



**DORSET LOCAL PHARMACEUTICAL  
COMMITTEE**

**ANNUAL REPORT  
AND  
ACCOUNTS 2014 - 2015**

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## **MEMBERSHIP OF THE COMMITTEE**

The following served on the Committee from 1<sup>st</sup> April 2014:

### **Independent Contractors**

Mr Steve Costello  
Mr Robin Mitchell  
Mr Chris Higgs

### **AIMp Contractor**

Mrs Bridget Fonteneau

### **Company Chemists Association**

Mrs Fiona Arnold  
Mrs Janette Best  
Mr Perveen Bhardwaj  
Mr Garwyn Morris  
Miss Claire Rossiter  
Mrs Mandy West

## **OFFICERS OF THE COMMITTEE**

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

## **Introduction**

We have now had two years under the new NHS structure and this second year has seen organisations and people within their roles being far more settled, which has allowed work to progress.

Dorset LPC has worked very closely with the new commissioners to provide continued support for commissioned services.

As is often the case with any restructure the initial workload and demands on the committee have increased and they have worked very hard to stay focused and support Dorset contractors.

Below is a summary of the year.

### **1. Working with Commissioners**

#### ***a) NHSE Wessex***

Over the past year the committee has met regularly with representatives from NHSE Wessex at their offices and at LPC meetings. This year has seen the first NHS flu vaccination service being commissioned from community pharmacies in Dorset. Whilst the decision to commission the service was very late the 39 pharmacies in Dorset offering the service delivered over 750 vaccinations during the flu season. The feedback from patients was excellent and NHSE Wessex saw the inclusion of community pharmacy in the NHS flu vaccination service as a success.

#### ***b) Public Health Dorset (PHD)***

Throughout this year Dorset LPC has had regular meetings with PHD.

The locally commissioned services contract for community pharmacy was “rolled over” for one year in 2013/14 so this year PHD introduced a new contract for community pharmacies providing such services.

The whole process proved challenging and very time consuming for all concerned. Having completed this work contractors will now be aware that PHD intend to introduce a Dynamic Purchasing System (DPS) for commissioning services in 2015. This will be an electronic process which hopefully will be easy to use, however it will require community pharmacy contractors to be proactive and timely in dealing with information from PHD.

Together with NHSE Wessex, Dorset LPC has been involved in the development of the PNA for the county of Dorset. This has taken considerable amounts of time and resource.

### ***c) Dorset Clinical Commissioning Group (CCG)***

Dorset LPC have met regularly with representatives of Dorset CCG throughout 2014/15 for various reasons, including the role out of EPSR2 across the county.

This year has seen the CCG undertake a Clinical Services Review (CSR) of healthcare across the county. The CCG wish to ensure that the population of Dorset receive healthcare that is safe, effective and sustainable. To achieve this may require changes to the current way of delivering services. The CSR has four stages to it and this year has been Phase 1 which is review, analyse and design. This involves looking at the needs for services, how they are currently delivered, the best way to deliver a service and the options available. The LPC have been involved in the work and attending meetings. The LPC have been promoting how community pharmacy can provide support for GP workload including with patients who require help with minor ailments and reducing A & E attendances.

Phase 2 which is formal public consultation has been delayed as the CCG need to complete some further work. It is hoped this will be completed during 2015/16.

This year has seen some of the 13 localities of the CCG exploring opportunities. The LPC have been actively involved in the development work in Weymouth & Portland and it is hoped this will see closer working between GP practices and community pharmacies in the future.

## **2. Working with other organisations**

### ***a) Wessex Academic Health Science Network (AHSN)***

Academic Health Science Networks (AHSNs) are membership organisations within the NHS in England. They were created in May 2013 with the aim of bringing together health services, and academic and industry members. Wessex AHSN covers a population of three million across 10 CCGs. Its footprint aligns with nine local authorities bringing together 11 NHS Trusts and 5 Universities.

