

Minutes of WPB Board Meeting held on Thursday 5th February 2016

Present: Suzanne Scott-Thomas (Chair); Mike Curson (MC); Gareth Holyfield (GH); Phil Parry (PP); Richard Evans (RE); Fiona Jones (FJ); Cheryl Way (CW); Rob Davies (RD).

In Attendance: Mair Davies (MD), Director for Wales; Helen Gordon (HG) (from 10.25am) CEO); Angela Grant (AG) Business Manager (minute Taker); Ross Gregory (RG), Health Policy Analyst; Elen Jones (EJ), Principal Policy Advisor; Jason Bartlett (JB), Membership Engagement and Communications Manager; Alan Hughes (AH), Gogledd Cymru North Local Practice Forum Steering Group Lead (observing); Howard Duff (HD), Director for England (part via teleconference); Karen Hodson (KH)(observing- part); Chris Martin (CM), Chair of PPIG (part); Professor Jayne Lawrence (JL), RPS Chief Scientist (via teleconference – part).

Apologies: Ash Soni (AS), President, Paul Harris (PH), WPB Vice Chair; Sandra Gidley (SG), Chair of English Pharmacy Board; Sultan ‘Sid’ Dajani (SD), English Pharmacy Board member

Item number and heading	Related paper/s	Notes and actions	Action by	Status
16/01 Welcome & Introduction		The Chair wished everyone a Happy New Year and welcomed everyone to the meeting. She informed that Helen Gordon, will be joining the meeting later on in the day and Howard Duff will be ringing in via video conference to take the Falsified Medicines Directive agenda item a little bit later on the day.		
16/02 Apologies for absence		Apologies were received from Ash Soni, President, Paul Harris, WPB Vice Chair; Sandra Gidley, Chair of English Pharmacy Board; Sultan ‘Sid’ Dajani, English Pharmacy Board member		
16/03		i) The Chair informed the Board that due to Chris Martin’s prior commitment, his item will be taken first on the agenda.		

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<p>An update on the work of NHS Wales Prudent Prescribing implementation Group (PPIG) and the Bevan Commission</p>		<p>ii) Chris Martin (CM) introduced himself and explained that following his retirement as Chairman of Hywel Dda University Health Board, he still holds many other roles, as the Chair of PPIG, Deputy Chair of Bevan Commission, Lead on Innovation and Palliative Care, Chair of Community Pharmacy Remuneration Group, Chair of Health Innovation Cymru Wales as well as a Fellow of RPS.</p> <p>iii) CM reported on the work of PPIG and agreed to share a copy of the recent PPIG report along with the letter to the Health Minister to WPB.</p> <p>iv) CM provided further information on the work of the Bevan Commission and Bevan Academics and Pharmacist Fellows. Chris agreed to share the list of Pharmacist Fellows with RPS once approved by the Bevan Commission.</p> <p>v) Board were encouraged to visit the Health Innovation Cymru website and a plea was put forward for the profession within Wales to move forward with one voice. The Board supported this way forward and will continue to actively work with other pharmacy bodies.</p> <p>vi) Chair queried the work on managed repeats and how RPS and Bevan Commission could work together. CM suggested for RPS to contact Dr. Brian Hawkins and Sue Murphy to support the work of RPS which is led by Elen Jones.</p> <p>vii) Board discussed the issue and challenges to use One Voice within community pharmacy, clusters, independent prescribing and how market forces and Local Health Board who have their own priorities that could impinge on pharmacist workforce.</p> <p>viii) The Chair endorsed the One Voice of pharmacy approach which is very much valued and suggested that RPS will be fully supportive and continue to work together in particular with Bevan Commission and their patient groups to have a patient voice.</p> <p>ix) Board was asked to note that there will be a meeting where RPS has been invited for the meeting on the 19 Feb.</p>	<p></p> <p>CM</p> <p>CM</p> <p>WPB</p> <p>EJ</p> <p>MD</p> <p>MD</p>	<p></p> <p>Completed</p> <p>completed</p> <p>completed</p> <p>completed</p> <p>ongoing</p> <p>completed</p>
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OPEN BUSINESS

