

SCOTTISH PHARMACY BOARD MEETING

Minutes of the meeting held on Wednesday 28 September 2016 at Holyrood Park House, 106 Holyrood Road, Edinburgh EH8 8AS.

PUBLIC BUSINESS

Present

Dr John McAnaw (Chair) (JMCA)	Mr Alan Glauch (AG)
Dr Ailsa Power (Vice-Chair) (AP)	Mr Johnathan Laird (JL)
Mr Ewan Black (EB)	Mrs Andrea Smith (AS)
Dr Anne Boyter (ACB)	Mr David Thomson (DT)
Mrs Kathleen Cowle (KC)	Miss Elaine Thomson (ET)

In attendance

Alex MacKinnon (AMack), Director for Scotland, Aileen Bryson (ABr), Scottish Practice and Policy Lead, Rebecca Martin (RM), Business Support Assistant, Carolyn Rattray (CR), Business Manager, Leaghann Watson (LW), Research Support Coordinator, Martin Astbury, RPS President (Pres), Brian Walters (BW), Director of Business Development and Michael Bonne (MB), Corporate Services Lead.

Helen Gordon (HG), Chief Executive, Dr Catherine Duggan (CD), Director of Professional Development and Support and Julia Robinson (JR) RPS Correspondent, joined the meeting by video-conference from Head Office, London.

16/01. Welcome and Apologies

The Chairman welcomed Board Members (BMs), staff and guests to the meeting, extending a particular welcome to those attending their first SPB Board meeting: Brian Walters (BW), Director of Business Development and new members of the Scottish team, Boyana Atanasova (BA), Digital Communications Assistant (DCA) and Leaghann Watson (LW), Research Support Coordinator, who has recently been appointed on a one year fixed term contract. LW's role will be to develop research and *Research Ready* across Scotland. The Chair also welcomed the newly appointed RPS President, Martin Astbury (Pres) and Dr Michael Bonne (MB), Corporate Services Lead.

The Chair also welcomed Helen Gordon (HG), Chief Executive and Julia Robinson who were joining the meeting by video-conference (VC) and BMs were advised that Dr Catherine Duggan (CD) would join the meeting by VC for the agenda item on Professional Development and Support.

Apologies were received from Professor John Cromarty.

16/03. Declarations of Interest

Board members were reminded to declare any specific interests prior to discussion of agenda items.
Dr Anne Boyter (ACB), The Pres and Alan Glauch gave details of amendments to their declarations of interest.

Action: Carolyn Rattray (CR), Business Manager, to update the BMS declarations of interest accordingly.

16/04(i). Confirmation of Board Meeting Minutes

Scottish Pharmacy Board

accepted as an accurate record

the minutes of the elections meeting held in SPB Public Business on Tuesday 14 June 2016.

16/04(ii). Confirmation of Board Meeting Minutes

The Scottish Pharmacy Board

accepted as an accurate record

the minutes of the SPB Public Business meeting, held on Tuesday 15 June 2016.

16/05. Matters Arising

There were no matters arising from the SPB Public Business Meeting – elections, held on Tuesday 14 June 2016.

Matters arising from the SPB Public Business meeting, held on Wednesday 15 June 2016.

P.4. Scottish Pharmacy Board Business Plan 2016 – Quarter 2: Alex MacKinnon (AMaCK), Director for Scotland, advised BMs that he had reported back to the Evaluation of Automated Technology Group (EAT) the concern around how challenging it was to develop bids based on the criteria given and this has been taken on board and progressed.

P.6. Lobbying and advocacy: AMack reported that, although he has not, as yet, managed to recruit Maree Todd MSP into membership, she has agreed to sponsor the SPB parliamentary stand event.

P.9. NES/RPS Educational Report: AMack asked Ailsa Power (AP) about the status of the first RPS / National Health Education for Scotland (NES) project report. AP advised that the report is with the Chief Pharmaceutical Officer (CPO) and it is thought that it will not be launched as a single report but will be used in conjunction with Heather Harrison's (HH) project (2nd NES/RPS project). AP also noted that elements of the report are being used to inform the Foundation Framework. It was pleasing to note that NES had now applied to become an RPS accredited Foundation School. AMack to discuss the NES / RPS projects with the CPO at their meeting on Thursday 29 September.

