



DORSET LOCAL PHARMACEUTICAL

COMMITTEE

ANNUAL REPORT

AND

ACCOUNTS 2013 - 2014

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MEMBERSHIP OF THE COMMITTEE

The following served on the Committee from 1st April 2013:

Contractors

Mr Steve Costello
Mr Mike Field
Mr Robin Mitchell
Mr Chris Higgs – change of circumstances, 20/11/13 appointed as Independent Member for remainder of committee term

Company Chemists Association

Mrs Fiona Arnold
Mrs Janette Best
Miss Dianne Carmichael resigned 25/6/13, replaced by Mr Perveen Bhardwaj 17/7/13
Mr Garwyn Morris
Miss Claire Rossiter
Mrs Mandy West

OFFICERS OF THE COMMITTEE

Chairman	Miss Claire Rossiter
Vice-Chairman	Mrs Fiona Arnold
Chief Officer	Mrs Amanda Moores
Treasurer	Mr Chris Higgs

Introduction

Primary Care Trusts (PCTs) no longer exist and we now find ourselves dealing with an NHS that is still migrating into a new structure, following the biggest change since its inception in 1948.

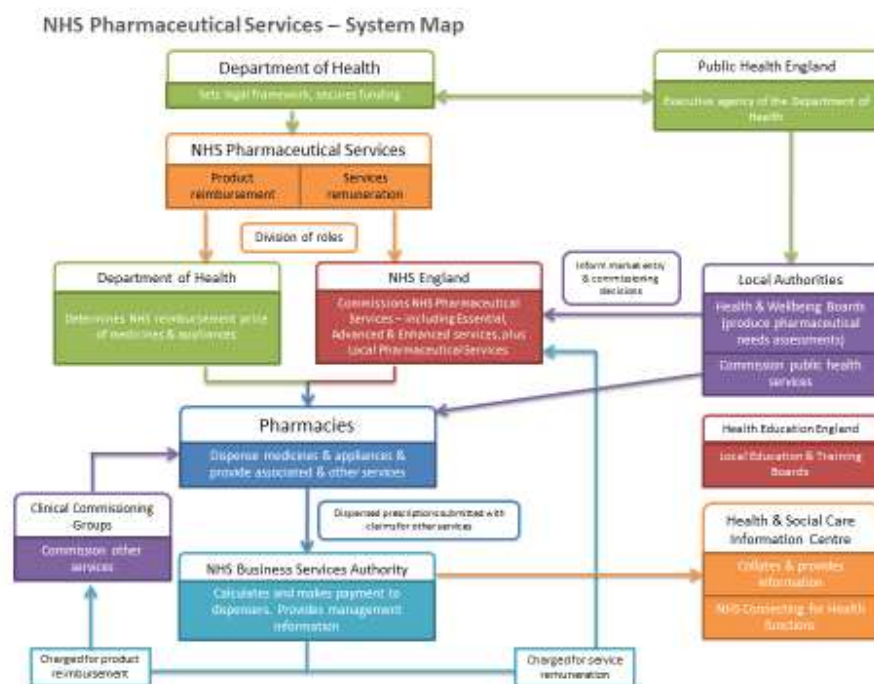
Dorset LPC has worked very closely with the new commissioners to support a smooth transition of services.

The workload and demands on the committee have increased and they have worked very hard to stay focused and support Dorset contractors. Below is the summary of the year.