		x) CW informed that NWIS is developing an Emergency Medicines Supply model which gives community pharmacy access to GP patient summary records, funded by Health technology fund money. It is to be piloted in April and rolled out throughout Wales in the next two years. There a still a lot work to be done and support from Local Health Boards to commission all the services. CW agreed to send a short email explaining the current IM & T work in Wales to be shared with the WPB and those attended the meeting.	CW	completed
16/04 Declaration of Interest	16.02/WPB/03	Board members were reminded that as part of the governance process, each member should notify the Welsh Office, AG of any amendments to their register of interest. It was highlighted that this paper needs updating annually so even if there are no changes, Board members are required to re-submit their form to AG.	WPB	ongoing
16/05 Minutes of the Open Business of the Welsh Pharmacy Board meeting held on 15 Oct 2015	16.02/WPB/04	<p>The Welsh Pharmacy Board received and approved the minutes of the open business meeting (item 16.02/WPB/04) held on 15 Oct 2015 and confirmed it as a true record of the meeting subject to the following amendments:-</p> <p>15/68 - Jodie Williamson was congratulated on her appointment with RPS and with her change in her role this item has not been picked-up. The Chair queried if there is a need to have a Board representative to liaise with BPSA. Elen Jones stated that there is no need at present to have a specific representation however Board members were asked for their support to attend the upcoming BPSA conference and further information will be circulated to the Board.</p> <p>15/69 - Your care Your Medicines (YCYM). Chair will follow-up on this by speaking to PH in the absences of WPhC Chair, Bethan Tranter.</p> <p>MD informed Board that RPS was due to meet with Richard Lewis, Director of Primary Care, however were not able to due to meeting at the WPhC. Mair asked with Board's agreement,</p>	<p>WPB</p> <p>JW/EJ</p> <p>Chair</p> <p>MD</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p>

OPEN BUSINESS

		<p>for RPS to attend the next meeting with WPhC as One Voice and YCYM is a priority for both bodies. The WPB agreed that this is a prudent way of joint working.</p> <p>15/71 - Pharmacist Support will now be pick-up by Jason Bartlett and Jodie Williamson that they are now in post.</p> <p>15/101 – some typo error to be noted as follows; Datex to read Datix b) ii – Sarah Rochiera to read Sarah Rochira b) ix – WIGBI to read WIGB</p> <p>15/102 - Medicines Safety Conference Chair thanked everyone for a very successful conference last year and asked everyone to start thinking about the theme for this year. Board were asked for the working group membership to be reviewed considering the expertise of new Board members who have recently joined the Board.</p>	<p>JB & JW</p> <p>AG</p> <p>RG</p>	<p>Ongoing</p> <p>completed</p>
16/06 Matters arising from the Open Business of the Welsh Pharmacy board meeting that is not specifically included in the agenda		There were no matters arising from the Open business of the WPB meeting that is not specifically included in the agenda.		
16/07 Any other Business		<p>The following items were noted under any other business and to be discussed later in the meeting:-</p> <ul style="list-style-type: none"> i) Short life working group ii) Science group representative for WPB iii) RPS Conference report iv) Faculty report 		

