

North Staffs & Stoke

PHARMACY COMMITTEE



Annual Report 2017-2018



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REPORT FROM THE CHAIR – NITA ALLEN | ONE

Welcome to your copy of the North Staffs & Stoke Pharmacy Committee Annual Report which details the committee's work over the last 12 months. I hope you will manage to take time to read about the developments and achievements the committee has made over the last year.

This has been the fourth and final year of the current committee. We say goodbye to some of our dedicated committee members that have served for several years Mike Connolly, Sue Pitt and Ernie Amoako. We have also voted to reduce the size of the committee from 13 members to 11. This will enable us to use contractor levies more productively by employing a part time service development officer. Simon Hay continues to be employed by the committee to support contractors to deliver key outcomes including quality payment and HLP. Rebecca Norton continues to take on the role of leading social media for the committee. Over the past year we have seen an increase in followers both on twitter and Facebook and we now have a facebook page for contractors and the public. I would also like to thank the rest of the committee for their ongoing hard work and contributions to the committee meetings.

This year has been challenging for the LPC and pharmacy. Negotiations with the government have been non-existent since the judicial review and the aim is now for the PSNC to start afresh with a new CEO. Going forward it is evident that pharmacy will have to seek alternative funding streams to supplement current funding. The independent local provider company continues to seek out new opportunities for local pharmacies.

The LPC have worked tirelessly to promote community pharmacy with contractor events, social media and contact with MPs to try to engage them in our plight. We continue to work alongside neighbouring LPCs to have a stronger voice where we have common interests and also to develop more efficient ways of working. We have continued to engage with all commissioners and stakeholders to support pharmacies with local services. This year we continue to provide existing enhanced services and have successfully piloted a respiratory tract infection service and hope to have this rolled out to more pharmacies in the near future. We continue to seek out new opportunities and improvements for the benefit of contractors, patient care and the NHS.

Nita Allen

REPORT FROM CHIEF OFFICER – TANIA CORK | TWO

Well its been a tough year as funding cuts have continued to bit!

Over the last year I have visited many pharmacies in the North Staffs and Stoke area and been able to see first-hand the great service that is provided in the community even though this year has been most challenging of years for community pharmacy I have ever experienced. There have been significant disruptors to the Community Pharmacy sector in the past year, and Contractors are forced to make increasingly difficult decisions to protect their business and maintain a sustainable future, which This has had a serious impact not only on Contractors, but also their teams who are working tirelessly to survive.

Also, the lead up to the outcome of the Judicial Review decision and the appointment of a new CEO at PSNC. Funding has been the top of PSNC's agenda in 2017/18 and with no mandate to negotiate due to the JR process it has been an uncertain period of stagnation as no top-level talks between PSNC and DHSC could take place. At the start of the year we awaited the outcome of the Judicial Review. On 18 May 2017, Mr Justice Collins gave his judgment, finding against PSNC, but criticising the Department of Health's (DH) consultation process, stating that it was unfair, but not so unfair as to be unlawful. DH had failed to disclose its use of a Companies House analysis that it said showed community pharmacies have an operating margin of 15%. In June 2017 Mr Justice Collins gave permission for PSNC to appeal his judgment, stating:

'While naturally I am not persuaded that I failed in any of the respects alleged ... I recognise the real effect of the cuts on pharmacies and the apparent reliance on the 15% and the non-disclosure.'

Following this decision PSNC (and the NPA) waited for the date for the hearing, which was originally March, but then put back to May 2018.

Simon Dukes, the new CEO at PSNC, has made it clear that to move forward we need is to draw a line under the past and begin a more collaborative journey with our primary funders and move towards a benefit sharing model where the patient is at the centre of everything the NHS does.

With this in mind, the LPC has focused, again, on the strong links the committee has with NHSE (NHS England), CCG (Clinical Commissioning Groups), PHE (Public Health England) and local authority. The LPC committee also has strong links the local Area Team, who have a history of locally commissioned services. These many links and relationships I intend to maintain and build upon for next year to ensure community pharmacy in Stoke and North Staffordshire is an integral part of primary care.

