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Devon LPC

As you know the new LPC membership took up their position in April this year. At its meeting earlier this week, elections for the Executive roles took place. David Bearman has been re-elected as Chair; Simon Gardener as Vice Chair. The new constitution allows non LPC members to be elected to executive roles. Brenda Taylor, an independent contractor from Beer, has been elected as Treasurer. Sue Taylor was appointed as the LPC Chief Officer.

A full list of LPC members is included at the back of this newsletter. Please do not hesitate to contact the secretariat if you need any information about the LPC, its membership or constitution.

Devon LPC Promotional Activity in Support of The Pharmacy Charter

Thank you to all of you who participated in our pre election initiative to raise the profile of community pharmacy with the local MPs and Prospective Parliamentary Candidates.

In the run up to the election we were proactively contacting and meeting with MPs and Prospective Parliamentary Candidates. We have always found that the best place to influence political figures is in the community pharmacy setting, showing them where and how, services are provided. This approach has stimulated questioning, and observation. MPs also then have the opportunity to see the number of employees involved. Most are interested in protecting local employment levels, and they may not realise that pharmacy is a significant employer in Devon. During our visits and meetings, topics of importance to the Pharmacy agenda arose naturally or were easily introduced into conversations.

Our thanks to all of you who supported us in this work; by hosting visits, contributing to the MUR day, or Pharmacy Charter day.

We received sixty one records of medicines use reviews relating to patient safety (Warfarin) and respiratory conditions. Forty nine records of pharmacist Interventions on Public Health or Minor Ailments also received. Once complete the data

collection from the MUR/Pharmacy Charter initiatives will be shared with contractors and their staff, and outside parties.

Follow on activity

The LPC aims to maintain personal and regular contact with all of the elected MPs in Devon. We are currently arranging further meetings and pharmacy visits and think it is significant that at a very busy time for them, almost all the MPs in Devon have met with or intend to meet with the LPC to discuss pharmacy's concerns and our agenda.

In particular, at a time when NHS policy is being re-written and early signs are that GPs are going to be commissioning the majority of NHS services, it is even more important that we continue to press for the contribution of pharmacy to our patient care.

Once again, our thanks to all of you who continue to play a part in making pharmacy an important part of the NHS and your local community. What happens in Pharmacy next week or next year is influenced by all - from PSNC contract negotiators, to LPCs, to the community pharmacy contractors, and pharmacists and pharmacy teams they serve.

If you would like to find out more, or host a MP visit to your pharmacy please let us know.

Pharmacy Repeat Dispensing Schemes

The LPC secretariat has recently received a number of queries about the pharmacy repeat dispensing schemes, which are being run by a large number of the pharmacies in Devon. The queries are coming from the local general practitioners who are requesting more information on the operation of these schemes. The LPC secretariat has been providing information on these queries, and allaying any concerns the doctors have.

We would suggest that if you are running a scheme in your pharmacy, it would be best practice (if you have not already done so) to meet with your local doctors to discuss the service. This will firstly promote a useful service that many patients appreciate, and secondly ensure that the practice understands how the scheme operates. Practices will be interested in how the patients are the only people who complete the repeat ordering slips, and what questions are asked by the pharmacy staff when the patients collect their monthly prescription, to limit the risk of medicines waste.

Another tip would be to provide the practice with a name of a pharmacy staff member as a point of contact, should the practice have any future queries.

Pharmacy repeat dispensing schemes are relatively new, and are where the pharmacy acts to help the patient order their monthly medicines. Usually most schemes will involve the pharmacy holding the repeat prescription slip, once the patient has completed the ordering slip for their next order. The pharmacy will then send the slip to the doctors a few days before the patient will need the medicines. This means they are dispensed and ready for collection in the patient's nominated pharmacy just before the patients medicines run out. An important point to note is that these schemes are not a NHS service, and not related to the NHS repeat prescription service.

The Devon LPC Contractor Survey 2010

Firstly Devon LPC would like to issue a big thank you to all the pharmacists, dispensers and anybody else who contributed to our contractors survey by returning the completed forms to us. The LPC committee has discussed the results at a recent monthly meeting, and so we can now publish the main findings.

- We had a total of 79 replies (64% from multiple contractors and 26% from independents/others) from the nearly 300 forms sent out. A good reply rate.

How do you feel about the LPC?

- 94% felt the LPC was supportive, 95% felt the LPC was helpful
- When the LPC was contacted 97% said we had addressed the need/query

Reasons for contacting the LPC?

