



# Annual General Report 2019 - 2020




Gateshead & South Tyneside  
Local Pharmaceutical Committee

*Passionate* about pharmacy



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# Mission and Vision

Gateshead and South Tyneside local pharmaceutical committee represents all pharmacy contractors regardless of company (including multiples and independents). Our committee is made up from a representative sample to reflect the mix of pharmacies in the area.

## Vision Statement

For the next 5 years Gateshead and South Tyneside Local Pharmaceutical Committee (LPC) will continue to be a structured and efficient organisation with mutually beneficial alliances, capable members and specialist advisers. It will improve relationships and engage with all stakeholders, enabling the people of Gateshead and South Tyneside to receive the highest possible quality of pharmaceutical care from community pharmacy and provide a vital role in

## Mission Statement

Over the next five years the LPC will increase its capability and capacity as an effective representative committee for community pharmacy. The LPC will endeavour to extend the range of services that are commissioned from community pharmacy, by raising awareness of the exemplar services provided to date, and the true value of community pharmacies as the third pillar of health care alongside our colleagues in the Medical and Nursing professions.

The LPC will encourage service level uptake and that quality in all services is delivered.

## Nolan Principles of Governance

As a committee, the LPC adheres to the Nolan principles of governance. A copy of which is included in the appendix.



# Chairman's Report

Welcome to my report for the past year...and what a year it has been.

Apart from the **Covid19 pandemic**, which hit the country and changed everything in March, towards the end of the year, the other big issue for community pharmacy was that **"The new contract"** arrived and this also caused a lot of anxiety for contractors at the time.

The funding was fixed for 5 years, which although giving a degree of security, was felt by many as a cut due to the fact that costs will inevitably rise over the time span. Plus, the new contract heralded a clinical future, which has taken some pharmacists out of their comfort zone. It is thought that there will be a gradual switch in funding by as much as 30% over the 5 years into clinical services and away from dispensing although at the time of writing - in the middle of the coronavirus pandemic - everything is up in the air... My plea to contractors, though, is to embrace change as it comes.

So, onto my report...

In April, we began the year, with a series of training events for contractors and their staff. In South Tyneside we were upskilling pharmacists in preparation for the next **9 PGDs** which had been approved for use with GP2P - we ran several whole day clinical training days using local GPs, patients & CPPE tutors. These events were completely full.

In Gateshead we offered 2 training events for the **"let's tackle blood pressure"** service that was running over Gateshead-Newcastle.



On 25/4/19 we hosted a visit by Dr Bruce Warner, the deputy chief pharmaceutical officer for England, who had come up to South Tyneside to see out GP2P service. We had a meeting with him, followed by a visit to a GP surgery and a pharmacy offering the service.







# Chairman's Report

Throughout May/June we put on a series of upskilling clinical meetings for contractors within Gateshead & South Tyneside and around the region using monies obtained from HEE. These upskilling sessions involved hands on clinical sessions with actor patients and GP colleagues as well as CPPE tutors.

In June, we put bids in for some non-recurring money in South Tyneside and in July we found out we were successful to the tune of almost 60k - which will be used to offer clinical services via pharmacies in South Tyneside, including a **microspirometry** service.

In July we began fleshing out our shiny new proposal to have a transfer of care type service in Gateshead, and consequently Newcastle as well, based on urgent care. The exec had a series of meetings with QEH, CCG to build consensus and create a head of steam. This service **“community pharmacy urgent care referral service” CPUCRS**, began to take shape throughout the summer. Our LPC worked with NoT LPC exec to produce firstly a proposal and then a complex bid paper. The paper will hopefully result in a service that will ensure referrals are made from GPs, A&E departments as well as walk in centers to community pharmacies throughout Gateshead and Newcastle for low acuity conditions - and more complex situations whereby a supply of a POM will be made for a range of conditions via PGD. The CCG is keen to get the service developed to reduce winter pressure issues. Unfortunately, time passed and when Covid19 hit, the project has been mothballed for a while.

