



Community Pharmacy Sandwell is the operating name  
of Sandwell Local Pharmaceutical Committee

# **Annual Report and Financial Statement 2022–23**

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## **Chairman's Report (Year Ending March 2023)**

2022/23 has been one of transition and extremely challenging for pharmacy contractors. Pharmaceutical services seem very different after just a few of years of the COVID-19 pandemic and contractors are continuing to face operational challenges as the healthcare landscape evolves around us.

The Black Country Integrated Care Systems (ICS) has become a statutory body, and the committee has worked hard in preparation of these changes. We have monitored the new commissioning arrangements of pharmacy enhanced and local services, as they evolve from NHSE and the CCGs to ICBs. These will be in place from 1<sup>st</sup> July 2023. However, despite the tremendous work by the LPC, uncertainty for local and national services still lingers and the committee will be doing its utmost to safeguard the contractor's access to relevant services.

Increasing workload from new advanced services and the growth in prescription items has increased pressure on our pharmacy teams further to unprecedented levels. Rising costs in energy, locum rates and their availability issues, and staff costs have simply exacerbated the situation.

Your team at the LPC have worked diligently to support you, the contractors, in trying to overcome these challenges and it is important that recognition of the contribution is mentioned in this report.

In addition to this transition, it was the year that PSNC moved forward with many of the Wright review recommendations through the Transformation of Pharmacy Representation (TAPR) programme. Community Pharmacy Sandwell considered the options open to it and proposed that we retained our current footprint and entered a formal collaborative arrangement with our other LPCs in the Black Country. With your approval, and after numerous meetings we agreed to a type of federated model of LPCs in Walsall, Wolverhampton and Dudley, leaving the foundation to merge and create Community Pharmacy Black Country within the next two years. This allows the merger to become co-terminus with the BC ICB.

2022/2033 has been once again extremely challenging to our pharmacy contractors. Rising costs in energy, locum rates, staff costs, increasing workload from new advanced services and the growth in prescription items has increased pressure on our pharmacy teams further to unprecedented levels. Despite our best efforts, and those of other LPCs around the country, to highlight these issues, the PSNC has been unable to convince the government of the inadequacy of the global sum and no increase in funding was secured during the current year.

This is the last annual report I will write as Chair of Sandwell LPC (CP Sandwell) as I stepped down from the role at the end of June '23 after over 20 years in the role. I have enjoyed my role immensely and feel honoured to have had such good support from my fellow committee members for so long. I have worked with many hard-working individuals, independent contractors, CCA, Co-op and AIM committee members, who have been committed to representing the best interests of all our contractor representatives. I would like to take this opportunity to thank everyone who has supported me as the Chair of the committee over the years, by sharing their knowledge and experience for the benefit of the contractors. My most special thanks to Ali Din, our long-serving Chief Officer who also stepped down from the position he dominated during my tenure. He had been the backbone to ensure that relevant information for me to 'keep the finger on the pulse' was available to provide information for the committee to make the decisions for the overall benefit of the contractors in Sandwell. Thank you, my friend!!

I hand the baton over to Pete Shergill who has served the committee well for more years than I can remember. He will be ably supported by the new Chief Officer, Peter Prokopa, who is keen to work with other members of the committee. It has been a privilege to serve the contractors within Community Pharmacy Sandwell. I wish you all the best for the future.

I have tried my best to serve your interests and now I look forward to seeing many of you at the AGM.

*Dev Dalvair*

*November 2023*

## **Chief Officer's Report**

### **Membership & Working of The Committee**

The lifetime of the current Committee was extended at a special general meeting held on 28<sup>th</sup> February 2023 until the new committee could take over on 1<sup>st</sup> July 2023.

The special general meeting also paved the way for change of the name to Community Pharmacy Sandwell and to mirror the current footprint until the new Committee can forge a merger pathway with other Black Country LPCs but reduce the committee size to the maximum of eight to adjust for top slicing of the budget to the PSNC and to provide greater focus for integration with other Black Country LPCs

This was a year that also saw some major changes to the committee, which accepted the resignations of Jacki Chang of Sandwell Pharmacy and Nadeem Nasrallah of Tividale Pharmacy. We also said goodbye to Ciaran McSorley, our dedicated Vice Chairman when he sold Ingram's Chemist. I am pleased to welcome Rebecca Butterworth as the new Vice Chair.

Lawrence Hancox also relinquished his position as CCA representative when his Lloyds Branch was sold but his services as the LPC Treasurer were retained, and I am grateful for his continued support in that role.

The other independent Contractors (to the end of June) were Dev Dalvair, Ali Din, Bhupinder Malhi and Lynn O'Connor.

We had two CCA representatives from Boots pharmacy, Rebecaa Butterworth and Khuram Ahmed. Mr. Mamun Miah from Well pharmacy also resigned from the committee in Spring 2023.

We said goodbye to Manraj Mander from Lloyds and Kyle Tierney from Boots served for brief period, both as CCA representatives.

The committee met nine times during the year up to April 2023. Most of those meetings were in the evenings to minimise expense.

