

20/21



WARWICKSHIRE LPC
the local voice for pharmacy

Warwickshire LPC

Annual Report and Statement of Accounts

Representing 106 Community Pharmacies

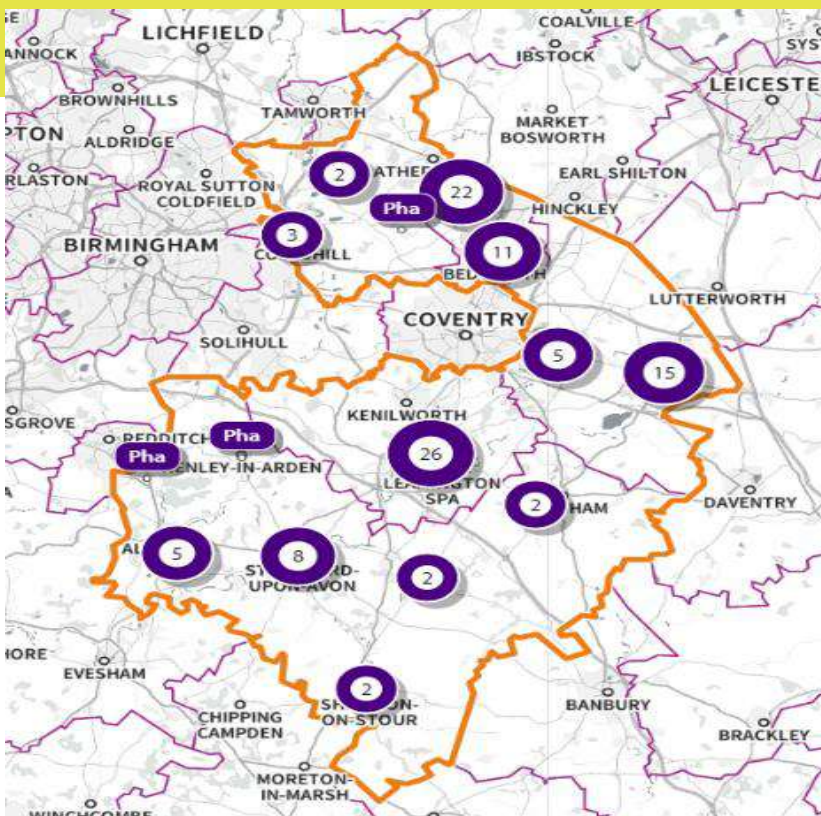
Our Community Pharmacies have a workforce of 920+

Serving a population of people of over 578,000

Looking to merge with Warwickshire LPC to be coterminous with the ICS

Recognised by Warwickshire Health and Wellbeing Board

Relationships with the 13 Primary Care Networks



Published: October 2021

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AR 20-21

Forward from the CEO and Chair

LPC CEO and Chair look back over 20-21 and look forward to 21-22 and beyond



Chief Executive

Fiona Lowe / LPC Chief Executive Officer

The past year has been a year like no other, with Community Pharmacy still reeling from the funding cuts – Covid hit...

Firstly, let us reflect on the lives lost to COVID-19. There have been close to 3.7million COVID-19 related deaths worldwide with 127,794 deaths in the UK (as of 2/06/2021), including many healthcare professionals. Our thoughts are with their friends and families. In Warwickshire over 1,250 have lost their lives to Covid. It became apparent that the pharmacy workforce, with high BAME representation, were impacted by the increased risk. We were initially poorly supported with conflicting advice nationally around PPE and accessing supplies. Pharmacy teams had to purchase their own PPE and screens to protect themselves and the public. Patients have generally been very supportive and very grateful for the outstanding support Pharmacy teams have offered to them. Sadly there have been some incidences of unwarranted abuse directed at pharmacy teams as they tried to maintain a safe environment for their staff and patients.

Who would have imagined an unprecedented COVID-19 pandemic, national lockdowns, multiple Covid vaccines being developed and rolled out all in one year?

Alongside an extension to the Flu vaccination cohorts, Community Pharmacy has been heavily involved in the Flu Programme and more recently the Covid Vaccination Programme, some onsite and others from community settings.

Kasli Pharmacy in Nuneaton became the first in Warwickshire to offer Covid-19 vaccinations – more soon followed across Coventry and Warwickshire:

Acorn Pharmacy, Allesley Pharmacy, Crest Pharmacy at Pure Gym in Nuneaton, Listers at Brownsover in Rugby, Kasli Pharmacy, Ringwood Pharmacy, Monarch Pharmacy, Medicines Express at Coventry Muslim Community Resource Centre, Boots - Lower Precinct and P2U in Odeon Nuneaton. Congratulations to all of the Pharmacies involved, feedback has been great and challenges huge!



The uptake of Flu and Covid Vaccinations and the speed of delivery has been very good in our geography for the most part although some pockets need additional focus. The expectation is that Community Pharmacy's role in vaccinations will increase during 2021-22. We would like thank the Coventry and Warwickshire CCG teams who supported testing and vaccinations in pharmacy teams.

Forward from the CEO continued

Change in practice: The COVID pandemic redefined how we and other healthcare professionals practice, Community Pharmacies often finding themselves as the only face to face access to healthcare for patients. There was a severe shock to the system which included a seismic shift to electronic prescriptions almost overnight and some increased use of eRD; pharmacies were bombarded with phone calls from anxious patients, medicine shortages, staff off due to COVID, furloughed colleagues, risk assessments, hospital discharge medicines, GPCPCS, PQS and new claim systems. Also fast paced changes to advice and changes to regulations and timelines for activities. These are some examples of colossal changes that Community Pharmacy had to navigate instantly showing our flexibility, willingness to adapt and genuine concern for our patients.

Alongside this, changes in NHS Landscape continued – Primary Care Networks (PCN), System working – soon to be Integrated Care Systems (ICS) and the advent of PLACE. CCGs merged, NHSE Regional Footprint consolidated with new stakeholders to get to know and influence. The LPC worked tirelessly, alongside PSNC, to support Contractors through the confusion and changes. Never have the LPCs and PSNC worked so closely with a common aim to support our Contractors. Locally we have a fabulous small team who have worked through the challenges of balancing home working, home schooling and coping with uncertainty. Additional services were brought on or extended such as palliative care and moving some services to telephone consultations as needed to support patients and the public. Established services where volume reduced during Covid had some payments made by Commissioners in recognition of the work by Community Pharmacies to cover some of the lost income.

Community Pharmacy has widely received accolades from NHSEi and DHSC for its outstanding contribution – however, have had to fight for funding throughout to support the Covid effort. So despite the incredible work done we have continued to face the severe reduction in funding. A lot of Contractors and the LPC were unhappy with the national support given to Community Pharmacy especially in managing the impact of the pandemic. Early on in the pandemic the LPC provided banners, PPE and visors for Warwickshire pharmacies.



We worked closely with the CCG and Councils to ensure patients received their medicines supporting local and national delivery services to vulnerable patients. We have been core members of the System (ICS) throughout representing Community Pharmacy interests. The group is the most advanced in its activities and plans in the West Midlands and we have managed to get the key Community Pharmacy Services as priorities – DMS, GPCPCS and ED to CPCS. There is considerable interest in the Extended Care PGDs as well.