**PSNE** is moving from strength to strength - now managing over 22 commissioned services across the footprint (DD G&ST NoT). The board meets regularly and there is a smaller operational group that meets monthly to ensure contractors are paid. During the Summer we experienced problems because CCGs were failing to pay our invoices and we had to chase them up a lot to ensure PSNE had enough funding to pay contractors promptly. PSNE has utilized Pharmoutcomes in novel ways, by building platforms, to recruit contractors into services as well as paying them. This has proven a much better system than asking for “wet” signatures.

The board has been working behind the scenes to alter governance and articles to allow Cumbria and hopefully Sunderland LPCs to join the organisation and by October we were ready to welcome Cumbria LPC onboard. Sunderland LPC are not quite ready to embrace the idea of having a company of scale - although I personally don't know how we would manage without it.

In addition, PSNE has been actively seeking out services and has developed a repository of service information to enable us to bid for services for contractors.

As I said earlier, the new contractual framework was published during the Summer with fixed funding over the next 5 years and a series of roadshows was held for contractors.

The LPC agreed to hold a contractor meeting on October 15th to bring contractors up to speed about the contract negotiations locally and to mop up those that couldn't attend roadshows. Also the meeting gave contractors an update on where we are with Primary Care Networks (PCN), and had contractors sitting in PCN groupings thinking about electing leads for their PCN and exploring what PCNs could offer to the patients and public of the patch. PCNs will be the new health service local bodies of the future - although they were very much finding their feet at the time. The entire LPC committee attended this latter event to help facilitate the meeting.





# Chairman's Report



Lots of other **training meetings** took place in October, and was a complex logistical issue for the exec team to organise, but valuable for contractors: EHC update, GP2P mop up session, microspirometry training for a ST contractors for a new service, a clinical skills update as well as the contractor engagement event which over 60 pharmacists attended. In late November we had a substance misuse update involving a really excellent presentation by Ken Dale and Emma post at which almost 100 pharmacists and their staff attended.

At the turn of the year, GP2P, our innovative transfer of care service between GPs and Community Pharmacies, moved forward into an exciting new phase involving diary bookings via EMIS.

All community pharmacies commissioned to provide the service were provided with a laptop computer loaded with an EMIS diary function. This means that surgery staff could now very easily be able to send appointments direct to community pharmacies without using a telephone. The bookings are made in real time identically to the bookings they already make for the GP or practice nurse. Pharmacies are able to block out periods of time when the service is unavailable, for example at lunch periods or when a PGD trained pharmacist is not present. I genuinely believe that this new extension to the GP2P service was very welcome at this busy time of year and facilitated appointments immeasurably. Pharmacies are now even better placed to provide this much needed service to patients taking more pressure off GPs by providing increased numbers of interventions.

In March everything changed with the **Coronavirus infection**. Covid 19 became pandemic very quickly in a matter of weeks and put pharmacies under major stress.

Pharmacies were struggling like never before - some pharmacies doing 50% increase in dispensing...the public were panicking and demanding prescriptions.

Within days paracetamol was virtually out of stock. Ibuprofen was on restricted supply. It was a mess. Pharmacies were utilising safe distances, some using masks, visors and gloves on the front line...some locking doors as staff levels reduce markedly due to self isolation. We sent the following Comms item to contractors as we moved to utilising PCN leads to cascade urgent LPC news items to contractors and to use the reverse of this to glean information from contractors:-

*"Your LPC is well aware of the fantastic work that pharmacy teams are doing in these truly chaotic and changing times - as we're all pharmacists and most of us are on the front line ourselves.*

*We also understand that you're being bombarded with information from all sides. With this in mind we are acutely aware the communications from the LPC have had to change.*

*As a consequence you will have noticed that we have reduced the frequency of our local LPC news items and have been utilising the PCN network and network leads to cascade salient information to contractors via WhatsApp messages.*

