

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

**Minutes of the meeting held at 9.00am on 12<sup>th</sup> April 2018 in the Events Space, 4<sup>th</sup> floor, at the Royal Pharmaceutical Society, 66 East Smithfield, London E1W 1AW**

### **Present**

Sandra Gidley (Chair)  
Clair Anderson  
Catherine Armstrong  
David Carter  
Ash Soni  
Tracey Thornley

Sibby Buckle (Vice Chair)  
Martin Astbury  
Elizabeth Butterfield  
Sultan "Sid" Dajani  
Aamer Safdar  
Mahendra Patel

### **Guests**

Gul Root (item 6)

Lead Public Health Pharmacists, Healthy Living Team,  
Public Health England

Chris Cutts (from 9.45)

Regional Pharmacy Dean (North), HEE

Ian Bates (item 9)

Education adviser for RPS

Sue Kilby

Chair of Industrial Pharmacists' Forum

Natalia Nisiobedzka

London North West LPF

### **In Attendance**

Paul Bennett

Chief Executive

Robbie Turner

Director for England

Catherine Duggan

Director of Professional Development and Support

Chris John

Workforce Development Lead (item 9 only)

Beth Ward

Head of Faculty and Foundation (item 9 only)

Neal Patel

Head of Corporate Communications

John Lunny

Public Affairs manager

Gareth Kitson

Professional Development and Engagement Lead  
(from 9.55)

Claire Thompson

Deputy Chief Scientist (item 14 only)

Luigi (Gino) Martini

Chief Scientist

Corrine Burns

Pharmaceutical Journal, RPS correspondent

Kina Vyas

Professional Development Pharmacist

Sabes Thurairasa

Senior Professional Support Pharmacist

**Apologies**

Nadia Bukhari

**18/40 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.

**18/41 Apologies**

Apologies were received from Nadia Bukhari.

Guests Stephen Messham and Zoe Aslanpour also apologised for their absence.

**18/42 Declaration of Interests**

**The English Pharmacy Board noted** paper 18.04/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.

Tracey Thornley updated her declarations in advance of the meeting with:-

Member of AMS in community pharmacy task and finish group for ESPAUR oversight group, and

Specialist commentator NICE medical technologies evaluation programme.

The Chief Scientist, Luigi (Gino) Martini, also gave a declaration of interest in advance of his presentation:-

Chief Scientist of Bioepic who have developed digital APP to measure blood glucose levels and so he has an interest in Digital Technology and diabetes.

Sibby Buckle also updated her declaration of interests with:-

Deputy Chairman, Rushcliffe Conservative Association.

**18/43 Minutes of the meeting held on 1<sup>st</sup> February 2018**

The minutes of the meeting held on 1<sup>st</sup> February 2018 circulated as paper 18.04/EPB.04 were agreed as an accurate record of proceedings.

**18/44 Matters arising not specifically included on the Open Business Agenda**

18/22 EPB programme of work

Page 8 – 2<sup>nd</sup> para from top – the name change (re diabetes campaign) is a proposal only as stated in the minutes, this followed a discussion about system leadership and helping to get pharmacists involved at the planning level. Following on from the visit from Partha Karr and Philip Newland-Jones at the working day on 11<sup>th</sup> April this will be a substantive item on a future agenda and work on a paper as

suggested at the working day will commence forthwith, bearing in mind that the staff are currently busy with the launch of the Mental Health campaign.

#### 18/26 Anti Microbial Resistance

Tracey Thornley informed the board that she sits on the community pharmacy task and finish group for ESPAUR oversight group. Tracey has discussed with Robbie Turner that as the group is expanding, and there is much work going on in the area, the RPS may wish to nominate someone to the group.

It was **agreed** that Tracey should also represent the RPS on this group.

**Action:** Tracey will circulate a summary of the notes from the community pharmacy task and finish group for ESPAUR oversight group meeting once received.

#### 18/18 (2) Prescribing Policy

The prescribing policy has not come forward for sign off as there is more work to be done in getting this right – currently embarking on a wider engagement piece with the membership. This is a GB policy and is currently being reviewed in the Scottish Office.

#### 18/19 FMD – implementation phase

There was some suggestion that professional advice should be issued in advance of implementation around insurance, risks, SOPs etc. Need to be aware of the impact this will have on the supply chain.

**Action:** RT to ask Aileen Byson to update the Board on what RPS are planning to do for members re the implementation of FMD.

#### 18/21 – Party Conferences – toolkit

This will be available for the next meeting.