During this year the LPC have worked with Wessex AHSN as part of the national Patient Safety Collaborative and are currently looking at opportunities for community pharmacy and Medicines Optimisation

### ***b) Healthwatch Dorset***

Healthwatch is the consumer champion for both health and social care and exists in two distinct forms, at local level and at national level. Dorset LPC has established a relationship with HealthWatch Dorset and has been able to provide support and advice when required as well as discussing the benefits of community pharmacy.

### **3. Contract applications**

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

June 2014: Case 2014-05 Bryant Pharmacy – **change of ownership**

June 2014: Case 2014-06 Abbey Pharmacy – **change of ownership**

June 2014: SHA/17618 F & S Care, Upton – appeal against NHSE Wessex refusal of Case 2013-11 – **refused**

June 2014: Case 2014-07 Rowlands, Upton – relocation without significant change – **granted**

July 2014: SHA/17675 E Prescriptions Ltd, Alderholt – appeal against NHSE Wessex refusal of Case 2014-04 – **refused**

August 2014: SHA/17682 James Cookson, Blandford – appeal against NHSE Wessex refusal of Case 2014-03 – **refused**

September 2014: Case 2014-08 Lloyds, Wimborne Road – relocation without significant change – **granted**

October 2014: Case 2014-09 Lloyds, Highcliffe – relocation without significant change – **granted**

October 2014: Case 2014-10 Shelley Manor Pharmacy – **change of ownership**

December 2014: Case 2014-11 Prescription Point Ltd, Ferndown – Distance Selling Pharmacy – **awaiting determination**

March 2015: Case 2015-01 Puddletown Surgery – outline consent & premises approval – **granted**

March 2015: Case 2015-02 Averroes Ltd, Turlin Moor – unforeseen benefits – **refused**

March 2015: Case 2015-03 Milton Abbas Surgery – outline consent & premises approval – **granted**

March 2015: Case 2015-04 Child Okeford Surgery – outline consent & premises approval – **granted**

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 dispensing appliance contractors in Dorset.

### **3. External factors that influenced pharmacy and LPC activity**

#### **a) *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

Unfortunately there is still no Pharmacy LPN in NHSE Wessex and the two LPCs (Dorset and Hampshire & IOW) covering this area have been providing much of the support. It is hoped that a Chair will be appointed and the Pharmacy LPN established during 2015.

#### **b) *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 was published on 14<sup>th</sup> August 2014 and clearly showed the positive impact community pharmacists were having on patients when delivering this service.

### **4. Consultation responses**

In 2014/15 Dorset LPC responded to the following consultations:

23.05.14 – Dorset CCG Better Together – Integrated Health & Social Care Teams

24.10.14 – Dorset Pharmaceutical Needs Assessment

06.11.14 – Somerset Pharmaceutical Needs Assessment

01.12.14 – Wiltshire Pharmaceutical Needs Assessment

05.12.14 – Hampshire Pharmaceutical Needs Assessment

## **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 five face to face training events, which have complemented other events delivered by Public Health Dorset & CPPE. All events were very well attended:

May 2014 – General Pharmaceutical Council Inspection Process – 89 attendees. This was an opportunity to meet the new GPhC inspector for Dorset and ask questions about the process for inspections.

July 2014 – Virtual Ward engagement event – 23 attendees. This brought together the contractors in East Bournemouth & Christchurch who are involved in a CCG commissioned pilot scheme which brings together a multidisciplinary team to support those patients identified as being most likely to be admitted to hospital. The pilot aims to provide appropriate support and hopefully prevent hospital admission or re-admission.

September 2014 – Novartis/LPC - Flu Vaccination Training – 14 attendees. The LPC co-ordinated two days of flu vaccination training to support those contractors who were successful in their EOI to provide the NHS Flu Vaccination Service commissioned by NHSE Wessex.

November 2014 – LPF/LPC/LOC - Sharing Best Practice “I can see clearly now” – 74 attendees = 31 pharmacists & 44 optometrists. This event brought together pharmacists and optometrists for a joint learning event. It was the first time these two professions had been brought together for training and the feedback showed delegates would like to do more in the future.

January 2015 – In2Health/LPC - Blood Pressure, Atrial Fibrillation & Motivational Interviewing – 29 attendees.