A wide variety of business is discussed by the full committee membership including national consultations such as pharmacy review and new applications or relocations. As well as approval & input into the Pharmaceutical Needs Assessment, an evening meeting to inform contractors of RSG (Review Steering Group) proposal for changes to pharmacy contractor representation and its impact locally and nationally.

The LPC continued to meet and collaborate with other LPCs in the Midlands and for part of the year represented the West Midlands region at National forums (PLOT - PSNC & LPC Operational Team) meetings. We made representations concerning drug shortages and the uncertainty of funding around some molecules as well as low level of payments around price concessions. We were actively engaged in the Community pharmacy representation review and shape of future LPCs with our Black Country LPCs to agree a joint pathway which gradually brings the 4 LPCs to closer working. Haleema Sadia joined the team as Service Development officer to help with the implementation of services such as GPCPCS, Hypertension case finding service.

We also regularly received representation from the ICB, from the Head of Medicine management, Jonathan Boyd who attended several of our meetings.

In addition to these meetings, the Chairman and Chief officer met on several occasions to plan and process the Committee's ordinary business. The Chairman and Chief officer meet with other regional LPCs of Midlands area who now comprise Community Pharmacy Midlands (CPM) where we discussed a wide variety of business which effects our contractors including the LPC provider company CHS, communications around PCN and liaising with NHS England. The Chief Officer also attended some ICS level meetings with other colleagues from the pharmacy profession of the Black Country which form the Pharmacy Leadership Group (PLG) and Integrated Pharmacy & Medicine Optimisation (IPMO) group to look at the transformation agenda, whole restructuring of the local health economy.

The committee was invited as part of primary care pharmacy subgroup to land the delegation of the contract from NHS England to the ICS and to ensure that we did not lose any services in the process. We were pleased to see Dan Attry, former Chair of Dudley LPC, take on the responsibility of Community Pharmacy Clinical Lead at ICS level and lead some initial work around the service agenda such as contraception pilot service and independent prescriber pathfinder sites.

The Committee agreed to facilitate the work of PCN leads and allocated a budget for meaningful dialogue with practices over and above the National Tariff once the national funding was exhausted.

Both the Chair and the Chief Officer attended regional PSNC meetings as well as the national PSNC meeting to represent the voice of Sandwell Pharmacy contractors to look at areas of mutual interest and to map out the implications for the LPC Structure in the future.

### **Working With the Commissioners**

The Committee continues to enjoy a very good working relationship with our "traditional" contacts within the ICS, including the Medicines Management.

Jonathon Boyd, in his role as the Head of Medicine Management LPC meetings, Lisa Maxfield, in her role as Senior Commissioning Manager for primary care services and PCN configuration has been supportive and presented on PCN geography and took questions from the members.

Public Health budgets are being cut and this feeds through down the chain into Public Health services and the commissioning decisions. Sandwell Public Health invariably follows a single provider model and pharmacy is then subcontracting to these organisations.

### **Pharmacy First**

This service was commissioned by SWBCCG as part of Black country STP area service. It is open to all Sandwell Pharmacies with a consultation area. Sandwell performs well in the delivery of the service.

### **Urgent Eye Conditions**

This is a service previously commissioned by the SWB CCG where pharmacies are presented with a voucher from opticians to supply P or POM product on the formulary and log the activity through Pharmoutcomes.

### **Supervised Consumption**

This service is commissioned from Cranstoun and was remunerated at a higher rate within Sandwell than in other areas (£2.55 for methadone and £3.40 for buprenorphine) following

extensive negotiations. Cranstoun claim that due to budgetary pressures they have to bring the fees down to £2 in line with other peer LPC areas. We have advised contractors that the LPC does not endorse the service fees level but in the interest of the patients, pharmacy should continue to serve but reflect on whether they should be supporting further patients under supervised consumption given the contractual obligations and workload.

### **Needle Exchange**

This service is also commissioned by Cranstoun, and it continues to be provided by a small number of pharmacies strategically placed around the borough.

### **Extended Care Tier 1, Tier 2, Tier 3 Services**

These are essentially PGD services such as UTI antibiotic supply requiring greater use of Pharmacy team skills, are contracted through NHS England.

### **Depression NMS**

This is a small pilot service designed to inform future commissioning of the service into the NMS bundle and inclusion as addition to the NHS. It was open to a couple of PCNs within Sandwell.

### **Emergency Hormonal Contraception (EHC)**

The provision of emergency contraception is being commissioned by Sandwell Hospital Trust on behalf of the Public Health Sandwell, approximately 30 pharmacies spread across the geography of Sandwell are delivering the service. The commissioners are satisfied with the footprint, activity and the engagement with the clients including provision of training and the service is currently only open where there is no provision.

### **Palliative Care**

A small number of Sandwell pharmacies are involved in the provision of this service which is commissioned by the CCG through CSU. The commissioning criteria was based around the PACT data.

