



Chairman's Report

The past year has certainly been one of transition for community pharmacy. The sector seems very different after a couple of years of the COVID-19 pandemic and contractors are still facing into operational challenges as the healthcare landscape evolves around us. Integrated Care Systems (ICS) are now statutory bodies and continue to form and develop and the new commissioning arrangements are yet to formalise. SNC, LPCs and our contractors have had a period of reflection on the way the sector operates guided by the Pharmacy Representation Review Steering Group (RSG). New pharmacy services have landed, existing services have grown, workforce pressures and operational costs continue to rise - blink and you might have missed last year completely! Your team at the LPC have worked diligently to support you, the contractors, in trying to overcome these challenges and it is hugely important we recognise their contribution.

Adam (Chief Executive Officer) has been working tirelessly to ensure community pharmacy is at the centre of discussions during the formation of the Cheshire and Merseyside ICS and going forward will be fulfilling an important role at the Primary Care Board ensuring that we are not the forgotten healthcare profession. Alison (Business Support Officer) continues to build on her fantastic work on the service dashboard, which is starting to be recognised nationally by other LPCs. This supports our contractors in understanding the service opportunity out there, allows them to grow their businesses as well as benefitting those of their patients who might be unable to see other sectors of primary care. It goes without saying that we are truly grateful for the fantastic communication Alison delivers week in, week out, through our newsletter CPCW Matters. Suzanne (Pharmacy Services Manager)

has supported contractors through her work with NHS England and COVID vaccination centres in what has been a very challenging environment to deliver an ever-changing service. Gary (Pharmacy Services Manager) has delivered a fantastic piece of work in training and supporting General Practice and contractors with GP Community Pharmacist Consultation Service (CPCS) where we have seen an uplift in referrals, driving more footfall through the doors of community pharmacy and growing their service income. Sara (Engagement Officer) continues to grow in her role, supporting contractors with queries of all shapes and sizes, supporting Gary with the GP CPCS rollout and having a strong lead role on the development of the new Contraceptive Pilot in the Wirral. I have only scratched the surface on the achievements of our wonderful employees, their work behind the scenes ensures the LPC continues to deliver value for money for contractors in developing and supporting pharmacy teams, growing service income and ensuring community pharmacy has a bright future in the Cheshire and Merseyside healthcare landscape.

I would also like to thank our members who contribute significantly to the work delivered by your LPC. A special thank you as always goes to Ian Cubbin and Stephen Thomas who continue to represent our views at PSNC, improving the influence we have at national level. Stephen has been a member of the RSG, and this has meant a further significant commitment in terms of additional time to ensure that the future of pharmacy representation is taken seriously.

During the year there were a few changes to committee membership:

- Katrina Worthington went on maternity leave in May 2021 and was replaced by Paul Barry
- Lee Williams (Independent Contractor) was replaced by Jack Eckersley in December 2021
- Nadia Ali (CCA) was replaced by Jemma Grossman in March 2022

Due to the continuing pandemic, committee meetings continued to be held virtually but since July 2021 we have increasingly been able to reintroduce met face-to-face meetings. We have welcomed several guests to our meeting, including:

- James Wood, PSNC Director of Contractor and LPC Support who introduced himself to the committee and explained this new role at PSNC
- Paul Charnley, Digital Lead, Cheshire and Merseyside Health and Care Partnership who explained the Wirral Patient Care Record Pilot, a project connecting community pharmacies into the share record arrangements
- Jackie Bene, Chief Officer, Cheshire and Merseyside Health and Care Partnership talked about Integrated ICS Development, Transformation Bids and Community Pharmacy
- Tee Weinronk, Wirral Independent Pharmacy Contractor attended to share her experience having been involved in the Wirral Patient Care Record Pilot
- Nick Thayer, DPharm Student at Keele University gave an update on Medicines Optimisation in Care Homes (MOCH), a joint project between Cheshire & Wirral Partnership NHS Foundation Trust, CPCW and Keele University
- Adam Jones, Partnership Manager, One You Cheshire East updated members on Reed Wellbeing and One You Cheshire East
- Steve Mosely, Metaphor Development updated members on the HEE Workforce Development work
- Helen Bromley, Consultant in Public Health - Cheshire West and Chester Council joined the meeting to talk about the Place Plan