<p>16/08 Leadership in Wales</p>	<p>16.02/WPB/08</p>	<p>a) Welsh Directorate Update</p> <ul style="list-style-type: none"> i) MD reported that following the operational challenges, all the business plan activities in 2015 were achieved apart from engagement with the public and patient. Public engagement has not been included in the 2016 business plan but RPS will incorporate within each part of the plan as appropriate. Board was asked for suggestions on how best to engage with the public and if there are models out there that they are aware of, WPB to feedback. ii) MD continued by thanking the very few staff who were in RPS in 2015 for all their hard work. The Chair and Board members fully endorsed Mair's compliment. MD explained that with a fully complement of staff in 2016 and with her new role, there are opportunities to review the team and different ways of working but never the less will be taking things prudently. iii) Board was asked to note that one additional item has to be included in the 2016 Business Plan which was not identified by the Welsh Board initially that is the Welsh Language work stream. iv) MD reported on the ongoing progress with the many working groups that RPS Wales currently sits on and stressed that there is a need to review on the outcome of the groups rather than just the participation. Clinical pathway group is currently looking for a representative from RPS Wales and MD informed that it has gone to WPhC and due to the very short turnaround time, Judith Vincent is looking into this for RPS. v) Choose Wisely Wales (CWW) being one of the working group, MD felt the group requires a representative with specific clinical knowledge and this would best 	<p>MD</p>	
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		<p>represented by Dr. Brian Hawkins who has agreed to represent RPS. Board agreement was sought and the WPB fully supported the decision.</p>	MD/ WPB	
		<p>vi) The CCW group requires RPS to forward approximately 5 interventions relating to medicines that we should not be doing or should only do in certain circumstances. (e.g. prescribing of antibiotics in sinusitis). All the Royal Colleges on CCW have been asked to do this and the steering group will prioritise these for action in Wales. Ideally the group wants suggestions that have gone through a patient and public forum so as to get initial buy in. The next meeting of the steering group is on 14th March.</p>	MD/ WPB	
		<p>vii) The WPB has agreed to form a virtual working group to discuss and come up with suggestion by 7th March with working group representatives from Mair as the coordinator and participation from the Chair, RD, FJ, PP and MC. It was agreed that all agreed thoughts and ideas will be collated and process through to the group via Brian.</p>	MD	
		<p>viii) Board member sought RPS's position on the work towards becoming a Royal College. HG explained that the scoping work is still on going and that this will happen but it is only a matter of timing. However, the WPB's view on the matter is encouraged to help to better understand and formalise the way forward. The scoping work will also be looking at the issue of RPS being perceived as being in the pharmaceutical industry rather than pharmacy.</p>	MD	
		<p>ix) MD informed that the Unscheduled Care Clinical Reference Group is currently represented by Tim Banner for RPS. Relevant papers were circulated to WPB on Friday email for the meeting he attended on 3rd Feb however, Board have asked for the papers to be recirculated.</p>	MD	Completed

OPEN BUSINESS

		<p>x) MD also reported that RPS sits on the Care Homes Steering Group where there are two groups of workforce planning and best practise groups with EJ sits on one and Tim Banner sits on the other. There is a consultation out from “Mwy Na Geiriau” (More Than Words) looking at welsh language which RPS will be responding to. EJ explained that a draft consultation will be circulated to WPB for comments.</p> <p>xi) Alan Hughes commented that the All Wales Prescribing Group have commissioned a project to setup welsh language supplementary label in the British National Formulary (BNF) and the March edition of the BNF will have both English and Welsh supplementary labels. This edition is currently live on the Medicines Complete website and that is worth looking into. Board was asked to promote this achievement and MD have asked Jason Bartlett to look into the communication’s angle from RPS. The Chair supported the need to promote the Welsh Language supplementary labels and asked EJ to ensure it is promoted on the RPS website.</p> <p>xii) MD introduced the overarching Business Plan 2016 which will have all the key performance indicator (KPI) and the impact on reputational voice. As not all the work streams produces profit or membership, the Executive team are currently working on how to measures impacts and have direct influence on reputational voice of a professional membership body. Board was informed that the plan will be discussed in detail at WPB working day in March and will be used to report back to the WPB with Red, Amber and Green (RAG) rating to track progress.</p> <p>xiii) Board raised concerns that there are quite a lot to achieve on the business plan and queried whether the plan is to be delivered solely by the Welsh staff and Welsh Board or will there be central support through a memorandum of understanding (MoU). MD explained that there is no formal MoU but she is certain when help has been requested there has been support. HG assured that the central support from the</p>	<p>EJ</p> <p>EJ</p> <p>MD</p>	<p>Completed</p>
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	<p>16.02/WPB/08b</p>	<p>professional leadership group is there for the whole of RPS and is in line with the strategic themes. Should there be a MoU internally, there will be more time spent managing the MoU rather than having an understanding on collaborative working.</p> <p>b) Chair’s Update</p> <p>The Chair highlighted several key points from her report and acknowledge the success of the 5th Annual Medicines Safety Conference and the launch of the RPS Manifesto document. The Chair voiced that it is felt that RPS are starting to work as one voice with organization such as CPW and GPhC with common themes.</p> <p>Sitting on WIGB, the Chair reported that the National Information Integrated Audit System (NIIAS) will be used to audit the access to patient records therefore the governance on this are currently being looked. Board queried the issue regarding access for community pharmacy technician in Wales and if this issue would be appropriate to be raised with the WIGB group. The Chair agreed it is a very important point but felt this was not the right time. RPS could use the PPIG umbrella to promote a better understanding of the role of pharmacist as it is felt that there is still a need to have a better understanding of the role of pharmacist in every aspects particularly with new emerging roles. It was agreed that bodies such as CPW should be consulted when RPS take it forward as a one voice.</p> <p>The Chair reported on the Error Reporting Task and Finish groups and informed Board that Lynette James, All Wales Medicines Safety consultant pharmacist, is currently developing a survey to understanding a base line of the culture for error reporting and learning in Wales across all the pharmacy sectors and the proposal will go to the group before it goes out in April once it has been agreed.</p>	<p>Chair</p>	
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OPEN BUSINESS