P.13. Care Homes: AMack advised BMs that, when completed, the *Prescription for Excellence (PfE)* 'refresh' will inform the review of the 2012 Pharmaceutical Care in Care Homes report and so, for the moment, progress is on hold. Annamarie McGregor (AMcG), Practice Development Lead, has been in discussions with Alpana Mair, Deputy CPO on this matter.

P.20. Professional Development and Support Update. Dr Anne Boyter (ACB) reported that she wasn't able to send the changes to the Asthma Guidance until they were published on 21 September. The changes have now been sent to Dr Catherine Duggan (CD), Director of Professional Development and Support, and ACB has received acknowledgement. ACB has offered her assistance and is waiting to hear back.

P.20. Website. AMack reported that Nick David (ND), Website Manager, had given a training session on the new website to the team. The new website is not yet at the stage to present to the Board, but will be presented at the January 2017 SPB Board meeting.

P.21. Pharmaceutical Journal (PJ). AP reported that Julia Robinson (JR), RPS Correspondent had been in contact and, since the previous Board meeting, had published an article in the PJ about the RPS / NES collaborative work noting both conferences and secondments.

Action: AMack to discuss the NES / RPS projects with the CPO at their monthly update meeting on Thursday 29 September.

Action: CR to invite ND to the January 2017 SPB Board meeting to present the new RPharmS website.

16/06. RPS Governance Handbook (Latest revision) 2016-2017

The Scottish Pharmacy Board

noted

the RPS Governance Handbook (latest revision) 2016-2017.

16/07. Prescription for Excellence (PfE)

The Chair reported that a meeting of the *PfE* Steering Board had been scheduled for 22 September but was cancelled. The 'refreshed' *PfE* document will be launched 'imminently'; it will not be very different from the original apart from in relation to focus. From a governance perspective, there will be strong and robust project management and a very definite way of grouping work

streams into clusters rather than as individual entities. Some of the work stream leads have been called in to give progress updates.

AMacK confirmed that, because of the 'refresh', the *PfE* Reference group also hasn't met, however two work streams are active, the Patient and Public Involvement (PPI) working group has met and is about to circulate a survey to 2,000 patients through the Citizens Group. The Evaluating Automated Technology (EAT) group, led by Professor Norman Lannigan, is also progressing, exploring different models of automation.

Scottish Government (ScotGov) has formed two further *PfE* working groups. The first of these groups is focussed on the Falsified Medicines Directive (FMD); the Medicines and Healthcare products Regulatory Agency (MHRA) presented at the first meeting of this group. The second *PfE* working group is focussed on the 4+1 versus the five year education model. Stephen Peddie has been seconded to work on this with the CPO. A second meeting of this working group is scheduled for Monday 3 October 2016. AMacK confirmed that these two new groups had been incorporated into the 2016 BP. BMs were assured that, although *PfE* is being refreshed, work is still progressing.

Elaine Thomson (ET) emphasised the need for a good communications' strategy. The Chair assured ET that communications are a central focus and will play a big part going forward, ensuring that messages will reach 'grass-roots pharmacists, the ones who deliver *PfE*'. Stakeholders will ensure that messages and communications will be cascaded through their networks. Johnathan Laird (JL) noted that this is an excellent opportunity to 'bring the jobbing pharmacist with you'.

Action: The Chair and AMacK to continue to keep pressure on for improved communications around *PfE*.

Action: AMacK will email the newly appointed *PfE* Communications Officer with the views of the Board and will then email the Board to update on the *PfE* communications' plan

The Scottish Pharmacy Board

noted

The *Prescription for Excellence* Update

16/08. SPB Business Plan 2016, Quarter 2 (Q2) and Quarter 3 (Q3)

AMacK reported on Q2 and Q3 of the SPB Business Plan:

'I love my Pharmacist' (ILMP) Competition: The *ILMP* Competition 2016 has been very 'effective' from Scotland's perspective with a number of successful MSP visits taking place as a result. Further MSP meetings with, amongst others, members of the Health & Sports Committee and shadow health representatives, are confirmed over the autumn months.

Conferences: AMaCK and the Chair have both represented the RPS at a number of pharmacy related conferences. Attendance at the autumn Scottish party political conferences has been confirmed and Aileen Bryson (ABr), Scottish Practice & Policy Lead, will also attend the GB Conservative & Unionist Party Conference in Liverpool.

