



**Devon Local Pharmaceutical Committee**  
**Annual Report 2015**  
**Incorporating Annual Accounts**  
**April 2014 - March 2015**



## **LPC Vision**

***"To maximise financial and professional opportunities for pharmacy contractors"***

## **LPC Mission**

***"To lead the development and facilitate the delivery of financially rewarding, safe and consistent, quality community pharmacy services"***

## **LPC Objectives**

- Ensure LPC Structure supports vision, mission and purpose
- Proactively develop new income streams for contractors
- Support contractors to implement financially rewarding, quality community pharmacy services
- Support and guide contractors to comply with new regulations and operate with good clinical governance
- Develop effective relationships with appropriate healthcare commissioners and PCOs to ensure the right to be consulted on pharmacy matters
- Facilitate closer working relationships between community pharmacists and other healthcare professions
- Develop an effective communication strategy with contractors and other stakeholders
- Engage with PCOs at a regional level and contractors at a local level to ensure pharmaceutical needs assessments are prepared in a clear and fair manner
- Ensure LPC members' awareness of NHS changes, impact on community pharmacy and influence local interpretation and implementation

## Chairman's Annual Report

### **The changing environment**

As I always seem to say the world is changing fast – but I think it is now self-evident that that is true. The election out of the way means there is unlikely to be any further radical reorganisation of the health service but the 5 Year Forward View already has us on a fast track trajectory of change. The positive though is that Pharmacy features far more strongly in those changes than it has ever done historically. The pressures on finances and clinical workforce numbers mean that commissioners and providers are fundamentally rethinking how services need to be delivered and we for the first time are often on the agenda and at the table for the discussions about change. We are without doubt in the greatest period of opportunity that we have seen in generations from a pharmacy perspective and there is scope for us to redraw pharmacies role in the healthcare model.

### **Progress Made**

This year I think we have made significant progress towards enabling community pharmacy to fully participate in the new future. A number of new services have been developed and a number of others are in development. We have secured significant funding for pharmacy services and the performance of our Minor illness suite of services has been well received and has featured at national level. Those of you who have got behind this service should be congratulated, as not only has the scheme been viewed as a success it has started to change the perception of pharmacy and the relationship with practices where for the first time in some locations we are seeing a systematic approach of referring to pharmacy. We have also started to deliver our first jointly contracted services in obesity and NHS health checks, the later due to be launched in the autumn this year. The obesity trial has started slowly but is now growing well and we are about to expand the number of sites.

It's not only about services though. The change in relationships we have, with commissioners and other providers also places us in a good position for the future. I say providers because it is increasingly the case that we will be developing a solution to a pathway or a health need going forward so it is likely that in many instances we will be bidding as collaboratives to jointly provide for a population and this has already started to happen with the Devon Health and Wellbeing hub. So it has been a year of progress and one in which the pace has definitely been increasing and we don't see that stopping!

### **Challenges**

The key issue for us going forward is not the number of opportunities but our ability with the current pressures experienced in the community to be able to develop and deliver them. We will only be able to fully realise our potential if we deliver the services we offer effectively and although there are a number of reasons currently we cannot honestly say we do that across all service areas. We know as well that as we move forward the roles we will be asked to take on will increase in clinical nature and we will require some reskilling in some areas. This again requires headroom for change, something we just don't seem to have. There is limited available resource in the LPC as well. So we have an issue how do we gear up and take advantage of all these opportunities while paddling like mad under the surface to keep the show on the road. On top of this we are one of the few areas of the country that does not have an excess of pharmacists. I can't say I have a magic bullet but there are somethings that can be done and with the support of a number of organisations like the Local Pharmacy Network, the Regional Team Academic Science Health Network, Clinical Commissioning Groups, Health Education South West etc we have started to work on training recruitment and technology solutions that may help a bit. The fundamental is though we will have to think about the teams we have and how we utilise / deploy their skills to get the most out of this new world.

### **What next?**

It's probably very difficult to say – there are lots of irons in the fire at the moment and precisely what the future will look like in 5 years' time I would not put a large bet on. There are things we do know though:

- It will be more integrated
- There won't be more money
- We will be more service led
- Pharmacists will appear in lots of new locations and roles

The next few years are critical in establishing the future we need to:

- Commence discussions with partners about how we can work together and own pathways.
- Build integrated models of care so that we can work across the community.
- Look for ways of driving efficiency by working together.
- Develop our technology so we can get and send information across clinical boundaries so we can fully play our part in care.