- 30% contractual issues, 30% training, 27 contract requirements
- **QUOTE:** "Devon LPC is the best so far" "Devon LPC is doing a fine job, but publicise how you can help us" "They do a good job in demanding times"
- What can the LPC do more of: "More training and development events" "getting more services commissioned"
 - **LPC Reply:** We conduct training events where the training provides a significant benefit to contractors, and when there is no comparable training available from other providers such as CPPE or PCT. As standalone training events are expensive the LPC will seek to use the Local Forums 'Your Forum' to deliver most future training events
- 91% felt the LPC represented local contractors appropriately

The Devon LPC Newsletter (Golden Pages):

- The LPC Newsletter was rated by 86% as above average or excellent
- **QUOTE:** "Excellent, it is helpful to be updated on all pharmaceutical matters" "Relevant and informative" "Keeps me up to date" "there does not need to be duplication of clinical issues by having articles in the LPC newsletter"
 - **LPC Reply:** We do not seek to duplicate clinical messages unless there has been a local request from a PCT, or where there has been an issue that has identified a communication need
- 63% would like to receive the newsletter electronically, instead of in a paper form

The Devon LPC Website:

- 30% of people questioned had never used the website

- **LPC Reply:** The LPC website is run using a PSNC format, the website has a significant amount of guidance and support on contractual services such as MURs, PCT contract visits, and local enhanced services in the online resources section - why not go and take a look!
- 28% of people use the news, and 29% online resources
- Ideas: Would be helpful to have PCT communication letters on the site. Locum list
 - **LPC Reply:** The LPC will look at providing a section on the website, for recent PCT letters that have been sent to contractors.

LPC Forums:

- 62% attended Forums
- **QUOTE:** Almost all said along the lines of “Chance to learn from colleagues and picking up the latest information” “Good updates, great to meet other pharmacists” “A shame some are not attended by more people”
 - **LPC Reply:** The Forums on average are now being attended by around 25 people, initially attendances were lower due to the event being new to the calendar. If you are new to the forums please come along and join us, there are 3-4 per year in each area, check the LPC event pages!

Pharmaceutical Needs Assessment

The regulations relating to Pharmaceutical Needs assessments (PNAs) have now been laid and NHS Employers have released its 'toolkit' to support PCTs in developing a robust PNA.

The guidance is structured around five steps:

- Getting the engagement right
- Identifying local needs
- Mapping current provision
- Shaping the future
- Action planning



A copy can be downloaded from the DH website www.dh.gov.uk

The LPC is working closely with all our PCTs to ensure that due process and full engagement occurs. Questionnaires have been sent to all pharmacy contractors in Devon; please ensure that these are accurately completed and returned - it is in your interest to do so!

Once a draft is prepared the LPC and all pharmacy contractors will be formally consulted; this is likely to be in the Autumn of 2010.

Community Pharmacy and Child Protection

All of the PCTs have recently asked pharmacy contractors to complete a self assessment on safeguarding children. Owing to the number of enquiries we have received about these at the Secretariat office we have sought advice from the professional body. We have included some guidance for you here that we have cleared with the Society and cross referenced with the self assessments.

All healthcare professionals, including those who do not have a role specifically related to child protection, have a duty to safeguard and support the welfare of children. This statutory duty towards safeguarding children has come from 'The Children Act 2004' legislation and the subsequent guidance 'Working together to safeguard children'. The 2004 Children Act legislation was implemented as a direct result of the Victoria Climbié Inquiry, which made many recommendations because of this tragic incident.

Employers have a responsibility to ensure that all staff, including administrative staff, are given opportunities to attend local courses in safeguarding and promoting the welfare of children, or ensure that safeguarding training is provided within the team (Working together to safeguard children, 2010). 'Level One' training should be made accessible to pharmacy counter staff, this will provide them with a general understanding of what constitutes child abuse, and what to do if they have concerns that a child is being abused. Pharmacists and pharmacy technicians who are in 'intense but irregular contact', with children, young people and/or parents/carers will need to be trained to a higher level (Level Two details see below).