Quality Roadshows: The final drafts of the Quality Roadshow presentation and workshop packs were circulated in the SPB weekly update (23/09/2016). Podcasts of the workshops will be available to Members. The NHS Board Directors of Pharmacy (DoPs) are to provide names of leaders within individual Boards. All stakeholders will have an element to play in the Quality Roadshows. The intention is that, by September 2017, all areas of Scotland will have been covered. This initiative was driven by the Department of Health (DH) to increase awareness of error reporting in advance of decriminalisation; Scotland is setting it in the context of the quality improvement agenda.

Health and Sports (H&S) Committee: ABr has spoken on two occasions at the H&S Committee evidence giving sessions. These sessions can be viewed on the Scottish Parliament (SP) website archive. ET also gave evidence at the second of the H&S Committee sessions, where the topic considered was General Practice based Pharmacists.

Parliamentary Event 2016: The first meeting of the steering group took place on Tuesday 20 September. The date of the event has been confirmed as Tuesday 13 December from 6 pm until 8 pm and it will be about personalised medicines. As at the previous event in 2014, there will be six speakers. AMaCK reminded BMs that the 2014 event on anti-microbial resistance prompted a full debate in the SP.

RPSiS Stand: A new stand is being designed and, to match in with the Society's commitment to science, will incorporate molecules. The plan is to take the stand into the SP for a week in early 2017 (now confirmed as week commencing Monday 6 March 2017). BMs were each asked to commit to spending an hour 'manning the stand' during that week. The event will promote all sectors of pharmacy and also pharmacy as a science based profession.

RPS Faculty: The RPS Faculty is being promoted in a bid to increase numbers. The RPSiS team has been working with Faculty Champions across Scotland to encourage those who have indicated interest in the RPS Faculty to follow through and submit their portfolios.

NES / RPS Boot Camps: The NES / RPS Boot Camps will take place on 29-30 September, at Dunblane Hydro. The event will focus on Pharmacists working with GP practices and AP and ABr will represent NES and RPS respectively. AP confirmed that the Royal College of General Practitioners Scotland (RCGP Scotland) will also attend to present on the joint vision from its perspective.

Joint working with RCGP Scotland: The RPS in Scotland and RCGP Scotland policy statement on GP Practice Based Pharmacists has now been agreed and finalised; Susanne Cameron-Nielson, (SCN), Head of External Affairs, has been liaising with David Webster of RCGP Scotland and a launch date for the joint policy on GP Practice Based Pharmacists has now been agreed for 13 October 2016. AS suggested that everyone should take the policy statement to their Area Prescribing Committees (APC). ACB suggested that the PJ should be primed for the launch. The next joint policy statement to be published will be on information sharing and then on Care Homes. AMaCK confirmed that the 2012 Joint Statement is to be reviewed.

Pharmaceutical Journal (PJ) Articles: It was noted that two articles are required for the PJ, the first one, to be written by ET, should be about GP Practice Based Pharmacists and the second article, to be confirmed, written by JL.

RPS Holyrood Round Table: The RPSiS team, together with *Holyrood Magazine*, delivered a round table at the Royal College of Surgeons of Edinburgh on 31 August. The Chair reported that there was a good mix of health care professionals (HCPs) who were of a similar mind around patient care and improving the access and sharing of information. *Holyrood Magazine* will produce a report (to be published in the October edition) which will be distributed to all MSPs.

AMacK concluded the Business Plan 2016 agenda item by advising BMs of a recent meeting he attended, with representatives from other professional and contractual bodies, to discuss primary care. The meeting was led by the Royal College of Nursing (RCN) and the output from the group was a set of 21 principles; these 21 principles have been submitted to the Scottish Government. It is envisaged that there will be further such groups and AMacK suggested that an area to be considered, that the RPSiS could lead on, might be around the access and sharing of information.

BMs were assured that there is a communications plan in place to ensure that Scottish Members are kept informed; this will be, amongst other routes, through the RPharmS website and social media. JL suggested that each BM should have a twitter account to reach both members and non-members.

It was agreed that JL and Boyana Atanasova (BA), Digital Communications Officer, should liaise on a strategy and guidance for twitter communications; 'Twitter promotes conversation'.