The LPC has supported contractors, particularly with the Quality payments introduced in 2017. In addition, the LPC has also ensured that commissioners, patients and other stakeholders also understand the potential consequences of the cuts.

The PSNC develop a self-evaluation tool which provides LPC's a focus for development for a work plan for the year. Building on the work already achieved in previous years, the committee has reviewed their performance in line with the self-evaluation tool. We are pleased to report that the self-evaluation of the committee is on track and in some cases outstanding. The results from this self-evaluation tool can be found on the LPC's website.

Myself and the Committee will continue to work hard to engage with Local Commissioners and explore new ways of working locally to enhance the role of Community Pharmacies and ensure that Community Pharmacy is recognised and has a voice in this challenging and changing world of primary care. One way this has been recognised is by the new pilot for community pharmacy; the Pharmacy First Extended Care Service. This is to allow pharmacists to carry out more detailed examinations of patients presenting with ENT problems and for children under 2yrs with conjunctivitis. In addition, the pharmacists can treat ENT infection with antibiotic via a suite of 7 PGDs. The pilot project has been running successfully in 9 pharmacies in Staffordshire and Shropshire and the outcomes from the pilot have been very positive. The service has been evaluated by Keele university and is awaiting publication.

The LPC is specifically referred to in NHS legislation, set up to represent the interest of all local NHS Pharmacy Contractors. We would love to hear from you! Please let us know how we can help you further. What is important to you? Please contact myself.

I would like to thank all of the Committee for their dedication and hard work over the past 12 months.

REPORT FROM SIMON HAY –| THREE

Healthy Living Pharmacy (HLP)

At the end of March, the majority of contractors were HLP accredited, barring 2 pharmacies without consultation room facilities, and a few that had not yet done the required self-accreditation work. The LPC supported for accreditation was given in the form of briefings, telephone conversations, and pharmacy visits.

Whereas multiple pharmacies are more familiar with the process of evidence collection, though the help of their head offices, many independents still needed to build up their evidence to support future reaccreditation.

In addition, 1 pharmacy did receive a verification visit by the Royal Society of Public Health (RSPH), and I attended this to understand the amount of detail required in an evidence portfolio. This pharmacy was signed off by the RSPH as accredited.

Health Promotion Campaigns

Liaising with the NHS England Area Team, I was able to agree 4 directed Public Health campaigns. Although response rates from pharmacies were disappointingly low at under 40%, across North and South Staffs and Shropshire we achieved the following results :-

Title	Leaflets Distributed	Conversations Held with Patients	GP Referrals	A&E Referrals
Be Clear on Cancer - Respiratory	1900	2000	323	18
Healthy Heart	2711	2706	185	2
Antimicrobial Resistance	3036	3600	432	15
Stay Well – under 5's	2335	2601	335	5

I had agreed a schedule for 2018/19 with NHS England subject to sufficient free literature being available. Public Health England agreed to distribute literature for the Stay Well Flu Campaign but the results were haphazard, and the decision was taken that the LPC would instead direct

pharmacies to order their own unless we were confident that material would be supplied to all pharmacies.

I continue to engage Public Health England and local authority Public Health Teams in deciding campaigns (and hopefully providing future funding.)

Quality Payment Scheme (QPS)

The vast majority of pharmacies in the area claimed the full points at the November reference date. LPC support for November was again in the form of emailed briefings, telephone calls, and pharmacy visits. From feedback provided by the NHS, I was able to identify which pharmacies had submitted their QPS claim, and chase those who had not. In addition, all pharmacy's NHS Choices entries were checked, and the pharmacy contacted if there were omissions. Similarly, use of the PSNC Summary Care Record usage calculator identified pharmacies (both independents and multiples) who had still not reached levels which triggered a payment. These too were contacted.

