

SCOTTISH PHARMACY BOARD MEETING

Minutes of the meeting held on Wednesday 20 April 2016 at Holyrood Park House, 106 Holyrood Road, Edinburgh EH8 8AS.

PUBLIC BUSINESS

Present

Mr Jonathan Burton (Chairing)	Mr Alan Glauch
Mr Ewan Black	Mrs Kim Munro
Dr Anne Boyter	Mrs Andrea Smith
Professor John Cromarty	Mr David Thomson
Dr Ailsa Power	Miss Elaine Thomson

In attendance

Alex MacKinnon, Director for Scotland (AMaCK), Aileen Bryson, Scottish Practice and Policy Lead (ABr), Annamarie McGregor, Professional Support Pharmacist (AMcG), Elspeth Bridges, Membership Development Manager (EBr), Rebecca Martin, Business Support Assistant (RM), Helen Gordon, Chief Executive (HG), Ashok Soni, RPS President (ASo), Lianne Denton, Local Relationship Development Manager (LD).

16/01. Welcome

The Chairman welcomed everyone to the meeting. The Chair advised Board Members (BMs) that Dr Catherine Duggan, Director of Professional Development and Support (CD) and Patrick Stubbs, Director of Marketing and Membership (PS), would join the meeting for their respective agenda items by video / tele conference. The Chair also welcomed Local Relationship Development Manager, Lianne Denton (LD).

16/02. Apologies

Apologies were received from Dr John McAnaw.

16/03. Declarations of Interest

(Item: 16.04/SPB/03). Board members were reminded to declare any specific interests prior to discussion of agenda items.

Elaine Thomson (ET) is now working as Professional Support for NES Fundamentals GP Practice Working.

Alan Glauch (AG) is no longer a Board Member of Community Pharmacy Scotland (CPS).

Dr Ailsa Power (AP) is now a Board Member for the RPS Faculty.

Action point: CR to update declarations of interest.

16/04. Confirmation of Board Meeting Minutes

(Item: 16.04.SPB/04)

P. 2: Telephony

Alex MacKinnon (AMacK) reported that a telephone handset had been installed in the RPS Scotland office following ongoing Lync telephony issues reported at January's Board meeting.

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the minutes of the public business part of the Board Meeting held on Wednesday 20 January 2016.

16/05. Matters Arising

No matters arising.

16/06. Prescription for Excellence (Pfe)

AMacK reported that the Pfe reference group had not met since November 2015. There are plans for the group to meet more by virtual means, possibly bi-annually. The Robotics and Automation group, led by Professor Norman Lannigan, Director of Pharmacy for Greater Glasgow and Clyde NHS Board, is progressing really well. This project will look at automation of the dispensing process in relation to urban and rural settings. It is also looking at various models around spoke and hub. Whilst the monies available facilitated the pilot, there was still a question of where the funding would come from in relation to any national pilot roll-out. Dr John McAnaw (JMCA) attended the last meeting of the Steering Group. Vice-Chair Jonathan Burton (JB) gave an update on JMCA's behalf at the Board meeting. JB expressed JMCA's concerns around discussions that related to where and how community pharmacy was fitting into the Pfe vision. There was a feeling that there isn't enough bottom-up thought going into ideas and processes. A sub-group has been proposed looking at risks but there are still concerns as to how grassroots pharmacists might feed into any process. There is a need for Pfe to improve communication with all stakeholders. AG suggested having a round table discussion which would be fed into a streamlined process. This would enable a better informed contribution into Pfe from RPS. AMacK reported that he would be unable to attend the next Pfe Automation and Robotics meeting on 27th April but Aileen Bryson (ABr) will attend in his absence.

Action point: CR to arrange round table discussion after Board elections next month.

Action point: ABr to attend next *PfE* Automation and Robotics meeting in place of AMacK on 27th April.

Concerns were raised regarding continued poor communications between the Scottish Government and the pharmacy profession particularly at grassroots level. Professor John Cromarty (JC) concluded that solid and reliable communication must be established between the pharmacy community and the Scottish Government to ensure the views of 'grassroots' pharmacy are actively and accurately reflected. Annamarie McGregor (AMcG) reminded the Board not to forget about hospital pharmacists; the RPS Care Home report had not yet impacted or delivered within the *PfE* process. AMacK added that the communications side of *PfE* has recently been improved in line with the other Scottish Government *PfE* revisions. David Thomson (DT) suggested that although there is some evidence of engagement it would be useful to have a routine communication pattern in order to move activity forward. Dr Anne Boyter (ABo) concurred that something must be done about communications.

Action point: AMacK to feedback communication concerns to Rose Marie Parr, Chief Pharmaceutical Officer.

16/07. **SPB Business Plan 2016 Q1**

(Item: 16.01/SPB/07). AMacK reported that the Business Plan was on track.