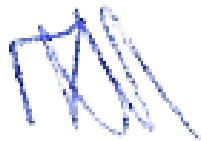
A huge thank you must finally go to our contractors and pharmacy teams who continue to deliver an amazing, ever-expanding service to our patients no matter how challenging the circumstances. You play a massive role in your community and your hard work and dedication is never underestimated.

As always, we face into another challenging year for community pharmacy and your LPC will continue to represent our contractors to the best of its ability. Community Pharmacy Cheshire and Wirral will press for all of your voices to be heard and to deliver a successful future.

We are here to support you in the further challenges of Year Four of our five year deal, and to ensure we continue to build on the solid reputation we have on the regional healthcare footprint.

With the correct investment and strategy, I truly believe that community pharmacy can help ease NHS pressures and support more patients in improving their health outcomes.

Kind regards



Dane Stratton-Powell
Chairman

Employee Report

Context of the year

It has been important in the last few annual reports to recognise the context under which the year has progressed to set the historical nature of this report appropriately. Our contractors and their teams continue to make us immensely proud with their stoic approach to the work and demands placed upon them as the patience, tolerance and behaviour of the public they served were challenged by the situations in which they found themselves. Thank you for your continued dedication and hard work.

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The situation around Covid-19 fluctuated throughout the year with a winter peak and first relaxation and then reintroduction of the mandatory face coverings regulations as we approached the winter period. Vaccination was a challenge and the LPC team worked with all the various places in the system to ensure pharmacy teams who needed vaccination appointments had them available at the earliest opportunity.

The struggle to make government recognise, and then meet our increased costs- incurred throughout Covid continued into this year and was finally agreed and the claim process put in place on the 28 June 2021. A 6-week window to claim began on the 5 July 2021 to allow settlement to link with the start of the repayment of the advanced monies. The result was that significantly higher sums were repaid than the government had initially acknowledged were incurred.

There were immense workforce pressures through the year, and a joint statement was made from the national bodies AIM, CCA, NPA and PSNC in December to support people understanding the struggles of our workforce.

The pharmacy advice audit was carried out in January, February and March, we eagerly await the results.

People

After a year of change in 2020/21 this year saw our team largely stable after Sara Davies joined us as Engagement Officer in the March just before the start of the year and Gary Pickering joined us in April 2021.

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The team work well together, and all have unique strengths that throughout the year we have been able to benefit from and focus appropriately.

Community Pharmacy Contractual Framework (CPCF) Developments

We had several changes to the CPCF through the year:

- The NHS community pharmacy C-19 lateral flow device distribution service (Pharmacy Collect) went live in April. The vast majority of our contractors were live (over 90%) by the end of April.
- CPCS IT changes were planned to happen from October originally but then pushed back to March – this saw the introduction of ‘provider pays’ where a contractor can choose the system that best works for their own workflow and other systems and referrals via 111 will arrive via that declared route.
- The flu vaccination service was expanded once more to include more cohorts: 50–64-year-olds and frontline primary care staff.
- The New Medicines Service (NMS) was also expanded with an additional 13 conditions added, more flexibility in how it can be delivered and to whom; as well as a provision for catch up provisions for those who had received eligible medicines during the peak pandemic period.
- The new Hypertension Case-Finding Service commenced via a soft launch in October, however with the expectation that many contractors would wait until after the Christmas period to realistically start.