The Chair asked about the 'yellow' elements of the 2016 BP. BMs were advised that the *PfE* element is quite considerable and will only increase; it will be necessary to allow a significant 'chunk of time and capacity' in the 2017 BP.

AMacK concluded the update on the 2016 BP, Q2 and Q3, by noting that 'it has been a very busy 'frazzled' period but amazed that the team had managed to feed into 'Project 7' and still deliver on the BP'.

Action: JL and BA to liaise on a strategy and guidance for twitter communications.

The Scottish Pharmacy Board

supported

the RPSiS establishing and leading a group of external HCP stakeholders to work on the access and sharing of information.

SPB Business Plan 2017

AMacK confirmed that the 2017 BP will be an evolution of the 2016 BP; the BP will have to fit within the corporate strategic goals.

The Chair asked if everything that was mentioned in the SPB Manifesto was included in the 2016 BP; if not, then perhaps, any omitted areas should be

included in the 2017 BP. AMaCK agreed to take elements out of the Manifesto and take it out to the membership, NHS, Civil Service and other stakeholders. DT suggested Health & Social Care (H&SC) partnerships; 'this would be quite a challenge but needs to work at grass roots'. ABr suggested that the RPSiS team would try to tackle this issue at the council elections in 2017; having meetings with councillors might provide access to H&SC partnerships KC suggested that there may be some influences coming out of the *PfE* 'refresh'. ET noted that there is a shift and need to get into the Integrated Joint Boards (IJBs). It is crucial for the public to be fully engaged.

- Joint work on the Foundation with NES
- Quality agenda will continue
- Two day RPSiS Seminar 2017
- A Public campaign - the Role of the Pharmacist. This is a Welsh initiative but AMaCK suggested that it should be a GB campaign. BMs agreed that a public campaign on the role of the pharmacist should be taken forward in Scotland.
- Science event: It was agreed that the RPSiS should hold an annual science event and it was suggested that, in 2017, the second event should build on the first one which was entitled: '*New Antibiotics, Better Antibiotics, Better Use of Antibiotics*'. The approach should be balanced and a title: '*Antibiotic safety – safe in the pharmacist's hands*', was suggested. It was agreed that realistic medicine and what this means, including leadership and behaviours would be integral to any event, although realistic medicines should not become realistic prescribing. Caution is required around terminology.
- AMaCK confirmed that the 2017 SPB BP would not be finalised until the 'refresh' of *PfE* is complete.
- ABr noted that there is to be an investigative broadcast (Sunday 2 October) around medicines bought on the internet. The RPS has made a strong statement against buying medicines on the internet.

Action: BMs to email ideas for the 2017 SPB Business Plan.

The Scottish Pharmacy Board

supported

- a public campaign on the role of the pharmacist being taken forward in Scotland.
- The proposal for an annual science event.
- proposals for the 2017 SPB Business Plan.

16/09. Feedback on RPS Conference 2016

Board Members were asked for feedback on the 2016 RPS Conference, held in Birmingham, on Sunday 4 and Monday 5 September 2016.

- The Chair felt, as both a participant and delegate, that there was a good mix of workshops, plenaries and break-out sessions, but that two days wasn't long enough. ACB advised that a consultation has gone out to stakeholders

proposing that the RPS Conference 2017 should be a one day event, taking place in November rather than September. On behalf of the SPB, ACB has rejected this proposal as November is mid-term for students and academics. DT, in his role as RPS Treasurer, noted that there is a need to look at the Conference costs; this might influence the type of event going forward.

- AMacK noted that the science sessions that he attended 'were really excellent'.
- It was agreed that Professor Zubin Austen's keynote speech had been excellent; DT suggested that his words around pharmacy being a prescribing profession should be heeded and taken forward.
- ET enjoyed the conference, finding it interesting and informative, however, she didn't feel that there was anything that would change her 'day to day practice'. EB agreed with ET. KC noted that 'it was really good to see how much Scotland is doing'.
- The final session, where Faculty Members and Fellowships were recognised, had been very disorganised unlike similar events run by other professional bodies. HG apologised to BMs for the operational issues that occurred at the 2016 event and reassured them that a full evaluation will be carried out and issues addressed.