Manifesto: The Manifesto has been a huge success. The format and messages have worked. Many MSP candidates have signed up and continue to sign up to the Manifesto pledge and support for pharmacy has been highlighted in all four main political party manifestos for the Scottish elections. AMacK and Susanne Cameron-Nielsen (SCN) attended a Holyrood hustings event where the panel included shadow health spokespersons and representatives on health from all political parties. AMacK reported a very favourable response and highlighted that the word 'pharmacist' or 'pharmacy' had been mentioned 25 times during the session. A very positive response. RPS attendance at the party political conferences held throughout February and March was also very positive. The resultant MSP pharmacy visits were very successful. AMacK highlighted productive pharmacy visits with Shona Robison, Cabinet Secretary for Health, Wellbeing and Sport and Jenny Marra, Shadow Cabinet Secretary for Health, Wellbeing and Sport.

Quality roadshows: With regard to the planned quality roadshows to be held in the autumn, three planning meetings have taken place with the stakeholder group and this objective has been progressed. The content for these roadshows will be progressed after the RPS / NES Seminar in May and the themes will focus on error reporting, professionalism and professional empowerment.

Faculty and Foundation: AMacK has presented at a number of Lloyds Pharmacy Management meetings; topics covered included the work of RPS, the work of the Scottish Pharmacy Board and the RPS Faculty and Foundation frameworks. A lot of work has also been done on Faculty and Foundation. A successful Faculty Champion's day was held on 6th February preparing our Faculty Champions for their

future role. AMcG and AMacK will attend the pre-registration RPS / NES mock examination day as invigilators.

PfE Public / Patient Involvement Group: AMacK reported that RPS was now a key partner in the *PfE* Patient Involvement Working Group and the RPS Scotland ambitions for public / patient involvement will be realised within its contribution to this working group.

RPS / RCGP Joint Working: Again joint RPS RCGP working continues with starting the process of drafting up of joint statements on pharmacists working in GP surgeries, care homes and information technology.

RPS Science Event: It was reported that planning is in progress to deliver an RPS science event in the Scottish Parliament in the autumn and that it was also the intention to promote science and pharmacy by taking the RPS stand into the parliament for 2-3 days engaging with MSPs from all political parties.

Action point: SCN to contact Schools of Pharmacy for specific representatives to support the RPS with its planned activity to support science.

Joint NES RPS project no 2: This next joint NES / RPS project will look at early years training in the community with a view to the possible development of a clinical career framework for community pharmacists. It will be a part time secondment. The interview date is yet to be fixed. Professor Harry McQuillan, Community Pharmacy Scotland (CPS), will be on the interview panel along with Alex MacKinnon and Ailsa Power for RPS and NES respectively.

When running events around Faculty / Foundation / Mentoring, bringing together large groups of pharmacists has worked really well.

AMacK reported that it would be helpful at this stage in the business plan year to take a step back and consider progress and reset priorities if that were deemed to be necessary. RPS workload contribution to *PforE* working groups is increasing and workload pressures from the Falsified Medicines Directive (FMD) and supervision are both ongoing.

It was agreed that the SPB would form a short life working group around IM&T to drive forward some of the outstanding IT issues from the Scottish perspective and also consider how the Board might best input into the RPS IM&T working group which meets periodically in London.

It was agreed that there is a need to get to a more proactive position with regards to the production of Policy and to also better enable Board input into consultations. There is a need to form a Board working subgroup on Policy and Consultations

LPF Events Update: Elspeth Bridges (EBr) updated the Board on LPF events. Career events have taken place in the East of Scotland, West Central Scotland and North East of Scotland. The events have been a great success and EBr emphasised that the career events also benefit experienced pharmacists too. A Wardley Wellbeing workshop was held at Dumfries on 2nd March with another scheduled in Stirling for 25th April. The workshops are held in collaboration with the Pharmacist Support charity and are designed to support pharmacists with work pressures. There are also several dementia events coming up in the near future. AMcG gave an update on the opioid events she has been delivering and informed the Board that there had been nearly two hundred attendees in total so far. There has been significant stakeholder engagement and the event has allowed for promotion to non-members through event packs.

Media Training: AMacK reported that media training will be organised once the new Board is in place after the 2016 SPB election process. This will help Board members with media engagement and possible future appearances in front of the Health Committee of the Scottish Parliament. A video camera has also been purchased and will be used for podcasts on the website.

Digital Communications Assistant post: RPS Scotland are recruiting for the Digital Communications Assistant post vacated by Beth Robertson in March. Beth's considerable contribution to the development of RPS Scotland's social media presence was noted.

Scottish National Seminar:

The Scottish Pharmacy Board

approved

the continuation of the Scottish National Seminar.