### **Pharmaceutical Needs Assessment (PNA)**

Sandwell LPC in collaboration with public health delivered the delayed PNA which was published in summer 2023. PNA concluded that there are sufficient pharmacies serving the Sandwell population with good accessibility via walking or public transport. There is good availability of all advanced services across the borough. In general, the wider services offered by pharmacists such as offering lifestyle advice should be promoted to raise awareness of the wider roles of pharmacists in supporting residents' health needs. This PNA finds that there are no current pharmaceutical needs that cannot be met by the existing network of community pharmacies.

### **Overview**

Nationally, as we come to the end of the fixed contract over five years, there was no annual uplift to the global sum, and this was disappointing as Pharmacy is under severe financial pressure. We appear to be nearly £1 billion short of where the PSNC(CPE) considered where we should be and if pharmacy had been treated on equal footings as other NHS providers, then there would still have been a shortfall of half a billion.

The nature of our contract and pressures within pharmacy of increasing volume means that we continue to pile on more pressure on pharmacy teams; higher workforce cost, higher inflationary pressures on utilities & rentals are well known to all contractors. All this led to what I think is a significant event and that is collapse or exit of the second biggest multiple from community pharmacy under the weight of these pressure and there does not seem to be any relief anytime soon.

We are very much beholden to the government agenda on the future of pharmacy. There is some light that maybe the government is beginning to see Pharmacy as one of the answers to the primary care recovery plan and injection of significant funding in the Pharmacy First Service.

The ICS will take over the pharmacy contracts from NHS England and work is under way to land this from April 2023.

Professor David Wright's review into pharmacy representation would have major implications for the LPC. This would mean that there will need to be a merger of the 4 LPCs in the near future and we need fresh talent to take us there and beyond. Therefore, I had come to a conclusion that the new role and its demand would need a new person and I was pleased that we were able to secure the future of the LPC in the safe pair of hands of Peter Prokopa who took over my role as Chief Officer from July; I wish him the very best and my wholehearted support.

Looking ahead I share the view that pharmacy pressures are at such level that no contractor large or small can continue to absorb the cost without extra funding and we desperately need a new contract which recognises the volume of work, our costs and that there no more efficiencies to leverage from the sector – we can't continue to absorb extra services at expense of dispensing income in other words deliver more for the same global sum. I am optimistic that the reset should happen sooner rather than later.

I wish to take the opportunity to thank my committee colleagues past and present – especially our Chairman Dev Dalvair for his mentoring, Business Support Officer Peter Shergill, Lawrence Hancox as Treasurer and Ciaran McSorley as Vice Chairman as well as colleagues past and present from the committee and the NHS commissioners – and lastly, the genuine warmth and confidence that I received from all of you, our Sandwell contractors.

*Ali Din*

*November 2023*

## **Treasurer's Report**

The Treasurer report covers the accounts of Community Pharmacy Sandwell for the period April 1<sup>st</sup> 2022 to March 31<sup>st</sup> 2023. The accounts have been compiled and approved by the accountants Patara + Co.

I recognise that this has been another difficult year for contractors; independents and multiples alike. We continue to have a mixture of virtual evening meetings and face to face daytime meetings and I scrutinise every penny spent of contractor's money. As already outlined, we have seen some changes to the committee over the past year. I would like to thank Dev Dalvair for his work as chairman and Ali Din for his work as Chief Officer. I would also like to welcome Peter Prokopa as the new Chief Officer, Pete Shergill as the new Chair and Rebecca Butterworth as Vice Chair of the committee. They have all been very generous in their support to me as Treasurer.

I am no longer a committee member since Lloydspharmacy sold my branch and I lost the right to sit on the committee as a CCA rep. The committee has asked me to stay on as Treasurer to take care of all financial matters until the proposed merger of the LPC's takes place to form the new Community Pharmacy Black Country; this ensures continuity and consistency as we transition

In reference to the late publication of the Financial Statement, the Committee wishes to apologise for the delay, however unanimously agreed that it was preferable to have the information correct before presenting it to contractors for approval. CPE have been kept informed of progress.

The reason for the delay is as follows; the accountants challenged the fact that the loan to the provider company (Central Health Solutions) had been fully repaid in a previous year; I had to provide evidence from CHS before Patara would produce the final version of the accounts.

The current assets figure is inflated because we still have an NHSE grant of just over £52,000 which can only be used for service implementation and training needs for Sandwell contractors. The current business funds in the Committee's bank account are just over £32,000 which is in line with the 6 months reserves as recommended by CPE. I would have preferred the figures to be separated but if the accounts had taken much longer it was likely that we would be having the AGM at Christmas.

The latest headlines in the pharmaceutical press show the exit of Lloydspharmacy from the high street having been the second largest multiple in the UK as recently as March. The Chancellor Jeremy Hunt has announced that the national living wage will rise by 9.8% and many pharmacy contractors have warned that this will be a "death blow" to the sector. I am encouraged that so many pharmacists have bought the Lloyds pharmacies to become new Independent Contractors, or to add to their existing portfolios. I wish them every success and hope the staff and patients are in safe hands.

Please find a copy of the Financial Statement for 2022-23 in Appendix A.

*Lawrence Hancox*

*November 2023*