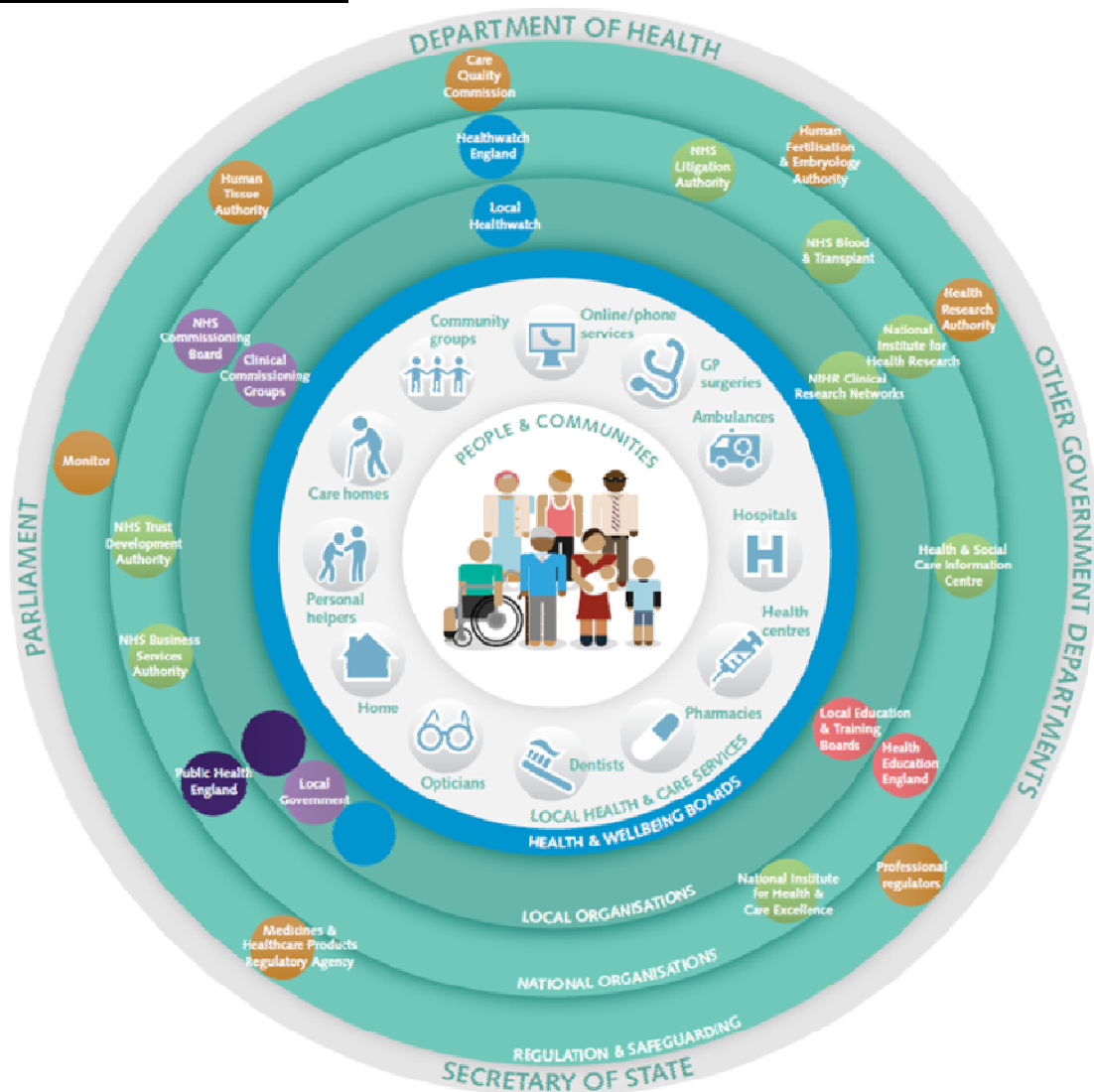
Until last year community pharmacy was commissioned to provide services through PCTs, now this can happen through a range of new commissioners. Primarily there are four ways in which services can be commissioned from community pharmacy:

1. NHS England – national CPCF
2. NHS England – local enhanced services
3. Local Authorities – locally commissioned services
4. Clinical Commissioning Group – locally commissioned services

NHS Pharmaceutical Services – System Map



Pharmacy and the new NHS



This diagram not only shows the commissioners but other stakeholders that the LPC is now establishing relationships with. This year has seen a significant increase in the number of stakeholders that the committee are actively communicating with e.g. HealthWatch Dorset, Wessex Local Education & Training Board.

