



Community Pharmacy
Lancashire

Annual Report 2022/2023



**“Putting Community Pharmacy on the local
healthcare map”**



@ComPharmLSC



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A foreword from our Executive Chair

The year 2022 to 2023 has been one of many challenges for our community pharmacies and the incredible hardworking teams found within them. It is very humbling to witness on a daily basis how these local teams continue to serve their patients and communities to the very best of their ability in spite of ever increasing, relentless pressures; providing the key healthcare service that community pharmacy is.

When the current iteration of the 5-year Community Pharmacy Contractual Framework was announced in 2019, the economic environment we now find ourselves in was never foreseen. Increasing operating costs, escalating drug prices, drug shortages, increasing demands from patients as other parts of the NHS come under pressure to name just a few. The workload continues to increase without any additional funding or sadly clear recognition from central government as to the critical role that pharmacies provide in the healthcare of the nation.



In reaction to this harsh environment, we have seen pharmacies take drastic action to try and manage these situations, including pharmacy closures or reduction in their opening hours, when the simple truth is these teams really want to be able to provide a wide range of services to their patients when and where they are needed, yet the funding envelope does not provide for the challenges that we face.

All of these factors have a dramatic impact on the wellbeing of the pharmacy workforce, who are working with these daily challenges in their endeavour to support their patients, and their resilience when facing into these has been, and remains amazing. However, it must not and cannot be taken for granted. Community Pharmacy Lancashire has made available on our website access to wellbeing tools and support services to help the teams care for their mental wellbeing.

The emphasis on the work of Community Pharmacy Lancashire, both the Board and the Team has been to grasp all opportunities to maximise the pharmacy services that exist, support contractors in driving out inefficiencies by finding new ways of working, and supporting the pharmacy teams to be the very best they can be; whilst developing collaborative working with our many partners both in primary care and the wider Lancashire and South Cumbria Integrated Care System (ICS) so that healthcare services across the geography become more integrated and unified to benefit those using the services.

I would like to thank the Board members for all their continued support, encouragement and time in supporting the Team. I would also like to thank Mari Williams who was our Vice Chair for all her help and support over her tenure with the Board and welcome Ali Dalal and Georgina Barber to the Board, along with the Team themselves for being able to get out there and really provide hands on support and guidance to you, our contractors during this difficult time.

My biggest thanks though goes to you the teams – pharmacists, pharmacy technicians, dispensing assistants, healthcare assistants, delivery drivers and others who all work so hard in their endeavours in serving their patients, for this I send my heartfelt thanks and appreciation.

Kath Gulson
Executive Chair
Community Pharmacy Lancashire

A message from our Chief Executive

May I firstly start with Our Community Pharmacy teams across Lancashire, who really are the primary care 'heartbeat' of our local neighbourhoods, and I applaud each, and every one of them for their commitment and devotion they have showcased across the whole of 22-23, not least the way they embraced, yet again, the front-line challenges during the Strep A crisis.

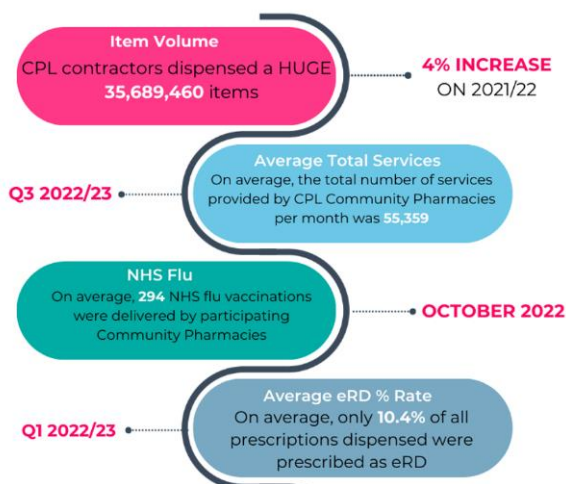
I also feel it's absolutely imperative for me to personally recognise, and for the wider public and stakeholders to note, that such attentiveness to patient wellbeing outputs, have actually been achieved, whilst being under the most extreme financial and operational pressures as a sector. Many of which have been highlighted by CPL across the year as well as the key national messages via PSNC.

[PSNC-Briefing-013.22-Summary-of-the-results-of-PSNCs-2022-Pharmacy-Pressures-Survey.pdf \(cpe.org.uk\)](#)



As we know thousands of people across Lancashire rely on our Community Pharmacies on a daily basis. They play a vital role as the front door to health and care services, therefore myself, alongside the CPL board, and the office team have strived to ensure all contractors gain the very best level of support. Whether that be reactive, in voicing their concerns / supportive in cash flow loss minimisation / contractual risk mitigation or proactive, in seeing how we can widen access to

COMMUNITY PHARMACY 2022/23



appropriately funded NHS Community Pharmacy services. Somehow helping to reduce our collective Primary Care pressures and looking forward to the opportunities that lie ahead and most of all to stem the sad and continued announcements of ongoing local Community Pharmacy closures.

As you run through the details within the annual report, you will note the vast amount of effort the CPL team have placed in actively representing our contractors, with a vision to marry up alongside National CPE initiatives and lobbying. Thus allowing for that stronger single national voice, whilst maintaining a very local independent representation view point, in line with the economic turmoil and workforce pressures that our CPL contractors were facing. Not least the struggles in simply obtaining medicinal drugs at the right prices

and getting a fair price for the delivery of local services.

In terms of contractual revenue and return, plus active participation of NHS pharmaceutical services by our local Community Pharmacies, we have aimed to align some much needed direct administrative, operational and clinical level support for our contractors. Whilst also offering external support to GP practices in line with ring fenced localised NHS funding, to help drive local services such as the GPCPCS and Hypertension model pathways. We are pleased to have seen good improvements in the overall quality outputs as highlighted within the report as well as the uplift in the numbers of our contractors who have now registered to help support their local communities with such services. This remains an ongoing key initiative and outlines the massive potential of thousands of patients being referred across from GP practices direct to Community Pharmacies for low acuity minor illnesses, for an appropriate clinical assessment by the Community Pharmacist.

I have also been humbled by the comments of support having been received by our contractors, their teams, managers, Area Managers and self-employed professionals whom we support, on how they are seeing the direct hands-on approach and availability really benefitting them, as well as the digital enablement's to improve accessibility and stronger single localised voice across social media. This has also been supported by the ambition and drive we have on behalf of our contractors in showcasing how Community Pharmacy can help in relieving the vast pressures across Primary and Secondary Care through digital interoperability mechanics and correctly funded services to help drive quality patient outputs.

Our close association and workings with the Public Health teams and growing ICS transitional teams continues to allow for progressive ways of marrying up key healthcare priorities across the Lancashire footprint and allows us to further the opportunities where our Community Pharmacies could offer support, as well as look to go faster and harder with IT solutions and rollout of much delayed services such as DMS. This works in line with the NHSE creation and mobilisation of the Core20Plus5 vision to deliver exceptional quality healthcare ensuring equitable access, excellent experience and optimal outcomes of which I strongly believe, that our Community Pharmacies already play a big part. Hence by working even closer together alongside our relentless CPL PCN leads we can really help embed a positive and close working culture of active collaboration across primary care.



A year of national change for the sector has meant we at CPL have followed through with the overwhelming majority of Community Pharmacy contractors, who had voted in favour of the RSG proposals, as we took forward the multitude of changes being proposed. This included boundary realignment, to become coterminous to that of the LSC ICB footprint, proposed name change, to better reflect the new borders, adjustments to the size of committee and also acceptance of revised model Constitution to name but a few. It was very pleasing to have then had the direct opportunity to lay the locally revised plans having been actively worked on, to our local Lancashire contractors and allow them the chance to cast their votes. This was duly mandated for progression by our contractors after having received a unanimous decision of the 187 votes in favour.



As I come to the end on my comments for the year and start to look ahead to 23-24, I see a continued stretch on resources and further increase to workload, yet I remain positive, that the national and local commissioners will begin to take serious note of the fact that our Community Pharmacies are absolutely pivotal and core to the NHS and Public Health plans. They truly are the front-line heroes, as they have been for years gone by and will continue to be moving forwards in support for our local neighbourhoods.

Community Pharmacy is ready and waiting and has a lot more to offer, yet will undoubtedly need corrective economically viable and respectful changes to funding arrangements to mitigate further public outcry as more and more of our beloved Pharmacies are forced to close their doors for the very last time.

Mubasher Ali
Chief Executive
Community Pharmacy Lancashire



A Year in Review

NMS

2022-23 saw a **29%** YoY increase and a total of **92,957** patients were supported with their Newly prescribed Medicines by our Community Pharmacies

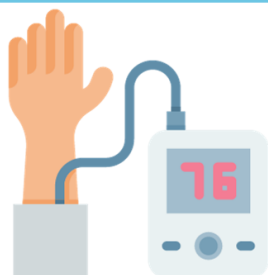


CPCS/GPCPCS

2022-23 saw a **33%** YoY increase in completed referrals from NHS111 & GP practices to reduce primary care pressures. A total of **65,974** patients were clinically assessed and supported by our Community Pharmacies

Blood Pressure Checks

31,117 patients were supported with BP checks for early detection & prevention from heart disease by our Community Pharmacies across 2022-23



ABPM

3,542 patients were also supported with advanced 24 hour BP monitoring where clinically elevated BP was noted

NHS Flu Vaccination

154,337 flu jabs were delivered across 2022-23 by our Community Pharmacies, a national increase of **2.8%** YoY



Enhanced Services

208 contractors providing EHC
225 contractors providing NRT
1,000's Substance Misuse interactions

NEWSLETTERS

A total of **68** newsletters incorporating local and national news, were released to support our contractors



PQS READY

PQS ready was introduced in October 2022 **20** PQS support releases were sent to contractors



EVENTS

CPL reinitiated face to face contractor events as well as virtual training sessions including access to recordings via CPL's **new** YouTube channel



VISITS

A massive **298** personal visits were made to our Community Pharmacies and Practices by the CPL team.



PHONE CALLS

In support of our Community Pharmacy Contractors, the CPL office team made **1,929** calls.



View from a New Board Member

I am delighted to have joined Community Pharmacy Lancashire as a Board member representing fellow independent contractors and to have had the privilege of witnessing the exemplary leadership of our new Chief Executive and his teams work ethic, in support of our contractor base. I am truly impressed by their dedication in performing their roles and functions with utmost professionalism and desire.

