fashion to LPCs) to operate PAYE even though this is not strictly required.

In addition; a number of additional queries have been raised for clarification to enable the PSNC template expenses policy to be updated.

These include clarification for:

- Payment rates for pharmacist and non-pharmacists
- Locum backfill cover payment
- Ensuring claims are made by the company for company representatives
- Ensuring an annual review of the policy

- Payment advice for evening attendance

Review the HMRC guidance and advise on next steps relating to this guidance and the current expenses policy.

Subject	LPC Training and events
Date of meeting	4th September 2019
Committee/Subcommittee	LCS
Status	Public
Overview	LPC Support reports
Proposed action	To review the report and provide feedback.
Author of the paper	Luvjit Kandula

LPC members days

Six LPC new members day and Regulations day have been booked from October 2019 to March 2020.

LPC new members day will include management, LPC finance, LPC structures and ways of working, leadership in difficult times, expectations on LPCs and LPC members, LPCs – what good looks like, resources for LPC members, local services database and updates on the latest issue affecting contractors, the role and powers of the LPC, governance, NHS regulations, the NHS landscape and architecture, commissioning, LPC engagement with the new local NHS structures, provider companies.

The content of the day will be reviewed further to ensure inclusion of information to help LPC new members to support the change management and implementation considering the NHS Long Term Plan, the new CPCF and PQS (including collaborative working with Primary Care Networks).

Future Planning

National meeting of LPCs – proposed date: 16th March 2020

Treasurers Day – May 2020

Chairs and Vice Chairs Training day – June 2020

Other support training days – TBC