1. Working with Commissioners

a) Wessex Area Team (AT)

Over the past year the committee has met regularly with representatives from the Area Team at their offices and at LPC meetings. Whilst some of the representatives involved are already known to the LPC, their roles and remits have changed significantly as they now have over 500 pharmacies in Wessex to deal with. These meetings have provided the LPC with the opportunity to discuss numerous issues affecting contractors and to establish processes, for example, support for contract monitoring visits.

b) Public Health Dorset (PHD)

From April 1st 2013 responsibility for commissioning of Public Health Services e.g. EHC, NHS Health Checks passed to Local Authorities (LAs). In Dorset there are three LAs – Bournemouth, Dorset & Poole. Public Health Dorset has the remit of delivering Public Health to the population of Dorset. PHD is hosted by Dorset County Council but covers all LAs in Dorset.

The services “rolled over” for a year so a considerable amount of time and resource has been spent in getting the contract and service specifications for services ready for community pharmacies to go live from 1st April 2014. As contractors will be aware this contract is significantly different to previous documents.

The whole process has been challenging and very time consuming and Dorset LPC has delivered in a very difficult commissioning climate. It is hoped that going forward the commissioning process will prove less challenging. To support this community pharmacies will need to provide robust evidence that they can deliver services consistently and to the required standard.

Throughout this year Dorset LPC has strengthened their relationship with PHD through regular communications and meetings.

Having PharmOutcomes as the single platform for recording and claiming for services commissioned by PHD has proved of real value this year.

c) Dorset Clinical Commissioning Group (CCG)

The County of Dorset has one Clinical Commissioning Group divided into 13 localities and is one of the largest CCGs in England. Currently there is one service, palliative care, commissioned by the CCG. There are discussions for new services and opportunities for pharmacy to support the CCG in delivering outcomes for patients. It is hoped in 2014/15 contractors will see these new services being commissioned.

Representatives from the CCG have attended all eight Dorset LPC meetings throughout the year.

2. Contract applications

The LPC has been notified of and where relevant responded to the following contract applications:

April 2013: Case 2013-01 Ostomart, Ferndown (appliance contractor) – excepted application – relocation of premises with no significant change - **granted**

April 2013: Case 2013-02 Angel Pharmacy, Weymouth – excepted application – relocation of premises with no significant change – **refused**

July 2013: Case 2013-03 Sturminster Marshall – **change of ownership**

July 2013: Case 2013-04 Late Night Columbia – **change of ownership**

July 2013: Case 2013-05 Talbot Pharmacy – **change of ownership**

July 2013: Case 2013-06 Bearwood Pharmacy – **change of ownership**

July 2013: Case 2013-07 West Howe Pharmacy – **change of ownership**

July 2013: Case 2013-08 Lloydspharmacy, Highcliffe - excepted application – relocation of premises with no significant change - **granted**

July 2013: Case 2013-09 Rowlands, Boscombe - excepted application – relocation of premises with no significant change – **withdrawn**

September 2013: SHA/17279 Angel Pharmacy, Weymouth – appeal against Area Team refusal of Case 2013-02 – overturned Area Team decision and **refused by Litigation Authority**

October 2013: Case 2013-10 Turlpharm Ltd, Turlin Moor – routine application – unforeseen benefits – **refused**

October 2013: HAM/2013/151 Ashley Pharmacy, New Milton - excepted application – relocation of premises with no significant change – **refused**

February 2014: Case 2013-11 F & S Ltd, Upton – routine application – current need – **refused**

February 2014: Case 2014-01 C & M Chemists, Boscombe – **change of ownership**

February 2014: Case 2014-02 Co-op, Sherborne - excepted application – relocation of premises with no significant change - **granted**

February 2014: Case 2014-03 James Cookson, Blandford - routine application – current need - **refused**

February 2014: SHA/17519 Turlpharm Ltd, Turlin Moor – appeal against Area Team refusal of Case 2013-10 - **refused**

March 2014: Case 2014-04 Eprescriptions Ltd, Alderholt - routine application – unforeseen benefits - **refused**

With the changes to the regulations for market entry we have seen a variety of types of applications.