Our CE's commitment to representing the interests of all local NHS Pharmacy Contractors has been nothing short of remarkable. One of the most admirable qualities of our CE is their passion and deep understanding of NHS legislation and their role in advocating for the pharmacy community. They have consistently demonstrated a comprehensive knowledge of the intricate workings of the National Health Service and Public Health alongside the crucial role that Local Pharmaceutical Committees (LPCs) play alongside them. Our CE's ability to navigate and interpret the complex NHS regulations and Public Health partnerships has been invaluable in ensuring that pharmacy contractors within the three Health and Wellbeing Board areas are well-represented and their voices heard.



The CE and office team have showcased a real commitment in trying to improve pharmaceutical services for our local populations. They have been unwavering in their pursuit of accurately reflecting and putting forward the professional views and aspirations of all pharmacists engaged in community pharmacy within our region. Their dedication to ensuring that our community pharmacists can provide the best possible NHS pharmaceutical services is evident in every decision and action they take.

Moreover, our CE alongside fellow Board members, have played a pivotal role in ongoing challenging discussions on current and potential new opportunities where our Community Pharmacies could benefit our patients and wider population health initiatives, by critically ensuring remuneration for such services is fair and viable for the contractors.

In addition, it has been great to witness our CE at Community Pharmacy Lancashire (CPL) to have exhibited exceptional skills in navigating and representing our collective contractor voices during these challenging times via the most appropriate channels. The pharmacy landscape has faced unprecedented challenges, and our CE & Board members together have been instrumental in helping our community of pharmacists try and weather these storms.

Ali Dalal
Board Member
Community Pharmacy Lancashire

Operations Overview

The Community Pharmacy Lancashire (CPL) team has been dedicated to providing support to contractors across Lancashire and looking for innovative ways to increase contractor capacity and cash flow, whilst driving important messages across to our contractors, their patients, other healthcare professionals and MPs to create a more co-ordinated and aligned healthcare system, as well as striving for fair remuneration for services across our patch.

Services

Discharge Medicines Service

The Discharge Medicines Service (DMS) which is an electronic transfer of the confidential clinical discharge details direct from hospitals to community pharmacies has continued strong across Pennine via the East Lancashire hospitals via the Refer to Pharmacy (R2P) platform, and it has been fantastic to hear from many of our Community Pharmacies on how well this has worked and how critical this is for patient safety outputs.

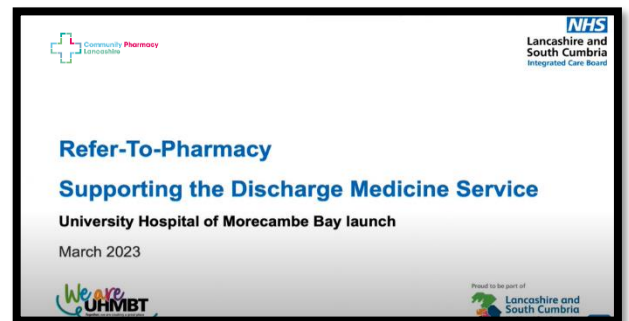
With this in mind the progression over the last three years has been slow across other hospital trusts in terms of IT interoperability issues. Therefore, we have actively lobbied and supported an advanced mobilisation of potential rollout options post October with help from the ICS digital lead, the Lead UHMB Pharmacist EPMA & Digital Strategy alongside the support from the Chief Pharmacy Information Officer at ELHT who was integral with one of the very first rollout pilots across the country. We are pleased to say that having come together with the aim of trying to get some much-needed movement we ended the year with a project looking to push a Refer to Pharmacy Go Live across North Lancashire via Morecambe Bay hospitals over the coming months, once the intense testing phases have concluded successfully and this also meant delays to some plans on support webinars for our contractors. This will be a crucial step forward in realising the massive potential this service has to offer and to bring secondary care and primary care closer together.



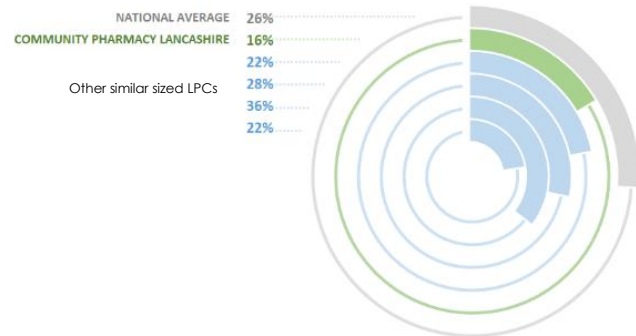
· Feb 9

Promote ...

Fantastic patient support being celebrated by Mubasher Ali Chief Exec at Brunshaw Pharmacy part of @ImaanHealthcare Nurul&team fully up to date and supported all @ELHT_NHS patients having been referred via @ReferToPharmacy. Please support our #saveourpharmacies campaign @PSNCNews



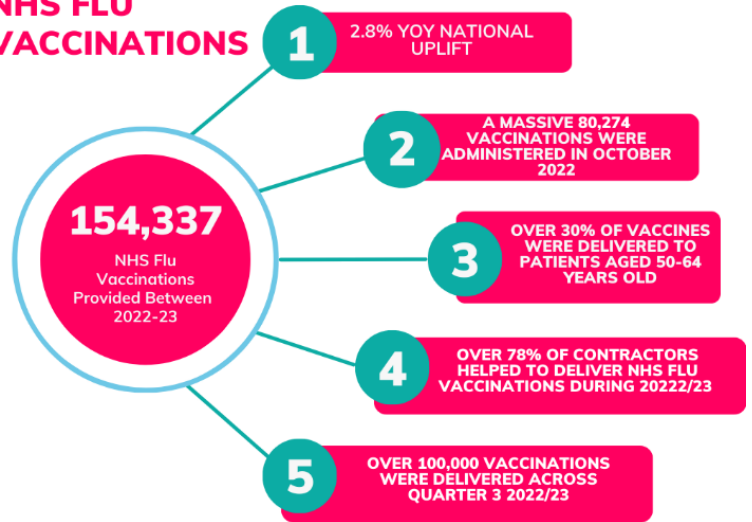
• % of contractors claiming at least once in Q4 2022-23 for DMS:



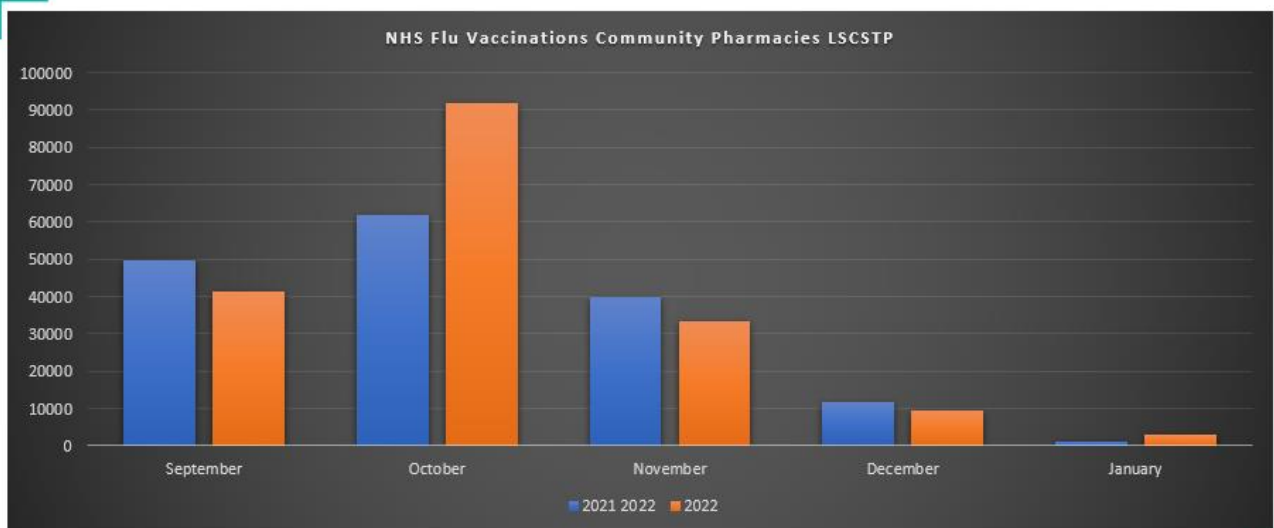
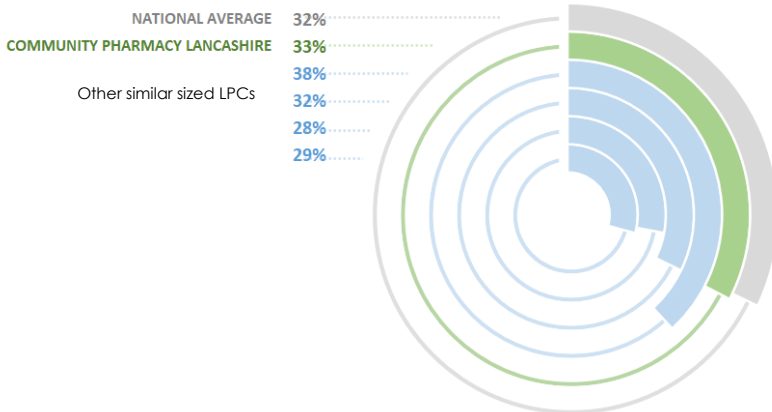
NHS Flu Vaccinations

NHS Flu vaccinations delivery from our CPL Community Pharmacies has continued to grow across 22-23 after such exponential growth in the previous year. This is a truly amazing feat and shows just how effective the Community Pharmacy offer is alongside our GP colleagues to protect as many of our most vulnerable patients as possible. CPL continued to support all contractors who wished to join the flu service and actively encouraged the participation as well as ensuring they did not miss the tighter claim window. This was evident with over 78% having supported the campaign over 22-23 season. CPL continued to share the latest picture across the ICS and Place Based flu calls to ensure the whole of primary care were able to signpost effectively to our contractors where stock was still available. It is also worth noting the intensity and implication that our contractors had to endure with respect to the volume spike being noted both nationally and at a local STP level as shown. The vast numbers continued to have been delivered across Q3 but a very notable late surge had also been absorbed across January.