Pharmacy counter staff need to (Level One):

1. Have an understanding of what child abuse is
2. Know the joint roles and responsibilities of local agencies in safe guarding children
3. Know who to contact if they have any concerns

Training options: CPPE has a Local Solutions workshop that can be downloaded and used to provide in house training to pharmacy staff, the training takes around 1.5hrs. Local PCTs will investigate the need for training and will facilitate provision where necessary

Pharmacists and pharmacy technicians offering NHS services such as Emergency Hormonal Contraception or Chlamydia screening, which cause 'intense but irregular contact' with children need to (Level Two):

1. Have an understanding of what constitutes child abuse and be alert to the possibility of child abuse or neglect
2. Be able to act upon indications that a child's welfare or safety may be at risk
 - For likely indicators see RPSGB document (*Child Protection Guidance, Aug 2007*)
3. Be familiar with and follow local child protection procedures, protocols, and how to record concerns about a child's welfare
 - Be aware of and see if necessary, South West Safeguarding and Child Protection Group policy <http://www.swcpp.org.uk/>
4. Know where to find the contact details of professionals in their locality with specific child protection expertise and responsibilities, for example, child protection health professionals, appropriate
 - See local authority website contact details for **Children and Families Teams**

Training Options: CPPE offers a free downloadable course called "Safeguarding Children a guide for the pharmacy team" (2nd Edition 2009). Most local PCTs have helped facilitate training events e.g. for EHC training and will investigate the need for training and will facilitate provision where necessary. The LPC will try and facilitate these local training events through the 'Your Pharmacy Forum' meetings.

Other references: See Devon LPC website > Clinical governance > Child Protection. Working Together to Safeguard Children, A guide to.. (HM Government, March 2010)

NHS Information Governance Requirements 2010/11

The Department of Health have confirmed that there will be a number of changes to the NHS Pharmacy Information Governance Requirements in 2010/11.



Deletions : Requirement 118 (Completion of IGSoC) has been removed as a requirement.

Additions: The only addition to the requirements in 2010/11 is, as previously communicated, the business continuity requirement (requirement 319). The detail of this requirement is currently being finalised and will be published shortly.

Merged Requirements : Requirements 208 (mapping and risk assessing information flows) and requirement 308 (exchange of digital information) have been merged to form one requirement. There was overlap between the two original requirements. Requirement 208 was predominantly focused on safe havens and the manual transfer of information and requirement 308 was focused on digital transfer. The new merged requirement is 'all transfers of hardcopy and digital personal and sensitive information have been identified, mapped and risk assessed; technical and organisational measures adequately secure these transfers'. The reference number for the new requirement is '8322'. The evidence required by pharmacies remains the same.

Numbering of Requirements

A new version of the online Toolkit is published annually. From version 8 of the Toolkit (2010/11), the reference number of each requirement will be prefixed with the online toolkit version number, i.e. requirement 114 is requirement 8114 for 2010/11 and for version 9 in 2011/12, it will be 9114.

Timescales

Version 8 of the online Toolkit is scheduled for release at the end of June 2010. By 31 March 2011 community pharmacies will be expected to attain Level 2 against each of the pharmacy information governance requirements.

More information

Background information is available in the [Information Governance Section](#) of the PSNC Website.

Premier Pharmacists – Your Stories Of Best Practice

In our last newsletter we introduced the concept of our “Premier Pharmacists” and the new regular column highlighting significant events and sharing best practice. We have been sent the following from a local pharmacist in Torbay.

The pharmacy team has been asking patients taking methotrexate various questions (such as dosage/strength) for some time now due to the serious consequences if the drug dosage or strength get mixed up. In this instance the patient presented with a prescription for a 4xdaily dosage (methotrexate is never a daily dose) of methotrexate 2.5mg. The pharmacist immediately phoned the surgery concerned and asked the receptionist to check this dose. She confirmed that the dose was indeed 4 x daily. The pharmacist then requested to speak to the prescriber and the receptionist said she would get him to phone back. Sometime later, the pharmacy received the call back and the GP realised that the dose was wrong and should have been weekly. In fact the GP didn't believe that the prescription said daily until he double checked the details on record. He apologised and said he would put in place procedures to ensure this did not happen again. As a result the patient got the correct dose and no harm was done.

Amazingly two weeks later another patient from a different surgery presented with another prescription for methotrexate with an incorrect dose - this time some old notes had been used and a dose stated that was 4 tablets each week instead of 8 - the newer dose which had been instigated by a consultant. At least in this case it was not a daily dose!

This story reinforces the learning in May's newsletter; don't be afraid to challenge such doses and indeed emphasises the importance for pharmacists to keep asking each and every patient who takes methotrexate to confirm their doses and strengths etc. Also it is often necessary to speak direct to the GP and not to rely on the receptionists answer.