BMs were asked for their suggestions for the 2017 RPS Conference:

- The CPOs' session is important and brings a useful comparison, however, they need to be invited sufficiently early to ensure that they are able to attend.
- It was agreed that there was confusion for invited speakers at the 2016 event and that, for 2017, speakers should be given a comprehensive brief which doesn't change once the conference is underway. The management of sessions needs to be improved
- The Chair suggested that, following on from Prof Zubin Austen's speech, there might be a session around professional decision making as additional skills are required; it was agreed that there is an appetite for risk and this could also be part of this element of the Conference. BMs were asked to provide names of potential speakers.
- Workshop sessions should be more interactive rather than only presentations; this would prove more conducive to learning and more useful for day to day practice.
- JL suggested, if the conference is to be reduced to one day, that there should be some form of pre-work in the form of a suite of webinars – the 'one way conversation' in the period before the conference; this would allow for a one day conference to be fully interactive; it would need to be a very structured approach.
- EB – enjoyed it 'a lot' in retrospect.' Although wasn't sure that there was a great deal to develop his day to day practice. ET agreed with EB.

BW noted that there is an 'outline sketch of a proposal for 2017', however, the challenge is that there is a 'broad church of pharmacists' all with differing views. BW reiterated that he is very keen to receive suggestions for 2017 and also feedback from 2016.

Action point: BMs to forward any other suggestions for the 2017 event and also feedback from the 2016 RPS Conference to Brian Walters.

16/10. Policy and consultations

RCGP / RPS Joint Statement
The Scottish Pharmacy Board

noted

the RCGP / RPS Joint Statement on General Practice based Pharmacists.

Evidence to the Health and Sport Committee
The Scottish Pharmacy Board

noted

the evidence given to the Health and Sports Committee.

Long Term Conditions (LTCs) campaign

There is a proposal to run a campaign on LTCs; this campaign will be launched at the Welsh Medicines Safety Conference (Thursday 3 November) and will be followed with a 'soft launch' at the forthcoming Quality Safety roadshow workshops. There is debate over whether this should be a GB campaign or individual country campaigns. A paper was sent out to BMs on 27 September – 'a work in progress'.

Ways of working

ABr asked how, going forward, BMs would like to receive and consider draft policy and consultations. In the past, an early draft was sent as a 'straw man' to BMs and critical friends; this was then revised according to the feedback; a near final draft was then circulated followed by a final draft; the challenge is that amendments come through at the last moment when it is thought that the document has been finalised.

KC: the deadline should be brought forward by a week, so allowing time after the 'deadline' to finalise the document.

DT: If a BM doesn't contribute to an early draft, they shouldn't be able to contribute to a later version.

JMcA: BMs should only have 'one shot at a document'.

The General Pharmaceutical Council (GPhC) has just launched a consultation on Continuing Professional Development (CPD) whereby, rather than checking pharmacists' CPD by rotation, pharmacists will be chosen randomly. ABr asked BMs how they would like to respond to this consultation. BMs confirmed that they were content with the GPhC proposal.

Many consultations are taking the form of surveys which can be a double-edged sword; they have negated the need for long drawn out responses, however, it can be more difficult to 'get a point across'.

Superintendents meeting

ABr reported on the first meeting of superintendents in Scotland, which was held on 12 September. It was described as 'quality rather than quantity' with three attendees: Lindsay & Gilmour, Davidsons and Boots. It was a good first meeting and there was an appetite to repeat the meeting and, hopefully, increase numbers. It was noted that the London meetings had started 'as a slow burner' but numbers attending have increased substantially and it is now very successful. ABr noted that a number of the bigger companies, who attend the London meeting, had responded to the invitation. It is proposed to have a second meeting in 6 months.

ABr confirmed that there were no outputs from the first meeting. The discussion revolved around resources and issues; it is expected that there will be more as relationships develop.

ABr concluded the Policy and Consultations Update by noting that, on the back of the Duty of Candour consultation, the RPSiS has been invited to be part of an SG working group on education; this fits very well with the tools and resources being developed for the quality and safety work stream.

External Affairs Update

In Susanne Cameron-Nielsen's absence, AMacK provided a brief update on External Affairs.