NHS FLU VACCINATIONS



• % of contractors claiming at least once in Q4 2022-23 for Flu vaccinations:



New Medicine Service (NMS)



Mar 23

Promote

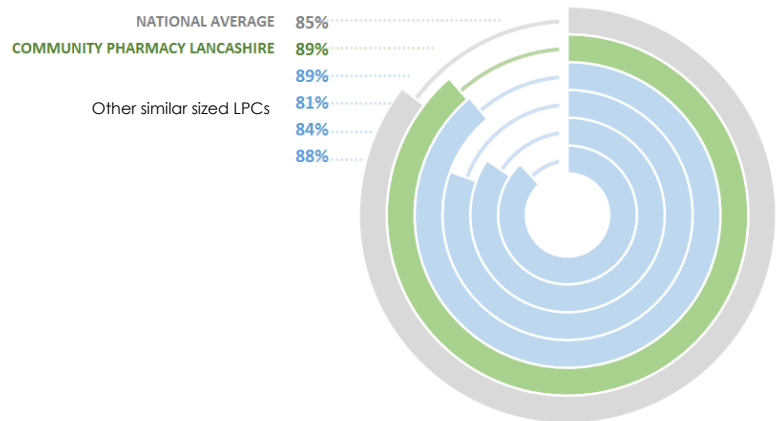
7 day Care at Evercare. Superb patient support by Shahed&Team at Evercare Colne by supporting daily CPCS NHS111 referrals & following up with the NHS New Medicine Service. #saveourpharmacies @LSCICB



The New Medicines Service (NMS) provides support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence. It is focused on specific patient groups and conditions and following the introduction of additional conditions from 1st September 2021 it has been a key area for CPL to support contractors in improving the identification and looking at ways of creating capacity to allow further expansion of the service and at the same time the timely NHSBSA claiming.

CPL sent out key updates and month end checklists with regards the elevated importance of NMS with its inclusion as a gateway criterion for PQS and also forming an important part of the Respiratory domain. CPL ensured this was relayed to relevant respiratory network and primary care partners to support the uptake and ultimately maximise patient outcomes. You will note that close to 90% of our contractors had claimed at least once in Q4 compared to other similar sized LPCs as per PSNC data. It was important to really harness the cross mapping of Community Pharmacy. However, there may be circumstances, where in the professional opinion of the pharmacist, they believe the patient would benefit from the provision of the NMS where they are moving from one formulation of a medicine to another (for example the prescribing of the same inhaled medicine, but in a different inhaler device from that previously used by the patient).

● % of contractors claiming at least once in Q4 2022-23 for NMS:

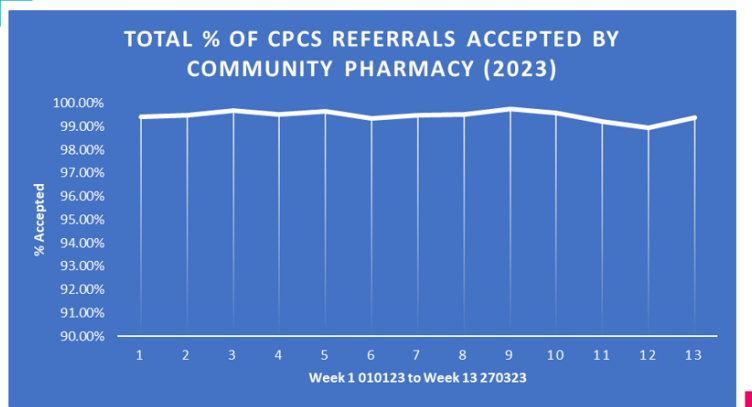


Community Pharmacist Consultation Service (CPCS)

The CPCS service connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy for a clinical assessment via the NHS111 service online or via the phone and also via a GP practice for minor illnesses conditions via a referral from the reception team at the practice known as GPCPCS.

This has been a real focus for CPL to help drive the ambition of maximising the effective transfer of care across urgent care settings and primary care into Community Pharmacy via CPCS to support the better access and the overarching right person, right place, first time methodology. The drive for increased referral opportunities and to embed the very best operational and clinical outputs for patients has been the mainstay of CPL activity.

CPL forged a much closer working relationships with the North West Directory of Services team, part of the North West Ambulance Services NHS trust and with thanks to the Regional Assurance manager were able to start a review of the overall North West CPCS referral numbers being sent into Community Pharmacies via NHS111 (telephony referrals only) as well as the chance to work on and support contractors with any referral acceptance activity and duly support the patients. Overall, as the data sets shown represent our contractors as part of the North West team helped support a huge spike in CPCS referrals over the December and New Year peak with close to 3,400 a week being reviewed and then maintaining numbers between 2000-2500 across the rest of 2023. The patient outputs were a continued focus for our office team and many calls were made in support of CPCS referrals and the collective nature of such support and the fantastic delivery from our Community Pharmacy teams is evident with



almost 100% of referrals being accepted since the available data sets from 01012023.

Work also continued with the national pilot exploring how referrals to CPCS from urgent treatment centres could work in Fleetwood, in readiness for this being rolled out as an extension to the existing NHS111 and general practice referral pathways. Many different variations were reviewed and tested to see what would constitute the most efficient pathway with IT interoperability between the walk in OOH providers and referral pathways proving to be a barrier. A lot of options were explored to maximise the learns with some IT mechanics Some known



Nov 21, 2022

Promote

Big thanks to Lisa Cottam&team at Fleetwood health centre pharmacy, part of the O'Briens pharmacy group...They are really helping shape the UECpilot via supportive and innovative approaches and forging continued close working with fantastic UEC Management and reception teams.



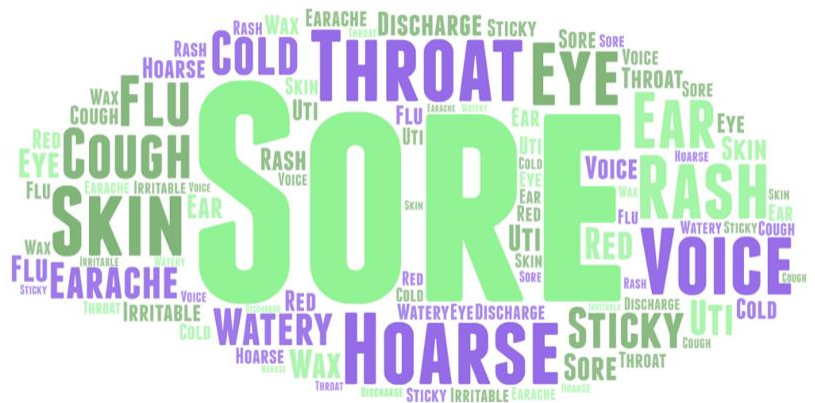
General Practice Community Pharmacist Consultation Service (GPCPCS)

With the growing volume as well as opportunity of CPCS also coming from GP practices, as GPCPCS referrals, CPL created a tiered support process map over several months, starting in November 2022 to try and align effective centralised support mechanics for the whole system including GP practices as well as stepping up the support for our Community Pharmacies. This was created to allow a faster support mechanic to become operational as well as the opportunity to directly aid our contractors in both claims as well as follow ups. Since the end of January 2023, CPL have been supporting contractors with GPCPCS referrals by making daily contact with those with new and outstanding referrals.

This joint effort has not only increased GP capacity for more referrals but hugely benefitted contractor cash flow with some incredible statistics. Across CPL there is now less than 3% of referrals left outstanding for some months, which is a fabulous achievement, bearing in mind the vast numbers of strikes, national holidays and ongoing pressures they have had to contend with.

We have shown a Word cloud depicting the vast types of referrals that our Community Pharmacy teams have dealt with over the year and how this has helped save hours for our GP colleagues to allow focus on the higher acuity conditions with very complex healthcare needs.

It is worth highlighting the huge workload savings for our Community Pharmacies and the massive



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As a CPL Clinical Lead with background in both Community Pharmacy and General Practice, I really aimed to harness the process of co-aligning a strong Primary Care initiative through GPCPCS. One that has been assigned at National Level in aid of our localities and to really help support a ramp up on referrals, by getting out to as many GP practice teams as possible and helping them navigate the process, provide professional advice on the referral pathways and most of all show them the simplicity of the Local Services button.

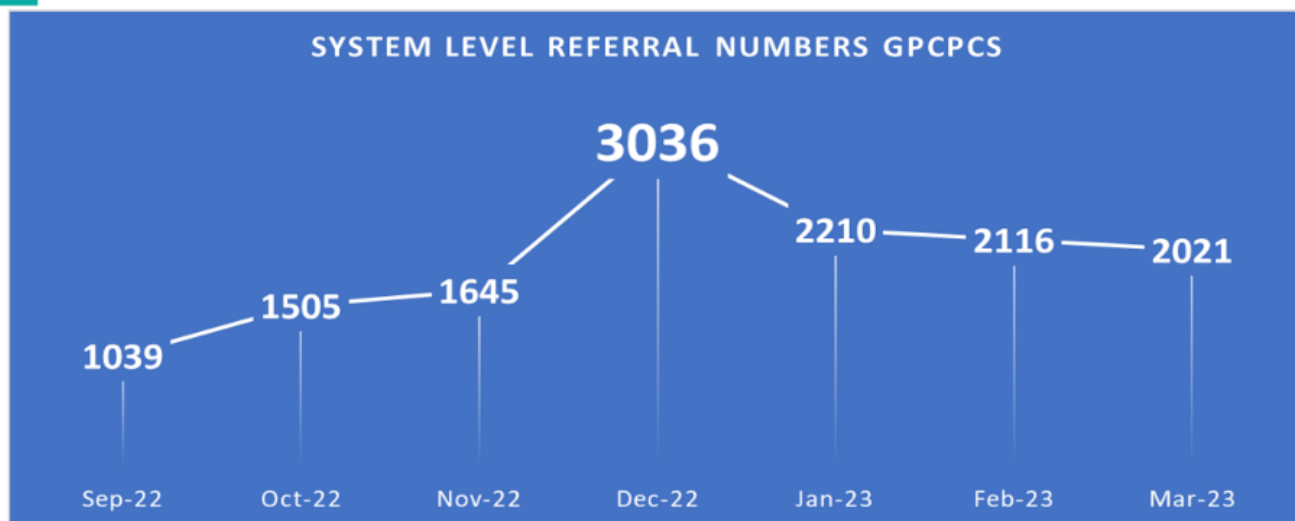


Maqsud Patel
CPL Clinical Lead

continuing to relay the GPCPCS message with nearly 25% of every conversation / activity being made to aid uptake and help the patient pathways between GP practice and Community Pharmacies. Towards the latter half of the year CPL utilised some further limited Ring-fenced funding for

GPCPCS support and recruited two sessional based Clinical Leads who together went out and supported practices both face to face and virtually. This then further added another direct tier of support being offered to our GP practices with the aim of picking up any training needs such as non-clinical triage routes, running through the simplicity of the Local Services Button and it's built in Red Flag triage questions as well as running through many other FAQs.