		<p>MD to circulate the report completed for WPhC on the development of the group.</p> <p>It was reported that following WPB agreement on the Faculty position statement, the first action learning set session for the Board was also completed. A Faculty champion day was being held in the Royal Glamorgan Hospital in Wales with approximately 15 attendees and encourage Board members to continue with their journey. MD reported that there has been much debate at the recent Scottish Pharmacy Board as well.</p> <p>Following the Chair's report on the outcome of her recent meeting with a LHB CEO, Board raised concerns that the pharmacy profession should not only detail outcomes in the financial or efficiency currencies as suggested. There is a need to look at the profession as providing quality and safety as key on the agenda. MD requested that any evidence to be sent back to her in support of quality and safety agenda for the professional body to take forward.</p> <p>c) Information Technology</p> <p>CW provided a verbal update to the Board informing them that the money has been obtained for the rollout for Choose Pharmacy platform to 350 pharmacies across Wales over the two years from April. This is in addition to the ones that they already have with the Choose Pharmacy DMR systems. The criteria is yet to be finalised on how it will be done but it will be largely be down to how the LHB is going to commission. The auditing of NIIAS will also need to be undertaken. The MTEC discharge is also being rolled out across Cwm Taf and Cardiff.</p> <p>There is also a big piece of work with Welsh Government on obtaining finances for replacing the hospital pharmacy system and introducing electronic prescribing system. It expected that the business case will be completed in the next couple of</p>	<p>MD</p> <p>WPB</p>	<p>Completed</p>
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OPEN BUSINESS

		<p>months which will then go out to tender. It will be implemented into pharmacies in 2017/18 and the actual rolling out of the electronic prescribing in 2018 onwards depending on the LHB.</p> <p>CW agreed to provide a written update to be shared with WPB</p> <p>d) RPS Wales Member Communications</p> <p>Jason Bartlett, Membership Engagement and Communications Manager provided a brief verbal update on where the LPFs are in Wales. The first meeting with an LPF has been arranged with further lined up with the other LPFs. MD informed that Jodie Williamson and JB who are now doing job share, will be looking at developing a strategy that will be shared with the WPB at the next meeting.</p> <p>HG informed that the Executive team will be looking at the LPF processes, now five years on, if the LPFs have progress and have made an impact particularly considering the value for money for members.</p> <p>Alan Hughes commented that due to geography between south and north, there is a need to look at how best to cascade plans and to think ahead in incorporating the various LPF in Wales.</p> <p>e) Public Affairs Update</p> <p>RG, briefed the board on the policy vision work, the influencing activities and the reputation and profile activities in 2015. The Chair sought clarity on the survey comparison referring to or being grouped as a pharmaceutical industry, how could RPS predict who are our key party and who should be RPS be targeting.</p>	<p>CW</p> <p>JB/JW</p>	<p>Completed</p>
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	16.02/WPB/08e Appendix 1	<p>WPB discussed the survey results and agreed that there is a need to seek further clarity where RPS sits in the industry and not to be categorised in the pharmaceutical industry which is not a direct comparison with other Royal Collages. The Chair stated that the issue of who we are and how we should perceive ourselves should be explored further with a view in line of the Royal college, to have a mandate for the Assembly going forward.</p> <p>The Board also asked for some information regarding who their local AM that they can engage leading up to the coming election. RG agreed to provide this information.</p> <p>Discussion took place on the proposed public activities in 2016 and WPB agreed in principal to support the proposal from the PA steering group but was very cautious proposal to establish a Cross Party Group on Pharmacy. Board felt that there is a danger of cross purpose with other groups and there is a need to explore further on the purpose of the group with an aim of having one voice.</p>	RG/ MD RG RG	
16/09 Consultation updates and key policy statements formed by consultation responses	16.02/WPB/09 a) and b)	<p>a) Homeopathy Professor Jayne Lawrence joined the meeting via teleconference and contextualised the issue regarding the homeopathy from a science perspective and RPS's role in responding to the consultation. JL explained that from science perspective, the evidence based on homeopathy is very weak and there is no scientific basis for homeopathy. However, it is recognised that some patient with the right consultations finds it beneficial as a placebo effect. Board was asked to be aware of the campaign from "Good Thinking Society" who have agreement from the department of health for homeopathy treatment be added to Schedule 1 i.e. it will be on the black list. This will mean NHS doctors will not be able to prescribe homeopathy products going forward. RPS has to have a very clear stand on their decision and respond to the consultation.</p> <p>The WPB discussed in details on the issue and agreed the followings;</p>		