- 'Hold the date' – Personalised Medicines reception and debate in the Scottish Parliament – Tuesday 13 December 2016.
- Holyrood Round Table – a review of this event will be published in the Holyrood Magazine edition for the SNP Party Conference.
- Maree Todd MSP is to sponsor the RPSiS Exhibition in the Scottish Parliament, week commencing Monday 6 March 2017.
- The RPSiS has an advertisement (SPB Manifesto 2016 Infographic) in the Holyrood Communications Political Guide 2017 opposite Shona Robison the Minister for Health and Well-Being's profile.
- RPSiS / RCGP Scotland joint statement on General Practice Based Pharmacists will be launched formally on Thursday 13 October 2016.

16/11. RPSiS National Seminar 2017

Carolyn Rattray (CR), Business Manager provided some background. Following the success of the inaugural 2015 RPSiS National Seminar, there was an appetite to hold another seminar in 2017, then repeating on a biennial basis. A provisional date for the Seminar has been secured: Saturday 30 September and Sunday 1 October 2017; The Sunday being the United Nations International Day of Older Persons. With this in mind it is proposed that the theme should be: *'Pharmacy throughout our lives'*.

BMs were asked to confirm their support, or otherwise for a National Seminar in 2017; they were also asked for suggestions for workshops.

Sponsorship for National Seminar 2017.

BMs were also reminded that as there would be no budget, sponsorship would be essential.

DT confirmed that he is meeting with Pharmacy Management and would discuss potential sponsorship options at that meeting.

Potential Workshops around the theme of 'Pharmacy throughout our lives'.

- Developing pathways of care that will be different dependent on different age groups
- Pharmacy education throughout our lives – educational competencies
- Community pharmacy pilot for the RPS Foundation
- Care Homes and Care at home
- Young people with LTCs. AP suggested that paediatrics is under-supported
- Integration partnerships around defined populations, particularly around young people as there is a gap
- GP and pharmacist relationships and risk awareness as a parallel theme
- JL offered to lead on a webinar to engage members and non-members before the event.

AMacK noted that the WPB managed to achieve £20k of sponsorship for the Welsh Medicines' Safety Conference.

A call for volunteers for a National Seminar steering group: JMcA, JL, ACB and ET.

The Scottish Pharmacy Board

supported

The RPSiS National Seminar 2017, taking place on Saturday 30 September and Sunday 1 October 2017.

16/12. Professional Development and Support (PDS) Team Update

CD provided a brief update on the work of the Professional Development and Support Team.

CD apologised to BMs that the Q3 PDS activity report was not quite ready and would be available on Tuesday 4 October. It was agreed that CR would circulate the Q3 report in the weekly update on Friday 7 October.

There have been a number of changes to the Faculty and Foundation team following staff illness and resignations. Cover from the Support Team has been put in place and work has been reprioritised. CD noted that her role is split at present and that she is only giving part of her time to PDS; this means that the team is currently under resourced.

In light of 'Fit for Business', work is ongoing to restructure PDS; some of the posts and savings will be used to start the new RPS education strategy; CD promised to share this strategy with the SPB following the Chairs and Officers Group (COG) which takes place in mid-October.

The affiliated groups, including the UK Clinical Pharmacy Association, are launching their national training programmes aligned to Foundation and Faculty in early November; the RPS Roadmap will be launched formally at the same time.

There have been positive meetings with Pharmacy Management (PM). PM is keen to launch a marketing campaign for the RPS Foundation and Faculty. They see the value in these models and, given they are Faculty accredited, are keen to spread the word: funding a newsletter and materials.

CD invited questions from BMs:

ACB asked for clarification about the education strategy for the RPS, that it would be presented to all of the NPBs. CD confirmed that the NPBs would be consulted on the education strategy once it has been ratified by the RPS Assembly. CD asked to be invited to the January SPB meeting so that the education strategy can be discussed in full. There was concern that the January meeting might be too late. It was agreed that the Chair and AMacK could discuss timings, etc. to ensure that the SPB is fully briefed but the Assembly ratifies the education strategy.

Action: AMacK and the Chair to discuss timings, etc of the passage of the education strategy to allow sufficient time for the SPB to consider it before the strategy is ratified by the RPS Assembly.

Action: CR / AMacK to invite CD to the January Board meeting.

Action: CR to circulate the Q3 PDS activity report in the SPB weekly update on Friday 7 October.

The Scottish Pharmacy Board

noted

the Professional Development & Support Q2 2016 Update.