- Open communication channels between primary care professionals is key in ensuring patient safety
- Pharmacists must believe in themselves; follow their professional judgement and knowledge
- Don't be afraid to challenge if you really believe something is wrong

The NPSA Alert relating to methotrexate and associated guidance may be viewed on the NPSA website <http://www.nrls.npsa.nhs.uk/resources/type/alerts/?entryid45=59800&p=3>

A £20 book token will be sent for each article printed.

Public Health Campaigns

Torbay Care Trust - Health Promotion Champions

As reported in the last newsletter, Torbay Care Trust has decided to promote members of the pharmacy team as Health Champions, to develop the public health campaigns in community pharmacy. The LPC definitely believes this is the right approach, as the medicines counter staff are usually the first point of contact for patients and customers within the pharmacy setting. The Care Trust will be running three campaigns this year set out in the table below. The first campaign, focusing on alcohol, has started this week and will run until July 17th.

Topic	Dates
Alcohol	June 14 th to July 17 th 2010
Sexual Health	November 1 st to December 4 th 2010
Smoking	February 21 st to March 19 th 2011

We were delighted that the majority of pharmacies in Torbay have signed up to this initiative which means that staff are fully briefed on the issues relating to the various topics and given the opportunity to build on their skills and knowledge base. Even if pharmacies don't want to release their staff for the training, they are still required to participate in the campaigns.

NHS Plymouth

Plymouth is adopting a slightly different approach this year; the primary care and medicines management team have liaised with the locality based Public Health Practitioners, who want to build on their local working relationships with community pharmacy and ask their local pharmacies to display local signposting and referral information relating to their particular priorities. For 2010-2011, there will be three campaigns, focusing on Mens Health (June 2010); Mental Health (October 2010) and Womens Health (March 2011). Community Pharmacies in Plymouth will shortly be receiving information about the Mens Health Campaign.

NEW DEVON LPC COMMITTEE MEMBERS – April 2010

CHAIR David Bearman	CCA rep - Co-Op	01752 343470 07739806995	Dbearman1@aol.com
VICE CHAIR Simon Gardner	CCA rep - Boots	07912759008	Simon.Gardner@boots.com
TREASURER Brenda Taylor	Contractor	01297 21823	pills@btconnect.com
Stephen Budden	Contractor	07787 721940 01297 552599	Stevebudden-lpc@hotmail.co.uk
Nerys Cadvan-Jones	CCA rep - Boots	07826 908544	n.cadvan-jones@boots.com
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Nigel Gray	CCA rep - Boots	07826 908550	nigel.gray@alliancepharmacy.co.uk
Peter Hope	CCA rep - Co-Op	07889 723573	Peter.Hope@co-operative.coop
Andrew Lane	PSNC rep	07785118812	Andrew@alchemhealthcare.com
Andy Lawson	CCA rep – Boots	07734 056327	andy.lawson@boots.co.uk
Michael Lennox	CCA rep – Lloyds	07798 861866	Michael.lennox@lloydspharmacy.co.uk
Kevin Muckian	Contractor	07979 083114	kevinmuckian@aol.com
Chris Naidu	Contractor	07876 643965	chrisnaidu@aol.com
Karen O'Brien	Contractor	07595 466653	Obrienltd1@aol.com
Stephen O'Reilly	CCA rep - Sainsburys	07825 844100	Stephen.O'Reilly@sainsburys.co.uk
Tony Perkins	CCA rep - Asda	07743 431611 01752 237860	tperkins86@gmail.com
Paul Stevens	Contractor	01392 833822	exminster.pharmacy@npanet.co.uk

Forthcoming Events

The Exeter, East & Mid Devon Locality Forum is due to take place on 22nd June 2010 at The Devon Hotel, Matford, Exeter, starting at 7.30pm. For further details, please see the events page of our website www.devonlpc.org

The LPC Locum List

The LPC Secretariat holds a list of locums working in the Devon area. If you are a locum pharmacist wanting work and would like your name added to the list, please contact the Secretariat (Tel: 01392 834022 or kathrynj@devonlpc.org) with your name and contact details. It would also be useful to give an indication of the geographical area in which you are based.

*For those looking for locum cover, all contact and negotiation of terms is **not** done through the Secretariat but direct, and any names given out are neither endorsed nor recommended by the LPC.*

CONTACT DETAILS FOR DEVON LPC

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If you are interested in attending an LPC meeting as an observer, please contact the Secretariat on 01392 834022. Details of all forthcoming events can be found on the events page of Devon LPC website www.devonlpc.org