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		<p>i) RPS does not endorse homeopathy product as a form of treatment that should be available on the NHS therefore should be black listed and not prescribed or funded.</p> <p>ii) RPS should keep status quo with current policy and keep the website guidance.</p> <p>iii) There is a need to explore further the Quick Reference Guide by strengthening the wordings but not out-right that it shouldn't happen. Call for evidence on placebo effect or the value which Prof. Jayne Lawrence will try to find further scientific evidence.</p> <p>iv) The WPB felt that pharmacist should not sell homeopathy products and that pharmacist should act autonomously.</p> <p>v) RPS consultation should be fed back to WPB for approval</p> <p>vi) The issue regarding MHRA and the licensing for homeopathy products as medicines will need to be addressed.</p> <p>Board queried the issue on evidence base of OTC (particularly P) medicines used for self-care and OTC prescribing, a different form Homeopathy. There is a described 'mode of action' for most medicines but possibly no strong evidence base for efficacy if measured by the normal attributes of Mortality. Morbidity, duration of illness, etc. Board had previously asked for some information from Dr Catherine Duggan and/or Professor Jayne Lawrence but as yet to receive any feedback.</p> <p>It was suggested that pharmacist should be able to have honest discussions with patients about the medicines we provide. Also there is a need to have some guidance as Community Pharmacists about the other aspects of effectiveness such as how effective they are as palliatives.</p> <p>The Chair asked Phil Parry to raise the evidence based issue with Professor Jayne Lawrence to obtain response and share with the Board.</p> <p>b) Community Pharmacy Managed Repeats Prescription Services.</p>	<p>EJ/MD /Chair</p> <p>JL</p> <p>EJ/ WPB</p> <p>PP</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p>
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	16.02/WPB/09b appendix 1 & 2	<p>Discussion took place on the revised policy guidance however it appears that not much feedback has been received so far since the policy has been developed for the last 18 months.</p> <p>The Welsh Pharmacy Board agreed;</p> <ul style="list-style-type: none"> i) To the paper as it stand but asked to seek advice from PPIG board through liaison with Dr. Brian Hawkins and Sue Murphy before agreeing a final version. ii) To consider adding a separate section specific to Wales similar to Scotland's version. iii) To review the policy document as a matter of priority and send any comments to Elen Jones before Board's next week's teleconference. 	EJ	Completed
	16.02/WPB/09b	<p>c) Principals of Medicines Supplies WPB discussed the high level principals set out in Appendix 1 and considered who would volunteer from the Board to be involved in a working group.</p> <p>The Welsh Pharmacy Board agreed;</p> <ul style="list-style-type: none"> i) that the papers to be re-circulated on the Friday email for further consideration and discuss at the next Board teleconference. ii) For the Chair on the managed sector, Rob Davies, Karen Hodson, Phil Parry, Mike Curson and Fiona Jones to be involved in the working group to capture all comments with an aim to setup the working group for the next steps and complete the work within the next month. iii) To include the term patient advocacy into the consultation response. 	AG/EJ EJ	Completed
	16.02/WPB/09b	<p>d) Pharmacist prescribing WPB discussed if there is a need to have Welsh input and be part of GB document. Role of pharmacist and prescribers were also discussed and it was felt that the current paper is very Anglo-centric therefore there is a need to explore solutions in Wales to incorporate into the GB paper.</p> <p>The WPB agreed to send comments to EJ and for EJ to form a working group including RD and PP to collate all feedbacks.</p>	EJ	