We have provided updates for our stakeholders throughout the pandemic, ensuring that Community Pharmacy is at forefront of their minds throughout, ensuring early engagements for staff vaccinations and local support for Covid outbreaks. We have delivered a number of webinars and training events, a website with fully up to date information including sections on wellbeing and Covid topics. We have also funded Virtual Outcomes for another 12 months to provide Contractors and their teams with additional training resource – which has been aligned to the new services. We have set up new lines of communication including WhatsApp groups for leads, contractors, PCNs which are all well used! We have a great set of PCN Leads too – and would like to thank you all and acknowledge your hard work this year.

We also had Contractor approval in May 2021 to merge with Warwickshire LPC (77% of the votes received in favour in Coventry and 88% in Warwickshire). We will be progressing with this and have a dedicated section on our website with any updates: [Merger Proposal – Warwickshire LPC](#)

Finally, a big thank you for your resilience in dealing with the worst pandemic in living memory and remaining open throughout. We hope that the vital role that you played will be remembered and lead to better recognition and funding for Community Pharmacy.

THANK YOU & WELL DONE

Fiona

Chair's Report

Faye Owen LPC Chair



As I reflect on 2020-21, it has without doubt, been one of the most challenging year we have faced as a country in modern times. Community Pharmacy has endured unprecedented challenges affecting all of our ways of working. Community Pharmacy contractors and their teams had to adapt to the ever changing circumstances that they faced, whilst still continuing to keep their doors open and provide healthcare services to their patients in what were really difficult operating situations, balancing patient care and that of the safety of their teams and the patients that they served.

The pressures and demands on Community Pharmacy throughout the year have been beyond significant with the sector continuing to operate as close to 'normal' when others within the healthcare sector closed their doors, leaving patients in need of advice and support, turning more to Community Pharmacy than ever with their unrivalled access and continued offer of face-to-face care.

Recognition of Community Pharmacy's efforts did not go unnoticed by patients and right through to the top of Government. The LPC would like to extend its thanks to Contractors and every single member of their teams for their hard work and resilience throughout the challenges that the Pandemic has brought. We appreciate how difficult a time it has been for all, and the strain it has put on everyone both individually and at a business level. Everyone should feel a sense of pride at what they have achieved.

I would also personally like to thank the LPC team of Zoe, Kathy and Susan, along with our Chief Officer, Fiona, for their hard work and dedication to support Community Pharmacy throughout this time. The LPC had to adapt its ways of working, meeting virtually, and the office team working from home, yet managing to still be there for Contractors when they needed them.

With working more closely alongside Coventry LPC and holding joint virtual meetings, we've managed to reduce our operating costs versus our budget, resulting in the LPC being able to give levy holidays to Warwickshire Contractors. It looks like we'll be able to give a further levy holiday in the coming 2021-22 year also, offering some financial relief to Contractors.

Despite all the challenges, Community Pharmacy delivered significant achievements this last year including the establishment of Covid-19 vaccination centres; delivering record influenza vaccination numbers, along with participation in the Lateral Flow Test Distribution Service, all on top of business as usual in these uncertain times.

Chair's Report continued

Faye Owen LPC Chair

We acknowledge that despite all of the public recognition for community pharmacy's contribution during the Pandemic, and even with Government praise for the Sector, that financially things are exceedingly difficult for Community Pharmacy right now. The Wright Review and the work of the Review Steering Group (RSG) is yet to be concluded and the proposed model for the future representation of Community Pharmacy is still unknown. However, throughout all the challenges that Community Pharmacy as a sector has faced this last year, it has shown that it can step up to the plate and deliver for its patients and its community.

The LPC will continue to strive to do its best to support contractors in achieving the best possible outcomes for Community Pharmacy, its teams and patients; building on the work from this last year ensuring Community Pharmacy has a voice at the table in the new NHS structures; ensuring recognition and inclusion of Community Pharmacy in pathway development; and representation within the new Integrated Care System (ICS).

Once again I would like to thank the LPC committee, office team and our Chief Officer, Fiona, for their continued hard work and support for Contractors in forwarding the role of Community Pharmacy. I would also like to reflect on all the loved ones that have been lost to the Pandemic, and wish every one of you good health and happiness for the future.

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The year at Warwickshire LPC

2020

Warwickshire LPC providing leadership for Pharmacy to ensure positive outcomes for our contractors and patients
Represent, engage and enable Community Pharmacy to realise its full potential, keeping the interests of contractors at our core

Spring

CCGs plan to merge. Covid pandemic and first lockdown – huge pressure on the sector – hot sites, GPs closing doors, New NHSEI teams. PCNs forming

Spring

PSNC – LPCs start closer working and collaboration, which has continued throughout Covid developing a better way of working and consistency of message

Spring

LPC became part of the newly established Pharmacy System Leadership Group which reports into what will be the ICS Board. Plus twice weekly meetings with NHSEI

Summer

Students from Coventry University supported projects on 'Changes in HCP practice impacting on Community Pharmacy' and 'GPCPCS implementation'. VirtualOutcomes purchased for another year

Summer

PCN Leads appointed – local and LPC. Ongoing support for Covid information, Vizors and Banners. Wright Review discussions and LPC size considered – merger will move us to ICS footprint.

Summer




Preparing for Flu season with Covid restrictions. New categories and pressure to deliver early to high risk / age so that patients could have Covid vaccinations as early in Autumn / Winter as possible

Autumn

Flu Vaccination programme – on and offsite provision through Community Pharmacy. PQS launched with significant engagement within PCNs required. Lead training and support provided by LPC

The LPC Constitution is the document by which the LPC conducts its business. It includes essential information about the duties of the LPC and its members and includes sections on appointment and election to the committee, governance and finance. To view the Warwickshire LPC Constitution, please click on the link below.

2021

-  Constitution
-  Corporate Governance
-  Ways of Working Policy 2019
-  2020/21 Strategy (Plan on a Page)
-  2020/21 Work Plan
-  Privacy Notice
-  ICO Registration Certificate
-  COVID-19: LPC Office Risk Assessment



LPC Strategy for 20-21 including improved communications with Contractors and Pharmacy Teams and key stakeholders. Plus planning for merger with Coventry LPC to match the ICS footprint which will be in place by April 2022

Autumn	Palliative Care commissioned across Warwickshire. Ongoing engagement about merger with Coventry LPC. PQS support through series of bite size communications. Good uptake and delivery of PQS. Deadline tracker established on resources tab
Autumn	Ongoing support for local deliveries SOPs, covid outbreak management and urgent PPE access. Ongoing Banners and PPE support
Winter	Supporting pharmacy teams to access covid vaccinations. Facilitating conversations with PCNs and Clinical Directors
Winter	GPCPCS soft launch and supporting work and engagement facilitated by LPCs, without the support of LMC – CCG and NHSEi also supporting. DMS launched – low numbers with UHCW and SWFT active.
Winter	Wright Review Consultation and updates from RSG. Decision of LPC to change name from next term of Committee to Community Pharmacy Arden following any approved merger.
Spring	MURs on the way out.. IPMO – ICS continued throughout Covid and will report into ICS Board through Provider Board and Clinical Forums
Spring	LFD service launched with high take up. Strategy developed for 21-22. Merger approved between Coventry and Warwickshire LPCs by Contractors Merger Proposal – Warwickshire LPC

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Engaging and representing Contractors



20-21

The LPC has supported community pharmacy contractors through a period of transformation and the pandemic



PQS and Services

LPC supported Contractors with all aspects of the PQS, including local risk assessments, communications and consolidation of PSNC information and FAQs. PCN domains were facilitated through the Leads. New services have been established – extended care, palliative care, on and offsite flu offering and LFT service. VirtualOutcomes support and training available funded by the LPC. We have had some changes in commissioners / lead providers and are working to support smooth transition and improved engagement.