The amount of time and resource that is required to respond to these contract applications and subsequent appeals is considerable. However there has been no change to the number of pharmacies and there are 156 community pharmacies and 3 appliance contractors in Dorset.

External factors that influenced pharmacy and LPC activity

a) Changes to market entry regulations

2013 has seen further changes to the NHS (Pharmaceutical Services) Regulations which sees the responsibility for developing the Pharmaceutical Needs Assessment (PNA) pass to the Health & Wellbeing Board for that area. However the decisions about market entry remain with the Area Team. The current PNAs have been allowed to remain in place for an additional year to allow time for Health & Wellbeing Boards to take on this new role.

b) Local Professional Network

Local Professional Networks (LPNs) are intended to provide clinical input into the operation of the Area Team and local commissioning decisions. Their specific functions include:

- Supporting local authorities with development of the PNA
- Considering new programmes of work around self-care and long term conditions management in community pharmacy to achieve Outcome 2 of the NHS Outcomes Framework
- Working with CCGs and others on medicines optimisation
- “Holding the ring” on services commissioned locally by local authorities and CCGs, highlighting inappropriate gaps or overlaps

The Pharmacy LPN that had been established for Dorset ceased to exist on 1/4/13 with the demise of the PCT. A year into the new structure and the Pharmacy LPN for the

Wessex Area Team which covers Dorset, Hampshire & Isle of Wight is yet to be established.

The Area Team are in the process of recruiting for the role of Chair for the Pharmacy LPN.

c) *New Medicines Service (NMS)*

In March 2014 additional funding for NMS was agreed for continuing in 2014/15 dependent on the outcome of the evaluation of the service. The report is not due before May 2014 and it is hoped that the information from this report will support the continuation of the service for the future.

4. Consultation responses

In 2013/14 Dorset LPC responded to the following consultations:

18.12.13 - NHS England South Tweet Chat – Improving health & patient care through community pharmacy

21.01.14 - NHS England Wessex Tweet Chat – Valuing mental & physical health equality

23.01.14 - Dorset County Council Draft Contract for Public Health Community Pharmacy Services 2014-15

17.03.14 - NHS England – Improving health & patient care through community pharmacy – A Call to Action

5. Annual Meeting

The Annual Meeting of Contractors was held over lunch on one of the all-day committee meetings and the savings have been used to channel resources into training evenings and contractor support.

6. Training events

This year the LPC has delivered/supported two face to face training events, which have complemented other events delivered by Public Health Dorset & SWAST. All events were very well attended:

June 2013 – The Future NHS and Interventions – 80 attendees

October 2013 – Think Pharmacy Event – This was an event for stakeholders across Wessex and these included Wessex Area Team, Dorset CCG, Dorset LOC, DHUFT and Public Health Dorset.

Working with our colleagues in Hampshire & IOW LPC and utilising pharmaceutical industry sponsorship some of the costs involved have been defrayed, for which the LPC is extremely grateful. We hope to continue providing these training opportunities going forward and if you have any suggestions on topics that you would like to be covered then please contact our LPC manager.

7. Communications

The committee have continued with their format for conducting surveys and the information provided by contractors has helped shape work plans and valuable discussion topics with commissioners. This year the LPC have conducted surveys on CPAF, waste, immunisation services, NHS Health Checks, Out of Hours services, EPSR2, dementia services, awareness of Public Health contracts and NHS Call to Action.

