

Minutes of the meeting of the English Pharmacy Board - Open business

Minutes of the meeting held at 9.00am on 11th April 2019 in the RPS Suite, 4th floor, at the Royal Pharmaceutical Society, 66 East Smithfield, London E1W 1AW

Present

|  |  |
| --- | --- |
|  |  |
| Sandra Gidley (Chair)Clair Anderson | Sibby Buckle (Vice Chair)Martin Astbury  |
| David Carter Thorrun GovindMahendra Patel Ash Soni  | Elizabeth ButterfieldHemant Patel Tracey Thornley  |
| **Guests**Sue Kilby Rahul SingalTahmina Rokib (from 10.30am)**In Attendance**Paul BennettRobbie TurnerRavi SharmaGino Martini (agenda item 13 only)Chris John (agenda item 8 Only)Wing TangNeal Patel (agenda item 12 only)Melissa Dear (agenda item 12 only)Heidi WrightJohn LunnyJonathan BisbyGareth KitsonAdele MottNicola GrayAmandeep DollHanna Jenvey (agenda item 9 only)Ivana KnyghtCalvin Smith (agenda item 16)Janet Till (agenda item 16)Corrinne BurnsYvonne Dennington**Apologies**Nadia Bukhari (Aamer Safdar stepped down from the EPB ahead of this meeting) | Chair, Industrial Pharmacists’ ForumHospital Expert Advisory GroupRPS AmbassadorChief Executive Director for Pharmacy and Member ExperienceDirector for EnglandChief ScientistWorkforce development leadHead of Professional StandardsHead of Corporate CommunicationsCampaigns and Corp Comms ManagerPractice and Policy LeadPublic Affairs manager Public Affairs executiveProfessional Development and Engagement Lead RPS Clinical FellowRegional Liaison PharmacistRegional Liaison PharmacistEvents and Sponsorship ManagerHead of SupportProduct Development ManagerProduct ManagerPharmaceutical Journal, RPS correspondentBusiness Manager, England |

19/41 Welcome and Introductions

The Chair welcomed EPB members and staff to the meeting and asked all present to introduce themselves. She invited visiting members to contribute to the discussion if they wished.

**19/42 Apologies**

Nadia Bukhari gave apologies. Aamer Safdar stepped down from the EPB ahead of this meeting.

**19/43 Declaration of Interests**

**The English Pharmacy Board noted** paper 19.04/EPB.03. Board members were reminded to send in any amendments to their declarations to Yvonne Dennington and were also asked to state, in the interests of best practice, any declared interest at the start of the discussion to which it relates.

David Carter gave an update to his declaration of interests in advance of the meeting.

**19/44 Minutes of the meeting held on 31st January 2019**

The minutes of the meeting held on 31st January 2019 circulated as 19.04/EPB.04 were agreed as an accurate record of proceedings.

**19/45 Matters arising not specifically included on the Open Business Agenda**

 **19/16** – Policy statement: on line pharmacy

Following feedback from CQC the policy has been extensively revised removing much of the detail and making it more strategic. The policy has been circulated for comments and will go to the next National Board Chairs’ Forum on 25th April for final approval.

**19/17** RPS to meet with NHS England

Ravi Sharna reported that he is currently working on getting a meeting in the diary with Ed Waller. Ravi has recently been appointed to the NHS Assembly.

The Chair took this opportunity to congratulate Ravi on behalf of the Board on his successful appointment to the NHS Assembly. This means the the RPS will be well represented at this level within NHS England.

**19/24** Research Ready

An update on Research Ready can be found in the Science and Research update paper 19.04/EPB.13.

**18/21** Meeting with Matt Hancock

A meeting is still being pursued with Matt Hancock’s office and a list of possible hospital visits has been sent to his office.

**19/46 Public Affairs and Policy Statements**

The English Pharmacy Board **noted and discussed** paper 19.04/EPB.06 on Cannabidiol oil.

The Board was asked if there was a requirement for the policy team to work on a position statement. The paper is also being presented to the Scottish and Welsh Boards.