*This method of communication is quick in these fast moving times and LPC news items take a lot of work to compile. The messages can be targeted easily, so please make sure you are in touch with your PCN lead via the WhatsApp groups that have been set up.*

*As well as keeping in touch with your PCN Lead though, please make sure you are checking your pharmacies NHS Mail for information direct from NHS England as well as ensuring you are on the PSNC Mailing list.*

*Community Pharmacy teams are the unsung heroes of this pandemic; stoically working tirelessly in incredibly difficult circumstances late into the night for patient benefit.*



# Chairman's Report

*I know you have all worked harder than ever before over these last few weeks - even being forced to work over Easter when a break would have been most welcome.*

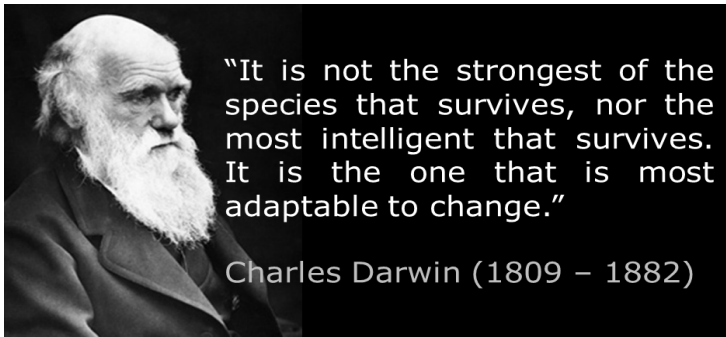
*I realise, however, that many of you will feel almost overwhelmed with anxiety and stress trying to deal with the pharmacy and your own personal situation.*

*Your patients and wider Society really do appreciate the hard work you are doing - and on a Thursday when the streets are full of clapping neighbours - remember that they are clapping for you! Keep safe," - David Carter*

Your LPC officers and members have worked tirelessly to help contractors over the past year, but especially over the pandemic period.

Community Pharmacy will emerge stronger, but we must continue to adapt. As I close my report I would like to leave you with a couple of poignant quotes.

John F Kennedy said "change is the law of life, and those that look only to the past or present are certain to miss the future" - don't be a dinosaur! But, in my opinion it was possibly Charles Darwin that said it best...



David Carter, Bsc, MSc, FRPharmS  
Chairman, Gateshead & South Tyneside LPC

## Attendance of LPC members at LPC meetings

LPC member	Membership	Possible attendances	Actual attendances
Mr David Carter (Chairman)	Independent elected	6	6
Mrs Louise Lydon (Secretary)	Independent elected	6	6
Mr Sami Hanna (Vice chair)	Independent elected	6	6
Mr Jon Green (Treasurer)	CCA appointed	6	6
Mr Mark Burdon*	Independent elected	6	5
Mrs Julie Topping	Independent elected	6	6
Mrs Lisa Simpson	Independent elected	6	6
Mrs Aina Osunkunle	Independent elected	6	6
Mrs Jennifer Graham	CCA appointed	5	5
Mr Richard Anderson	CCA appointed	6	6
Mrs Emma Morris	CCA appointed	6	6
Mr Alex Graham	CCA appointed	6	5
Mr Gordon Johnson	CCA appointed	6	6

\* PSNC Northern Regional representative.

September's Annual General Meeting reaffirmed the executive officers in their roles:

- LPC Chairman – Mr David Carter
- LPC Secretary – Mrs Louise Lydon
- LPC Vice Chairman and Communications Officer – Mr Sami Hanna
- LPC Treasurer – Mr Jonathan Green – Replaced by Emma Morris at the end of the financial year

Mr Greg Burke, Regional LPC Secretary, continued to support the committee in the capacity of minute taker. Greg's fulfilment of this role ensures that all committee members can fully take part and contribute to proceedings whilst notes are simultaneously recorded.