We put a significant amount of resource (alongside monies made available by NHS E&I) into building up the referrals from General Practice into the Community Pharmacist Consultation Service. This has seen Gary recruiting, inducting, and training practice teams and supporting them through the launch whilst Sara liaises with the pharmacies around those practices to ensure they are fully aware of the dates, and expectations of referrals arriving.

We are country-leading in the volume of referrals received – 106 surgeries have taken up our training offer and have generated 9,104 referrals. We have worked tirelessly with both practices and contractors struggling with the workforce pressures to ensure that focus remains on patients referred through this route.

LPC News & Systems

We had a couple of significant pieces of work this year – our website upgrade and our rebranded logo. The website upgrade was far less simple than imagined, and I must recognise Alison's tenacity and attention to detail which has meant we have arrived with an almost seamless transition, a site to be proud of which was timed perfectly with the logo launch. The ongoing rebrand of documents that remain of use continued throughout the year.

We also invested in some IT equipment to allow hybrid meetings to occur and for the first face to face LPC meeting, Adam our CEO got to test the technology out as he had to join remotely due to a self-isolation situation.

Our contractor updates continued to help summarise things and provide a different avenue to help our contractors stay abreast of changes, challenges, and other ways of accessing valuable support – we expanded them from our field manager meetings on zoom to a broader contractor update on YouTube and later in the year also broadcast as a podcast to maximise the accessibility for your teams.

The Review Steer Group (RSG) worked with contractors, PSNC and LPCs to develop recommendations following the Wright review of pharmacy representation in England.

Both PSNC elections and LPC elections were delayed allowing the RSG to complete its important work around contractor representation and support including the structure of both PSNC and the LPCs

Contractor Support

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Restrictions were removed as we progressed through the year with the Covid-19 SOP for community pharmacy withdrawn in July and the flexible provision of services first extended but ultimately removed on the 30 September 2021. The Community Pharmacy Assurance Framework (CPAF) monitoring cycle returned also, and we stood up our mechanisms for helping make contractors aware and chasing those who had not submitted towards the end of the window.

Full contractual requirements came back in for all primary care contractors-this caused some disciplines more difficulties than others - with Pharmacy already largely meeting them.

Work for the review of Pharmaceutical Needs Assessments (PNAs) that were delayed last year continued. All 4 of our Local Authorities engaged well and we were able to help them through the process as they sent their draft documents out for consultation. The contractor response to the survey was superb – all bar 1 of the contractors in the patch responded to the survey which gives the Health & Wellbeing Boards a huge confidence in the results.

The new Pharmacy Quality Scheme brought a number of challenges with particular intervention necessary helping contractors understand the requirements around the New Medicines Service delivery to meet the gateway criteria and PCN Lead returns.

Linked with this, as an LPC we expressed our view strongly to PSNC around the role and funding of PCN leads; the desire for meaningful involvement and engagement within PCNs funded from outside of the CPCF rather than the very limited role funded within the CPCF and this was acknowledged with assurance that our message had been heard.

Throughout the year, our work with other local representative committees and commissioners on conflict management was crucial to maintain relationships. Many contractors across all disciplines struggled at times to find their way through the regulations and landscape Covid-19 brought us, and our existing good relationships helped us to quickly mediate and resolve any difficulties that presented themselves to us by sharing positions, as well as professional and contractual contexts across these boundaries.

Suzanne worked closely in this space with our colleagues in the Cheshire LMC to deliver a brilliant sequence of joint events for our PCN leads and the PCN Clinical Directors to promote better working relationships.

Commissioner Relationships

Through last year, a lot of work was carried out adapting our services to delivery in a Covid situation and the challenges that brought to some of those services. Many services were adapted to have remote/telephony options of delivery, and these were largely continued through the year where appropriate. A lot of multi-disciplinary work was carried out, particularly across Cheshire with the approach to Covid vaccination and focusing on a truly personal response to patients encountering difficulties.

Clinical Commissioning Groups

Cheshire CCG

A lot of time was spent with the CCG on the Covid group and Flu group maximising opportunities for pharmacy contractors.