The overall consensus of the Board was that a document was needed, more in line with the homeopathy guidance that would ensure that CBD oils were being sold in the right way. It was felt that a yes / no to actually selling CBD oils from pharmacies would not be useful as they are already being sold – but something that supported the safe sale will be useful.

Some of the points made were:-

* Pharmacist should advise about what the oil is and what it isn’t and the guidance should provide some clarity around the evidence which pharmacists can also share with people
* The public also need a credible source of information – advise on safe use of the product
* The police have put out a statement saying their workforce shouldn’t use cannabidiol oil as it can contain traces of THC
* Guidance should look at value and benefits as well as risks
* The information should be straightforward for both pharmacists and the public
* Need to also consider the carriers such as peanut/sesame oil and this issue needs to be highlighted
* The variability and lack of control should also be highlighted
* The issue of THC vs CBD needs to be covered
* Need to also think about what happens in hospitals when people bring this is as part of their medicines and want to use it – it is unlicensed but not illegal as it is a food supplement

There was some discussion that followed on from this about working in collaboration with others and ensuring that horizon scanning happens.

Ravi Sharma assured the Board that collaborative working is happening and emphasis is placed on this way of working and it is improving. Horizon scanning is actively taking place but there are a huge amount of publications coming out and the volume is challenging to manage.

**Action:** Policy team to produce guidance on Cannabidiol oil.

**19/47 Updates from Team England**

The English Pharmacy Board **noted** the update papers 19.04/EPB.07 (i) – (viii).

1. Local Engagement – noted.
2. Public Affairs – noted.
3. Policy and Consultations – noted
4. Digital (IM&T) – noted.
5. Medicines Optimisation – noted.
6. Pharmacy Public Health Forum

Ravi Sharma gave a short verbal update saying that the last meeting he attended discussed the cardiovascular elements of the Long Term Plan regarding pharmacy working with general practice on CVD and atrial fibrillation screening and how RPS can be involved.

The Chair queried the action from this PPHF. It was highlighted that this forum has no funding therefore cannot commission. Robbie Turner replied saying that the forum is good for building relationships and horizon scanning and has been pivotal in achieving quality payments for healthy living pharmacies and highlighting the role of community pharmacy in the prevention agenda. They have also been instrumental in getting CVD into the long term plan. The forum has a role to play in influencing. The challenge now for pharmacy is to get CVD into the contract negotiations.

Public Health England released a spreadsheet of 200 health economies with information on CVD and health checks.

Working more closely with LPCs was highlighted as much of the health agenda is now local. It was **agreed** that the RPS needs to be active and supportive of LPCs in the future.

**Action 1:**TT to share spreadsheet with HW

**Action 2:** Give consideration to how the RPS can engage with LPCs/PSNC.

1. Innovators’ Forum – there is nothing to report
2. System Leadership – this is covered under item 10 on the agenda

**19/48 Education and Professional Development Directorate**

The English Pharmacy Board noted update paper 19.04/EPB.08.

 Faculty Review

The Task and Finish group met on 21 March 2019. The Terms of Reference were agreed at this meeting and the group will be held monthly either virtually or face to face. There will be a wider reference group. The task group comprises of 12/13 people cross country and cross sector and are currently working on the purpose of the faculty. The group were presented with all the facts and figures at this meeting and will report back in September 2019.

HEE have set up an academy of advanced level practice and consultant level practice. They are setting standards and consulting on an operational framework. The consultation closes on 22nd April 2019. There are concerns around this model as one size does not fit all and there may be a role for the RPS in shaping advanced practice. It will be important to get younger pharmacists involved.

Currently the faculty programme is still running whilst this review is taking place. Those who are due for review are being kept informed.

The reason for the review is the need to see change. Improving access is key. It was highlighted that HEE will not include industry and this needs to be considered as part of the review, as a faculty needs to address the needs of all pharmacists from all sectors.