### **18/45 Public Health England Update from Gul Root**

The Chair welcomed Gul Root to the meeting.

Gul thanked the EPB for being invited and expressed her delight at being awarded a RPS fellowship last year, she said she was proud to have received it and it was her biggest achievement.

Gul explained her role saying that she had a dual role with the Department of Health and Public Health England. She said that PHE are very pro pharmacy giving pharmacy a strategic position with a recognition of the role pharmacy can play.

There has been a huge growth in pharmacy public health interventions but more needs to be done, focusing on prevention and keeping people well. Gul referred to a number of publications that promote the role of pharmacy, she agreed to send links to all of these documents.

There are now over 9,300 healthy living pharmacies, with the equivalent number of health champions, that have achieved level 1 status. Level 2 assessment of these pharmacies will be local authority led as they have responsibility for commissioning services. The Royal Society of Public Health has been given funding from PHE to carry out quality assurance visits.

Cardiovascular disease is a high priority area where pharmacy could make a real difference.

The interventions for older people document is in final draft stage – this will be piloted in a number of sectors:- urgent care, care homes, community, hospital, practice (GP surgeries).

There is a draft document on sexual health – looking at pharmacists having more engagement with a role in sexual health.

The Pharmacy Public Health Forum website has been updated. John Newton now leads on this. The forum was established by Ministers in 2007 to put public health practice into the pharmacy team.

Gul advised that when meeting with parliamentarians to actively promote the role of public health. Pharmacy has a pivotal role to play in improving the public's health, quality of life and longevity.

There was some discussion around having a national strategy for public health as currently it is confusing for patients as there is a plethora of varied services offered in pharmacies. Gul replied that some progress is being made especially in the area of cardio vascular disease and that Robbie is the RPS representative on a newly formed CVD group. Gul emphasised the importance of joining up all the work that is done by the various pharmacy bodies to demonstrate a joined up approach. However she said that localism is here to stay for the moment.

Discussion continued regarding the difficulty in commissioning services and how local authorities are cash strapped currently. It was suggested that the RPS challenge the Local Government Authority re commissioning.

Gul said she was working with the RPS to develop support tools to complement the Public Health Professional Standards that were produced by the RPS.

The Chair thanked Gul for attending. Gul replied saying she was happy to work with the RPS and thanked the board for being given the opportunity to attend the meeting.

## **18/46 Public Affairs and Policy Statements**

### Mental Health Campaign

The English Pharmacy Board **ratified** paper 18.04/EPB.07

There was some discussion on the forward planning for the campaign. There will be a roundtable debate on 1<sup>st</sup> May and a parliamentary launch on 6<sup>th</sup> June 2018. The policy document and report from the roundtable will be designed and printed in advance of the launch. Currently the Chair and Vice Chair will be attending the launch. The keynote speaker is yet to be confirmed.

A mental health toolkit is being developed for LPFs to assist with delivering events on mental health.

**Action: Post launch plan for the MH campaign to be shared at the next meeting – JL/MD**

#### **18/47 Updates from Team England**

The English Pharmacy Board **noted** the update papers 18.04/EPB.08 (i) – (ix).

- (i) Local Engagement – noted.
- (ii) Public Affairs – noted.
- (iii) Policy and Consultations – noted.
- (iv) Digital (IM&T) – noted.
- (v) Medicines Optimisation – noted. Catherine Armstrong noted that there is a November launch date for metrics for patient safety. Update on RMOC – Tracey Thornley is attending a RMOC meeting next week. **Action:** TT to report back to the board after the meeting.
- (vi) Pharmacy Public Health Forum – This group has been reinvigorated but to date nothing to report.
- (vii) Innovators' Forum – the Urgent and Emergency Care report has been published. Mention was made regarding the Innovators' Forum looking at the test and treat sore throat initiative – Tracey Thornley informed the Board that this was part of the National Innovator Accelerator programme which falls under the AMR agenda.
- (viii) PGEU – Sultan "Sid" Dajani reported that he did not attend the last meeting but will be circulating the report of this meeting
- (ix) FMD – Tracey Thornley circulated an update to the Board ahead of this meeting.

The Chair raised the issue as to whether to keep FMD and PGEU on the agenda. It was **agreed** that both should stay on the agenda as standing items particularly as FMD is entering the phase of implementation therefore very important for members.

#### **18/48 Update from Professional Development and Support**

The English Pharmacy Board **noted** paper 18.04/EPB.10.

Catherine Duggan said that quarter 1 had been a quarter full of activity and she commended her team for their outputs for the quarter.