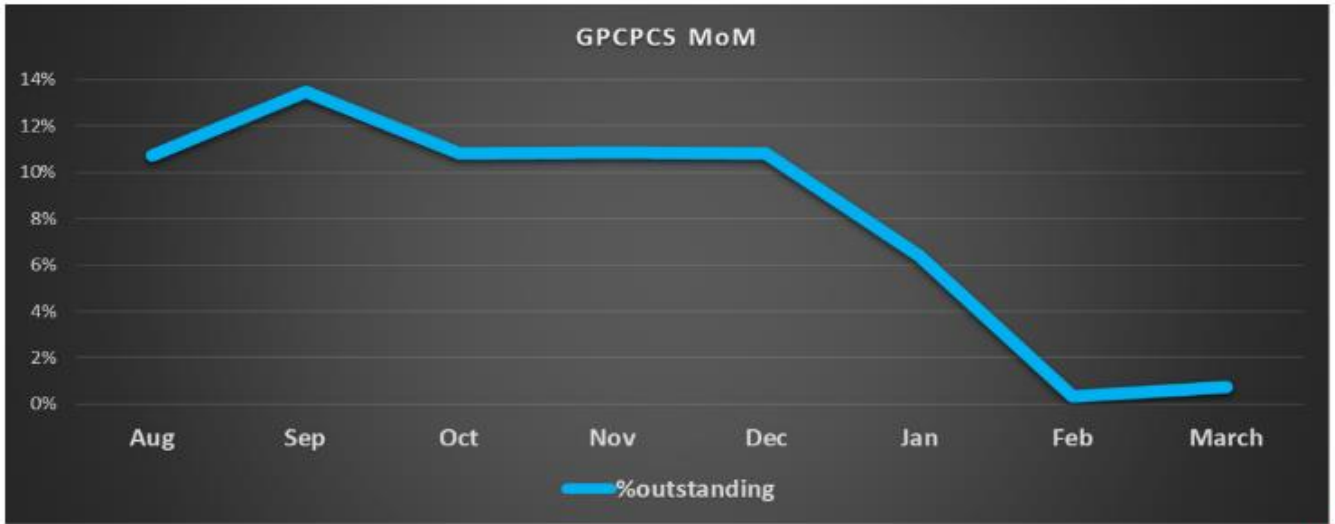
In terms of outputs and referral numbers, you can see from the trend lines as received via the



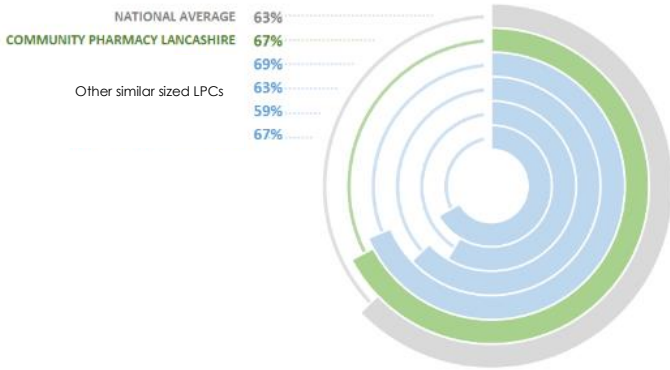
commissioner data sets, that the numbers continued to increase month on month with the peak for December being over 3000 and subsequent months being maintained above 2000 referrals. Following the intense level of focus since January we can see in the month-on-month (MoM) analysis the vast improvements across our contractors, with almost negligible levels of referrals being shown as still outstanding post having been received at the Pharmacy as well as the completion numbers increasing to above 80%. These stats are a real credit to our Community Pharmacies and the quality of care they are portraying.

Finally, the CPL contractor claiming focus across all CPCS referrals and completions has also shown to have had a positive impact with almost 67% of contractors having now claimed at least once across Q4 and trends favourably amongst other similar sized groups as taken of PSNC data sets.





• % of contractors claiming at least once in Q4 2022-23 for CPCS:



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Our Chief Executive has really harnessed a very close working relationship between the office team at CPL and our contractors, their healthcare teams and professionals, which also include the many self-employed professionals who support our Community Pharmacies across the whole of Lancashire, and this closer collaborative ethos has really encouraged, the very best in quality outputs for our patients. The efforts across CPCS & GPCPS referral acknowledgment and completion is truly outstanding and is further evidence of what our Community Pharmacy teams can offer across the wider Primary Care arena.

Mike Ball
Vice Chair
Board Member CPL



Hypertension case-finding service

CPL have really embraced the need for expanding the BP check services via Community Pharmacies across the whole of the system. The main aims of the service are to identify people aged 40 years or older, or at the discretion of the pharmacist, people under the age of 40, with high blood pressure (who have previously not had a confirmed diagnosis of hypertension), and to refer them to general practice to confirm diagnosis and for appropriate management. Also, at the request of a general practice, undertake ad hoc clinic and ambulatory blood pressure measurements. These requests can be in relation to people either with or without a diagnosis of hypertension.

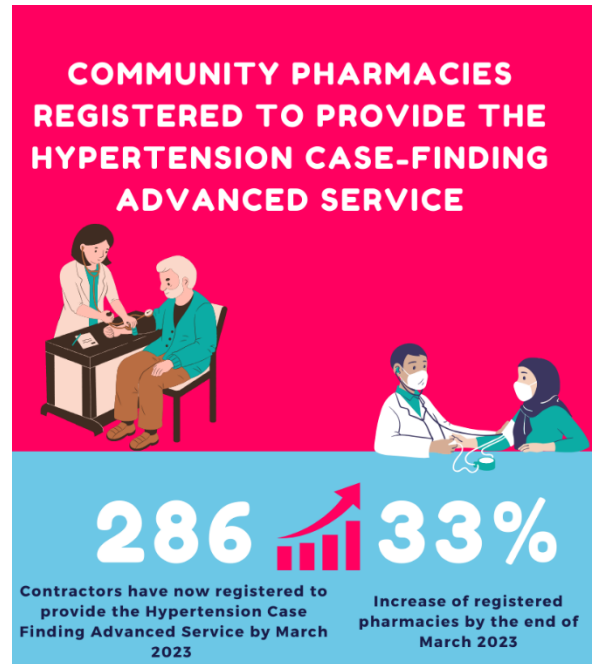
Cardiovascular disease (CVD) is one of the leading causes of premature death in England, affecting seven million people and accounting for 1.6 million disability adjusted life years. This places a financial burden on the NHS of approximately £9 billion per year.

Hypertension is the biggest risk factor for CVD and is one of the top five risk factors for all premature death and disability in England. An estimated 5.5 million people have undiagnosed hypertension across the country.

CVD is a key driver of health inequalities, accounting for around 25% of the life expectancy gap (27% in men and 24% in women) between rich and poor populations in England. Those in the most deprived 10% of the population are almost twice as likely to die as a result of CVD than those in the least deprived 10% of the population. Additionally, 60% of excess mortality for those living with severe mental illness can be attributed to preventable physical health conditions, such as heart disease.

Residents of the most deprived areas in England are 30% more likely to have high blood pressure (BP) compared to those in the least deprived areas. The Community pharmacy BP monitoring has the potential to increase the detection of hypertension within local populations and is expected to positively impact health inequalities by targeting people who do not routinely see their GP or use other NHS services

The Hypertension case finding service went from strength to strength with now more than 285 pharmacies participating in the service across the footprint delivering thousands of blood pressure readings and following up with those patients who



Jan 27

Promote ...

Community Pharmacy protecting LIVES via NHS CP BP check service. CPL Chief Exec celebrating one of the best Pharmacies across Lancashire, Mubashir&team at PeakPlus have completed well over 1500 BP checks for early CVD risk identifications @PSNCNews @HealthierLSC @LSCICB @TheBHF



Nov 7, 2022

Promote ...

Massive thanks to Sophie,Tony&team at Accrington Pharmacy, they have shared some key learns on how they have adjusted their team ethos/profiling to ensure capacity freed to deliver BP checks &COVID/Flu vaccs and now they one of top Pharmacies on BP checks across Lancs.. Well Done



went onto stage 2 of the service using the pharmacies ambulatory blood pressure monitoring machine (ABPM).



Mar 21

Promote ...

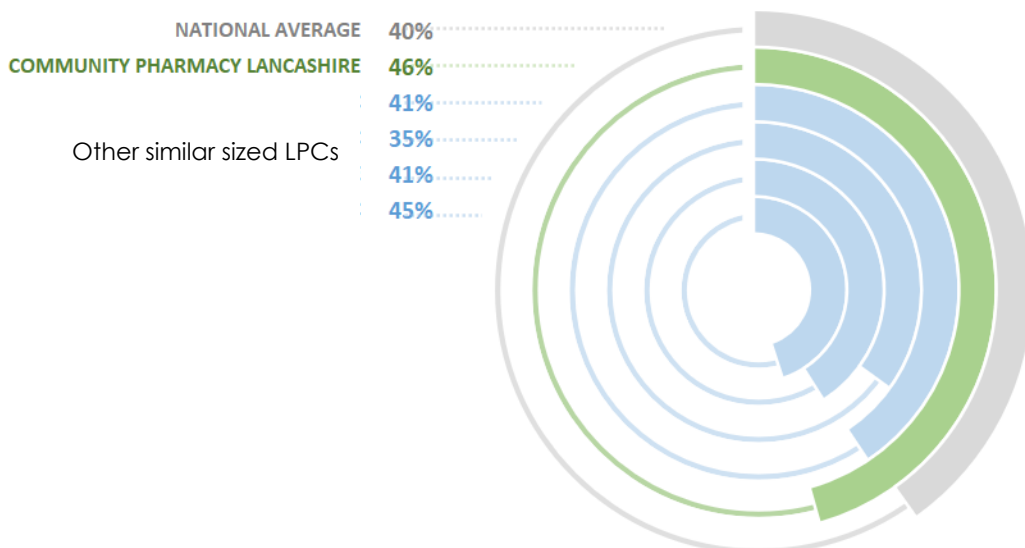
Great PCN Lead achievements from Tahir&team at Cohens Darwen Health Centre. Tahir leading from the front with his efforts towards GPCPCS referrals&protecting LIVES against hypertension with NHS CP BP checks. #saveourpharmacies @PSNCNews @TheBHF @ELHT_NHS