It was noted that significant work would need to be undertaken on sponsorship for the Scottish National Seminar. President Ash Soni (ASo) reminded the Board that there may be sponsorship opportunities to explore due to the FIP event taking place in Glasgow in 2018.

16/08. Update on RPS Conference 2016

Dr Anne Boyter (ABo) reported that the conference programme was coming together. Confirmed speakers include President Ash Soni, Austin Zubin, Chris Ryan and Alistair Burt MP. The General Pharmaceutical Council (GPhC) have requested a plenary session. There will be four sessions held over the 4th and 5th September. Themes/topics will include care homes, policy, seven day working, NHS 111 and NHS 24. Professor Jayne Lawrence will also lead a science session.

There have been 197 submissions for research so far for the conference.

The awards will be launched next week (week beginning 25th April).

It was confirmed that the conference will be held in Birmingham in 2017.

David Thomson (DT) asked for clarification about arrangements for Board Member attendance at the RPS conference. ASO highlighted the importance of having full Scotland / Wales representation at the conference.

Action point: CR to email BMs about attendance arrangements.

16/09 NES / RPS Educational Project

Dr Ailsa Power (AP) informed the Board that the NES / RPS Educational Project Report undertaken by Deborah Stafford (DS) is very close to completion. The final report will be submitted to Professor Rose Marie Parr, Chief Pharmaceutical Officer in the near future. The Chair stressed that any feedback regarding the report would be gratefully received by DS. The report will be included on June's Board Agenda.

The next RPS / NES joint project will focus on the community pharmacy sector. This project will run for 12-18 months and there may be the possibility of an associated University qualification with this project.

Action point: BMs to contact DS with thoughts / comments.

16/10 NES / RPS Seminar 17 May 2016

AMcG reported that bookings for the Seminar had opened last week. Dr Catherine Duggan and Dr Rachel Joynes will be attending from RPS Head Office. The event has received good coverage and 100 delegates have signed up so far. There is a maximum capacity of 120 delegates. NES are offering scribes for workshops. AMcG is looking for a volunteer for the Faculty session from the Board.

Action point: BMs to contact AMcG if interested in volunteering for the Faculty session.

It was pointed out that pharmacists in patient-facing roles will get priority for attendance. NES / RPS would also like a mix of attendees from all over Scotland as well as the central belt as different geographical areas can have very different needs.

16/11 Policy and consultations

ABr asked for feedback from the Board following recent media interest in prescription charges. The Scottish Conservative & Unionist party are keen to reintroduce prescription charges in line with England. The British Medical Association (BMA) are also supportive of re-introducing charges. ABr invited the Board to give their views.

DT opposed the reintroduction of prescription charges.

ABO was opposed but concerned about medicines not being recognised as having value when prescriptions are free.

ASo said prescriptions should be free at the point of need/delivery and added that it was important to address the issue across GB as clarity was needed.

JC pointed out that free prescriptions eliminates discrimination between long-term conditions.

Helen Gordon (HG) said that being clear on access to care is key.

ET added that how to get patients to value the NHS is to change the culture of patients and health care professionals by defining 'need' and 'want'.

AP concurred that patient education is key.

Action point: Further discussion required at a strategy day to be arranged by CR.

GPhC consultations

ABr confirmed that the RPS support team had produced the RPS response, following on from the discussion paper last year. It was deemed necessary to achieve a level playing field for all parts of the profession.

A brief update on rebalancing and DH work-streams was also given.

Managed Repeats

ABr confirmed that the Managed Repeats policy had finally been signed off. This has now been sent to the NHS Board Directors of Pharmacy and Primary Care Leads. The policy is now on the RPS website and the Effective Prescribing Group are going to take it forward.

First draft of RCGP/RPS Joint Statement No 1

(Item 16.04/SPB/11(i)). ABr reported that the first draft had been circulated in the papers but emphasised that it is a rough draft. The work with NES still needs to be referenced. AP added that the framework has been put together by a GP and a pharmacist. AP highlighted that being endorsed by RCGP will be positive. It was confirmed that ABr will be starting work on the care home policy and the access to records positioning statement.

Pharmacists working in GP surgeries

JC expressed concern about 'a practice-based pharmacist's typical day'. With a set of guiding principles you can then conform to them. AG also expressed concern because the funding attached to reduce pressure on GP surgeries possibly starts to devalue what has been achieved.

Action point: BMs to feedback to ABr. Finalised version will be produced for the Board meeting in June.

Falsified Medicines Directive

(Item 16.04/SPB/11(ii)). ABr provided a summary of progress and the Board were given a better oversight of the purpose of the implementation group. A clearer picture of the European Medicines Verification Organisation (EMVO) group was also given.