It's a tall ask but if we all work together it's a big future too!

I want to thank the staff at the LPC Secretariat; Sue Taylor, LPC Chief Officer, Kathryn Jones, Office manager and Mark Stone, Consultant Pharmacist who work very hard on behalf of pharmacy contractors in Devon and without whom the LPC would not be in the strong position it is today. Last but not least, a huge thank you to the members of the LPC committee who give up their time to serve on the committee. Their wide background of knowledge, experience and insight into the profession provides us with a strong platform on which to base our work.

David Bearman  
Chair – Devon LPC

### **Chief Officer's Report**

The time of year for writing Annual Reports seems to come round more quickly each year and this year was no exception. Here are some highlights from 2014-2015 to share.

#### **LPC constitution**

At the beginning of 2015 the LPC recommended to contractors that a new Constitution was adopted and held a special General Meeting on the 6<sup>th</sup> January 2015. The new constitution was unanimously accepted and adopted. The constitution tidied up some administrative issues and also enabled the LPC to support the development of a Provider Organisation. To date the LPC has not taken this any further as the approach has been to work collaboratively with other providers when responding to tenders, but it remains an option for contractors in the future.

The acquisition of the Care 4 U group by Well Pharmacy early in the year meant that the LPC lost an independent place on the committee and gained a CCA seat. Following an election process for the independent contractor vacancies we welcomed Sian Retaillick as a new member.

#### **Pharmaceutical Needs Assessments**

The three Health and Wellbeing Boards across Devon were required to develop and publish their PNAs by the 1<sup>st</sup> April 2015 and the LPC worked closely with the Devon wide steering group that was established to

take the work forward. The aim was to ensure a level of consistency across the three PNAs published in Devon and the LPC also had the opportunity to comment on the draft PNAs during the consultation process. The PNAs were all duly published and are available on each local authority website (Devon County Council, Plymouth City Council and Torbay Council). The PNAs are used by the NHS England when they are determining applications under the control of entry regulations.

## **Local Pharmacy Services**

### **Public health services**

The Local Authorities continue to have the responsibility for commissioning all public health services in Devon. We are fortunate to have good working relationships with our local public health teams and commissioners and the LPC Executive meets regularly with the public health leads and the Devon LMC to discuss service development and issues of concern that are common across primary care. For the year 2014-15 sexual health services, harm reduction and smoking cessation continued to be the main areas of focus and a decision was taken to extend the existing services until October 2015 while a new procurement process would be put in place.

A small number of pharmacies are also subcontracted to provide weight management services and in the early part of 2015 the LPC was working with another lead provider to bid for NHS Health Checks to a targeted population in Devon.

### **Pharmacy First**

We were thrilled last autumn to be awarded funding via the Prime Ministers Challenge Fund to implement a Pharmacy First scheme across the whole of Devon.

The Pharmacy First services encompass three separate schemes: a “winter ailments” service providing access to Over-The-Counter (OTC) medications to vulnerable groups under a limited formulary; a minor ailments Patient Group Direction (PGD) service covering bacterial conjunctivitis, impetigo, nappy rash, oral candidiasis and uncomplicated Urinary Tract Infections (UTIs) and an emergency supply service for patients who do not have access to their repeat medication. Originally launched in the Western locality of NEW Devon CCG in December 2013, services were extended to the northern and eastern localities and South Devon and Torbay CCG in November 2014. The main aim of all services was to ease the pressure on GP, urgent and acute care providers by offering services at NHS expense to vulnerable groups who may otherwise engage with these providers and to encourage people to go to their “Pharmacy First” and move towards a mind-set that would encourage self-care.

A full evaluation of the first five months of the service (November 2014 to the end of March 2015) was written in partnership between the NEW Devon CCG and Devon LPC, with input from NHS England and public health colleagues.

The evaluation showed that the Pharmacy First services helped to relieve the pressure on primary care and urgent care services saving General Practice doctor time of 465 hours (approximately 2,790 appointments saved), 303 hours of OOH GP time (approximately 1,818 appointments saved), and 35 hours for Accident and Emergency department (approximately 210 appointments saved). The total opportunity for monetary savings was forecasted to be over £40,000. There were over 8,000 patient consultations in the 5 months from November 2014 to end of March 2015, with significant provision on Saturdays and Sundays. Patient satisfaction was high with 100% of patients who completed the service user questionnaire reporting that they were happy with the service and would recommend it to friends and family. If you are interested in

reading the evaluation that was also publicised in the Chemist and Druggist, you can download it from the Devon LPC website.