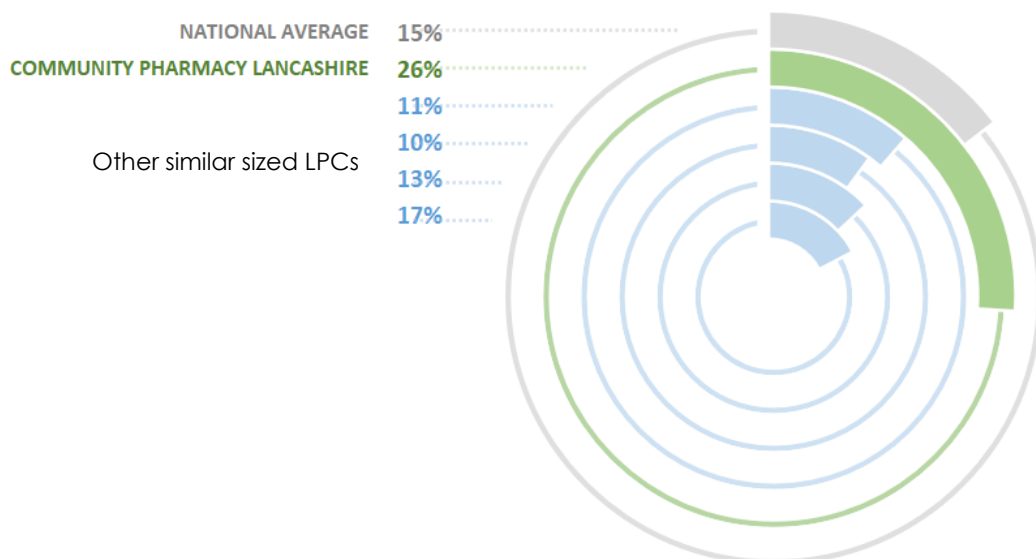
Pharmacies have been working closely with their general practices to identify cohorts of patients who can be screened in their local pharmacy, and this collaboration has proved very successful with both general practices and pharmacies, whilst giving reassurance to many people of their blood pressure readings and the advantage of receiving appropriate professional healthy heart advice.

CPL has again worked hard in not just celebrating the fantastic efforts of our Community Pharmacies but also continuing the need for timely claims and reporting, which as can be noted have some of the best % claims when compared to similar sized LPCs across both Clinic Checks and ABPM to also help support the threshold incentives

● % of contractors claiming at least once in Q4 2022-23 for BP clinic checks:



● % of contractors claiming at least once in Q4 2022-23 for ABPM:



Smoking Cessation Service (SCS)

The SCS has been designed to enable NHS trusts to undertake a transfer of care on patient discharge, referring patients (where they consent) to a community pharmacy of their choice to continue their smoking cessation treatment, including providing medication and support as required. The ambition is for referral from NHS trusts to community pharmacy to create additional capacity in the smoking cessation pathway.

CPL have been an integral part of the implementation of the Stop Smoking Service with two Hospital Trusts across Lancashire going live. The service began at Blackpool Acute Trust in July 2022 with Lancashire Teaching Hospitals going live in November 2022. CPL have supported the ICS / Hospital Teams alongside the CSU and held specific Go Live webinars for initial sites wanting to initiate the service. CPL office team have also provided support to participating pharmacies by making direct contact with contractors who have received referrals from Hospital Trusts.

As a means of extra support and guidance, a recorded training webinar was also uploaded on to our website and new YouTube channel, where the recording has been viewed 67 times.

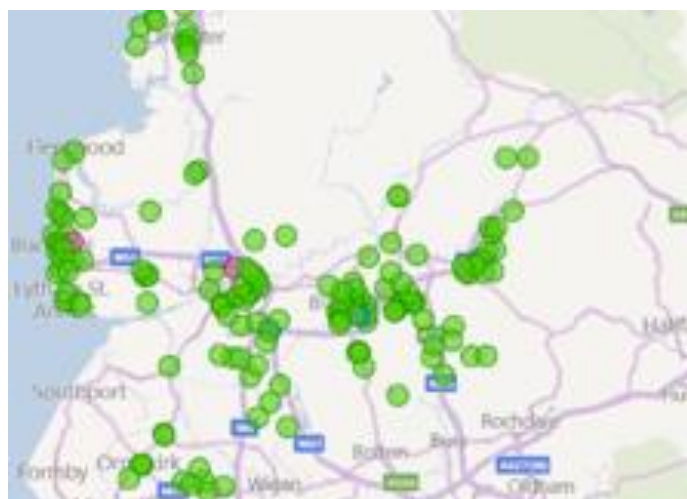
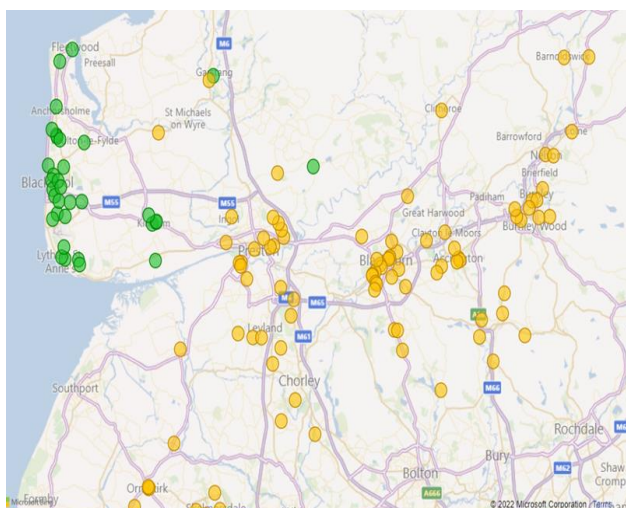
Initially when the service was implemented, the number of pharmacies (depicted as green dots) was relatively low as shown on the map to the left, however as we progressed towards the end of 2023 and beyond, with continued webinars and phone call support on Go Live queries, we saw a steady rise in sites registering to provide the service.

COMMUNITY PHARMACIES REGISTERED TO PROVIDE THE NATIONAL SMOKING CESSATION SERVICE

183 Contractors have registered to provide the Smoking Cessation by March 2023

2 Hospital Trusts went live during 2022/23.

- Blackpool Teaching Hospitals
- Lancashire Teaching Hospitals



Covid Vaccination Services

Our CPL contractors have continued to support the ongoing waves of Covid vaccination services via off site and on-site modelling in close association with NHSEI at a regional level. This is again further evidence of how Community Pharmacies can continue to play more of an active role in NHS commissioned vaccination services.

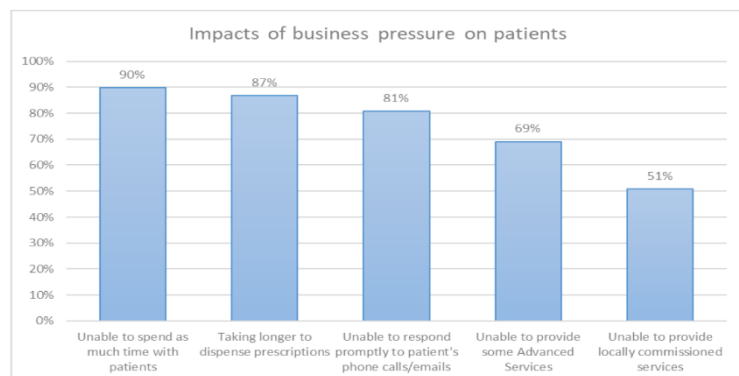
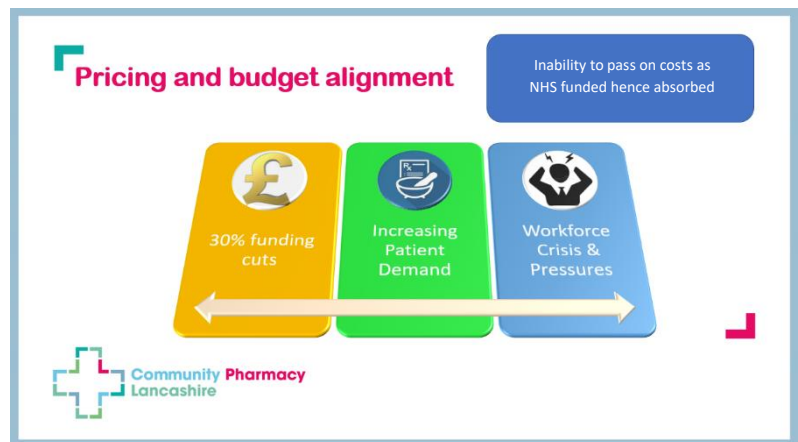
Locally Commissioned Services

Pharmacy contractors continue to deliver services commissioned by both local authorities and Clinical Commissioning Groups (CCG's) such as Emergency Hormonal Contraception, Smoking Cessation services and Substance Misuse whilst the changing landscape of the upcoming formation of the ICB may allow further opportunities where Community Pharmacy can play an even bigger role in support of wider Primary Care pressures.