Alongside this, significant work was undertaken around eRD, repeat dispensing and assistance given to the 'proxy led' task and finish group. eRD remains a challenge in some of our dispensing doctor practices.

We worked with the CCG to continue the commissioning of MAS as the move to ICS came about and to resolve some warnings around Chloramphenicol drops in people under 2 years old, firstly pausing the PGD then re-introducing it once clarity and assurance was gained.

Warrington CCG

The palliative care service commissioned as the first community pharmacy service was tweaked with more products added and the fee increased.

Talks continue around piloting a supportive service around the polypharmacy agenda in frail patients and where community pharmacy can assist the PCN pharmacists by identifying those most needing structured medication reviews and providing data to allow effective alignment of medicines under the Electronic Repeat Dispensing service. This work firstly paused due to covid and then to staff changes at the CCG and we are resurrecting it in 2022-23.

Wirral CCG

Discussions continued around the sore throat addition to the Pharmacy First service, however these were delayed upon the news and subsequent introduction of a new national antimicrobial stewardship assessment.

The dermatology expansion remains in planning phase; however, a funding gap means it will not be progressed until 2022-23. The work is around 'Acute flare ups of long-term skin conditions and part of the Healthy Wirral workstream.

We have made representations to the CCG around the palliative care service and asked for fee rises in line with inflation since the last review. We await their response.

Local Authorities

Cheshire East

We worked with Cheshire East ahead of the Pharmacy Collect programme to target those people who needed a bit more help managing their test with the pharmacies also managing the reading of the results and communication ongoing from there.

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Work with the swab squad teams meant that pharmacies could easily signpost patients to these sites if they did not have LFT kits.

We also worked tirelessly with the council on the ongoing vaccination and Public Health offer that could be provided by pharmacy on the patch.

Cheshire West and Chester (CWAC)

Work with the swab squad teams meant that pharmacies could easily signpost patients to these sites if they did not have LFT kits.

Warrington

Warrington contractors offering the supervised consumption and needle exchange service were supported by remote provision of training for the first time. We offered our experience of running such online events to the council and delivered the events in partnership with their substance abuse partners.

Wirral

The situation where we worked on the Wirral alongside the council and Wirral Ways to Recovery (WWtR) team to bid for monies supporting further work from the government's ADDER program (which stands for Addiction, Diversion, Disruption, Enforcement and Recovery) was successful. We are currently in negotiations to bring about a Naloxone supply service, gain extra support in communication between pharmacies and clinical staff in the programme office and bringing WWtR staff into pharmacies shared spaces where there are

closer links to service users. Along with this will be a properly funded pilot to look after people undergoing addiction therapy more wholly that we hope will influence work nationally.

We worked alongside Wirral's Sexual Health service, expressing interest in being a pilot area for the Oral Contraception Management Service and were successful in the bid. Up to 61 pharmacies in 3 of our PCNs on the Wirral will get the opportunity in 2022-23 to deliver this pilot service and shape it as part of the Pharmacy Integration Fund.

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NHS England & Improvement Cheshire & Merseyside

Our close relationship with the local NHS E&I regional team continued throughout the year. We continued the weekly update meetings to enable the whole region to be agile to changing situations, rules, regulations, and guidance. This was recognised and we were able to work in partnership to deliver webinars across Cheshire & Merseyside for pertinent topics and to offer jointly funded support for implementation for some of the services they commission (eg GP-CPCS, DMS, Hypertension). This was recognised as the gold standard and many areas look with envy at the relationships here that continue to thrive to mutual benefit.

The Covid-19 Vaccination service was delivered by many contractors and pharmacy indeed was the pillar vaccinating the most patients towards the end of the booster period which is truly spectacular.