Webinars and support – more than 500 attendees



A number of webinars were delivered during the year, including PCN Leads, Covid recovery, PQS Advanced Services West and a series supporting GPCPCS for pharmacy teams and practices. Each had an audience of between 25 and 150. We have adapted our style to embrace the new technology and noticed that engagement from participants has grown too. We have experimented with interactive Apps and breakout rooms.

Healthcare collaboration including PCNs support

Collaboration has been the name of the game this year. The LPC has forged closer relationships with all the key Stakeholders: NHSEi, CCG, STP Leadership, Secondary & Community Care, Councils, PCN Pharmacists and Local CP PCN Leads. Flu Groups, Covid Groups, Outbreak & Infection Control, Supporting hard to reach groups. Linking into local delivery support and business continuity support. We have been welcomed to numerous groups and meetings – in some instances the volume has been overwhelming.

PSNC, RSG and Wright Review

We have worked collaboratively with PSNC throughout the pandemic, through Rapid Action Team and more latterly PLOT – we share the responsibilities across the West Midlands – taking a turn to serve on the Groups. We have also supported the preparation and facilitation at some of the LPC Conference breakout sessions.

We have taken time to discuss and promote the work of the RSG on the Wright Review and feedback constructive comments. We have a section on our website where we post our responses: [Contractor Representation Review – Warwickshire LPC](#)



Our Mission

Warwickshire LPC providing leadership for pharmacy to provide positive outcomes for our Contractors and patients
Engage and enable Community Pharmacy to realise its full potential
Keep the interests of Contractors at our core
Working as an integral part of Primary Care in Warwickshire and supporting the extended prevention agenda

Our Vision

Championing Community Pharmacy to improve patient care in Warwickshire

Our Values

Leadership



Integrity



Honesty



Accountability



Openness



Objectivity



LPC Meetings

We work as a collaborative with our neighbouring LPCs, as well as a West Midlands and now whole Midlands footprint. We held joint LPC Meetings with Coventry LPC, with a short separate session for each individual LPC on the same day. This made the process the most cost effective. They have all been online this year due to Covid-19. We have been online during the pandemic but hope to return to some face to face sessions from September. We do publish our agendas in advance on our website. [Meeting Details – Warwickshire LPC](#)

LPC Meetings Members attendance

Fiona Lowe, Theresa Fryer, Satyan Kotecha, Deepak Lodhia attended all 7 meetings;
Caroline Harvey and Charan Kaushish attended 6/7;
Faye Owen, Mike O'Donnell, Sam Griffiths and Andy McKenna attended 5/7;

LPC Membership changes

We welcomed a temporary replacement for Charan from September 2021 – Rohini Aerry. Rohini, however, has now left.
We are delighted to say that our small support team are all still with the LPC:
Zoe Ascott, Katherine Robinson and Susan Karoly-Smith

Market Entry

In the Warwickshire LPC geography, there have been 7 successful Change of Ownership Applications and 1 Pharmacy Closure.

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Services Updates

20-21

PHARMACY
The Heart of our Community

Pharmacists are highly qualified experts in medicines. We offer appointment-free healthcare advice with no waiting lists, right in the heart of your community.

#pharmacyadvice
* PSNC Pharmacy Advice Audit 2021

Comparison with 2020 audit data shows growing **patient reliance** on advice and care from **community pharmacies**.*

We haven't stopped during the pandemic

More than **58 million** informal **healthcare consultations** are provided by pharmacists and their teams every year*

We haven't stopped during the pandemic

Dispensing

Average number of prescriptions each month 436,446 and average number of 875,372 items dispensed per month .

Average number of items per script 2.03. Average nett cost £7.42 per script. Average fees per script £1.70 (based March 21 data)

EPS and ERD (March 2021) (Warwickshire N and S excludes Rugby)

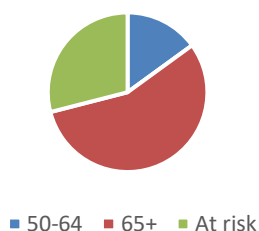
S 57.4% / N 66.3% / 66.3 scripts issued patient had a nominated pharmacy

S 71%/ N 84% scripts received through EPS

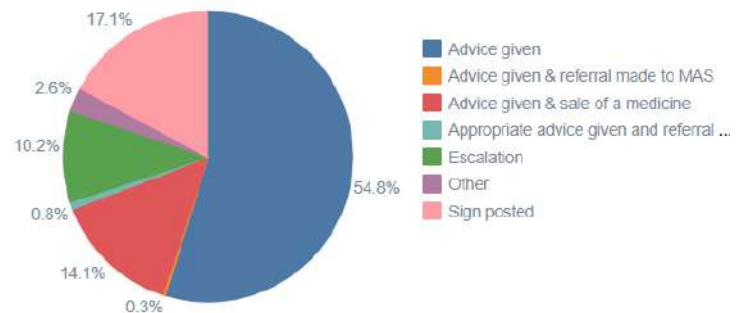
S 4.4 % / N 2.7% scripts eRD (S 3.1 %/ N 2.3%% all items)

More than 39,000 NHS Flu jabs administered by Coventry & Warwickshire pharmacies (an increase of >45% on last year)

NHS Flu 20-21



2,016 CPCS Minor Illness referrals through NHS111 and 1,489 Urgent Repeat Medication referrals completed in 20-21 (Service Value £49,000)



Minor Illness Referrals Outcomes

NMS – 61% do 11 a month

Pharmacies are generally not taking full advantage of this service, which will expand and hopefully have the limits increased too. On average only 61% of our pharmacies provide NMS - each deliver 11 - 12 a month which is below the limit for most pharmacies and below the national average. The LPC will be looking to support increased provision and link to DMS

GPCPCS – 1 PCN active – 2 ready to test

In November GPCPCS soft roll out was launched. A lot of engagement has been undertaken by the LPC and NHSEi. CCGs are also supporting. We have delivered 12+ webinars. 98% pharmacies are signed up to CPCS / GPCPCS. Key area of focus for the LPC, challenging as unsupported by the LMC

DMS - Acute Trust set up

DMS as its forerunner, TCAM has been established at UHCW. The numbers are small as Covid intervened. It is a priority area for the STP / ICS. Thus should drive delivery. This will be an area of focus for the LPC. SWFT is live and GEH will follow. A series of training evenings to support are planned for 2021

LFD – 97% providing

This service successfully launched at the end of March 2021. More than 97% of our pharmacies are providing LFD. Healthwatch have been out checking how easy it is to arrange collection.