### List of observers

- Local pharmacy contractors
- Pre-registration pharmacists and undergraduates





# Secretary's Report

## List of guest speakers

- Steven Carter, ST Council, Stop smoking services
- Karen Large, ST Health Collaboration and ST PCN lead
- Andrew Dillamore, ST Health Collaboration Business Manager
- Jo Farey, ST CCG Commissioning
- Dr Anji Curry, ST CCG, STHC
- Rebecca Noonan, Changing Lives, Domestic Violence
- Sue Gill, First Contact Clinical
- Dr Debbie Wilmot, Gateshead Recovery service
- Catherine Baldrige, Meds Management Lead, ST and Sunderland NHS FT
- David Newall, Gateshead and ST Sexual Health Services
- Sam Hood, Newcastle and Gateshead CCG
- Sue Jennings, CBC, Gateshead PCN
- Gemma O'Donovan, Sunderland University
- Julie Conoughton, ST Council, Public Health

# Members' Contributions

## Accounts

### Gateshead and South Tyneside Local Pharmaceutical Committee Income and Expenditure Account for the year ended 31st March 2020

<b>Receipts</b>			
LPC Statutory Levy	178,292.10		
<b>Training &amp; Project Funding</b>			
Health Education England		24,000.00	
Imeary Street Surgery		1,200.00	
Pharmacies Training Registration		3,999.55	
PSNE Ltd		40,056.93	
Sunderland City Hospital		372.50	
NHS Newcastle & Gateshead		471.25	
NHS South Tyneside		5,551.83	75,652.06
<b>Sundry Receipts</b>			
South Tyneside Council		3,362.00	
Gateshead MBC		3,000.00	
Sale of Printer		250.00	
Bank Interest		66.17	6,678.17
			<u>261,622.33</u>
<b>Opening Bank Balances 1st April 2019</b>			
Barclays Bank plc		36,951.45	
General Fund		1.00	
Business Premium Account			36,952.45
			<u>£298,574.78</u>
<b>Payments</b>			
LPC Attendance Allowance		21,860.29	
Locum Fees		57,952.73	
LPC Officer Honoraria		81,880.00	
Employer National Insurance		2,741.72	
Secretarial Costs		2,943.48	
Catering and Meeting Expenses		22,889.34	
Travelling Costs		1,493.02	
Training Courses & Equipment		28,334.00	
Computer Supplies		385.83	
Group Software Super Licence		8,746.58	
PMI Insurance		400.36	
Accountancy Charges		774.00	
Credit Card & Bank Charges		610.40	
PSNC- Annual Levy		30,078.00	
Postage & Telephone		26.80	
Sundry Expenses		43.00	
Information Commissioner Fee		35.00	
			<u>261,194.35</u>
<b>Closing Bank Balances 31st March 2020</b>			
Barclays Bank plc			37,380.43
General Fund			
Business Premium Account			
			<u>37,380.43</u>
			<u>£298,574.78</u>

**Independent Examiner's Report:-**  
We have examined the above Income and Expenditure Account for the year ended 31st March 2020 and hereby certify that the Accounts are in accordance with the financial records maintained for the year. We have not carried out an audit.

Read, Milburn & Co  
Chartered Accountants  
71, Howard Street, North Shields  
Tyne and Wear, NE30 1AF

*Emma Morris*  
Emma Morris (Treasurer)

Signed on behalf of the Committee:-

*Read Milburn & Co*  
6 August 2020



# Members' Contributions

## Louise Lydon – Secretary

Highlight of my year 2019/20 has to be the launch of the GP2P service which I was heavily involved in both designing, training and implementing.

I am very proud of what our LPC has achieved with this innovative service, which has gained much interest both nationally and regionally, recognising G&ST LPC as the forward thinking LPC it is.

This service demonstrates how clinicians can work together, overcoming historical professional, communication and IT barriers to develop a service with the local patient at the heart of it.

