

Plymouth Pharmacist Forum October 20th 2010

Twenty one people both pharmacists and staff attended the 5th Plymouth local forum. The first item on the agenda was feedback from the recent LPC activities. Mark Stone and David Bearman informed the group about the NHS White Papers and the significant changes that they are likely to have on primary care and therefore pharmacy. The group welcomed the fact that pharmacy at least had a mention in the leading paper, however there were concerns the mention was so brief. The general move proposed in the White Paper, where GPs will lead the commissioning of 80% of the NHS services gave some concern, as the group felt that GPs may try to secure themselves as the main provider. Mark and David Bearman informed the group of the LPCs lobbying activities, and urged the group to get involved by contacting their own MP.

Mark and David Chapman gave the group the highlights from the LPCs AGM and Sue Sharpes (PSNC) presentation. David Chapman informed the group about what Sue said on the future of the pharmacy contract, 'the days of sticking labels to boxes and checking them are gone, pharmacy must provide services'. This concerned a few members of the group, they had worries over safety and the quality of the dispensing service. Mark reflected this by saying that the change from supervising all dispensing to a more overview of supervision, will need to be managed carefully so to not affect safety. Sue had also stated that the first prescription service would be introduced soon to the pharmacy contract, and that there would be future remuneration for health outcomes that pharmacy is able to achieve. She also emphasised clearly that community pharmacy must record the interventions that it does, as this will be very used to inform the new contract.

Plymouth PCT represented by James Glanville and Oksana Riley informed that group about the care homes best practice guidance, that the PCT facilitated working group was putting together. Oksana said that a newsletter with hints and tips to improve the safety in the dispensing of medicines to homes would be sent to pharmacies over the next week. James introduced the PCTs Pharmaceutical Needs Assessment (PNA) that was currently out for consultation. He asked the group to take a look at the detail included in the PNA, and to check their pharmacies details. Sian Retallick, an independent pharmacy owner noticed that one of her pharmacies was not included in the PNA.

Mark led a discussion on the current Royal Pharmaceutical Society (RPS) leadership body's consultation on supervision. Mark discussed how all business must focus continually on innovation to ensure that the services and products provided by business are relevant, quality and affordable. He stated that innovation is now the key to how healthcare services will cope with an ageing population and the knock on increase in activity. Pharmacy, Mark said was not immune to this, especially as the government has stated that pharmacists need to be involved in patient facing services, instead of focussing on checking in the dispensing process which can be soon be done by technological improvements.

Mark gave the group an exercise to complete in small teams on how the pharmacists' focus of daily activities will change with technology, and how important to the patient that pharmacists are involved in the specific activities. The group prioritised services that pharmacists provide today, which emphasised a focus on dispensing, while prioritising patient queries, more structured services like MURs were low in the priority order. This was a stark difference to the priorities in the eyes of the patient where MURs were much higher, and patient queries were top. David Bearman said that the exercise was useful but it did not consider what the government wanted and they were the paymasters.