16/12 Public Affairs

AMacK informed the Board that SCN was unable to attend today's Board meeting. SCN will pull papers 16.04/SPB/12(i), 16.04/SPB/12(ii), 16.04/SPB/12(iv),

16.04/SPB/12(v) together on her return. The Chair moved on to item 16/12(iii) Holyrood Round Table.

Holyrood Round Table

ABr is looking for Board approval for Holyrood Round Table arrangements. Round tables can be very influential events and ABr/SCN have held an initial meeting with Holyrood magazine who are hosting the round table. There will be a planned excerpt in the Conference edition of Holyrood magazine. ABr added that a theme is needed; thinking about current aspirations and how to deliver it. SCN is considering asking Pennie Taylor to facilitate the event with twelve participants taking part over a two hour period. Consideration also needs to be given as to whom to invite to participate in the event. First choice invitees are the Chief Pharmaceutical Officer, Chief Medical Officer, Directors of Pharmacy, patients and practitioners. No politicians will be invited as it is intended that the output article will go to politicians.

Action point: BMs to feedback ideas to ABr/SCN.

16/13 Dementia Friends

AMcG reported on the Society's continued commitment to the theme of dementia. The theme has been kept highlighted throughout GB. A dementia programme has been developed through LPFs. This has been shared with and supported by NES and now signed off. AMcG emphasised that Board support for future dementia events would be appreciated. The possibility of providing dementia training to BMs was discussed. It might be possible to get input from Sally Arnison, Edinburgh pharmacist at her dementia-friendly pharmacy. ASo pointed out that as dementia levels are increasing it is important to learn and provide better standards of care for people with dementia i.e. encouraging dementia-friendly involvement.

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training to be facilitated for BMs.

Action point: AMcG to coordinate dementia training for BMs.

Action point: AMcG to approach Sally Arnison to get input for BMs dementia training.

16/14 Professional Development and Support Update

(Item: 16.04/SPB/14). Dr Catherine Duggan (CD) was unable to join the meeting due to video conference difficulties.

It was noted that a CPD project had started to get more people involved with RPS, where RPS support will help with CPD entries, helping members on that important Faculty journey. JC asked if the target set for Faculty was realistic and argued that by lowering the target you will keep motivation high. An unachievable target is not motivating.

Action point: AMacK to feed back to CD.

The Scottish Pharmacy Board

noted

the Professional Development and Support Update.

16/15 Chair and Vice-Chair's Report

(Item: 16.04/SPB/15). Covered by items 16/06 and 16/07.

The Scottish Pharmacy Board

noted

the Chair and Vice-Chair's Report

16/16 Website Development Project

(Item: 16.04/SPB/16). AMacK led on this item in the absence of SCN. AMacK emphasised the importance of the Website Development Project as it needs to deliver for RPS and its members across a wide spectrum of functionality. It was stressed that the website must be more interactive. HG reported that the project is going well and now awaiting feedback. The Board was informed to standby for further information.

16/17 Key messages

It was agreed that the key messages should be:

- Prescription for Excellence (*PfE*)

AMacK started the discussion with concerns around *PfE* communications. There is an information gap and it is not clear how it all fits together. Insufficient communication with grassroots pharmacists is the main concern.

Action point: AMacK to contact *PfE* communications team. SPB may express concern more formally on behalf of the profession if improvements in this area are not forthcoming.

- Manifesto
- NES / RPS Joint Conference
- Commitment to dementia work
- Prescription charges

Action point: ABr to develop informed wording on the SPB's view on prescription charges.

16/18 Any other business**Information Management and Technology**

AG raised the issue of the RPS IM&T GB group and suggested that the majority of what was being discussed is not particularly useful from the Scottish perspective. AG proposed that BMs get together and volunteer to get dialogue going in a Board subgroup and highlight the main outstanding Scottish issues. Day to day pharmacy is not being properly supported by the current IT systems and there needs to be a recognition that systems need to be more responsive and better integrated. Consideration will need to be given to how the SPB inputs and interacts appropriately with the RPS GB group to input to and benefit from the expertise of the wider group.

Action point: CR to liaise with BMs to agree a day (other than strategy day) to meet and discuss IT with a view to identifying and taking forward the outstanding issues.

Research Ready post

AMcG reported that RPS were looking to recruit someone in a part-time capacity to deliver Research Ready support to Scotland. The successful applicant will be line managed by Dr Rachel Joynes but will be based in the RPS Scotland office. The post is offered on a part-time basis for 10½ hours a week. This was welcomed by Board and Directorate team members as science, research and building the evidence base for pharmacy is a key component within the 2016 SPB Business plan.

16/19 Dates of next meetings

The date of the Scottish Pharmacy Board Induction Day will be Tuesday 14 June 2016.

The date of the next Scottish Pharmacy Board Meeting will be Wednesday 15 June 2016.

Action point: CR to put out sample dates for strategy day or hold until June Induction Day.