In addition to these 3 main roles, I was also involved in helping pharmacies understand and submit their acknowledgement emails for NUMSAS, and in ensuring pharmacies were aware of local surgery business change meetings when electronic Repeat Dispensing went live.

LPC COMMITTEE AND MEETINGS

We would like to thank Newcastle Fire Station for providing a free of charge venue for LPC meetings. The committee met on 6 occasions during the year. As usual, the morning sessions start at 10am where the committee members work together on strategies, business plans, SLAs and consultations. The afternoon session is the LPC business meeting, starting at 1pm. The committee does not meet during August and December. All contractors are welcome to attend any LPC meetings as an observer and if they wish to do so please contact Tania Cork.

The Committee Membership remained relatively stable throughout 2017/18. The Committee consists of thirteen committee members, 5 Independent Contractors and 8 Company Chemist Contractors (CCA). Pharmacies are elected or appointed by contractors in accordance with the LPC Constitution. All existing and new LPC members and Officers have signed a copy of our Code of Conduct and Accountability agreement with Declarations of Interests. Members adhere to the corporate governance principles adopted by the committee. Declarations of interests are checked at the beginning of each LPC meeting. These declarations of interests can be found on the LPC website.

At the end of October 2017, the work was started to determine the make-up of North Staffs & Stoke LPC from April 1st 2018. As at 31st October 2017 there were 117 contractors across Stoke and North Staffs. In order to work to a reduced budget, the committee will reduce to 11 members from April 2018, of which 6 will be CCA nominees, 4 elected Independents and 1 Regional Multiple. The CCA were notified of their entitlement to places on the committee and the Independent pharmacy contractors were invited to submit nomination forms for the remaining places.

At the close of the allotted period 6 nominations were received, this went the committee vote for the 4 independent places.

Your LPC has continued to be active in attending regional and national PSNC events, and we have welcomed Jasbinder Heer, the PSNC representative, to our LPC meetings. Finally, LPC members and officers have attended and reported on national events such as LPC Chief Officers' and Chairs' meetings and LPC Conference in November.

A number of guests and contractor observers were invited to parts of meetings of the Committee. Attendance is indicated on the minutes published after each meeting, on the LPC website.

In line with previous years we have published individual member's expenses and attendance to the committee meetings. Please see the treasurer's statement within this annual report.

LPC BUSINESS PLAN

This year the LPC has continued to implement the ambitious work plan within our given budget. We are pleased to report that this work plan is on target. The business plan is our tool used to evaluate the committee's development and to focus on our commitment to our contractors. The business plan focuses on five main themes:

- Promote
- Improve
- Protect
- Educate
- Governance

This five-year business plan can be found on the LPC's website. <http://www.northstaffslpc.co.uk/>

The expenditure and budget as had careful monitoring by our treasurer and finance sub-committee.

QUALITY PAYMENTS FOR COMMUNITY PHARMACY | FOUR

We saw the introduction of the Quality Payment Scheme for the 2017/18 Community Pharmacy Contractual Framework; seeking to deliver a consistent approach to Community Pharmacy provision. The Quality Payment Scheme was enthusiastically embraced by all our pharmacies. Many of you have been supported through the process, posing questions and being visited by Simon Hay. It has been a great opportunity for us to develop relationships with our contractors.

Simon has been instrumental in helping contractors meet the Gateway Criteria and to claim the maximum available payment for the Quality Criteria. This role has been helped with the collaborative work between ourselves and South Staffs LPC, and especially Gill Hall. Thanks to both Simon and Gill for their efforts, the feedback received from contractors when have visited pharmacies has been extremely positive.

FLU SERVICES | FIVE

The National Flu Vaccination Service continued to be a big success with Community pharmacists in England administering **1,344,462** flu vaccinations to patients under the national NHS Flu Vaccination Service in 2017/18 (77.1% of all community pharmacies in England) signing up to deliver the service. See national Flu Vaccination data for 2017-18 [here](#).

