



Context

Our Vision and Strategy - Community Pharmacy England

Community Pharmacy England commissioned leading health think tanks Nuffield Trust and The King's Fund to develop a vision for community pharmacy. The resulting independent report follows almost a year's worth of research and consultation with the sector and wider stakeholders and advocates for community pharmacy.

'A Vision for Community Pharmacy' describes how Nuffield Trust and The King's Fund foresee a transformation of the community pharmacy sector. The report not only sets out how community pharmacies' role in healthcare could be expanded over the next decade, but also explores the barriers to achieving this, and the enablers which will help make progress towards it.

'Community pharmacies are critical to our local neighbourhoods, but there is still more that they could do for patients, the public and the wider NHS. To empower pharmacies to reach this potential, offering the full range of clinical services within their expanding skillset, we must ease ongoing pressures, fund them sustainably and properly embed them within local and national healthcare systems.' Quote from Janet Morrison CEO of CPE.

Our two LPCs have a joint strategic plan and workplan, with flexibility to include differing additional local priorities to align with local need and local ICS plans as appropriate.

Each year the LPCs set the workplan for the coming year. The key BAU aspects of the plan relating to running the LPC, engagement, representation and support that this entails. This is includes, for the most part, the same pillars of activity each year, with additions, updates depending on local or contractual changes. It is published on the LPC website under about us and our governance documents. In addition to this we have our additional key priorities many of which are locally focussed and are updated regularly. The BAU workplan closely aligns with the self-assessment document produced by CPE and a new version will be available by March 2025. A draft has been reviewed by the LPC and a draft action plan put in place ahead of the final version being shared.

The key priorities identified for CPA and CPHW are: PNA related activity to be completed during 2025; Self-assessment RAG documents to be completed during 2025 and reviewed twice a year thereafter; Transition to a new CEO following retirement in 2026 and anything that comes out of the new CPCF and NHS Plan / CPE Vision

CPA have additionally identified: Integration into the ICS and representation on Primary care Collaborative along with input into the Primary Care Strategy. Plus, proactively supporting the Oral Contraception Service.

LPC Office: Unit 24 Basepoint Business Centre; Crab Apple Way, Vale Park, Evesham, WR11 1GP



REPRESENT

SUPPORT

LEAD

VISION

CPA and CPHW will represent equitably and effectively every contractor either individually or as a collective, championing the services pharmacies provide to our populations

AIMS

Represent contractors at system & place & PCN level to promote national advanced service uptake & awareness amongst stakeholders

Represent contractors in system-level and regional (MORAG) discussions relating to pharmacy challenges associated with access to and supply of medicines and patient and medicine safety.

Represent contractors to advocate for 'doing things once' and working at scale across our two areas. To include building relationships with commissioners to maximise local service opportunities and input into the Locally Commissioned Services review. Build effective relationships with LRCs & GP representative organisations to raise awareness of pharmacy services & promote collaborative working Represent community pharmacy's unique position.

CPA and CPHW will offer support to every contractor in reaching their full potential in operational and service delivery performance through regular communication, events and dedicated support.

Raise awareness of CPA & CPHW amongst contractors and the support available to them by variety of means. Work closely with contractors and commissioners to see what support and training is needed and how best meet needs.

Develop communication strategy and tools including website, newsletter and social media to reach wider community pharmacy network & ensure effective targeting of information.

Work collaboratively with ICB, other local commissioners and clinical forums to deliver and evaluate a range of awareness / contractor support sessions re CPCF national services to provide insight into contractor preference for ongoing events and resource packs and marketing materials

Support contractors to understand and value the strategic shift towards clinical services, enhancing their role in patient care & improving health outcome. Plus prepare them for any changes from NHS Plan and CPE negotiations and vision.

CPA and CPHW will provide effective leadership to ensure that community pharmacies across our area are well-prepared for the future of the CPCF, helping position community pharmacies as respected members of primary care, with a strong focus on viability, strength of the network and appropriately funded clinical services. Supporting innovation and excellence in community pharmacy practice.

Lead discussions with local system / commissioner stakeholders and partners so that we are recognised as an effective and trusted representative of our contractors.

Be consistent and clear about the benefits of working at scale in a consistent manner to ensure all patients have equitable access to services.

CPA & CPHW operations & finances to be underpinned by robust governance.

Work at regional and national level to provide a trusted conduit between our contractors and regional / national teams to lead & influence, sharing best practice across a wide area.

Ensure media ready and engage with MPs and councillors.

ENABLERS

Viable Pharmacy Network, CPCF and Local Contracts Digital and Data sharing to support delivery Excellent stakeholder and contractor engagement and active LPC Members.

MEASURES

Feedback from stakeholder; Feedback from contractors at visits and by other means; Data on service delivery and sign ups; Network stability; Engagement at events; Queries handled by the team. Financial balance and self-assessment.

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