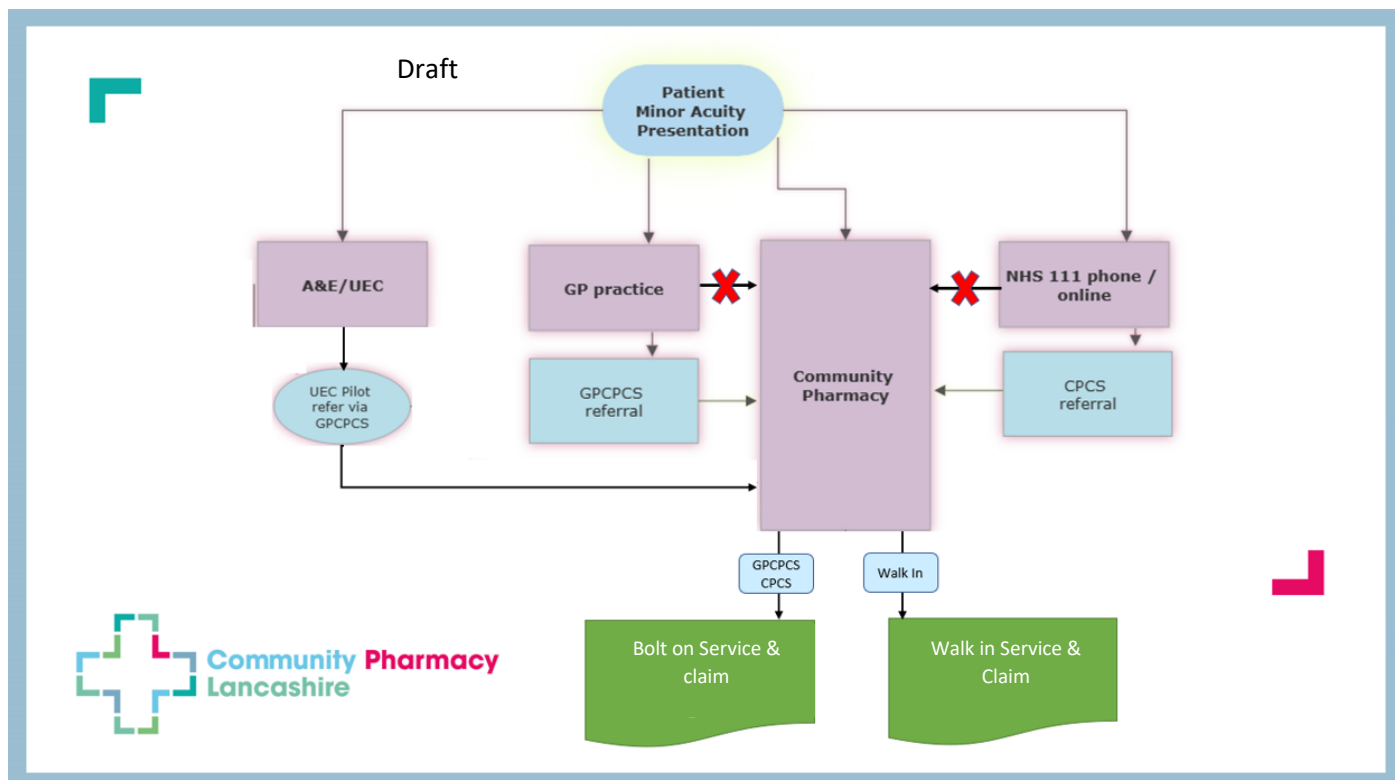
CPL alongside, NHSE colleagues and in particular the Strategic Director of Medicines, Research and Clinical Effectiveness for the ICB have been able to mobilise the first Harmonised Palliative Care, Service Level Agreement, across the whole of Lancashire. This is a huge step forward in mitigating postcode-based concerns and allow a seamless transfer of care options. CPL have also been successful in negotiating an additional total stock fee alongside a regular review on prices based on the Price Concessions where additional stock ordering may be necessitated as well as removal of burdensome monthly audit needs.

CPL have also continued our IT platform discussions with regards the LCC professional NRT voucher scheme with the commissioners around the heavy workload implications and cumbersome dual systems entries.

The biggest effort having been made across the end of 22-23 was that of a co-aligned initiative and negotiation alongside the new Chief Pharmacist and NHSE colleagues with regards the rollout of a harmonised Minor Ailment Service across the whole of Lancashire. This was planned to mitigate the ongoing pressures by the continued minor acuity presentations at GP practice, NHS111 and OOH care settings with the option of free professionally assessed OTC supply based on the same exception criteria we have for national Prescriptions and thus mitigating issues around health inequalities. Much work had gone into the formalised costing of the service as well as the baseline process map. This was based on current times and accounted for the changes in base pay rates, self-employed rates, continued inflationary rise impacts, rising energy costs and overall true on costs for contractors having to be absorbed with ongoing like for like declines in funding whilst managing ongoing workforce pressures and increased patient demands.



It picked up great support across all senior leadership amongst the system and a final SLA was agreed between us and the commissioners which included an appropriate flat fee bolt on post GPCPCS or CPCPS consultation as well as a flat fee to allow for walk in service hence minimising the traffic heading towards our already stretched Primary Care and Secondary Care colleagues. It also included caveats of VAT and Price Concessions built in. It is however very disappointing to have been given the news at the very last few days of the 22-23 year that the ICB finance and directorship had rejected the proposals citing financial pressures.



Contractor Support

Over the course of 2022-23, the CPL office team have implemented several new mechanics in which contractors can reach the team easily. CPL have continued to support contractors through face-to-face visits, as well as the introduction of our VoIP phonenumber system (known as BOnline). This has provided our contractors, healthcare colleagues and the public with a single point of contact to ensure support from a member of the team can always be accessed to provide resolutions to queries.

This year has also seen the launch of several new social media platforms, providing our contractors with various support options as well as many different means of keeping up to date with important topics. Our Social media feeds have been carefully curated to highlight our local contractor successes and celebrations whilst also concentrating on circulating important messages surrounding the ongoing funding struggles and continued workforce pressures.

The CPL team have utilised BOnline to make daily support calls to contractors. These support calls may focus on keeping up to date with SLA specific markers such as referrals and to remind contractors of upcoming event reminders and urgent deadlines to name but a few. CPL aim to reach out to as many contractors as possible with important messages. As well as targeted phone calls. CPL have also continued to release two weekly Newsletters focussed on the implementation of local services, alterations to SLA's, important dates for contractor diaries, news of any free training and many more localised articles and are detailed below.