In Staffordshire and Shropshire, the PharmOutcomes system was available to use to record the flu jabs and this would automatically inform GPs that a patient has been vaccinated. NHSE are working to increase the number of GP practices able to receive the notifications but, if there is no nhs.net email address for a surgery you will be prompted to print out a record and send a paper version to that patient's surgery.

PharmOutcomes will NOT generate invoices for vaccines given – you must claim via NHS BSA in line with the FP34C process. Claims must be submitted within 6 months of the vaccine being administered, late claims will not be paid.

DELIVERING YOUR LOCAL SERVICES – HOW PHARMACY CAN HELP| SIX

We continue to be mindful that commissioners are becoming more and more focused on a consistent quality delivery of commissioned services and we are hearing the phrase 'use it or lose it' in many of the conversations we have with them. Engagement with these services and evidencing quality outcomes must be the focus for contractors over the coming year.

Thank you to Gill Hall from South Staffs LPC for writing this next section.

As in previous years, the LPC aims to ensure that as many of our community pharmacies as possible are delivering a full range of available Local Pharmacy Services and that these services are delivered to a consistently high standard. We also continue to explore the possibilities for new and innovative services and how these can be commissioned locally. As we work to raise awareness of community pharmacy services with both professional and patient groups it is extremely important that we have a high take up rate among contractors and would like all of those signing up to any of our pharmacy services to offer it during all of their opening

hours so that referrers and referred patients can be confident that the service will be provided at the pharmacy when they attend.

Pharmacies are reminded that they need to sign the current version of each Service Level Agreement and return a copy of the signature page to the commissioner. Previous delivery does not automatically mean that you are signed up to continue providing the service. For those pharmacies which are part of a multiple the signature must be from your head office – this definitely applies for Boots, Lloyds and Well pharmacies and pharmacies which are part of other chains are advised to check with your head office. Please be aware that multiples often do a “bulk” sign up to services so the LPC urge branches to check whether they have been signed up to deliver the service.

If branches log onto PharmOutcomes and a service module is visible, it means that your branch has been signed up to provide that service. If you have been signed up by head office but you are not providing the service please check the LPC website to see what preparation is required, if you do not wish to provide the service please contact your area manager / services manager to ensure that your branch is taken off the list of providers.

NUMSAS | SEVEN

Last year saw the introduction of the [NHS Urgent Medicine Supply Advanced Service \(NUMSAS\)](#) as part of the 2016/17 and 2017/18 Community Pharmacy funding settlement. The Service was commissioned as an Advanced Service, initially from 1 December 2016 to 31 March 2018, but in November 2017 NHS England announced that the service would continue to be commissioned for a further six months, i.e. the service to operate until the end of September 2018. The latest January 2018 national statistics generated from service provision is linked [here](#).

We also have the local emergency supply service commissioned by NHSE across Staffordshire and Shropshire. Patients who are registered with a GP in England and who have run out of medication may access the service. The pharmacy must have signed the SLA and follow the conditions outlined in the SLA. The service can be used during all of the pharmacies opening hours. Medication can be supplied, where appropriate for the patient, even when the GP practice is open because even when a practice is open it may not be reasonable to expect a prescription to be available urgently. The service is recorded on PharmOutcomes and payment

is for the medication plus a professional fee. The pharmacy must NOT request a prescription to cover the supply as the service is designed to remove this requirement as the patient is provided with up to 14 days' supply of medication which then gives them time to request a prescription via the normal route. The service is commissioned by NHSE as it offers a more cost-effective way for patients to access medication which they have run out of rather than them attending OOH or A&E for a supply, or even going without medication such as inhalers, metformin and blood pressure medication. This local service continues to run alongside the national NHS Advanced NUMSAS service which also operates in Staffordshire and NHS111 can refer patients into a pharmacy for the emergency supply service where they operate NUMSAS but they can also refer into the local scheme if no NUMSAS pharmacy is available close to the patient's home.