Our Blood Pressure Pilot was incredibly useful to setting both contractors and local systems up ahead of the hypertension case finding service. We used this relationship to discuss the GP referral into the Hypertension case finding service and gain a proposal at the CVD board for the cohorts that may be possible to be locally agreed. This also meant that the EMIS referral module (and PharmRefer once development work has been carried out) was also commissioned for use and our contractors had access to the PharmOutcomes data entry template at the earliest opportunity.

Health Education England

We were successful in a bid to produce a piece of work looking at pharmacy workforce needs, and the future support needed. We commissioned a pharmacy L&D company to project manage this work, but Adam remained with project oversight. The report is a longer-term piece, and we look forward to its conclusion and report in the autumn of 2022.

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Cheshire & Merseyside Health & Care Partnership (HCP)

Integrated Care systems really gained momentum as we were working throughout the year to the target of formation for the 1 April 2022. This was pushed back 3 months to the 1 July 2022, however on the journey we learned that there were plans to delegate the responsibility for the commissioning of primary care services (including pharmaceutical services) to ICS by 1 April 2023, with some areas piloting this work from 2022 onwards. Cheshire & Merseyside was designated as one of those pilot areas early on due to the excellent relationships, involvement and competence of the local team. We also fed into several national forums supporting ICS development – one run by PSNC (focused on contractual matters), one by RPS (focused on the Fuller stocktake) and one by the NPA (focusing on practical engagement matters)

The Primary Care Provider Leadership Forum continued to thrive and when the draft constitutions of the ICSs were published, our area was the only ICS in the country that had the ambition of having two seats at the main ICB for primary care (1 GP which is mandated, and 1 place that may not be a GP – ambition to appoint a non-GP if one is appropriate). It took significant work influencing and demonstrating to the system of the competence to do this.

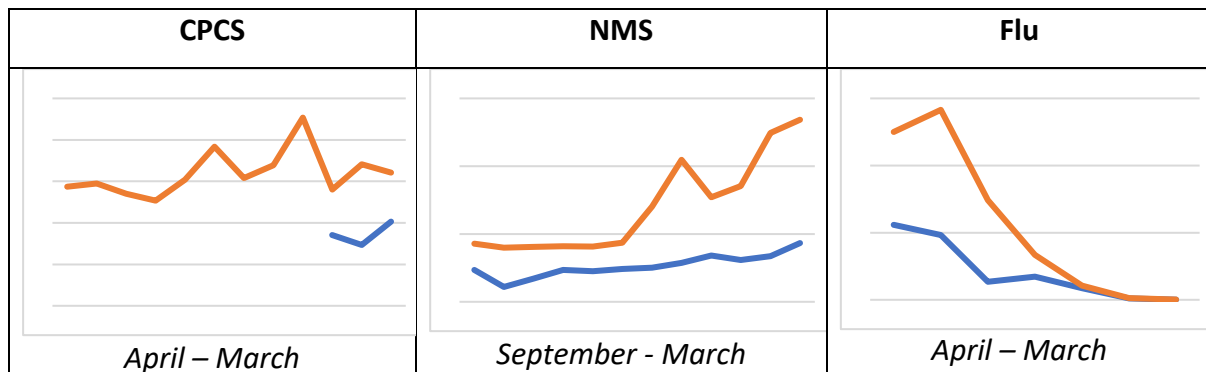
Adam deputised several times throughout the year on the current Health & Care Partnership board, ensuring pharmacy's visibility at all levels of the system.

As the momentum towards the ICS continues to build at the end of the year, we are confident that we are in a good place to ensure that our contractors' views are heard and potential utilised as this work moves forward.