AMR training

Chris John gave an update on this work in place of Beth Ward who is the lead. RPS submitted a bid to HEE and won the bid for the training of 30 pharmacists in London and the South East region. The training runs over 3 months and is targeted at post foundation pharmacists. HEE are considering the feasibility of rolling this out as a national programme.

This piece of work is great for the RPS, illustrates the strength of the RPS in preparing and winning bids.

**19/49 Science and Research Update**

Gino Martini gave a short update.

Cannabidiol Oil

 Currently the guidance on the Home Office website is causing confusion.

 **Action 1:** Gino to write to the Home Office to highlight the confusion.

 DNP

Currently DNP has killed 21 people who were body conscious. There is a need to highlight the risks to MPs and to do something more to say that DNP should be banned. Gino is in touch with Panaroma to further highlight this issue.

**Action 2:** Raise this issue with PH England/Scotland/Wales

**19/50 Pharmacy and Member Experience**

Professional Standards for Community Pharmacy Services

The English Pharmacy Board noted papers 19.04/EPB.09 (i) literature review (ii) engagement summary.

Wing Tang gave a short verbal update on progress to date with the professional standards**.**

The target date for publication of the standards is March 2020.

 Wing explained the process so far of engagement, setting up of a strategic oversight project group (made up with representatives from the three national boards and pharmacy bodies), commissioning of a literature review and forming an independent steering group.

 The independent steering group had their 1st meeting on 13 March, where the scope and the content of the standards was confirmed. It was agreed at the meeting what was in and out of scope. It was also agreed not to duplicate information that was already out there such a GPhC standards, service specifications and our own existing standards. These will be signposted appropriately.

 The next steps include drafting of the standards, sharing the draft with the steering group and project board and user testing. After redrafting the next stage will be consultation, whereby everyone including the Board as a collective and individually will be able to comment on the standards. It is hoped the standards will be ready for consultation in September 2019.

 It was recognised that this is an excellent piece of work and a massive job and will hopefully add value to a system that is currently volume led.

 It was highlighted that there is currently a huge training budget within NHSE that is currently only 8% spent and pharmacists are not taking up this opportunity. It was suggested that the availability of this training budget could tie in with the work on the standards.

 It will be important to get the narrative right around these standards as currently pharmacists are feeling very “done to”. The standards should be seen as a tool towards working in an integrated system. To help with implementation a critical audience is the LPC network and PSNC.

 It was suggested that the standards should also have a focus on professional autonomy and confidence and have a benchmarking system whereby meeting the standards can be measured. Wing agreed that how pharmacists meet the descriptors is being considered.

 Mentoring Pilot

 This item was introduced by Ivana Knyght and Calvin Smith.

 It was decided to reinvigorate the mentoring service in 2018. The discovery phase highlighted the limitations of the previous service. The team opted for a 3rd party solution to take this work forward.

 A Mentoring Expert Advisory Group (MEAG) was formed and had their first meeting in January. Currently in development phase and educational material is being developed. The current mentoring service will be closing on 26th April 2019. Communication to members will inform them of the closure and what is in train for the future. There will be a programme of quality improvement and the scheme will be reviewed at regular intervals. The new platform will have a better look and feel, be easier to navigate, more capability and an array of resources.

 There was some concern regarding the current graphics, it was agreed to review and change the graphic. It was suggested that there be a tick box to choose your mentor/mentee with diversity in mind.

There was some discussion about ensuring competence of the mentor. This is

being discussed by MEAG and they are looking at a declaration of competence.

Cost of the service was addressed in a robust business case which was approved by the Executive team before being included in the budget for approval by the Assembly.

It was explained that mentoring is about personal and professional development and that there are times when the relationship does not work effectively. The new system incorporates the ability to exit a mentoring relationship if it is not working.

Currently there are no plans for an APP but this may be a further development phase in the future if there is a business need.

Overall the new service was applauded by the Board.

 **Action 1:** Circulate the slides

 **Action 2:** Review and change the graphic

**19/51 English Pharmacy Board Work Programme of Work/ Campaigns current and for 2019**

Ravi Sharma introduced this item outlining the work that Team England have currently been involved in.