WEBSITES AND SOCIAL MEDIA | EIGHT

We have a variety of ways of keeping in contact with contractors. Firstly, we email out any important correspondence directly to the pharmacy email address that we have on our data-base. The new GDPR regulations mean that we had to review our mailing list and ask pharmacy teams to confirm they still wanted news from the LPC. If you no longer receiving LPC mailings please contact me (Tania) to be included on the data-base.

The LPC maintain the website and it is regularly updated to provide access to the most up to date versions of SLAs, PGDs and other relevant information for all pharmacy. Please continue to use this website as your main source of information.

We have a patient facing website which we believe supports our pharmacy teams by explaining community pharmacy services to the public and helping them to locate which pharmacies offer particular services. www.staffsandstokepharmacies.co.uk

Our request for our contractors is that they check out the patient facing website and double check that they are on the relevant lists as providing the services they know they are signed up to provide. They should also check that they don't appear on a list as providing a service which they no longer offer.

Facebook and Twitter are regularly updated and news is posted on by our social media lead, Rebecca Norton. We have a number of sites on Facebook which we would urge contractors, pharmacists and support staff to sign up to;

- Healthy Living Pharmacy Staffordshire and Stoke
- Staffs & Stoke Pharmacies
- North Staffs & Stoke LPC

PNA | NINE

The LPC was integral in the production of the Pharmacy Needs Assessment (PNA) and worked closely with the Local Authority teams across our two Health and Well-being Boards. The PNA is a crucial part of the market entry system and supports robust commissioning decisions. LPCs provide much of the background information about the provision of pharmaceutical services that are unfamiliar to the HWB. The two new 2018-2021 PNAs, for both Stoke-on-Trent and Staffordshire was, published in March 2018 and concluded both areas were well served and there are no gaps in provision.

Stoke PNA can be found [here](#)

Staffordshire PNA can be found [here](#)

NHSE | TEN

NHS England via a series of Area Teams across the country, is responsible for the monitoring and performance management of the Community Pharmacy Contractual Framework. North Staffs and Stoke pharmacies are aligned to the Staffordshire and Shropshire Area Team, based in Anglesey House in Rugeley. NHSE have met regularly with the Local Pharmaceutical Committees to feedback contractor issues and discuss areas of common interest and where a common approach on a contractual issue is required across North Staffs and Stoke. We would like to thank Andy Pickard for all his support and guidance with regards to pharmacy.

CPAF | ELEVEN

Contract Monitoring for 2017-18, NHSE engaged NHS Business Services Authority (NHS BSA) to collect data from pharmacies on contract compliance using a mini-CPAF questionnaire; in this, contractors assessed their own compliance using an online survey. The resulting answers were then used to identify any pharmacies which would be followed up with a complete CPAF submission; and of these a proportion were selected for compliance visits – approximately 4% total contractor estate. These were done not just on the basis of the answers in the mini-questionnaire, or full CPAF but also in response to complaints or concerns expressed at other times to NHS England, or where breaches had already been reported or suspected.

The process was nationally organised by NHS England and although the LPC was not directly consulted on the process, this had been agreed by PSNC. NHSE had been in touch with the LPC over local implementation and procedures, and we are not aware of any ongoing serious problems resulting from the visits, although these have only just been completed. NHSE had been in touch with the LPC over local implementation and procedures, and we are not aware of any ongoing serious problems resulting from the visits.

CONSULTATIONS | TWELVE

In 2017/18 the LPC responded to the following consultations:

- ✓ June 2017: Department of Health – The availability of gluten free foods on prescription in primary care
- ✓ July 2017: NHS England – Items which should not be routinely prescribed in primary care: guidance for CCGs
- ✓ September 2017: General Pharmaceutical Council – Consultation on guidance to ensure a safe and effective pharmacy team
- ✓ December 2017: Home Office - A consultation on proposals to schedule pregabalin and gabapentin under the Misuse of Drugs Regulations 2001
- ✓ December 2017: NHS England – Conditions for which over the counter items should not be routinely prescribed in primary care: guidance for CCGs
- ✓ February 2018: The National Institute for Health and Care Excellence – Consultation on community pharmacy promoting health and wellbeing

PROMOTION OF THE PHARMACY PROFESSION | THIRTEEN

The LPC was keen to continue to promote community pharmacy to the people of North Staffordshire and Stoke, key stakeholders and other influencers. Continued stakeholder engagement has been key for us this year. We will continue this promotion of pharmacy for the next year with an ambitious media plan.