National Services

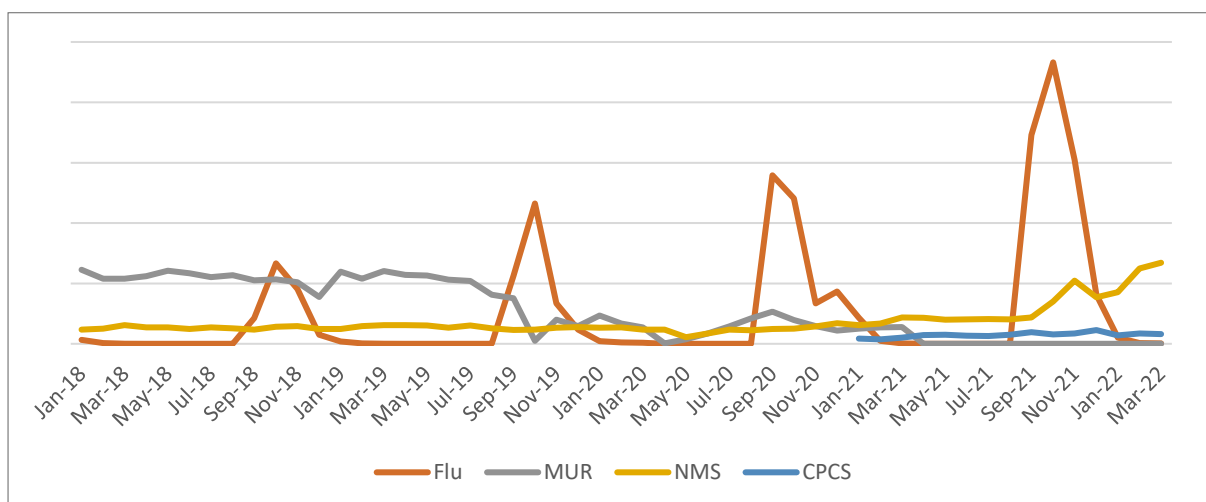
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This year contractors saw an overall increase in their national service income of 62% compared to 2020/21; whilst community pharmacy saw the decommissioning of the MUR service, the income from this has been more than replaced with the embedding of the CPCS service and a massive 165% increase in the NMS income and 67% increase in the flu income.



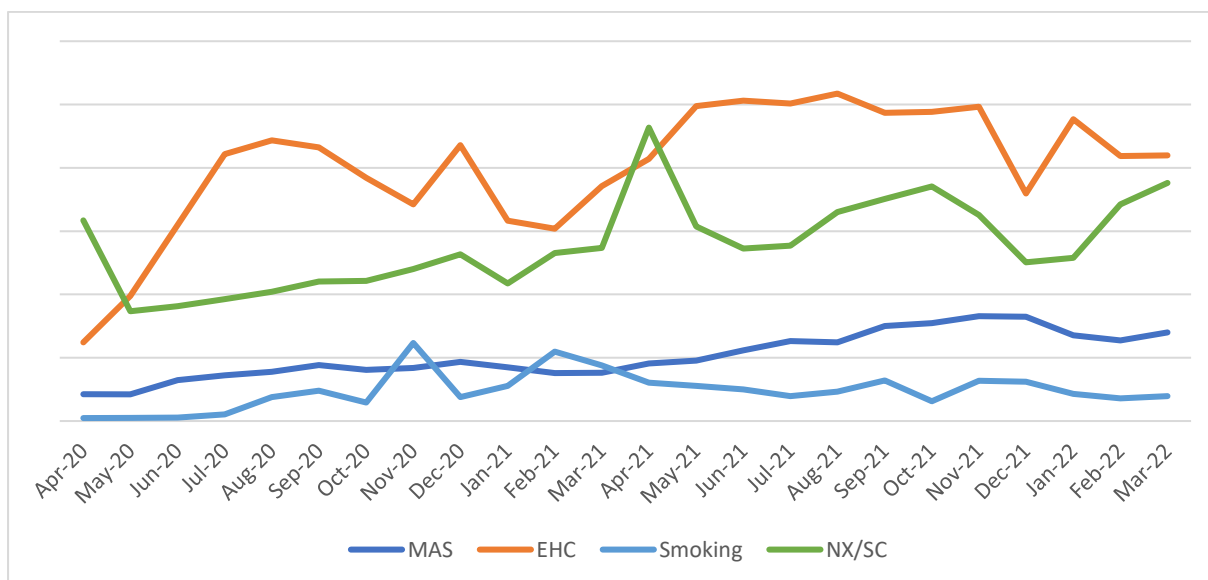
Key: Blue Line = 2020/2021, Orange Line = 2021/2022

The graph below demonstrates the trends over several years, with flu service delivery clearly increasing year on year and an upward trend for NMS.