Catherine added that ahead of her departure on 25<sup>th</sup> April many changes had been made to the team including Wing Tang and Ivana Knight taking up the posts of interim heads of standards and support.

Science and Research and Education are prominent on the future agenda and she commended the team for this.

## **18/49 Health Education and Workforce Planning**

The Chair welcomed Ian Bates and Chris John to the meeting. They thanked the chair for their invite.

A handout of slides was distributed to the meeting and circulated electronically after the meeting.

Chris highlighted the summary of responses to the consultation on Health and Workforce strategy for England. Catherine Duggan added that the response was to be highly commended.

RPS consultation on the role of the pharmacist: 61 individuals and 26 organisations responded. The response rate was disappointing but the spread of organisations was encouraging. Quantitative analysis has been carried out but still working on the qualitative analysis. As the roles of a pharmacist become more homogenous it is important to find the core attributes and fundamentals of being a pharmacist in order that the role can be defined. Currently there is difficulty in explaining the role to the public.

Chris John and Peter Kopelman attended the GPhCs Education Advisory group quarterly meeting on 6<sup>th</sup> April, the three main points from this meeting were:-

- Initial education and training for pharmacists direction of travel
- Research on preparedness for practice
- Consultation on education and training standards for pharmacist independent prescribers.

The work of the RPS Task and Finish Group on Pharmacy Careers and Continuing Professional Development was recognised.

The 5 year integrated degree is outside the scope of the work of this Education Advisory Group, the reason being that systemic funding is not yet in place.

A key question that does not yet have consensus is whether to develop the pharmacy workforce for a wider clinical facing role or a wider range of careers/roles.

Chris said that currently there is no appetite to become prescribers on registration but that the knowledge elements will continue to be looked at and consolidated into the foundation programme. GPhC have commissioned research on whether registrants feel ready to practice –

**Action:** Chris to circulate information about GPhC research on whether registrants feel ready to practice.

Ian Bates highlighted that there was now a sense of accelerated change building on the sustained eight years of work that has been undertaken at the Society.

Ian referred to the recommendations of the RPS Task and Finish group on Pharmacy Careers and Continuing Professional Development and what has been agreed (5 points in the slide). Eight years of continuous RPS development of infrastructure etc has culminated in this national commitment to the recommendations by the four country Chief Pharmaceutical Officers. It is noted that significant progress by the RPS needs to be made by September 2018. The RPS in collaboration will develop "Principles for Foundation Training" mapped against the health system and workforce needs, RPS will steward these principles across 4 nations.

Ian congratulated the work of the task and finish group and said that now was the time for action fulfilling the ambition of the RPS in being the stewards of education and training, career development, advancement of the profession and workforce development.

Paul Bennett added that this is one of the most significant pieces of work we will be focussing on and said he was delighted with the output of the task and finish group. He said that Catherine Duggan had been fundamental in getting the RPS to this stage so it was tinged with sadness that she would be leaving the RPS. The recent decision to recruit for the position of Director of Education and Professional Development and a programme manager will ensure this work is delivered.

The Chair paid tribute to the work of Catherine Duggan along with Peter Kopelman and his absolute passion for the advancement of pharmacy.

Some questions were raised regarding milestones. Catherine replied that the organisation is about 85%-90% there, with this being the first time education is intrinsic across the whole of the RPS. All documentation has been produced, staff and board members need to familiarise themselves with it. Catherine referred back to the ambition of TransCom (the Transitional Committee) who described this as an ambition some 10 years ago.

The Chair thanked Ian and Chris for their time in presenting to the board.

#### **18/50 Health Education England - Regional Deans (North of England)**

The Chair thanked Chris Cutts for attending the meeting.

Chris said he would be speaking about the focus and policy aspects along with the current work programme, emerging issues and collaboration with the RPS.

There are four regional deans, Chris (north), Trevor Beswick (South) Gail Fleming (London and South East) Ros Cheeseman (Midlands and East)

Chris said there is lots happening, the agenda is wide with lots of elements. The Regional Deans have a focus on developing the clinical pharmacy workforce.

There are three different plans national/regional/STPs & LWABS.

Chris spoke about the Oriel programme of pre reg recruitment into multi sector placements. Key issues with this programme are students changing their minds and employers dropping out. There will be on-line assessment from next year.