MEMBERS OF PARLIAMENT

The LPC have continued to lobby local MPs throughout the year to keep them updated regarding the difficulties and challenges faced by contractors and to raise the profile of what community pharmacy could offer if we had a different national contractual framework.

LOCAL COUNCILORS/LOCAL AUTHORITY

The LPC is keen to Engage with local councilors across the county and city area. We have made significant progress building relationships with commissioners in the two local authorities.

HEALTH AND WELLBEING BOARD

Health and Wellbeing Boards (HWB) have a wide remit across the new health and care system, providing strategic oversight and bringing together all the local commissioners. The development and publication of the Pharmaceutical Needs Assessment (PNA) is now the responsibility of the Staffordshire HWB and Stoke HWB. The Joint Strategic Needs Assessment (JSNA), the Joint health and Wellbeing Strategy (JHWS) will inform the preparation of the PNA which will be used by NHS England to determine some applications for pharmacy market entry. During the year the LPC has attended a number of Health and Wellbeing Board engagement events.

COMMISSIONERS

Both North Staffordshire and Stoke-on-Trent areas have operating CCGs and the LPC have continued to work to develop relationships with the two organisations. The two CCGs are working very close and also share many of the workforce however, they still remain a separate entity with

different priorities. The LPC has continued to sit on the governing board of North Staffs CCG and for Stoke-on-Trent CCG the LPC is part of the planning committee which meets once a month.

The LPC also represented Community Pharmacies on the following committees and groups:

- Area prescribing committee
- Joint Medicines Management optimisation committee
- EPS steering group
- LIN (local intelligence network)
- LPN committee
- CRI substance misuse group
- Patient forums
- Patient congress
- Health watch
- North Staffs CCG board
- Stoke CCG planning committee
- long-term conditions committee which includes diabetes, respiratory, cardiovascular.

LOOKING AHEAD | FOURTEEN

As I write this report I understand we have had a bad year for Community Pharmacy, but I urge all of my fellow pharmacy teams and contractors not to give up. I still believe that Community Pharmacy is well placed to provide accessible, high quality care to all and would urge everyone to offer the best service they can for their patients. We will not give up the fight and will continue to lobby and fight for the invaluable contribution you all make to an ever-stretched Healthcare Service.

Myself and the committee are committed to helping local pharmacy contractors provide an NHS pharmacy service of the highest quality by offering support and advice to pharmacy contractors. We will continue to engage with local commissioners and explore new ways of working locally to enhance the role of community pharmacies and ensure that community pharmacy is recognised and has a voice in the development plans that are going on locally e.g. the Stoke and North

Staffs Sustainability and Transformation Plan (STP) and supporting the CCG in achieving the objectives in the GP Forward View.

For the future year, the LPC will be also concentrating on extending our media work. This will be in conjunction with South Staffordshire LPC. We intend to extend our team in order to help contractors maximise their income through delivering all available services.

FINANCE REPORT | FIFTEEN

Steven Cork took over from Elissa Pateman as North Staffs and Stoke LPC treasurer in May 2017. He is supported in her role by the LPC finance sub-committee which consists of Mike Connolly and Sue Adams. The LPC budget was prepared to show predicted expenditure in 2016-17 and is linked to the LPC business plan. We currently have three bank accounts with Lloyds bank and one business saver account with Nationwide. It was agreed by LPC members that to be protected by the bank under the financial compensation scheme, it would be beneficial if we put the LPC reserve money into the saver account. The Business account in Lloyds is where the contractor levies are received and the Treasurer account is where the day to day banking occurs such as payment of invoices and wages. The third account holds the allocated funds for services and projects.