PQS – >95% claimed 1 & 2

More than 95% claimed PQS1 and some or all of PQS2. The LPC supported PCN Lead appointment and training as well as introductions to PCN Leadership to facilitate the PQS completion. LPC supplemented / explained PSNC guidance as needed

MUR – majority completed 100

March 31st saw the end on MURs as SMRs in PCNs became the NHS preferred option. However, this has been slow to take off due to the pandemic and there may be a role for Community Pharmacists to support these reviews. Most pharmacies completed the 100 allowed MURs available in 20-21

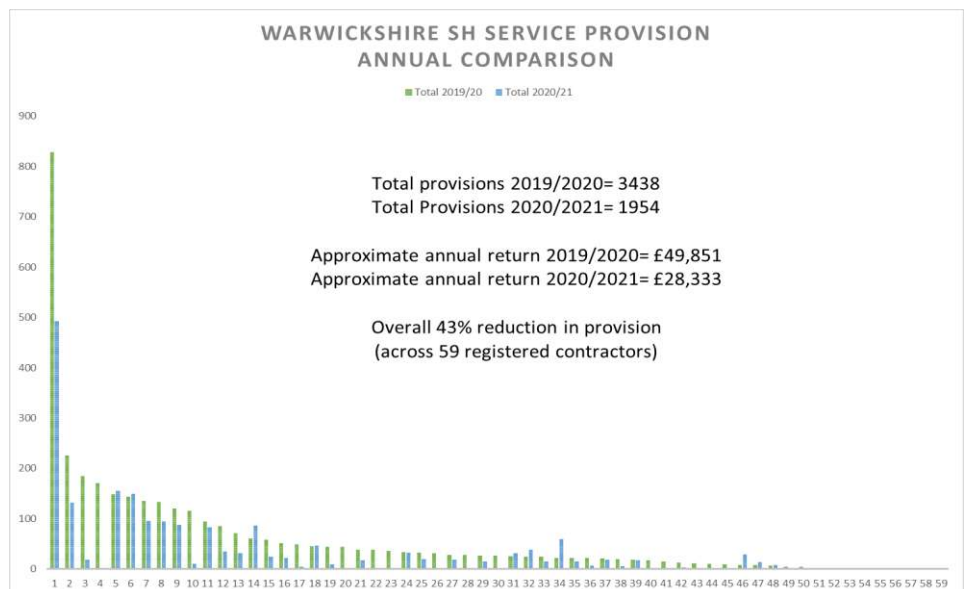
Local Services

Stop Smoking Services

Stop Smoking Service- Commissioned directly via Warwickshire Council, the Stop Smoking Service is currently under review. Previous service level agreements have been extended until September 2021 whilst a new-in-post commissioner reviews previous activity. The LPC are working closely with the commissioner to ensure appropriate SLAs are in place. 35 Community Pharmacies are registered to provide Stop Smoking Services. The reduction in service over the past year is due to the challenges faced by community pharmacies with providing face to face services during the Covid pandemic.

Sexual Health Services

Sexual Health services- 59 community pharmacies are contracted to provide sexual health services within Warwickshire. Services were affected dramatically due to Covid seeing a 43% reduction in EHC provision compared to the previous financial year.



Local Services Continued

Drug User Services

Substance Misuse/ Drug User Services- This service is commissioned by Change Grow Live (CGL). During the financial year 2020/2021, community pharmacies faced significant challenges delivering services due to Covid restrictions. To enable pharmacies to continue to offer support for certain patient groups, CGL reassessed the use of supervised consumption and altered a number of prescription interventions to daily pick ups. Pharmacies were financially recompensated for any losses this may have caused for a designated time period. There are 55 pharmacies registered to provide supervised consumption and 1,315 registered service users. There are currently 23 pharmacies providing Needle Exchange, with currently over 2,000 registered service users.

Palliative Care Service – during Covid

End Of Life Medicines- 11 Community Pharmacies were commissioned to stock and supply EOL medicines during the Covid pandemic. Pharmacies were invited to express interest in the service. Commissioning was based on location and extended opening hours to ensure widest possible provision.

PGD – Extended Care Services

Tier 1. The Extended Care Service allows pharmacists to treat patients presenting with certain conditions that otherwise would have to be seen by prescribers in General Practice. The Tier 1 services include UTI.

The Tier 2a services include infected skin conditions.

The Tier 2b services due to be commissioned in Autumn 2021 for ENT infections.

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NHS Landscape

20-21

Our long-term strategic ambitions for Warwickshire are:

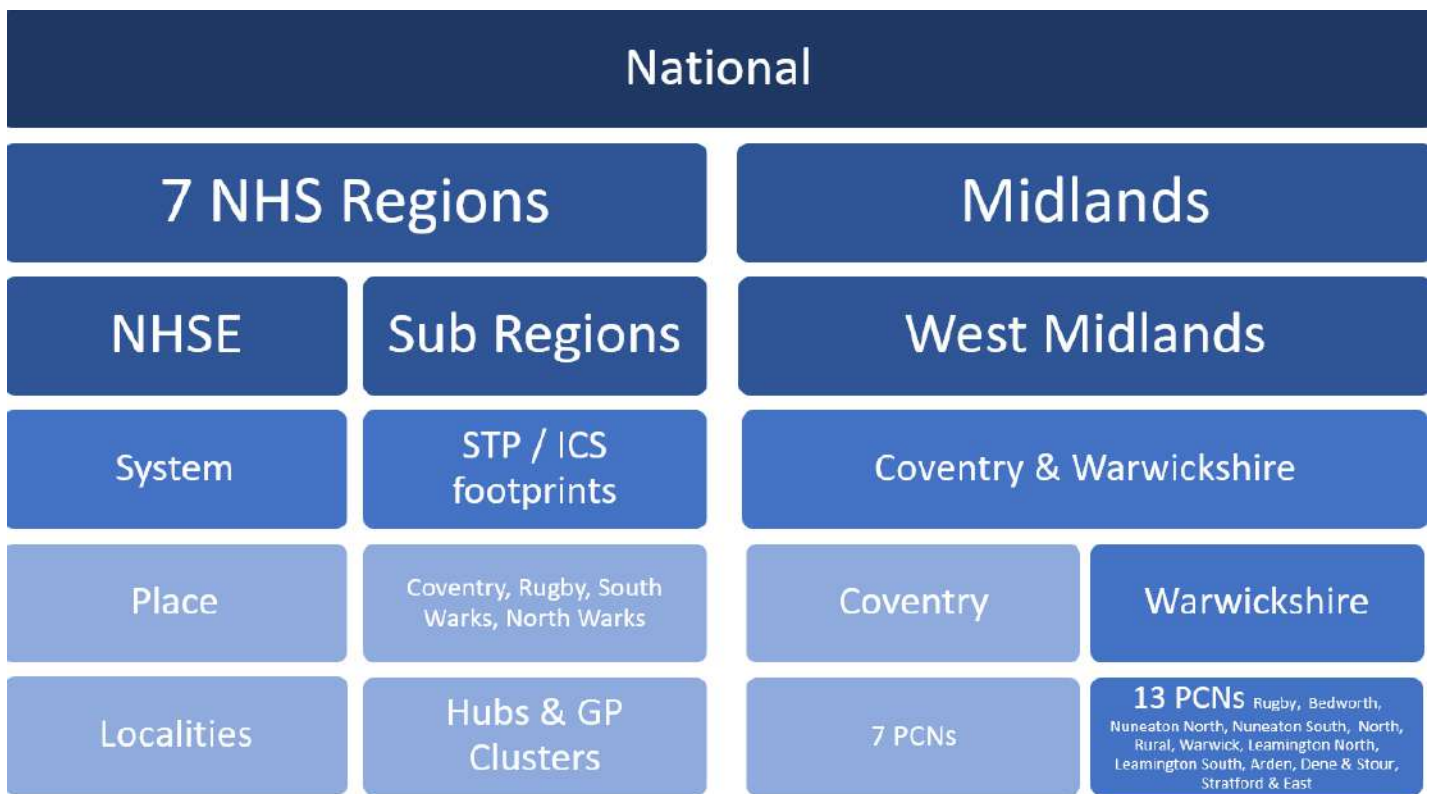


Figure 1. Coventry and Warwickshire's Strategic ambitions (HCP, 2019)

These ambitions are aligned to our shared vision for health and wellbeing across Coventry and Warwickshire's Health and Care Partnership (HCP). Together we want to do everything in our power to enable everyone to pursue a happy, healthy life by putting people at the heart of everything we do.

"One Health & Care Partnership, Two Health and Wellbeing Boards, Four Places, Three Outcomes"

Warwickshire borders six Counties and has a population in excess of 577,000. 18% under 16 and 20% over 65. Priorities in Warwickshire – young people, mental health and reducing inequalities in health. Within Warwickshire health and wellbeing outcomes can differ dependent where you live. For example, males living in the north of the county in Nuneaton and Bedworth Borough die on average 3.6 years earlier when compared with males living in the south of the county in Stratford on Avon District. To make sure that they are getting things right for each area the Council has established local Health and Wellbeing Partnerships (HWP) for North, Rugby, and South Warwickshire. Each HWP is developing an action plan outlining how they will focus on the countywide priorities in a way that meets the health and wellbeing needs of North, Rugby, and South Warwickshire.



The NHS Landscape following the White Paper and the consultation process is changing. The paper Integration and innovation: working together to improve health and social care for all - GOV.UK (www.gov.uk) sets out our legislative proposals for a Health and Care Bill. Many of the proposals build on the NHS's recommendations in its Long Term Plan, but they are also founded in the challenge born out of Covid-19. At the heart of the changes being taken forward by the NHS and its partners, and at the heart of the legislative proposals, is the goal of joined up care for everyone in England. Instead of working independently, every part of the NHS, public health and social care system should continue to seek out ways to connect, communicate and collaborate so that the health and care needs of people are met.

What does this mean for Community Pharmacy?

The Community Pharmacy Contract will be delegated down to ICS level by April 2022. Some of the NHSEi Contract team are expected to move to the ICS, but we anticipate a gap in knowledge around Contracting and Commissioning expertise within each ICS. The ICS will manage the Pharmacy Contract, but this is still expected to be commissioned nationally with any degree of local flexibility being unclear. We hope this will lead to more integration and 'buy in' from the System and appreciation of Community Pharmacy's role and opportunities for future service commissioning.

Integrated Care System (ICS)

There will be two main bodies

ICS NHS Body - Will be responsible for:

Developing a plan to address the health needs of the system
Setting out **strategic direction** for the system

Explaining the plans for both capital and revenue spend for the NHS bodies in the system.

The ICS NHS Body will take on the commissioning functions of the CCGs and some of those of NHSE.

The ICS NHS Body will be responsible for the day to day running of the ICS, NHS planning and NHS allocations

ICS Health and Care Partnership - Will be responsible for promoting partnership arrangements and developing a plan to address the health, social care and public health needs of the system

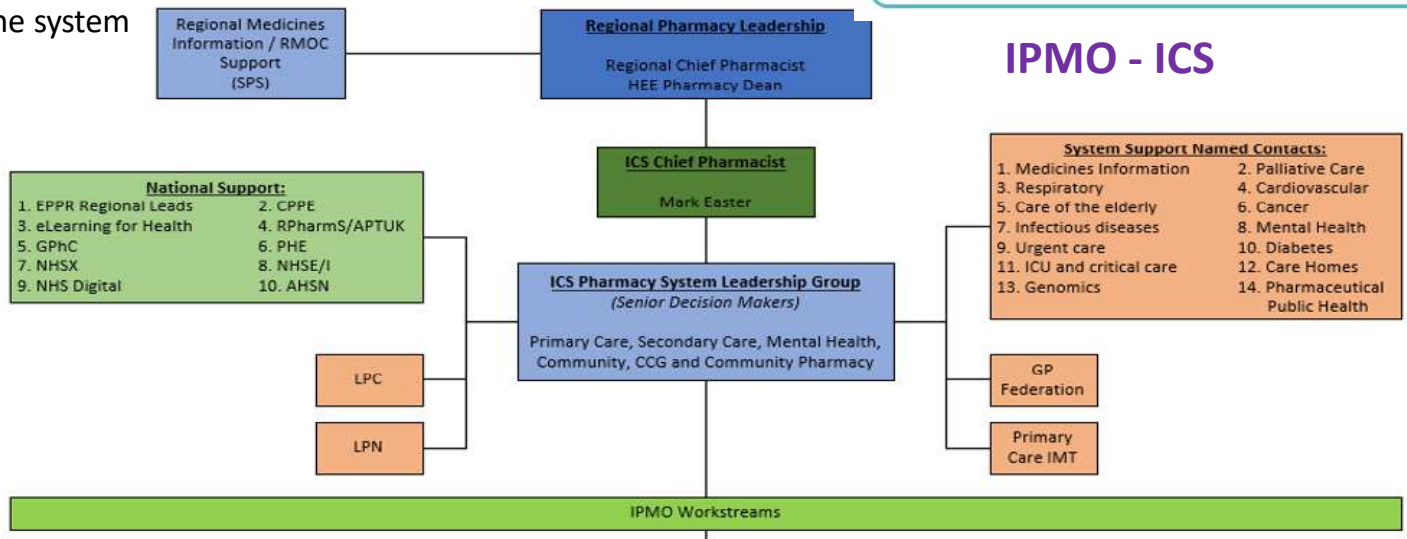
- An Integrated Care System has four core purposes;
 1. Improving outcomes in population health and healthcare
 2. Tackling inequalities in outcomes, experience and access
 3. Enhancing productivity and value for money; and
 4. Helping the NHS to support broader social and economic development.