## Emma Morris - Treasurer

I'm the new treasurer and started in role May. I have quickly familiarised myself with payment processes and ensured all banking has continued during the handover from my predecessor.

The accounts for 19/20 have now been signed by myself and the accountant and included in this annual report for your review.

## Sami Hanna – Comms & Vice Chair

This has been a very busy year for contractors and the LPC has been working tirelessly to support and represent. We have worked on new and innovative services such as GP2P which introduced PGDs and clinical service to community pharmacies.

We have run many events to help bring contractors up to speed with the new contract as well as under and the the NHS Long term visions.

We facilitated elections of PCN Leads and enabled pharmacies to have the information they needed to claim the PQS points.

Communications between leads and the LPC was introduced to enable collaborative working across the between the PCNs. This network became invaluable as the covid crises hit.

The covid crises caused hit us towards the end of our financial year with lockdown occurring. The strength and resilience of the pharmacy network pharmacies really shone throughout and continues to this date.

Pharmacies really adapted and were able to keep functioning as other parts of the NHS started closing down. Our PCN network was utilised to ensure our communications still went out. Although it was a tough period of time I was incredibly proud of our colleagues in community pharmacy.

I hope as we go into the next year I look forward to represent and build on all the great work that community pharmacy has done. We have a really good and active committee that I am proud to work with.

## Richard Anderson – Sexual Health Lead

Gateshead Sexual Health Service set up a partnership forum which brings together a range of statutory & voluntary providers who, directly or indirectly, deliver sexual health advice, support or interventions across the Gateshead area. The aim of the forum is to share information & provide a networking opportunity as well as share ideas/good practice, whilst at the same time improve/introduce signposting pathways. The LPC was invited & accepted the opportunity to be included in this forum. Bi-annual partnership meetings were planned for May & November this year - the first of which was, due to COVID19, understandably cancelled.

After the successful & highly attended EHC training events last year, the LPC decided to adopt the same approach of sharing training costs going forward &, in collaboration with commissioners for Gateshead & South Tyneside, again organised & facilitated three mandatory face to face training events for those pharmacists wishing to re-accredit, or newly qualified pharmacists wishing to provide the EHC service.



# Members' Contributions

Next year there will be two training sessions the commissioner has agreed to fund, with the possibility of an extra session if needed.

The self declaration portal on Pharmoutcomes, linked to the CPPE website, is now used by both commissioners to verify accreditation status for all Gateshead & South Tyneside contractors & the annual GPhC registration now negates the need for any DBS checks.

Dual screening test kits for 16-24 year olds are distributed to those pharmacies providing EHC, along with condoms if required, to increase the numbers diagnosed & treated for chlamydia & gonorrhoea.

## Alexander Graham

I continue to enjoy attending the LPC meetings. I like to keep 'in the loop' regarding local pharmacy practice, issues and events. By working alongside knowledgeable community pharmacists, I can develop and extend my own expertise in my own role. I enjoy making an active contribution; engaging in group dialogues in order to learn more about local pharmacy ongoing changes and initiatives. As a result, I can feed this back to my superiors and monitor the impact on business.

## Gordon Johnson

Over the past year, myself and the committee have been working hard for the benefit of our members. Firstly, together we came up with a strategy for how Community Pharmacy could play a part in the new local Primary Care networks. I have myself been elected as the lead for the Gateshead Central South PCN. The PCNs have become very important during the Coronavirus Pandemic and I have been working closely with the pharmacies within the PCN to ensure that they have had all of the information that they have needed. I have also been in several talks about how community pharmacies in Gateshead could be better utilised by the PCN.

I also attend the CCG Medicines Use and Guideline Group on behalf of the LPC and was building links with the Queen Elizabeth Hospital to attend the Medicines Governance Group.

I have recently been appointed the Governance Lead for the LPC and am looking forward to continuing to work with the highly skilled members of the committee.