We have been able to utilise pharmaceutical industry sponsorship to defray some of the costs for training events. The LPC meetings were free to run as the Newcastle Fire Station provided a free venue, the committee is extremely grateful for this. During this year PSNC was given leave to appeal the Judicial Review decision, no additional funding has been requested from PSNC for this. Throughout the year I have been reviewing expenditure and budgets on a regular basis. This work has ensured that the committee finances have finished the year in a position that will allow the committee to continue to robustly support contractors.

The accounts cover North Staffs and Stoke Pharmacy Committee during the period 1st April 2017-2018. The business accounts are audited annually by a chartered accountant. The financial statements are listed in Appendix 1.

Individual members' expenses have been recorded for the past year. A copy is shown in Appendix 2. The amount for each member is that which each member has been reimbursed by the LPC. This is the cost of training courses attended, locum cover whilst attending courses,

travel expenses incurred and locum costs to cover attendance at LPC meetings. All expense claim forms, invoices and supporting documents are available for examination at LPC meetings. These documents can be viewed by contractors and if you wish to do so please feel free to contact me at the LPC office.

APPENDIX ONE

NORTH STAFFORDSHIRE LOCAL PHARMACEUTICAL COMMITTEE

INCOME AND EXPENDITURE ACCOUNT For the year ended 31 March 2018

	31 March 2018		31 March 2017	
	£	£	£	£
Income				
Levy	120000		120000	
Sundry receipts	-		4268	
Deposit account interest	221	120221	259	124527
Expenditure				
PSNC levy	17025		63003	
Staff costs	53635		55119	
Rent	-		1847	
Telephone and postage	766		854	
Duplication and stationery	7069		4459	
Locum costs and travel	21533		14511	
Licences and insurance	56		55	
Quality payments	4754		-	
IT	643		378	
Bank charges	35		-	
Call to Action	751		1959	
Sundry expenses	-		689	
Health literacy & Continence project costs	217		-	
Accountancy & other professional fees	1500	107981	1150	144024
Surplus/(Deficit) for the year		<u>12240</u>		<u>-19497</u>

BALANCE SHEET

Lloyds Treasurers account	836		4732	
Lloyds Instant account	3606		26549	
Nationwide account	50422		50229	
Lloyds BB Instant online account	176507	231370	-	81510
Loans to LPC's		9360		4095
PAYE creditor		-1141		-1613
Accruals		-480		-480
Deferred Income		-143357		-
		<u>95752</u>		<u>83512</u>
Retained funds brought forward		83512		103009
Surplus/(Deficit) for the year		12240		-19497
		<u>95752</u>		<u>83512</u>

In accordance with the instructions of the Committee we have prepared without carrying out an audit these financial statements from the accounting records of North Staffordshire LPC and from information and explanations supplied to us

Barringtons Limited
Chartered Accountants
41 Cheshire Street
Market Drayton
TF9 1PH

Date:

I approve the financial statements and confirm that I have made available all relevant records and information for its preparation

APPENDIX TWO

Member	May am	July am	Sept am	Nov am	Jan am	march am
N Allen	√	√	√	√	√	√
T Cork	√	√	√	√	√	√
C Stott	√	√	√	√	√	√
R Norton	√	√	√	√	√	√
E Amoako	√	√	√	√	√	R
S Pitt	√	√	A	√	√	A
M Connolly	A	√	√	√	√	√
S Adams	√	√	√	√	√	√
R Morjaria	√	√	√	√	√	√
H Morjaria	√	√	A	√	√	√
A O'Connor	A	A	A	R	R	R
K Najran	√	√	A	R	R	R
W zeeman	√	n/a	A	R	R	R
J Bridgett	n/a	n/a	√	√	√	√
P Walker	n/a	n/a	√	√	√	√
E Patrick	n/a	n/a	n/a	√	√	√

Present = √ Apologies=A R=resigned