Local Services

This year contractors saw an overall increase in their local service income of 37% compared to 2020/21, with all the main services showing a recovery after the COVID pandemic.



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Adam Irvine
Chief Executive Officer

Suzanne Austin
Pharmacy Services Managers

Gary Pickering

Alison Williams
Business Support Officer

Sara Davies
Engagement Officer

LPC MEMBER AND LPC MEETING ATTENDANCE – 1 APRIL 2021 TO 31 MARCH 2022

Member	Address	Sector	Attendance
Dane Stratton-Powell Chairman	Lloyds Pharmacy c/o Woburn Road Warrington WA2 8UH	CCA	7 of 7 meetings
Stuart Dudley Vice Chairman	Treetops Pharmacy 49 Bridle Road Eastham CH62 6EE	Independent	6 of 7 meetings
Ian Cubbin Treasurer	Galen Pharmacy 10-12 Liverpool Road Neston L64 9TZ	Independent	6 of 7 meetings
Nadia Ali*	L Rowland & Co (Retail) Ltd 299 Chester Road Hartford CW8 1QL	CCA	2 of 3 meetings
Paul Barry*	Well Pharmacy Merchants Warehouse 21 Castle Street Manchester M3 4LZ	CCA	5 of 6 meetings
Daniel Byatt	Cohens Chemist 46-48 Charlotte Street Macclesfield SK11 6JB	AIMp	7 of 7 meetings
David Crosbie	Morrisons Pharmacy Station Road Nantwich CW5 5SP	CCA	5 of 7 meetings
Jack Eckersley	Rydale Pharmacy 18 North Street Coppenhall CW1 4NL	Independent	1 of 2 meetings
Nick Goodwin*	Vicars Cross Pharmacy 58 Green Lane Vicars Cross Chester CH3 5LB	Independent	2 of 5 meetings
Jemma Grossman	Rowlands Pharmacy 154 Allport Road Bromborough CH62 6BB	CCA	1 of 1 meeting
Andrew Hodgson	Andrew's Pharmacy 71 Kennedy Avenue Macclesfield SK10 3DE	Independent	4 of 7 meetings
Heather Johnson	Lloyds Pharmacy 35 Grange Road West Kirby CH48 4DZ	CCA	7 of 7 meetings
Rachel Jones	Superdrug Pharmacy 39-41 High Street Congleton CW12 1AU	CCA	5 of 7 meetings
Wesley Jones	Boots D90 EF08 1 Thane Road Nottingham NG90 1BS	CCA	6 of 7 meetings

Anna Mir	Boots D90 EF08 1 Thane Road Nottingham NG90 1BS	CCA	6 of 7 meetings
Stephen Thomas	L Rowland & Co (Retail) Ltd Rivington Road Runcorn WA7 3DJ	CCA	7 of 7 meetings
Lee Williams*	The Prescription Service 16 Princess Street Knutsford WA16 6BU	Independent	2 of 4 meetings
Katrina Worthington	Well Pharmacy Merchants Warehouse 21 Castle Street Manchester M3 4LZ	CCA	0 of 1 meeting

* No longer a member of CPCW

CCA - Company Chemists Association

AIMp - The Association of Independent Multiple Pharmacies

COMMUNITY PHARMACY CHESHIRE AND WIRRAL LOCAL PHARMACEUTICAL COMMITTEE
DRAFT RECEIPTS AND PAYMENTS ACCOUNT
FOR THE YEAR ENDED 31ST MARCH 2022