## Aina Osunkunle

This past year I am pleased to have taken up the post of the Interim lead/LPC support Officer to Gateshead Outer West Primary Care Network (PCN).

I successfully liaised with the contractors/representatives of contractors within the Network also setting up a WhatsApp group with the result that a PCN lead was identified and accepted by the other members. I also successfully organised and coordinated an informal face to face meeting on the 5th of February 2020 during which the PCN lead formally took on her role. I continue to be the LPC support officer.

It continues to be a privilege for me to be a member of this LPC.

The Gateshead and South Tyneside LPC continues to do a great work especially in these unprecedented times, engaging with commissioners including the CCG (Clinical Commissioning Group), NHS England, Health and Well-being Boards (HWB) Local Councils, Primary Care Networks (PCN) and other relevant bodies and individuals successfully getting several services commissioned.

## Lisa Simpson

Well what a year this has been. I thought getting to grips with the GP2P service and having my 1<sup>st</sup> prereg would be my biggest concerns.

I surprised myself how easily I learned and put in to practice my new clinical skills. The PGDs initially appeared daunting but quickly became like 2<sup>nd</sup> nature, turns out I really enjoy looking at patients' ears and throats. Plus, the feedback from the patients has been amazing.

As for my pre reg its been wonderful to watch her develop and grow into a pharmacist I would quite happily leave in charge anytime. She especially stepped up during those exceedingly difficult weeks in March. I thought I had dealt with pretty much everything in my career, including a bomb threat but COVID-19 was something else. I am immensely proud of how my team and pharmacy in general stepped up





# Members' Contributions

to the challenge. Hopefully, next year will be a little quieter.

## Julie Topping

As a member of the LPC for a number of years now it is interesting to see how ideas for new services (after a great deal of work and organisation by the exec team) eventually become fully commissioned services eg GP2P and Emergency Medication Stockists. The success of these ventures is largely due to the excellent networking of the team.

I attended a Collaboration Workshop on 4/3/2020 with Louise and experienced this firsthand.

A large number of people from various areas (GP, Pharmacy, CCGs, Social Care) all met together to brainstorm ideas of how to better work together.

On chatting to fellow professionals I found it interesting that they were all surprised at how many services community pharmacy offered. (We may need a better PR system to promote ourselves)

I am sure that more pharmacy services will result from these types of meetings in the future.

## Mark Burdon – PSNC Rep & Member

I am the PSNC regional representative for the NE and Cumbria region. At the local level I work as a community pharmacist and GP practice pharmacist in Jarrow.

More recently I have joined the board of the South Tyneside Health Collaboration (STHC) which is responsible for GP2Pharmacy and a range of other local initiatives.



## Contacts

*If you have any enquiries regarding this report, please get in touch with:*

Sami, our Communications officer on:

**Sami Hanna**

Gateshead & South Tyneside LPC

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72 Malvern Gardens

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NE11 9LJ

Email: [sami.hanna@gandstlps.net](mailto:sami.hanna@gandstlps.net)

Tel No: 0191 4200213

07930 342035

If you want to get in touch with the LPC on any other matter please  
contact our Secretary, Louise on:

**Louise Lydon**

Gateshead & South Tyneside LPC

C/o Edinburgh Road Pharmacy,

89 Edinburgh Road,

Jarrow

Tyne & Wear

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07977 007 152



# Nolan Principles

*The 'Nolan Principles' code of practice has been written with regard to the seven principles of public life identified by the Nolan Committee in their First Report on Standards in Public Life in May 1995 and subsequently endorsed by the government. Gateshead and South Tyneside LPC, actively promote, and members adhere to, the principles set out below.*

## The Seven Nolan Principles:

### Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

### Openness

Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

### Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

### Selflessness

Holders of public office should take decisions solely in terms of the public interest.

They should not do so in order to gain financial or other material benefits for themselves, their family or their friends.

### Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisation that might influence them in the performance of their official duties.