The foundation programme is a big piece of work involving pilots, looking at multi sector, will take a lot of investment, and call to action is key. The detail is still to be worked out and Chris said he will give more information as it is available. There was some discussion about consultant pharmacists and how there are only about 80 after 12 years. New guidance is planned and work on this will be starting soon, currently working on credentialing and testing the model. Community pharmacy buy in to this programme will need to be led by employers. Chris said clinical leadership is needed across the system, it is not about having consultant pharmacists who are organisation specific.

Catherine said she was able to collate the data on the specialist pharmacists if that would be useful, ie how many renal pharmacists there are etc.

There was some discussion around the setting up of the North School for Pharmacy and Medicines Optimisation within HEE and how the term “school” is recognised in HEE. The schools are multi professional and look at quality assurance and are part of the governance structure of HEE and link in with the regulators and royal colleges. Catherine Duggan added that the more pharmacy mirrors the ways of working of the medics the more it will be understood.

Questions were asked as to whether the Deans have a role at STP level as STPs need to have a greater awareness of the scope of practice of pharmacy, there appears to be a lack of understanding. Chris said LWABs are part of STPs and they are not sighted on pharmacy, so there is much work to be done in pushing the pharmacy agenda, local leadership needs to make the case for pharmacy, and the RPS also has a role to play here.

Robbie Turner agreed that the RPS has a role to play and the recent recruitment of four regional pharmacists should help with system leadership level.

The Chair thanked Chris for attending, saying that the newly appointed regional pharmacists will work alongside the deans and that the Board was looking forward to improved relationships between HEE and RPS.

## **18/51 Science Update**

The Chair welcome Luigi “Gino” Martini and ClaireThompson to the meeting.



Gino said his presentation would focus on early career, academic background, maintaining the RPS visibility of Science and Research and engaging our members.

Gino thanked Tony Scully and Abby James from the PJ, for arranging an interview with Dame Sally Davies. He said he had been working on raising the profile of Science and Research since he took up post and had a number of meetings with MHRA, BPSA etc. Claire added that this work supports all that the organisation is doing to raise the profile and she gave credit to the work that Mair Davies and the University of Cardiff has done on an engagement piece with APS.

Discussion continued on the impact of increasing the use of the museum, library and the building. Museum tours are very popular and more should be undertaken and there was talk of piloting school visits.

The last winter summit was a success and plans are afoot to hold another this year, and the team are currently investigating the feasibility of holding it at the RPS. Women in Leadership – hosting an event called “Survive and thrive” with key speakers discussing the challenges for women in leadership positions. Board member Nadia Bukhari will be speaking at the event.

**Action 1:** Claire to send more information re the Women in Leadership event.

Gino said that it was marvellous to take on the role of Chief Scientist at the RPS and that he will be focusing on raising the profile of the RPS in Science, keeping ahead of the game. He asked how best to engage with the English Pharmacy Board.

Tracey said that the work she was doing with RMOC on biosimilars was growing in prominence and it would be good for the Science team to engage in this work.

**Action 2:** Gino to contact Tim Root and highlight the RPS work on biosimilars including the quick reference guide.

Paul Bennett said there was work going on to increase the visibility of the heritage of the organisation by engaging with schools.

Catherine highlighted that the Society has the oldest accredited pharmacy museum in the world.

A few other points were raised:-

- The value of the research ready programme
- Using the ambassadors and board members to engage with schools and promote science
- Engage and support for black minority groups
- RPS to do something to celebrate their legacy with NHS70 –

**Action 3:** Sid to raise NHS70 with the museum and library panel.

**Action 4: Agreed** to have a regular item on the agenda for Science and Research.

## 18/52 English Pharmacy Board Programme of Work including Campaigns for 2018

The English Pharmacy Board **noted** receipt of the presentation circulated ahead of the meeting.

Robbie Turner introduced this item highlighting the amount of work the team is doing in delivering events, webinars and resources related to revalidation. The team areas of work focus on activities since January 2018 and what is coming up in 2018.

### Policy and Practice

Prescribing policy – still some work to be done on this to make it a GB policy

Consultation – Low value medicines – input into the consultation has resulted into some real changes for exemptions for people who are vulnerable.

External meetings – many meetings coming up – sometimes it is difficult to manage all requests to attend meetings – Robbie thanked the Board members for their support in attending meetings.

**Action 1:** Ash Soni agreed to circulate the NAPC briefing on pharmacy and Primary Care Home.

**Action 2:** Claire Anderson to verify source of data relating to the 1,6m pharmacy visits each day.

Diabetes – following on from the presentation from Partha Karr and Philip Newland-Jones it will be sensible to align the diabetes work to the request for a report.