 Diabetes

 Heidi Wright thanked the board for the comments on the diabetes policy of which there have been many iterations. The team are currently working on the final version reviewing the recommendations in view of the role pharmacists can play across the whole system and all of the policy is underpinned by person centred care. A number of examples of good practice will be published alongside the policy.

 A robust delivery plan has been developed alongside featuring webinars, events and networking opportunities.

 The point was raised that consideration needs to be given to commissioning cycles and communications should include commissioners.

 Ravi explained that the policy has been developed in partnership with NHSE who is the national commissioner.

 The Chair thanked the team and Mahendra Patel for what has been a difficult piece of work but said that the final document will be well worth the effort.

 System Leadership

 Amandeep Doll and Nicola Gray gave a short presentation.

 The regional liaison pharmacists spent the first 6 months on a fact finding mission across the country looking at system leadership in a changing NHS landscape and in relation to the Long Term Plan, looking at how to support members to understand what leadership skills will be needed. The Liaison Pharmacists have been engaging with a range of key stakeholders across different sized systems at different levels of maturity at a national, regional and local level (the detail of this is set out in the slides).

The delivery phase of the project will include:-

* providing and disseminating resources and information to support and accelerate the development of medicines optimisation activities.
* Working with RPS Local forums to ensure their expertise and networks are best used for the benefit of pharmacists, patients and the wider public.
* Promote sharing of innovative pharmacy practice to accelerate uptake across England.
* Presenting at Clinical Pharmacy Congress in June 2019 to launch the RPS resource

The board found the work inspiring and hoped that it will spread around the country. The role of pharmacy in prevention was raised and it was suggested that this work should include prevention. Nicola Gray said that so much of this work is dependent on personal relationships. It is recognised that in the changing NHS landscape some of the existing structures are fragile. Primary Care Networks are a growing opportunity to work collaboratively. Concerns were raised that if guidance comes out at the end of this year this will be too late as structural changes are happening now.

It was suggested that this work should link in with Academic Health Science Networks (AHSNs).

The point was raised that we should not duplicate and ensure we are aligned with the work that is going on in other organisations such as PSNC, NPA and the Kings Fund. Ravi Sharma assured the board that this work was not being conducted in a silo and that meetings are taking place with other bodies. NHSE will be doing something in May that fits in with this work.

The Chair thanked the Regional Liaison Pharmacists for what they had achieved and the hard work they had put into this piece of work.

 **Action 1:** Circulate slides

 **Action 2:** Make contact with AHSNs

 Long Term Plan

Ravi Sharma introduced this item saying that it was good to see the advocacy work of the board being reflected in the LTP with over 40 mentions of pharmacists and pharmacy, recognising the skills of the pharmacists to improve patient outcomes. It is clear that Now or Never has had an impact and much of that work is reflected in the plan. The plan shows big investment into primary care.

The EPB at its January meeting undertook business planning for 2019 and beyond focusing on the LTP and concluded there were three areas they should concentrate on:-

1. Pharmacists’ role and expert knowledge
2. Futuristic healthcare and role of pharmacist
3. Workforce development

Each of these priority areas has 4/5 workstreams. The EPB used the working day yesterday (10th April) to drill down into these areas creating a delivery plan.

There was some discussion around the board being better informed on digital matters. They concluded that the detail was not as important as the horizon scanning, knowing what is coming along next. The pace of change is quick and what is happening in other parts of the world will influence the NHS plan, there is a lot of investment going on.

It was highlighted that cancer care did not appear to be in the workplan and yet it is a growing area that is changing rapidly and pharmacy should be picking this up especially in relation to diagnostics and side effects of medicines.

In relation to digital advancement pharmacy needs to map out where it is going and the tools that will be needed. Robbie Turner added that it was the RPS role to help prepare members to cope and take advantage of change and then help protect them from the challenges and barriers. At the next meeting of the Digital Forum a paper will be presented on Digital Capabilites written by Stephen Goundrey Smith (RPS digital consultant).