At the time of writing this report the Pharmacy First service had been re-commissioned to at least the end of March 2016, and work is in hand to review and refine it.

### **Carer Friendly Pharmacy**

We were delighted that a small number of community pharmacies in Devon were selected to participate in the national Carer Friendly Pharmacy project that ended in February 2015. In exploring an area which could be of potential interest to the NHS and local authorities as a nationally or locally commissioned service, the Carer-friendly Pharmacy pilot was helpful in demonstrating the key role community pharmacies could play in the early identification and support of carers so that they received support before reaching crisis point, while also examining issues such as workload and time requirements in practice.

As a result of the pilot, 247 carers are now linked to some kind of support as a result of the initiative, and both carers' services and pharmacies generally report positively on the training they provided/received as well as how the pilot progressed. Furthermore, many new carers who were previously unknown to Carers Services and primary care were identified, referred and provided with support. The pilot was fully evaluated by the Centre for International Research on Care, Labour and Equalities (CIRCLE), based at the University of Leeds, has published their evaluation on the Carer Friendly Pharmacy Pilot.

In conclusion, we'd like to thank you for your continuing support of the Devon LPC and for your ongoing commitment to embracing changes as they occur and for taking on the challenges of new services when they come round. Although outside the scope of this report a new Advanced Service for Seasonal Flu Vaccination was announced in July 2015 and you have all stepped up to the plate in terms of getting ready to jab! As David has intimated in his Chair's report the pressures on the NHS and local services are increasing rapidly and the world of pharmacy is set to change significantly over the next few years. We will continue to work hard with local commissioners and our other stakeholders to ensure that community pharmacy is considered as part of the solution to the challenges ahead.

Sue Taylor  
Chief Officer

## Summary of LPC events 2014/15

*Table 1: Workshops*

Annual Contractors meeting	6 January 2015	Deer Park, Kennford, Exeter
EPS R2 “Deep Dive Session”	27 May 2014 19 June 2014	Plymouth Plymouth
GPhC Inspection event	17 September 2014 18 September 2014	Exeter Plymouth
HLP Alcohol Identification and Brief Advice Training for Pharmacy Staff	24 April 2014	Plymouth
HLP Alcohol Audit C Brief Intervention Training	3 February 2015	Barnstaple
HLP “Thrive” Event with Kelechi Nnoaham, Director of Public Health, Plymouth	10 February 2015	Plymouth
Pharmacy First – Winter & Minor Ailments Engagement Events	4 November 2015 10 November 2015 11 November 2015	Exeter Barnstaple Torquay

**524 attendees at our workshops**

### Control of Entry

The LPC examined a total of six applications for a new pharmacy or for relocations during the year. The consideration of applications is very onerous on the LPC and takes a lot of time and commitment to ensure that every application receives a fair consideration by the committee and that these considerations are provided to the NHS England in a timely fashion.

*Table 2: Pharmacy contractual applications considered by the committee during 2014-15*

Type of application	Total number of applications	Total number granted	Appeals	Oral Hearing	Adjacent to Or within surgery	Opened by 31/03/15
Unforeseen benefits	1		1	1		
No significant relocation	5	4	4	1	2	2
<b>Totals</b>	<b>6</b>	<b>4</b>	<b>5</b>	<b>2</b>		<b>2</b>

Owing to the low number of applications received it would appear that the market is stable for now. This should encourage contractors to invest in their premises, staff and service delivery.

## Monitoring the Uptake of Medicine Use Reviews

**Table 3: LPC Area MUR Statistics Breakdown 2014-15**

PCT	MUR Value per annum	Possible total no. of MURs per annum	No. MURs undertaken	% of available MUR per annum	No. of pharmacies claiming	Av. No. MURs per pharmacy	% of available budget	No. of pharmacies	% of pharmacies undertaking MURs
Devon	£1646400	58800	44693	76%	141	317	76%	147	95.25%
Plymouth	593600	21200	15786	75%	47	336	75%	53	88.75%
Torbay	£448000	16000	11813	74%	39	303	74%	40	100%
Totals	£2688000	96000	72292	75.5%	227	318.5	75.5%	240	95%

## Members Attendance at LPC meetings

Members of the committee (listed in Table 4) are required to attend the LPC meetings regularly as well as provide input and attend meetings on behalf of the LPC and local contractor and other roles.