Robbie highlighted that this work will be looking at system change on the theme of pharmacy and diabetes, focusing on person centred care.

**Action 3:** A plan for the development of a report and possible campaign on the theme of pharmacy and diabetes will be developed.

### Local Engagement – Gareth Kitson

RPS ambassadors – This is seen as a development role to help people to get more engaged.

**Action 4:** share RPS Ambassador job description with Board members.

Local Leads update day – looking at holding another update day – possibly outside of London.

Robbie Turner congratulated Gareth on the work he has been doing with LPFs as it hasn't been without challenges. Paul Bennett also added that any changes to process tends to get people impassioned and Gareth has handled all missives with exceptional professionalism. Gareth was thanked by Paul and the Board for his professionalism and diligence.

### Public Affairs

CPOs conference – more RPS visibility at the conference this year.

Meeting with Pharmacy Minister Steve Brine MP.

APPG – a revised plan for 2018 is in development

Brexit Workshop – still to find a date to hold this workshop.

Local campaigning and influencing – the current list of activists needs updating – it was suggested that we need an activist engagement programme in order to harness these networks.

#### Media activity

Melissa Dear highlighted media activity since January 2018 and gave a list of what was coming up in the next few months.

The RPS has a quarterly column in the Pharmacy Magazine and the last column was on STPs, with the next column in June focusing on mental health.

Neal Patel explained that there had been a few changes in the media team with the use of an external agency. There has been a 20% increase in media activity compared with January to March 2017 and since the changes which is remarkable considering the restructuring.

#### System Leadership

Sandra said there had been more of a focus on the national agenda under the leadership of Robbie Turner, with a move towards system leadership and working in tandem with other organisations. Robbie added that influencing at a national level was ensuring the profession is recognised. The four newly appointed regional pharmacy leads will help with the national influencing especially with STPs. The four recruits will be based with one in London, one in the South and two in the North. The names of the new recruits will be circulated once all paperwork is in order.

### **18/53 English Pharmacy Board Communications Plan**

Following on from an internal meeting where communications with members was discussed it was agreed to bring this item to the Board for further discussion as it is evident that members are not aware of the work the English Board and the RPS is doing.

Neal Patel gave a presentation. He said the branding work should make it a lot easier for members to understand who we are and what we stand for. It is evident that we currently do not do enough to showcase the amazing work that we do.

It is important to prioritise, as the EPB agenda is huge, in order to show the impact of specific topics using all channels. Neal suggested the priority areas should be:-

- Care homes
- Mental health
- diabetes

The ambassadors will have an enhanced role in these areas by being present in related digital forums.

Neal gave a summary of what is new with the communications plan:-

- overarching messages
- tracking pro-active work
- content relevant
- RPS leadership blog – maybe regional

#### Collaborating with the EPB

- Landing page for website
- Set the objectives
- Test out new approach
- Learn from what works
- Celebrate success

The Board liked the more positive approach and made the following suggestions:-

- Use the abstracts from FIP to help inform future practice
- Link AMR with Care Homes as there is new AMR research coming out.
- Maximise the opportunity to use the new legislation on decriminalisation of dispensing errors.

The Chair said the Board were in favour of the general direction of travel for the new communications plan to take a more proactive, thematic approach and were aware of having less resource in this area especially for the reactive work. Robbie highlighted the need for Board members to do some background research themselves before engaging in reactive media.

**Action (1):** Proactive communications plan for the topics of care homes, diabetes, prescribing and mental health to be developed.

#### 18/54 Key Messages

The key messages from the meeting were:-

- Patient Safety
- Mental Health Campaign
- Education strategy – HEE working collaboratively with RPS

#### 18/55 Any other Business

##### **RPS Elections – Social Media Campaigning**

At the working day on 11<sup>th</sup> April the English Pharmacy Board discussed publishing board members expenses on line. A decision was taken at the RPS Assembly to publish expenses but it is for the English Pharmacy Board to agree this formally.

The English Pharmacy Board **agreed** to publish their expenses for the years 2016 and 2017 and from hereafter with the caveat that all board members (including those not currently in office) have sight of the expenses before they are published to check for errors etc.

**18/56 Close of meeting**

The meeting closed at 15.45pm.

**18/57 Dates of next meetings**

EPB working and induction day – 20<sup>th</sup> June 2018

AGM – 20<sup>th</sup> June 2018

EPB meeting – 21<sup>st</sup> June 2018

EPB working day – 3<sup>rd</sup> October 2018

EPB meeting – 4<sup>th</sup> October 2018

***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.