**Action 3:** Circulate paper on Digital Capabilities

**19/52 Prescribing Supervisors’ Competency Framework**

Wing Tang introduced this item on behalf of Adele Mott.

Wing recapped over the project progress so far saying this document will be useful for trainers, health education providers, course accreditors, prescribing professionals. HEE have contributed to funding this piece of work. The target for consultation is June/July with publication before the end of the year.

A project group meeting has been held followed by a steering group meeting, chaired by Angela Alexander. A validation group meeting has also been held. A draft has been developed and currently the set of competencies totalling between 60-70 is being refined as this is too many. There will be another meeting of the project group and steering group in May ahead of the consultation.

Course providers are currently being accredited. There is eager anticipation for this work.

It is acknowledged that the board have had a huge role to play in setting the vision for this piece of work and it is hoped that there will be continued support from the Board with:

* Advocacy and possibly joining the external reference group
* When ready for public consultation to scrutinise and comment
* Ideas for implementation – help with maximising its value

The board agreed that there was huge potentional for events and support and that we should take up this opportunity sooner rather than later.

**19/53 English Pharmacy Board Communications Plan**

Neal Patel introduced this item, giving the board an updated version of the weekly dashboard.

Some of the points he made were:-

* RPS is hugely successful with media coverage with over half of all media coverage coming from RPS – this is important for raising awareness of the organisation and reaching people we would not normally reach.
* Website traffic continues to increase after the investment made last year in a new website
* Safe and secure handling of medicines attracts the nursing profession to our website
* Data from the dashboard helps us to make the right decisions
* MEP drives people to the website - currently working with the Innovation and Enterprise directorate to greater develop the MEP to add value – currently the PDF format does not give the granularity to track specific usage
* Prescribing is in the top 5 things that people search for on the website
* Social media – working to increase followers – thinking about what channels are suitable for specific information – ensuring we are relevant
* Although email is still very much in use it is a declining channel for information sharing
* Need to make more of the “my RPS section” on the website
* GDPR compliance is important and restricts the sharing of emails with RPS locals – we are currently exploring ways of improving these communication channels
* Currently using GPhC shared data to assist with targeting areas of low uptake with RPS locals
* Currently working on a new 3rd party events system – hoping to have in place by June 2019.
* Pharmaceutical Industry careers – content led campaign – includes driving content on the website, podcasts, webinars etc.

**19/54 RPS confererence 2019**

Hanna Jenvey introduced this item.

The RPS conference for 2019 with be Sunday 17th November and will be held at a new, good quality venue near Liverpool Street. The exhibition area is at the heart of the venue which seats 600 – 700 people in total. There is room for 4 parallel streams. The overall theme of the conference is Medicines Safety. The conference will be free of charge to members with a fee of £250 for non members. The new events system will be in place before the launch of the conference. The RPS will take a small “no show” deposit from members. Currently the programme is in draft but more input is encouraged. There will be a RPS Awards night on the Saturday before the conference, which will be a ticketed event. On Sunday evening there will be an engagement event for early career members.

The board raised the issue of different pricing structures for different groups. The events team will be considering this in the overall planning and have been challenged with making this a successful event in line with the commercial strategy of the RPS and the team’s revenue targets.

Questions were raised as to why the event is in London. As the event is being held on a Sunday, London is the most accessible regarding train links, and offers the best value for money.

The board offered their help in marketing the event, for example having a session on the LPC agenda. Sponsorship will be key to the success of the conference so any help with getting sponsors will be appreciated.

Any differentiation in pricing scales and giving discounts will need to signed off by Assembly.

Hanna explained that for this year the conference is being stripped back to basics.. It is hoped to grow the conference year on year to a wider audience, when discounted pricing structures and other financial benefits may be considered.