	2022		2021	
	£	£	£	£
RECEIPTS				
Contractor Levies	269,179		385,713	
Service Fees	24,954		13,293	
Palliative Care Support	-		986	
NHSE GPCPS Support Funds	6,768			
MOCH Publication Contribution	900			
Bank Interest	899		1,245	
		302,700		401,237
PAYMENTS				
Wages	202,651		196,501	
Employees' Expenses	2,854		1,019	
Office Expenses	10,091		9,606	
Meeting Expenses	1,635		176	
Members' Expenses	12,761		13,312	
Chairman Expenses	1,968		2,748	
Recruitment and Consultancy Fees			405	
P S N C Levy	83,767		82,823	
Accountancy and Payroll Services	780		720	
Corporation Tax	411			
		316,917		307,310
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		(14,217)		93,927
Bank balances at 31st March 2021		241,308		147,381
Bank balances at 31st March 2022		227,091		241,308
STATEMENT OF ASSETS AT 31ST MARCH 2021				
Lloyds TSB Current Account		167,711		182,909
Close Brothers Treasury		86,804		85,905
Less Creditors:				
Estates	11,677		11,677	
PCT Inhaler Training Funds	5,835		5,835	
Warrington Alcohol Pilot	4,500		4,500	
EPS Training Funds	240		240	
CWC PH Funds	5,000		5,000	
		(27,252)		(27,252)
Corporation Tax 2022 Liability		(171)		(253)
		227,091		241,308

Dr Ian Cubbin
Treasurer

I. J. Cubbin

**REGIONAL ACCOUNT
RECEIPTS AND PAYMENTS ACCOUNT
FOR THE YEAR ENDED 31ST MARCH 2022**

	2022		2021	
	£	£	£	£
RECEIPTS				
HEE Quality Champion			177	
PharmOutcomes Stakeholder Sub-Licence	86,538		93,442	
Sponsorship	450		700	
Regional Account and MALPS LPC Contribution			75	
NHSE Cheshire & Merseyside (Training)			5,130	
		86,988		99,524
PAYMENTS				
Meeting Expenses			53	
PharmOutcomes Licence	56,528		53,960	
PharmOutcomes LPC Allocation	39,982		20,020	
BHF Service			200	
Regional Administration			335	
Regional Online Training			5,131	
Accountancy and Payroll Services	360		360	
PRAG - Attendance			177	
		96,870		80,235
NET RECEIPTS/(PAYMENTS) FOR THE YEAR		(9,883)		19,289
Bank balances at 31st March 2021		50,751		31,462
Bank balances at 31st March 2022		40,868		50,751
STATEMENT OF ASSETS AT 31ST MARCH 2022				
Lloyds Mersey Pharmaceutical Region Account		201,397		124,115
Less Creditors:				
NHSE Cheshire & Merseyside (Training)	5,184		11,854	
Health Education England	3,635		3,635	
British Heart Foundation	16,950		17,875	
HEE Workforce Development	28,560		30,000	
NHSE&I PCN Development	10,000		10,000	
NHSE GPCPCS Support funds	86,200			
NHS Hypertension support funds	10,000			
	- 160,529		- 73,364	
		40,868		50,751

Dr Ian Cubbin
Treasurer

I. J. Cubbin

COMMUNITY PHARMACY CHESHIRE AND WIRRAL LOCAL PHARMACEUTICAL COMMITTEE

ACCOUNTANTS' REPORT

FOR THE YEAR ENDED 31ST MARCH 2022

In accordance with your instructions, we have compiled these unaudited financial statements in order to assist you to fulfil your statutory responsibilities, from the accounting records and information and explanations supplied to us.

1 Abbots Quay
Monks Ferry
Birkenhead
Wirral
CH41 5LH

Haines Watts Wirral Limited
Chartered Accountants

Haines Watts Wirral Limited
Chartered Accountants