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<p>16/10 National Pharmacy Board Election 2016</p>	<p>16.02/WPB/10</p>	<p>The Chair asked Board to note the paper sought their support to promote the election to the wider network. Board was reminded that it is their responsibility as Board members to encourage nominations and to support candidates who want to know what to do and how they can contribute to the profession as well as to their self-development.</p> <p>Board discussed the election and nomination process and sought clarification on the period of office for Mike Curson and Fiona Jones who were elected to the Board last year as well as the recent election places for 2016 places.</p> <p>AG explained that both Fiona and Mike's nominated roles that filled in the casual vacancies arising from the failure to fill through the normal election process, is for the period of three years as the original elected person's term would have ended. Board was asked to note appendix Y of the Governance Handbook.</p>		
<p>16/11 Matters to Report</p>	<p>16.02/WPB/11i) and 11ii).</p>	<p>RD gave a brief update from his recent attendance to the Faculty Champion event in London. He reported that the relaunch of the Faculty champion will be in a more structured approach and there were some good discussion of RPS Wales and Cwm Taf innovations, the need to have sessions on faculty resources available with structured faculty champions programme going forward. There was emphasis on encouraging every champion to mentor at least 1 new member. There was also discussion regarding how to market the Faculty, its benefits and costs to members.</p> <p>The Chair was also congratulated on being awarded Fellow of Faculty.</p>		
<p>16/12 Any other business</p>		<p>The Chair took the following items,</p> <p>i) Launch of Care Homes policy document EJ informed the Board that the Care Home policy document will be launched on the 1st March and Board members were encouraged to the event.</p>		

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		<p>ii) WPB representation for science group as requested by Linda Hake of the Assembly. It was confirmed that Karen Hodson will represent the Board on Science.</p> <p>iii) Short of Life working group Board was informed that a short of life working group is currently being setup centrally so Board has been asked for volunteer to participate. It was agreed that PH and PP to represent the WPB.</p> <p>iv) RPS Conference – RE provided a brief verbal update on the conference committee’s progress for this year’s conference. Chair asked what is the WPB’s involvement in the conference and how best to get Wales representation at the conference? It was felt that integrated care should be in the conference. HG explained suggestion for speakers would be fed back to the committee as the Chair of the committee are currently in the process of exploring options.</p> <p>The Chair requested for the RPS Conference update to be reported back to via the Friday email to raise awareness as to what information needs to be feedback.</p> <p>Karen Hodson brought to the attention of the Board that the next FIP will be in Glasgow and ask RPS to consider hosting a reception there and if this kind of suggestion could be fed back to the committee now.</p> <p>It was also suggested that there is also a great opportunity to link in with Bevan Exemplars as there are already many good examples to share and names such as Janet Thomas, Martin Davies, Judith Vincent from ABMU, Anne Hinchcliff, Paul Gimson etc were also suggested.</p>	AG	Completed
			MD/ Chair	
			RE	
			RE/AG	completed
			RE	
16/13 Key Messages from the Meeting		The WPB agreed for the following key messages for publication in Pharmaceutical Journal and the RPS website.	JB	

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		<p>(i) Election of National Pharmacy Board 2016 and the appointment of Karen Hodson for the any sector casual vacancy place on the Welsh Pharmacy Board.</p> <p>(ii) Launch of Care Homes policy document and campaign on 1st March.</p> <p>(iii) Joint work with PPIG.</p> <p>The Open part of the business meeting closed at 13.30pm</p> <p>Next meeting:</p> <p>Welsh Pharmacy Board working day – Thursday 17th March 2016.</p> <p>Welsh Pharmacy Board meeting - Thursday 28th April 2016.</p>		
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