• The Goal – delivering the NHS triple aim

1. Population health and prevention focus
2. Quality of care, and
3. Use of resources

• Grounded in the following principles;

1. Collaboration not competition
2. Planning for populations and population health outcomes
3. Reduction in unwarranted variation
4. Building on the strong system and place based partnerships within systems
5. Subsidiarity and local flexibility



IPMO - ICS

Primary Care Networks PCNs

We have some fantastic PCN Leads from our local pharmacies, who have worked hard to try and engage PCN colleagues – some have been welcomed and others have found it a struggle.. The LPC and our buddy leads have tried to facilitate where we can. We have had dialogue with LMC, PCN Pharmacists and others. PCN collaborative working is becoming key and it is important that when the opportunity arises we are ready to engage with a cohesive message as well as proactively share what Community Pharmacy can do. Our Leads are as follows:



PCN	CP Lead	LPC Lead
Rugby	Jas Jeers	Charan Kaushish / Rohini Aerry
Bedworth	Sarbjit Kalsi	Faye Owen
Nuneaton North	Vacancy	Deepak Lodhia
Nuneaton South	Michael Burr	Satyan Kotecha
North	Deepak Lodhia	Mike O'Donnell / Fiona Lowe
Rural	Diane Zakis	Mike O'Donnell / Fiona Lowe
Arden	Mohammed Hasan Noor	Zoe Ascott
East	Prashant Parmar	Andy McKenna
South Leamington	Theresa Fryer	Theresa Fryer
North Leamington	Perbinder Dhaddy	Theresa Fryer
Dene & Stour	Jack Healey	Sam Griffiths
Stratford	Sam Griffiths	Sam Griffiths
Warwick	Andy McKenna	Caroline Harvey

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20-21

LPC Annual Accounts 19/20

Income and expenditure account

Year ended 31 March 2021

	Notes	2021 £	2020 £
Income			
LPC Statutory Levies		99,000	132,000
Reimbursed Expenses		(263)	150
Interest Received Gross		-	15
Sales - services	2	37,395	-
Government Covid Grant		4,000	-
<i>Total Income</i>		140,132	132,165
Expenditure			
PSNC		37,709	31,454
PCN Expenses Claim		2,713	6005
Employee Travel Expenses		310	239
Employee Mileage Claim		116	2000
Employee Telephone Expenses		-	243
PR & Marketing		3492	-
Chief Officer Salary		21,560	22,904
Employee Wages	3	44,565	22,110
PAYE & NI		6,459	3,061
Pension		2,884	782
Office Software		441	582
Office Insurance		233	247
Office Equipment		11	-
Office Rent		6,740	2,964
Other Office Costs		-	2,263
Depreciation		294	262
Contractor Events		240	10,758
Members Expenses		809	1,223
Postage and Carriage		45	-
Professional Fees		5,315	40
Accountancy Fees		1,000	1,000
Consultancy Fees		-	5,550
Payroll Costs		1,152	1,152
Member Locum Cost		13,218	15,085
Meeting Rental		-	2,564
General Expenses (Includes masks)		14,919	418
<i>Total Expenditure</i>		164,225	132,906
Surplus/(Deficit) Arising In The Year		(24,093)	(741)

Balance sheet

	Notes	2021 £	2020 £
Non-Current Assets			
Fixtures and Fittings		1,260	1,482
Computer Equipment		647	-
		<u>1,907</u>	<u>1,482</u>
Current Assets			
Bank Account		113,596	126,778
Deposit Account		25,106	25,106
Petty Cash		816	115
Prepayments		-	286
Trade Debtors		12,078	11,000
Provider Arm Loan (Repayable in < 1 year)		8,325	7,215
PAYE		597	221
Pension		955	476
Net Wages		857	-
Other Debtors		-	16,255
		<u>162,330</u>	<u>187,452</u>
Current Liabilities			
Accruals		1,200	1,900
Trade Creditors		96	-
		<u>1,296</u>	<u>1,900</u>
Net Assets		<u>162,941</u>	<u>187,034</u>
General Fund			
Balance at 1 st April 2020		187,034	187,775
Surplus/(Deficit) Arising In The Year		(24,093)	(741)
		<u>162,941</u>	<u>187,034</u>

2 Sales – Services

Sales – services income derived from cross charges to other LPC. These are charges to cover wage costs, office rent and other office costs.

3 Employees

	2021 £	2020 £
Employee wages consist of:		
Admin Net Wages	27,629	15,729
Engagement officer	7,451	4,660
Admin Digital Assistant	9,485	1,721
	<u>44,565</u>	<u>22,110</u>

4 Debtors

	2021 £	2020 £
Provider Arm Loan	8,325	7,215
Prepayments	-	286
Trade Debtors	12,078	11,000
Current Account	113,596	126,778
Deposit Account	25,106	25,106
Petty Cash	816	115
PAYE	597	221
Pension	955	476
Net Wages	857	-
Other Debtors	-	16,255
	<u>162,330</u>	<u>187,452</u>

Prepayments consist of administration expenses and office rent paid in advance.

5 Creditors: amounts falling due within one year

	2021 £	2020 £
Accruals	1,200	1,900
Trade Creditors	96	-
	<u>1,296</u>	<u>1,900</u>

Treasurer Report

Warwickshire LPC Accounts 2020/2021

The LPC closing bank account balance at end of year 20-21 was £138,702.31 (current + deposit) with an expenditure of £164,225 against a planned budget of £147,000. This is because the new accountants have included the all the shared office team costs paid by Warwickshire in the expenditure column and the cross charges received back from the other two LPCs in the income section.

In year we reduced our levy income by having 3 months levy holiday as well as reducing the monthly amount. Overall, we spent £24,093 more than we received as income versus £741 more last year. We will also see the repayment of the CHS Provider Arm Loan in 21-22 financial year of £8,325. We also received a share (£4,000) of the local government grant for our office set up which covered the office fixed costs for the year

We were able to achieve these reductions due to:

- Move to virtual meetings for 20-21
- Fewer locality / PCN meetings than expected due to delay in maturing
- Impact of Covid on travel and meetings
- Utilising some of our reserves

We acknowledge that the end of year bank balance is above the 50% of planned expenditure recommended to be held in reserve. In light of the delayed reporting of the RSG in relation to the Wright Review the LPC believes it is prudent to retain at least a proportion of these additional reserves in order to support the agreement and implementation of the changes needed to achieve the best possible representation of community pharmacy at both a local and a national level. We believe that these additional reserves will allow us to do this, on behalf of contractors, without having to levy contractors for additional funding.

The LPC has proposed the following:

- A budget of £127,000 for 21-22 has been set, this may be revised when we review in the Autumn based on run rate. **Therefore a 50% reserve would be £63,500. Leaving approximately £75,202 additional reserve.** We will have the CHS Loan repaid in 21-22 **£8,325**
- We are aligning our financials ahead of our merger with Coventry LPC in April 2022.
- 25% £31,750 'set aside' to support the LPC undertake any required transformation over the next two years to meet any next steps of the Wright Review Transformation of Community Pharmacy representation. Any not called into use will be returned to Warwickshire Contractors by way of a levy holiday at the end of the period.
- £51,777 (including the Loan repayment which we have received) will be held as a contingency fund until the end of November 2021 – for CPCF, PQS and adapting to new ways of working. We will then review our financial position and if it has not been allocated or called into use, a four months levy holiday will be applied in prior to April 2022.