**Table 4. Members of Committee during 2014-15**

<b>Committee Member</b>	<b>Area Represented</b>	<b>Elected or appointed</b>
David Bearman	Plymouth	CCA Appointment
Sadik Al-Hassan	North Devon	CCA Appointment
Chris Babbs	Torbay	AIMp Appointment
Nerys Cadvan-Jones	North Devon	CCA Appointment
David Chapman	Plymouth	CCA Appointment
David Fulton	Teignbridge	Elected Independent
Simon Gardner (wef Sept.14)	Torbay	CCA Appointment
Ali Hayes	East Devon	Elected Independent
Andrew Howitt	Exeter/Mid Devon	CCA Appointment
Andy Lawson	Devon (Exeter)	CCA Appointment
Michael Lennox	South Hams	CCA Appointment
Stephen O'Reilly	Exeter	CCA Appointment
Matt Robinson (resigned Sept 14)	Plymouth	CCA Appointment
Adrian Tebby	Teignbridge	Elected Independent
John Varnish	Plymouth	CCA Appointment

**Table 5. Devon LPC Meeting Attendance 2014-15**

<b>Committee Member</b>	<b>Elected or appointed</b>	<b>Attendance/ Possible</b>
David Bearman	CCA Appointment	8/9
Sadik Al-Hassan	CCA Appointment	8/9
Chris Babbs	AIMp Appointment	8/9
Nerys Cadvan-Jones	CCA Appointment	8/9
David Chapman	CCA Appointment	7/9
David Fulton	Elected Independent	6/9
Simon Gardner (wef 09/14)	CCA Appointment	2/3
Ali Hayes	Elected Independent	8/9
Andrew Howitt	CCA Appointment	9/9
Andy Lawson	CCA Appointment	8/9
Michael Lennox	CCA Appointment	5/9
Stephen O'Reilly	CCA Appointment	6/9
Matt Robinson (resigned 09/14)	CCA Appointment	4/9
Adrian Tebby	CCA Appointment	9/9
John Varnish	CCA Appointment	6/9

## **Treasurer's Report – Andy Lawson**

***Members of the committee are required to attend the LPC meetings regularly as well as attend meetings on behalf of the LPC and contractors. Operating under Nolan Principles, the LPC consider that members carrying out duties on behalf of pharmacy contractors should not be out of pocket. The LPC operates within a robust Accountability and Governance Framework that is regularly monitored.***

The Devon LPC is funded entirely by contractor levy. In respect of income, the contractor levy for Devon has again remained unchanged at 15p per £100 (0.15%) of net ingredient cost and this sum is collected monthly from all contractors and remitted to the LPC by the Prescription Pricing Authority.

The income received by the LPC for 2014-15 showed a decrease of 0.34% on the previous year, whilst the levy paid by the LPC to the PSNC, increased by 2.5% for 2014-15

Some additional monies are received unconditionally from the pharmaceutical industry when working in partnership with the LPC, in particular, to support training and educational events for pharmacists and pharmacy staff, LPC meetings and our Annual General meeting (AGM). In total, for the year ended March 2015 the LPC received £5,450.00 in respect of educational grants. In addition, administration is undertaken for Cornwall LPC and is reimbursed on a monthly basis. Since February 2013 the Local Optical Committee Business Manager has been working in the Secretariat office, providing further income on a monthly basis.

For the year ending 2014-15, the LPC had a surplus of income over expenditure for the year of £16,799.28. The bank balance at the year-end was £133,416.51.

My thanks go to the Officers and committee members for their ongoing support and governance of the finances of the LPC. I am always happy to answer any financial queries from contractors at any time and a full set of accounts can be viewed on request.