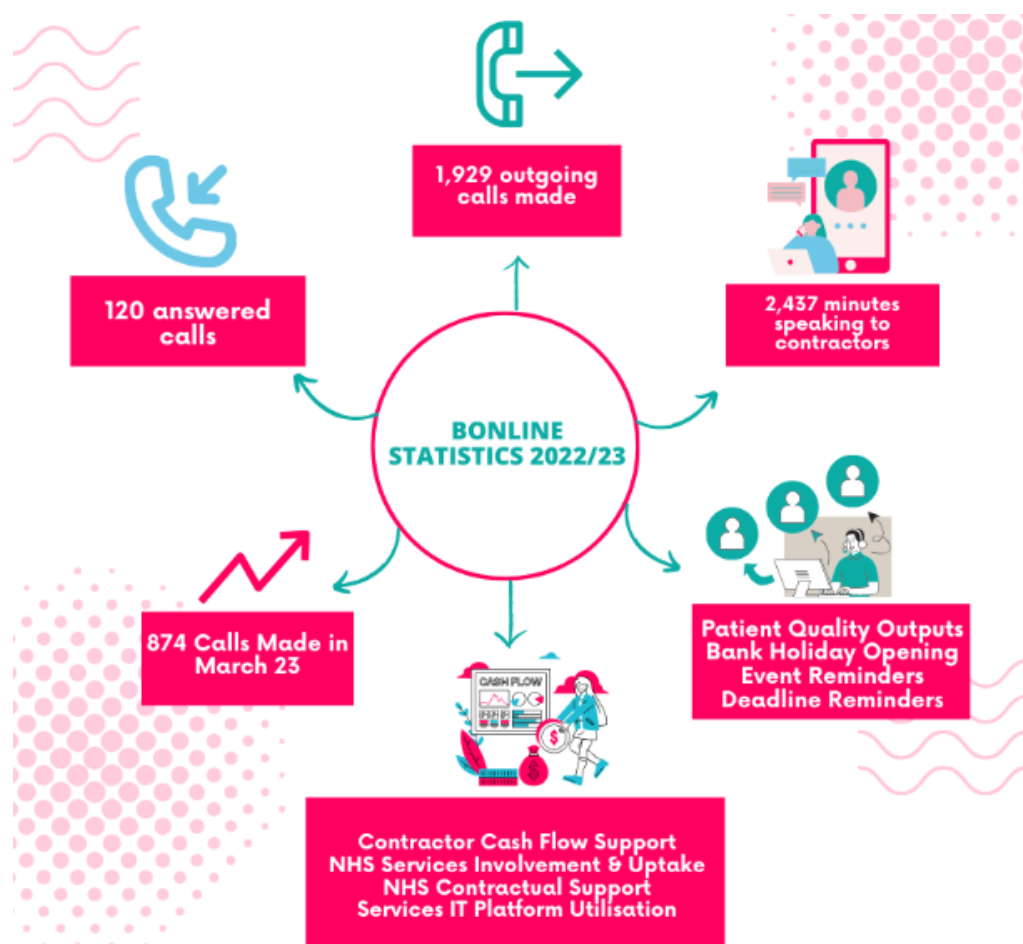


Naomi Parker
Senior Business Support Officer
Community Pharmacy Lancashire

BOnline direct support for contractors & stakeholders

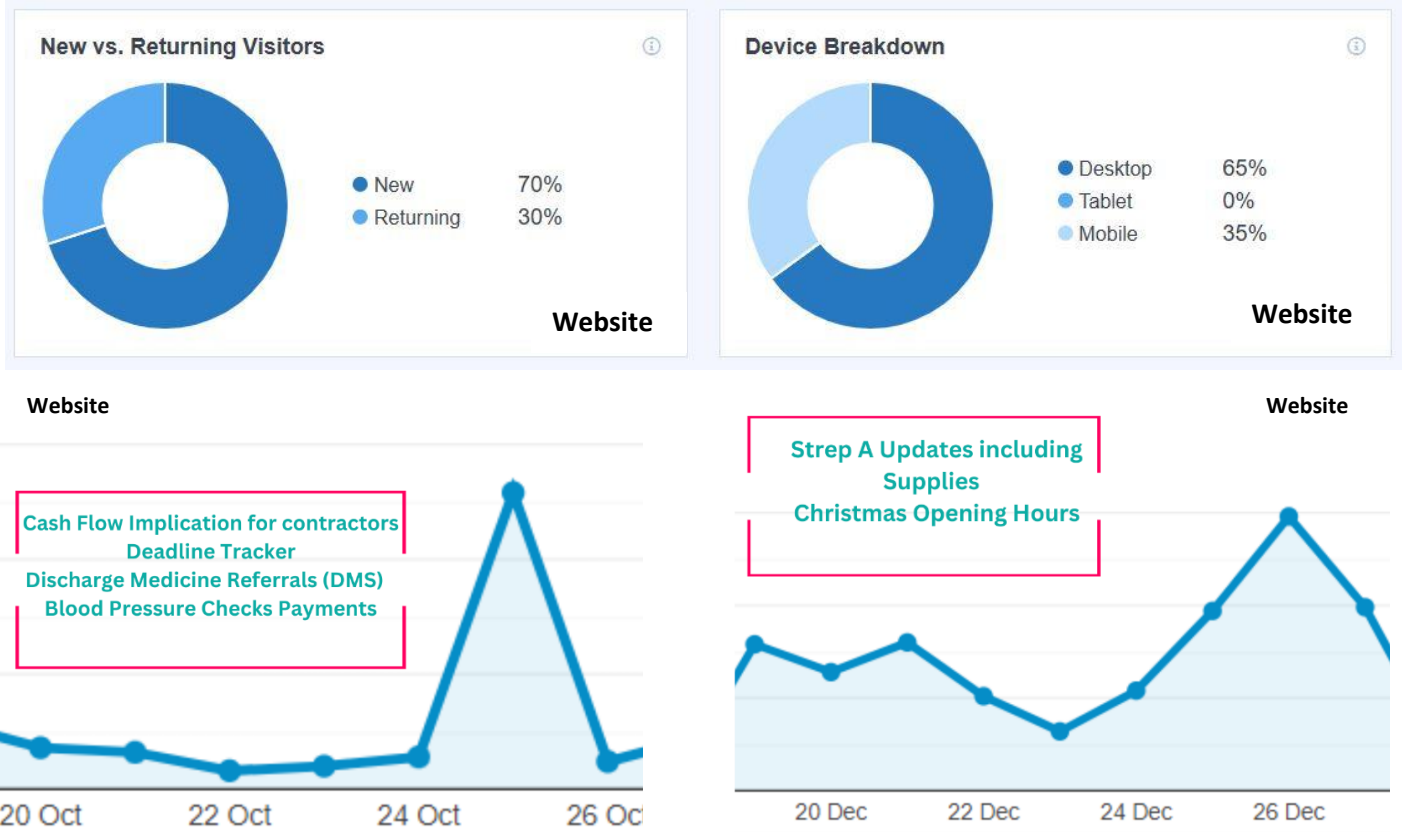
In November 2022, the VoIP system adopted by CPL, known as BOnline was introduced. The use of this system has meant that all members of the CPL team are able to make and receive calls by using just one contact number, creating a streamlined experience for contractors, as well as providing multiple layers of support.

The office team have been able to track and monitor outgoing calls that have been made to contractors, this output has been huge and has grown massively throughout the year to support contractors in providing high quality professional care and outcomes for patients.



Website & Newsletter Support Breakdown

The uptake of our website and twice weekly newsletters continues to grow as a means of getting key reminders and deadline dates out to our contractors without the need for multiple emails when our contractors are already bombarded with so much single items of information from so many avenues. We have seen that the majority still continue to access the website via the desktop route but the mobile access routes have continued to rise and hence we aim to provide content which is corrected for both types of users. We also see continued access from new users to our website and therefore aim to keep the content both relevant and as up to date as possible. We have really



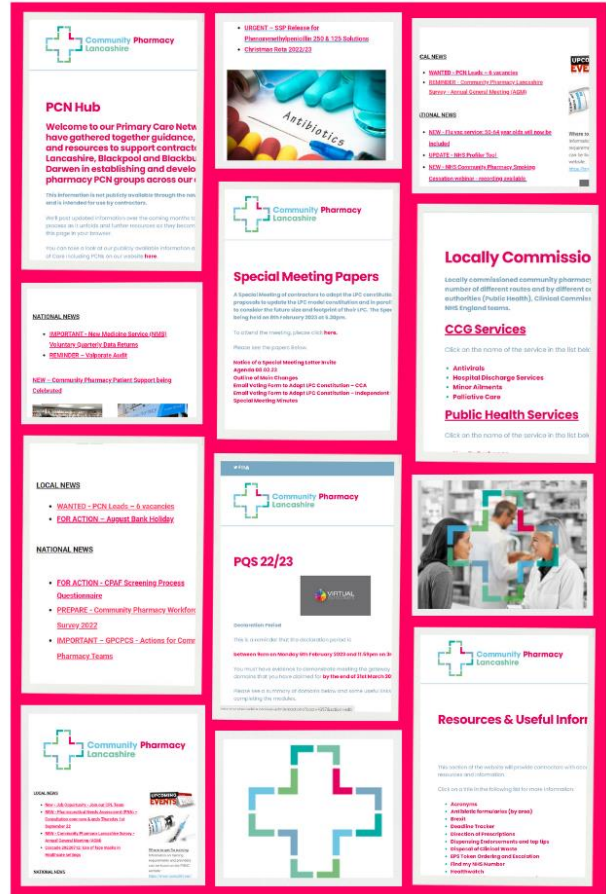
invested the time in picking the most fundamental dates and timelines across the year and that has really helped the majority of our contractors and a few examples have been shown were specific cash flow implications and Strep A updates were very timely and uptake therefore peaked.

Our Newsletter feeds at the beginning of the week have a mix off localised key messages for contractors, which also narrow down to specific commissioning boundaries and also include a roundup of the most pertinent National news to act as a reminder were needed.

We have also supported contractors with a newsletter towards the back end of the week which focusses on any service specific initiatives with the most common being our PQS ready updates. These may also include several other category updates around training options, new links to development opportunities for our teams, SLA reminders and any other important messages as received within week. We have also shown an outline of our top 10 most viewed pages and newsletter feeds.

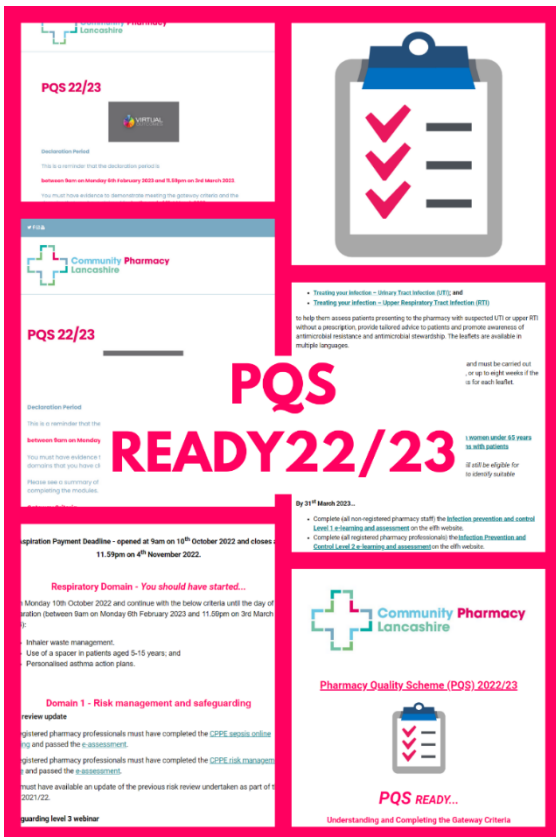
TOP 10 NEWSLETTER ARTICLES

- 01 Pharmaceutical Needs Assessment (PNA) – Community Pharmacy Lancashire Survey – Annual General Meeting (AGM)
- 02 Deadline Tracker, Discharge Medicine Referrals, Blood Pressure Checks Payments
- 03 WANTED – PCN Leads – 6 vacancies August Bank Holiday
- 04 SSP Release for Phenoxymethylpenicillin 250 & 125 Solutions, Christmas Rota 2022/23
- 05 Joint Local Guidance – Strep A Supplies Update, Critical Bank Holiday IT Systems access checks
- 06 Mandatory Workforce Survey, Bwell Boxes Project, Controlled Drug Reporting
- 07 Have you submitted your Valproate audit data yet? PQS Data Published
- 08 Community Pharmacy Patient Support being Celebrated, Independent Prescribers Pathway Survey
- 09 Update for Community Pharmacy Teams regards GPCPCS, Virtual Event – Exploring Capacity
- 10 Celebrating PCN Lead achievements from Tahir and team at Cohens Darwen Health Centre, Useful Links – Exploring Community Pharmacy Capacity and Empowering Teams Workshop Resources



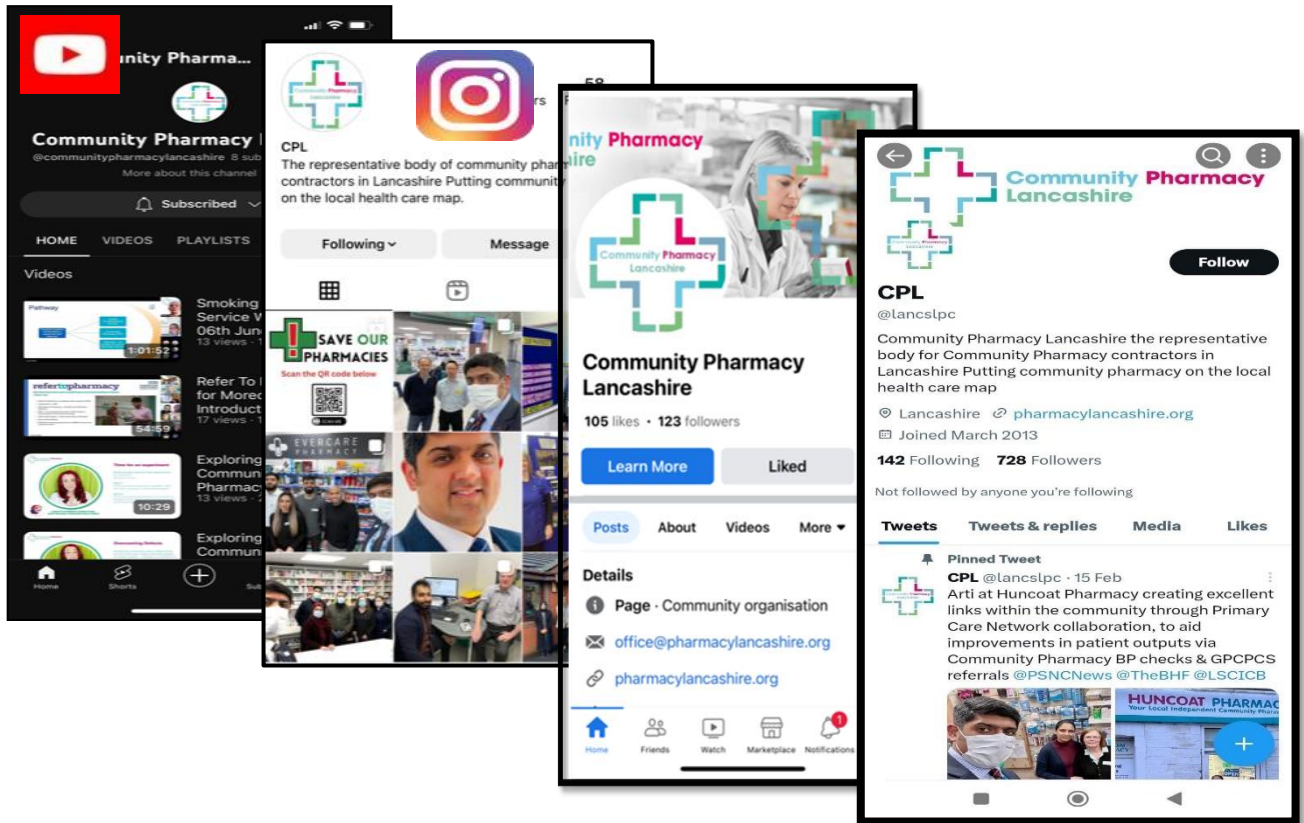
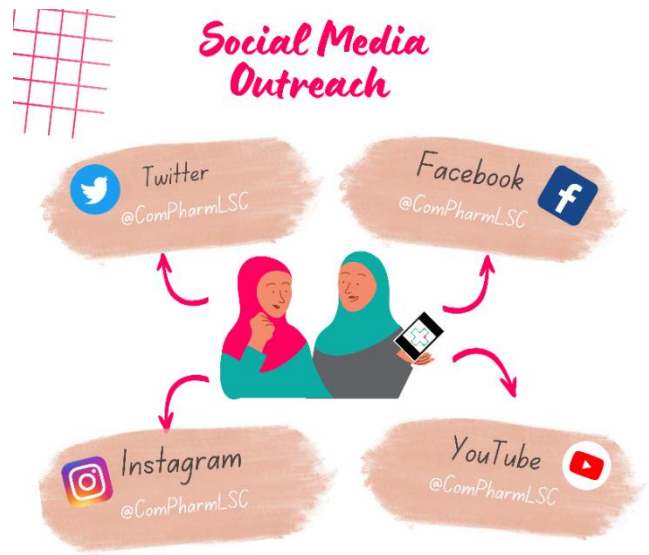
TOP 10 WEBSITE PAGES