Points of note on the accounts:

- The shared support and office function has now annualised.
- There are some accruals and pre-payments and the provider arm loans remain on the 'books'

We hope that these suggestions meet with your approval, if you have any queries please contact the LPC office in the first instance and we will be happy to explain further. ahwlpc@gmail.com

7

21-22

The year ahead



Merger and the new LPC elections

Following on from the April Special General Meeting (SGM) to approve the merger, the LPCs have met to consider the implications of the proposed election timings, where some LPCs and PSNC are opting to delay elections by a year and arranging SGMs to this effect due to the Wright Review. The joint LPCs footprint will align with the soon to be formalised ICS footprint in April 2022, considered to be an appropriate size for local and System representation and support for Contractors. Following discussion and advice from PSNC to continue with our current plans, we will be following our original timelines with elections in January for the joint LPC to be known as Community Pharmacy Arden (CPA) in April 2022 for a four-year term.

Services and Representation for 21-22

Extended Care PGDs – commissioned across Midlands 11 ICS areas – huge interest from secondary and primary care – UTI, Skin infections and soon ENT – see LPC website

Service delivery



Increase uptake and referrals from DMS and GPCPCS . DMS as of June 2021 is now live in all the acute and the health and care trust. Revitalise NMS and expand the delivery of Extended Care PGD Service.

Pilots for BP testing, stop smoking referrals for patients discharged from hospital and sore throat test for Strep A. New categories for NMS are anticipated.

Training events and resources.

Stakeholders



Integration of Community Pharmacy in ICS, PLACE and PCNs is the aim, with opportunities to deliver new services within integrated local pathways. Representation at all levels. Support Local CP Leads to integrate into the PCNs effectively – training and support.

PNA will be due to be completed in October 2022 and so questionnaires will come out in the Winter.

Wright Review



Wright Review – engagement with RSG and Contractors.

A series of engagement events will be available for Contractors and a vote in December on the final proposals. This will be critical as to how PSNC and LPCs support you in the future.

[Pharmacy Representation RSG – Improving community pharmacy contractor representation and support \(pharmacy-review.org\)](http://pharmacy-review.org)

Central Health Solutions CHS – Loans repaid



Central Health
Solutions Ltd

CHS our Provider Arm partner (www.1centralhealth.co.uk) has had a very successful year delivering service opportunities in our LPC for Contractors. CHS has delivered more than £1.3Million in revenue for Contractors across the North & West Midlands. In Warwickshire there have been a couple of small schemes. CHS will also make a profit for second consecutive year and have as a result **paid off the LPC Loan in full**.

Vaccinations

We are awaiting the details and specifications for the forthcoming Flu and potentially Covid booster vaccination programmes for 21-22 season. This is likely to be a huge combined effort between GPs and Pharmacy teams with some co-ordination potentially by ICS or PCN. Look out for information on our website. The CCG / Council are looking at options around commissioning pharmacies again to support vaccinating their staff for Flu but are waiting on what happens nationally.

For those currently providing Covid vaccinations – a lot of information is on the SPS and NHS Futures websites and we have WhatsApp Groups set up – let us know if want to join these.

Workforce Survey

HEE have sent out a Workforce Survey for all Pharmacy Contractors to complete. This is very important to help inform ICS discussions around resilience across the system and work on the 'grow your own' options and support cross sector trainee posts. It will also help inform the future planning and funding in relation to the development of the community pharmacy workforce across the NHS in England. [FAQs on the HEE workforce survey : PSNC Main site](#) for completion by mid June and results should be available in the Autumn. Also the Community Pharmacy Workforce Group [Community Pharmacy Workforce Development Group](#) has produced some guidance [What do we want? – Community Pharmacy Workforce Development Group](#)

Your LPC Team 21-22

Name.	Member / Team	PCN Supporting	Subgroups (Lead in Red)	Other roles
Fiona Lowe	Team	North / Rural	Exec & Finance, Merger , Governance, Contractor Engagement , Stakeholder	Chief Executive Officer IPMO Rep
Zoe Ascott	Team	Arden	Governance , Regulatory , Contractor Support, Communications	Administrator & Gov Lead
Kathy Robinson	Team		Services , Stakeholder	Services Support Officer
Susan Karoly-Smith	Team			Digital Admin and Website
Faye Owen	Chair (CCA)	Bedworth	Exec & Finance , Merger , Governance	Signatory
Theresa Fryer	Vice Chair & Treasurer (Indep)	Leamington N and S	Exec & Finance, Merger, Regulatory	Signatory
Satyan Kotecha	Member (Indep)	Nuneaton South	(Regulatory), Services , Stakeholder	S&O CHs & IPMO Rep
Independent Vacancy	(interim Andy McKenna)	East	Governance, Regulatory & Services	
Caroline Harvey	Member (Indep)	Warwick	Contractor Engagement , Services	Signatory
Mike O Donnell	Member (AIMp)	North / Rural	Governance, Regulatory, Services	S&O CHS Lead
Deepak Lodhia	Member (CCA)	Nuneaton North	Stakeholder, Contractor Engagement	
Sam Griffiths	Member (CCA)	Stratford Surrounds & Dene / Stour	Regulatory	
Charan Kaushish / Rohini Aerry	Member (CCA)	Rugby	Contractor Engagement	

LPC Strategy 21-22

The LPC agreed their outline strategic priorities. Contractors were invited to attend and contribute to the sessions. **The LPC has a workplan for all standard LPC activities**, which will be carried over as BAU. The link is below: [LPC Constitution and Governance – Warwickshire LPC](#) . The PSNC RAG rating will be updated during 2021, once it has been amended by PSNC. The additional Objectives are shown below:

Objective	Budget	Goals	Timeline	Aspirational Target
1. ICS Engagement	£4000 pro rate For meeting attendance, preparation and proposal development Estimate: 4 hours a week average	Community Pharmacy representation embedded in the ToR of system leadership of IPMO, which directly reports into ICS Board as core members for quoracy throughout 2021-22 i) Investigate structure of the ICS and establish relevant Groups that would benefit Community Pharmacy to be represented on during 2021 – then establish a place for CP on Group(s) ii) Maintain proactive engagement of all relevant IPMO workstreams and Committees 2021 -22 to establish Community Pharmacy role as a stakeholder in the ICS	Financial year end 21-22	Core Member of IPMO Leadership Representation on all relevant Groups at ICS and PLACE once in place and in ToR
		Submit clinical Community Pharmacy service proposals to the ICS – one to be submitted by financial year end 21-22	Financial year end 21-22	One to be submitted by financial year end 21-22
		Support the Joint Formulary Workstream – to benefit Community Pharmacy by influencing for example impact of branded generic switches and developing an intervention scheme proposal. Develop and implement an Intervention Scheme by end of 21-22 Limit the growth of the use of branded generics in the area by influencing at APC over key decisions (excludes BNF recommended brand specification for MR and narrow therapeutic margin etc) – target limit to maximum growth of 0% branded generics across C&W	Financial year end 21-22	Implementation Service Development 0% increase in branded generics (excluding recommended in BNF)
		Support implementation of DMS through close working relationship with secondary care team and drive an increase in UHCW, SWFT and to start referrals in GEH. Target 30 referrals per week per acute site by end 2021 and 60 by end financial year. (Currently 10, 23, 0 respectively per month) Engage ICS to refer into NMS and through DMS	Financial year end 21-22	Target 30 referrals per week per acute site by end 2021 and 60 by end financial year) NMS requests within DMS referrals
		Establish opportunity for CPCS (Med and MI) from ED by supporting the development and implementation pilot 2021-22 to be in operation and undertaking referrals by end of January 2022	January 2022	Referrals from ED established from UHCW
		Establish a mechanism for representation of Community Pharmacy on the Provider Alliance 2021-22	Financial year end 21-22	Representation in place

LPC Strategy 21-22 continued

Objective	Budget C&W shared budget unless otherwise specified	Goals	Timeline	Aspirational Target
2. PCN Collaboration	£10,000 pro rate Meetings 1 hour a month and backfill training - work directed by LPC (Leads – CP or LPC or other) (£6k + £8k pa)	Maintain Leads for each PCN (LPC and Community Pharmacy local leads) – filling vacancies as they arise	Financial year end 21-22	Maintain Leads (CP or LPC) for each PCN
		Set up a maturity matrix for the leads and establish a mechanism for supporting with mentoring / buddying for less experienced Leads – LPC / other CP Leads (using feedback from PSNC PCN Lead survey to inform areas requiring greatest focus)	Baseline August 2021	Matrix developed and baselined August 2021
		Increase on baseline performance as assessed by matrix – 75% Leads operating at satisfactory level	Financial year end 21-22	Matrix review end financial year has 75% Leads operating at satisfactory or better level
3. GP CPCS	£6,000 pro rate (non-recurring) for engagement – could tag some onto PCN engagement activity under Objective 2 Co-ordination of activity and messaging	Provide training and support materials to enable CP to deliver GPCPCS to claim set up Fee through Annex F by end of June	End June 2021	
		In conjunction with CCG/ NHSEi provide training sessions for practice teams to implement GPCPCS throughout 2021 – up to one a week. Through engagement of PCN Pharmacists / ICS Lead to facilitate the roll out throughout 2021	End of December 2021	75% PCNs engaged and live or testing
		Develop a FAQ and locum guide to support contractors based on early adopter learning by end June 2021	End June 2021	FAQ and Locum guide developed and shared

LPC Strategy 21-22 continued

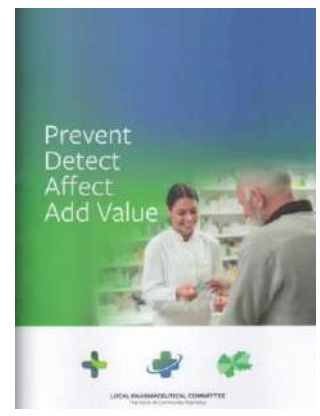
Objective	Budget C&W shared budget unless otherwise specified	Goals	Timeline	Aspirational Target
4. National Services	£2,000 – for pathways / data / training	Develop and provide a series of training events to cover National Services before October NMS new categories – once confirmed to be included	Financial year end 21-22	Training Events delivered and good attendance
		Develop a quarterly services newsletter with data, where available – for Contractors – national and local – first Newsletter by end of September Dashboard of national services data available at LPC Meetings.	End September	Newsletters with data sufficient for Contractors to benchmark themselves produced
		Local implementation of National Services – pathways to facilitate to be developed asap – aspirational target 2 months from launch	Financial year end 21-22	Local enabling pathways in place within 2 months of national launch
5. Local Services	£1000 <u>per LPC</u> for service development meetings and supporting preparation activity	Warks: SSS – develop a proposal for enhanced funding before September 2021 – to present to Warwickshire Commissioners	September 2021	Proposal for enhanced funding presented by end August 2021
		SSS – Review any pilot / CPCF opportunities – Pharmacy Integration referral from Secondary Care – Coventry & Warwickshire through engagement with ICS and Acute Trusts – these would complement local SSS	Financial year end 21-22	TBC by services team once details confirmed in CPCF
		DUS – Review holistic ‘per capita’ options for client services – develop a proposal to go to CGL by September C&W	End September	Proposal for CGL presented
		Develop dashboard from data available for Local Services to inform LPCs and to include within quarterly Services Newsletter (Under Objective 4)	End September	Available for September Meeting.
TOTAL Budget (non BAU) 21-22	£12,000 per LPC for remainder of 20-21	Other Subgroups will have a budget to cover required meetings, which will align with LPC Meeting dates where possible. BAU will fall within existing budget allowance		

Budget 21-22

Warwickshire LPC	assuming 100% requested	Levy £116,400
Item	21-22	£
Office team	Support Officer (6 -7.5 hrs / wk); Administrator (8 hrs / wk); Digital admin (5hrs/wk) - employed includes OPI = expenses £2000	£17,800.00
Office rental etc	Office costs rent, IT, petty cash, printing and utilities	£3,600.00
CO costs	Pay OPI expenses	£32,000
Payroll expenses	payplus costs	£1,500.00
Members backfill	based on ave 8 @£250 x 6 meetings	£12,000.00
Members expenses	based on 9@£25 x 3 meeting as rest online	£675.00
PSNC Levy	based on 10% uplift	£34,599.40
Venue hire meetings	based on 6 meetings @£26*9*3 (aim for funding)	£702.00
Events	2-3 a year shared cost and part funded pharma	£3,000.00
CPWM	£20 per contractor	£2,140.00
Additional Office / Support hours	half a day a week extra	£5,000
Other Training Contractors	Pharma support required in addition	£3,000.00
SUBTOTAL		£116,016.40
Training LPC courses and development		£1,000.00
Accountants		£1,000.00
Printing / stationery		£1,000.00
Marketing / PR		£2,000.00
External & subgroup Meetings		£2,000.00
Exec meetings & cross AHW		£1,000.00
PCN Support	£25 per mo per lead only ave - 13 Leads	£3,900.00
SUBTOTAL		£11,900.00
TOTAL EXPENDITURE		£127,916
NOTES		

- Footnotes-

- Levies – likely to be levy holiday of some sort ahead of merger so income will be lower
- Expenses will be lower due to remote working
- Venue higher / events costs will be lower as most will be online
- CPWM will be lower as most meetings online
- Additional admin support may not be fully implemented in 21-22
- Chief Officer Salary £25,000 per annum gross (16 hours a week)



We will be changing our name over the next year to:

Community Pharmacy Arden

once we merge



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Warwickshire LPC – The local voice for Pharmacy