16/13. Chair's and Vice-Chair's Report

The Chair provided an update on activities carried out by himself and the Vice-Chair since the previous SPB meeting, held on 15 June 2016.

- There was one omission from the report which was that the Chair attended and represented the RPSiS at the Service of Thanksgiving and Dedication of the 70th Edinburgh International Festival, which was held at St Giles Cathedral on Sunday 7 August 2016.
- 24 August 2016: The Chair presented at the Pharmacy Management National Forum on professionalism. The Chair not only highlighted the challenges to professionalism but also the resources and services that the RPS has to support professionalism.
- 31 August 2016: The Chair attended the Urgent Care and Out of Hours Services Conference and gave a plenary presentation; he covered the SPB

Manifesto and also the joint response (with the DoPs and CPS) to the Out of Hours Review.

- 20 June 2016: The Vice-Chair attended the RPS Pre-Foundation webinar.
- 25 July 2016: The Vice-Chair attended the FIP Conference Steering Group meeting. AP confirmed that the FIP Conference arrangements are at a very early stage with discussions about venues, etc. The next meeting takes place on 30 September; AP can't attend but DT will be attending as Chair.

There were no questions.

The Scottish Pharmacy Board

noted

The Chair's and Vice-Chair's Report.

16/14. Audio-visual presentation

Mike Bonne (MB), Corporate Services Lead, gave the background to the new AV facilities noting that his presentation is tailored to meet the requirements of BMs. CR to circulate presentation to BMs in the SPB weekly update. MB explained that each room is equipped in different ways dependent on whether the meeting is taking place in a large room, meeting room or at desk. The rationale behind this is to enable BMs to be better engaged, whilst reducing the need to travel. There are two platforms for meetings: Lync web app and Skype for Business. MB went through various activities, including pre-conference checks and meeting etiquette and how to set up different kinds of meetings. CR to circulate MB's AV presentation in the weekly update. ACB uses the video-conferencing facility as it saves a great deal of time travelling. She noted that it works very well for her because Strathclyde has a great internet connection.

Action: CR to circulate MB's AV presentation in the SPB weekly update.

The Scottish Pharmacy Board

noted

the AV presentation.

16/15. Website Development Project

AMacK provided an update on the development of the new RPharmS website. The project has now completed the development and the architectural testing stages and is now in the content migration stage. The project is 'on plan' and from a user's perspective is 'much more user friendly'. AMacK concluded that 'it is vital, to all our work, for it to work well.

The Scottish Pharmacy Board

noted

the Website Development Project update.

16/16. Key messages

- Joint statement with RCGP
- National Seminar 2017 – 30 September to 1 October
- RPSiS Parliamentary event: ‘ Personalised Medicines’
- Holyrood Round Table
- RPS / NES Boot camps
- Quality Improvement Road shows
- Evidence to the H&S Committee

It was agreed that it is important to emphasise achievements to date as well as future activities.

16/17. Any Other Competent Business

- Strategy Days: As a result of the recent Doodle Poll, the date of the next SPB Strategy day was confirmed as 1 December 2016. AMacK asked if strategy days in 2017 could be joined with the formal Board days. It was agreed that two strategy days in 2017 would be joined to formal Board days (April and June) and the other two would be interspersed. CR to confirm dates in weekly update.
- Burns Supper 2017: BMs confirmed that the annual SPB Burns Supper should go ahead. It was agreed, to save costs and also adhere to the no alcohol policy on expenses that the food and soft drinks would be covered by the SPB budget and that BMs would cover the cost of any alcoholic drinks. HG noted concern around ‘the extended group’ and also tax issues. AMacK and HG to discuss.
- Professional Indemnity Insurance (PII): AMacK has been contacted by the DoPs re: PII who have asked if the RPS would be willing to act as a sign-posting function. AMacK noted that there is a need to ensure that not showing favour. It was agreed that this should be taken away for further consideration; HG agreed with this.
- Board Papers: DT, as RPS Treasurer, noted that printing Board papers needs to be as cost-effective as possible. It was agreed that papers should be electronic only for the January 2017 meeting. Two emergency copies to be printed.
- Sponsorship: ET thanked everyone for sponsorship; she raised £400 for Pharmacist Support.

16/18. Date of next formal SPB meeting

The date of the next meeting will be Wednesday 18 January 2017.