Working with our colleagues in the LPF and LOC 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 the 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 has conducted a survey on NHS commissioned flu services.

In June 2014 with the support of Mike Field the LPC started to provide a monthly update, "News in Brief", which has replaced the quarterly newsletters. We have been receiving so much information that the newsletters were getting larger and sometimes the information needed to be shared quickly. This change to a monthly format has allowed us to get the latest information to contractors in a very timely manner and hopefully it is proving useful!

Going forward the LPC is planning to conduct contractor visits as well as surveys, which will provide the opportunity for discussions about the work of the LPC and how we can support contractors.

## **8. South Central LPC Forums**

The South Central LPCs have met four times during the last 12 months. As this is the first year as part of South Central it has given Dorset LPC the opportunity to find out how four other LPCs operate as well as share good practice and ideas. These meetings have been supported by the South Central PSNC representative Gary Warner.

## **9. Funding the Committee's activities**

In the last twelve months the full committee has met a total of seven times. This also included a joint meeting with the LPC of Hampshire & IOW where members were involved in a training session on coaching and mentoring skills. In addition to the LPC meetings, representatives of the committee have attended over one hundred meetings with a huge variety of different people and organisations. In the last year the committee has concentrated on establishing relationships with new organisations and commissioners

Throughout the year 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 and will allow the committee to establish additional means of supporting contractors.

#### **10. And finally from the Chief Officer**

The last 12 months have seen some new opportunities for community pharmacy in Dorset. The LPC has proactively worked with commissioners to ensure that community pharmacy has a voice when services are being discussed. Whilst time seems to fly by, progress does sometimes feel slow, however the results are promising.

This year marked the start of the four year life of the new committee and we welcomed the first representative from the Association of Independent Multiples (AIMp), Bridget Fonteneau. The membership of the committee has remained constant for the year which has allowed the LPC to be effective in its work.

Amanda Moores  
Chief Officer  
Dorset Local Pharmaceutical Committee

**INCOME AND EXPENDITURE ACCOUNT**  
**for the year ended 31 March 2014**

	2015		2014	
	£	£	£	£
<b>P.P.A. composite levy</b>		<b>160,023</b>		160,023
<b>Other income</b>				
Bank interest		<b>637</b>		819
		<hr/>		<hr/>
		<b>160,660</b>		160,842
<b>Expenditure</b>				
Employment costs	<b>23,275</b>		24,546	
Administration	<b>46,596</b>		40,270	
Bank charges	<b>80</b>		49	
Computer ware & stationery	<b>968</b>		2,145	
Education & training	<b>1,800</b>		2,053	
Attendance allowance	<b>24,440</b>		25,734	
Travel & subsistence	<b>6,935</b>		6,875	
Meeting expenses	<b>1,579</b>		844	
Telephone & internet	<b>1,016</b>		947	
Tax	<b>(65)</b>		164	
Treasurer expenditure	<b>450</b>		800	
Independent examination	<b>-</b>		-	
Accountancy fee	<b>1,200</b>		1,800	
PSNC levy	<b>42,704</b>		41,333	
Insurance	<b>1,326</b>		1,214	
		<hr/>		<hr/>
		<b>152,304</b>		148,774
<b>NET PROFIT/(LOSS)</b>		<hr/>		<hr/>
		<b>8,356</b>		12,068

**CAPITAL STATEMENT**  
as at 31 March 2015

	2015		2014
	£	£	£
<b>CAPITAL ASSETS</b>			
Prepayments	156		162
Bank balance	99,689		85,136
	<u>99,845</u>		<u>85,298</u>
<b>CURRENT LIABILITIES</b>			
Expenses	14,388		6,975
PAYE/NIC	1,206		1,599
Accountant	1,200		1,800
Tax on deposit interest	127		356
	<u>16,921</u>		<u>10,370</u>
		82,924	74,568
<b>NET ASSETS</b>		<u>82,924</u>	<u>74,568</u>
<b>FINANCED BY:</b>			
<b>CAPITAL ACCOUNT</b>			
Brought forward		74,568	62,500
Add: Net profit/(loss)		8,356	12,068
		<u>82,924</u>	<u>74,568</u>