***Andy Lawson***



## DEVON LOCAL PHARMACEUTICAL COMMITTEE

### THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014

#### KEY INFORMATION

Chairman:	Mr David Bearman
Vice Chairman:	Mr Adrian Tebby (Resigned 31/12/14)  Simon Gardner (Appointed 23/2/15)
Treasurer:	Mr Andy Lawson
Chief Officer:	Mrs Sue Taylor
Accountants:	Easterbrook Eaton Ltd Chartered Accountants Old Fore Street Sidmouth Devon EX10 8LS
Bankers:	LloydsTSB 309 Market Place Reading Berkshire

DEVON LOCAL PHARMACEUTICAL COMMITTEE

MAIN INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 MARCH 2015

<u>Income</u>	Year Ended 31 March 2015	Year Ended 31 March 2014
PPA Levies	290,651.84	291,654.38
Bank Interest	2,075.38	2,411.14
Sponsorship	5,450.00	6,450.00
Secretariat Business Costs Reimbursed	7,411.93	2,553.35
Local Optical Committee	5,685.25	5,901.72
Cornwall LPC	5,127.65	5,172.10
PharmOutcomes	0.00	122.70
<b>Total Income</b>	<b><u>316,402.05</u></b>	<b><u>314,265.39</u></b>
<b><u>Expenditure</u></b>		
<b>LPC Members Expenditure</b>		
Locum & Travel Expenses	11,181.19	10,456.43
LPC Daytime Meeting expenses	9,482.97	9,373.32
LPC Meeting Expenses	1,343.58	1,206.64
AGM costs	0.00	657.00
Contractor Support - Events	7,726.60	3,501.82
Forum Costs and Sub-Committees	0.00	6,201.79
	<b><u>29,734.34</u></b>	<b><u>31,397.00</u></b>
<b>PSNC</b>		
Levy	72,098.00	70,296.00
Conference Costs	126.90	763.20
PSNC workshops	475.00	807.60
	<b><u>72,699.90</u></b>	<b><u>71,866.80</u></b>
<b>Secretariat Expenses</b>		
<b>Staff Costs</b>		
Employer contribution to employee pensions	25,268.40	31,713.40
Staff National Insurance Contributions	8,924.05	11,638.28
Staff Salaries	102,260.53	105,564.42
Professional Support	14,585.00	12,912.90
	<b><u>151,037.98</u></b>	<b><u>161,829.00</u></b>
<b>Office Expenses</b>		
Rent	17,146.80	17,146.80
Telephone, Internet & Broadband	2,194.23	1,969.74
Photocopier Charges	2,573.20	2,181.81
Postage	5,456.42	4,932.87
Stationery	2,946.85	1,592.20
Computer Hardware and software	1,379.06	1,521.30
IT Support	3,282.97	3,270.00
LPC Office Equipment & maintenance	3.96	863.51
	<b><u>34,983.49</u></b>	<b><u>33,526.54</u></b>
<b>Other Expenditure</b>		
Accountancy	1,215.00	1,650.00
Bank Charges	229.60	229.60
Subscriptions	276.29	446.00
Insurance	997.84	987.82
Corporation Tax on Gross Interest	482.20	562.00
Secretariat Business Costs	7,658.13	8,976.89
Staff Training	288.00	699.80
	<b><u>11,147.06</u></b>	<b><u>13,552.11</u></b>
	<b><u>269,868.43</u></b>	<b><u>280,774.45</u></b>
<b>Total Expenditure</b>	<b><u>299,602.77</u></b>	<b><u>312,171.45</u></b>
Net Surplus of Income over Expenditure for the year	<b><u>16,799.28</u></b>	<b><u>2,093.94</u></b>

**DEVON LOCAL PHARMACEUTICAL COMMITTEE**

**MAIN BALANCE SHEET AS AT 31 MARCH 2015**

	<u>31.03.15</u>	<u>31.03.14</u>
<b>Assets</b>		
Lloyds's Bank Account		
LPC Current 4102069	133,416.51	116,617.23
<b>Total Current Assets</b>	<u>133,416.51</u>	<u>116,617.23</u>
<b>NET CURRENT ASSETS</b>	<b>£133,416.51</b>	<b>£116,617.23</b>
<b>Represented By</b>		
<b>Devon LPC Accumulated Funds</b>		
Bought Forward	116,617.23	114,523.29
Surplus for the Year	16,799.28	2,093.94
<b>Total Devon LPC Funds</b>	<u>133,416.51</u>	<u>116,617.23</u>
<b>Total Accumulated Fund carried forward</b>	<b><u>£133,416.51</u></b>	<b><u>£116,617.23</u></b>