**Action 1:** HJ and MA to speak about possible discounts and the appropriate sign off mechanism.

**Action 2:** Contact the conference steering group with input into the agenda

**19/55 Brexit Update**

A Brexit webpage has been set up for members. Updates are ongoing with NHSE and DH communications team regarding planning aspects.

The Chair recently met with John Ashworth MP, he is supportive of pharmacy.

There was some discussion regarding the serious shortages protocol (SSP), to date no guidance has been issued, therefore there is no information to share with members. It was highlighted that the delay to Brexit could be used to greater articulate the benefits SSP could provide.

The issue of putting a notice in all community pharmacies explaining the pharmacist’s role in relation to medicines shortages.

**Action 1:** RS to raise the issue at the next Brexit meeting of highlighting the benefits of SSP not only in relation to Brexit.

**Action 2:** Investigate issuing a notice to all community pharmacists for patients/public regarding medicines shortages.

**19/56 Innovation and Enterprise update**

Janet Till and Calvin Smith introduced this item, explaining their approach to new ideas for innovation, focusing on the principles only.

**19/57 Any other business**

Board members standing down

The Chair thanked both Aamer Safdar and Liz Butterfield for their work on the board and wished them well for the future. Neither Aamer nor Liz will be standing in the 2019 elections.

Liz responded by saying she had enjoyed her time on the board and that her seven years of serving on the board has gone by quickly. She reflected on the work she had participated in on medicines optimisation and how the principles developed by the RPS were still relevant today. She said that there is a huge opportunity for pharmacy to play in patient care going forwards. She thanked board members for being wonderful colleagues.

Chair standing down

Ash congratulated Sandra on behalf of the board for her work as Chair for the past four years, achieving so much in this time.

Sandra responded saying that it had been great working with everyone although it had not always been easy. She said she had nothing but support from the team who were small in number but work hard resulting in the work of the board going from strength to strength. Sandra said she remains a board member for a further year and will give support to her successor.

Induction for new board members

Following requests for a more detailed induction process for new board members, a day has been planned for all new board members from England, Scotland and Wales.

Appointment of Assembly members for 2019/2020

Martin Astbury raised this issue declaring an interest on behalf of himself and all board members.

Martin referred to a decision by Assembly in November 2016, set out in a briefing paper December 2016 (excerpt below):-

“**b) Elected Assembly members to serve a two year term of office**AGREED that NPB elected representatives would serve a two year term of office on the Assembly in a particular capacity (dependent upon being re-elected to the individual Board in the first instance where applicable) and that there may be a need for EPB in particular to consider staggering the introduction of this new practice.

AGREED all changes would take effect from June/July 2017.”

He explained that if the current process was left in place then next year only one place will be available on the Assembly for a two year period. He suggested changing the format for 2019. Instead of two places being available for a two year period, change to one place for two year and one place for one year, to give board members next year a greater chance to get appointed to the Assembly.

There was some debate from board members about changing a process that was only put into action two years ago, the risk of changing it this year could set a precedent. There did not appear to be support for this suggestion from the board so the Chair decided to take a vote on two options:-

1. Devote some time on the governance working day (7th May) to discuss this in more detail and seek advice on the suggestion ahead of the meeting.
2. Reject the suggestion now.

Option 1 received 4 votes

Option 2 received 6 votes

Option 2 carried, therefore there will be no further discussion on this suggestion.

**19/58 Key Messages**

The key messages from the meeting were:-

* Topol Review – pharmacy recognises changing landscape – building on preparing for the future
* Recognising pharmacists are under pressure from medicines shortages - supporting members with information when available
* Integrated Care Systems and LPNs – proposal for future mapping of organisations

**19/59 Close of meeting**

The meeting closed at 16.00pm.

**19/60 Dates of next meetings**

EPB extra meeting on governance issues – 7th May

EPB working day 19th June

EPB meeting – 20th June

EPB working day 9th October

EPB meeting – 10th October

***Board Members please note:*** *All of the above dates are to be diarised across all EPB members. Board meeting dates are firm dates but Working Days will only be used at the discretion of the Chair and the Director for England.*