8. South Central LPC Forums

With the changes to the NHS structure PSNC have also reviewed their Regional structures and as a result Dorset now sits in the South Central Region. The PSNC representative for South Central is Gary Warner who is a member of Hampshire & IOW LPC and is a contractor on the IOW.

The South Central Region consists of the LPCs in Wessex & Thames Valley Area Teams and they meet on a quarterly basis.

Having spent many years as part of the South West LPC forum, Dorset LPC is still maintaining contact with those LPCs to support knowledge and best practice sharing.

9. Funding the Committee's activities

In the last twelve months the full committee has met a total of seven times plus there has been a joint meeting with the LPC of Hampshire & IOW. In addition representatives of the committee have attended over one hundred meetings with a huge variety of different people and organisations. With the changes to how services have been commissioned this has involved establishing new relationships and having regular meetings with a number of different commissioners.

Following on from the changes to the way in which the levy is collected from contractors the Treasurer has been reviewing expenditure and budgets on a regular basis. This work has ensured that the committee finances have finished the year in a healthy position.

10. And finally from the Chief Officer

The arrival of the Health & Social Care Bill 2013 has seen huge changes within the NHS. The new organisations have spent the first 12 months settling into their roles and this has limited the amount of progressive work the LPC has been able to do in terms of services for community pharmacy.

We have concentrated the committee's work on ensuring continued delivery of existing services through community pharmacy.

This year marked the fourth & final year of the life of this committee. In December 2013 the LPC started the process for forming the new committee. As a result of acquisitions the Association of Independent Multiples (AIMp) will have a right of place on the committee as of April 2014, which means there will be 6 CCA members, 3 independent members and 1 AIMp member.

With this change we have lost a long standing and hugely valued member of the committee – Mike Field. Mike will continue to work with the committee and support delivery of various activities including training events and newsletters. The committee wish to thank Mike for his years of service and hard work, it has been greatly appreciated.

Amanda Moores
Chief Officer
Dorset Local Pharmaceutical Committee

INCOME AND EXPENDITURE ACCOUNT
for the year ended 31 March 2013

	2014		2013	
	£	£	£	£
P.P.A. composite levy		160,023		148,859
Other income				
Bank interest		819		1,028
		<hr/>		<hr/>
		160,842		149,887
Expenditure				
Employment costs	24,546		24,035	
Administration	40,270		38,148	
Bank charges	49		50	
Computer ware & stationery	2,145		1,421	
Education & training	2,053		1,694	
Attendance allowance	25,734		16,565	
Travel & subsistence	6,875		5,619	
Meeting expenses	844		2,383	
Telephone & internet	947		811	
Tax	164		206	
Treasurer expenditure	800		800	
Independent examination	-		594	
Audit fee	1,800		-	
Audit fee 1,800				
PSNC levy	41,333		40,752	
PSNC design & development	-		9,130	
Insurance	1,214		1,187	
		<hr/>		<hr/>
		148,774		143,395
NET PROFIT/(LOSS)		<hr/>		<hr/>
		12,068		6,492

CAPITAL STATEMENT
as at 31 March 2013

	2014		2013
	£	£	£
CAPITAL ASSETS			
Prepayments	162		130
Bank balance	<u>85,136</u>		<u>73,897</u>
	<u><u>85,298</u></u>		<u><u>74,027</u></u>
 CURRENT LIABILITIES			
Expenses	6,976		8,907
PAYE/NIC	1,599		1,628
Independent examiner	-		594
Auditor	1,800		-
Tax on deposit interest	<u>356</u>		<u>398</u>
	<u><u>10,370</u></u>		<u><u>11,527</u></u>
		<u>74,568</u>	62,500
 NET ASSETS		<u><u>74,568</u></u>	<u><u>62,500</u></u>
 FINANCED BY:			
 CAPITAL ACCOUNT			
Brought forward		62,500	56,008
Add: Net profit/(loss)		12,068	6,492
		<u><u>74,568</u></u>	<u><u>62,500</u></u>