- 01 Homepage
- 02 PQS Ready
- 03 Locally Commissioned Services
- 04 Special Meeting Papers
- 05 PCN Hub
- 06 Resources & Useful Information
- 07 NHS Services
- 08 Smartcards
- 09 Independent Prescribing for Pharmacists – Applications open for 23/24
- 10 The Committee



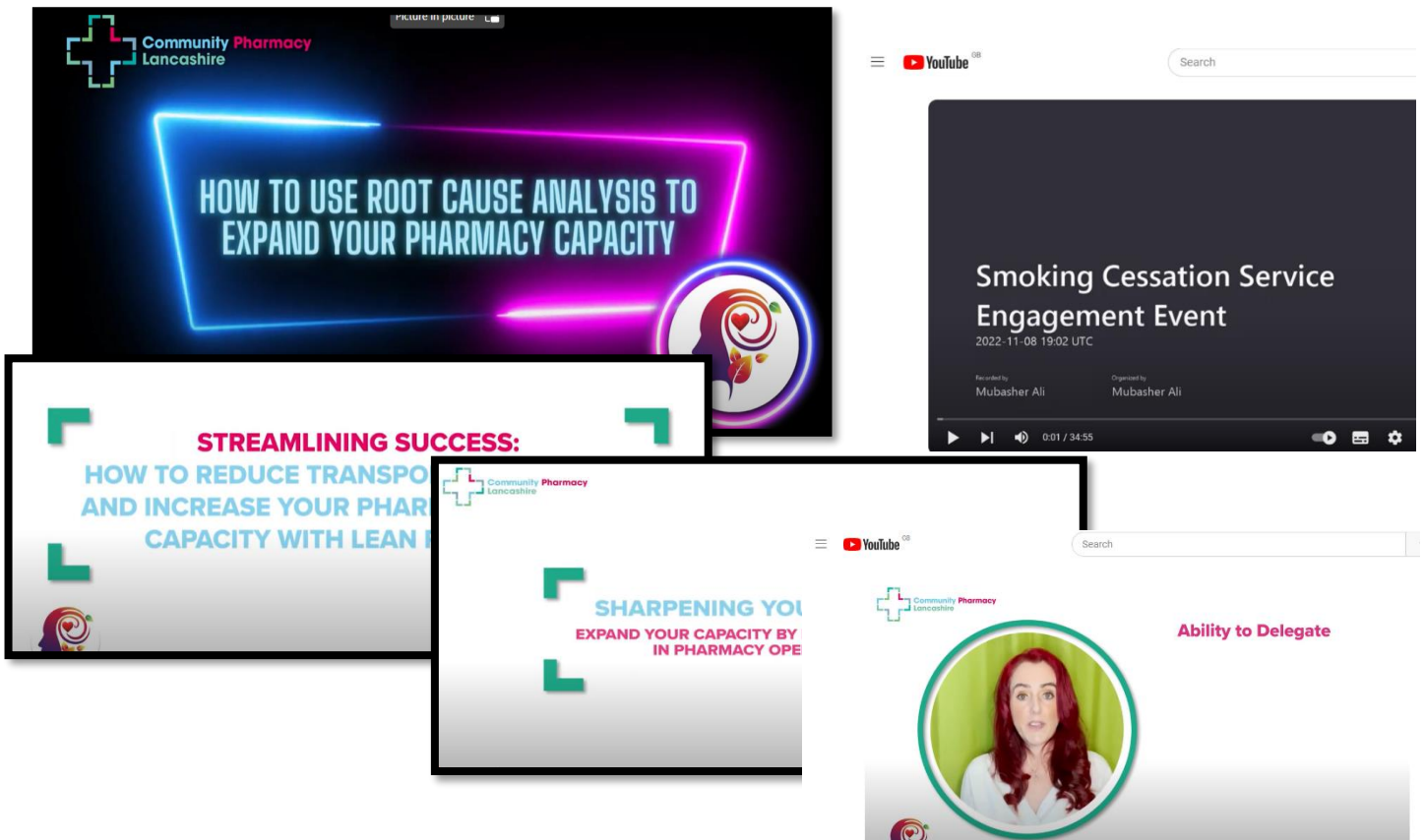
Outreach

CPL have created several brand-new social media platforms and have carefully created a series of posts covering various topics with a mixture of celebrations amongst our contractors whilst also highlighting serious issues such as the current and ongoing financial pressures and work force challenges. This effort has resulted in a growth of followers and interest in how CPL and the Community Pharmacies we represent can influence change as well as indicate the core role we play amongst Primary Care.



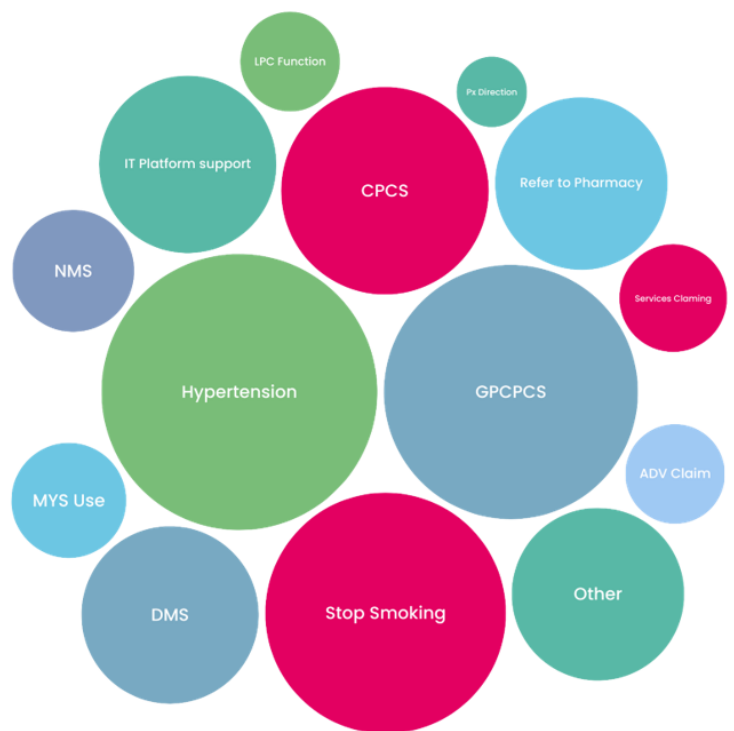
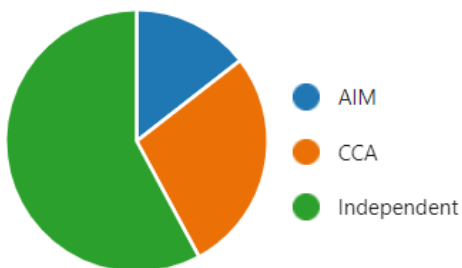
As well as growing CPL's existing Twitter and Facebook accounts, we have also introduced two new social media platforms, Instagram and YouTube. Both have been gaining interest and have been capturing new audiences. YouTube has been a fabulous way of keeping our contractors up to date with any new training videos for services as well as top tips on how to improve your pharmacy capacity.

Our CPL YouTube Channel currently hosts 12 videos, consisting of contractor training events such as Smoking Cessation and DMS as well as our Exploring Community Pharmacy Capacity and Empowering Teams Series. This is off the back of several face-to-face training sessions across Lancashire, which had then been broken down into 8 short videos for all contractors to view.



Contractor Visits Support

Across 22-23 the team have aimed to maximise the exposure of CPL support availability via digital communications but have also had a real hands-on approach to help our contractors via face-to-face visits, across a multitude of different topics areas, including direct requests. The charts depict the appropriate split of contractor groups in terms of the visits with the weighted overview graph giving more context around the specific nature of the visits themselves. It can be noted that the majority visits focused on Services & Contractual Support with others pertaining to IT platforms and commercial return.



Virtual Outcomes

CPL have continued our partnership with the Online healthcare training partner Virtual Outcomes across 22-23 and have also started discussions on additional future modules to continue supporting our contractors and their healthcare teams stay abreast of their contractual framework needs, as well as the ongoing CPD element of their professional work. Virtual Outcomes also allows for sharing of specific content with our GP practice colleagues around the GPCPCS referral mechanic to aid the referrals process and has been widely shared with our ICS colleagues.



Based on the latest 22-23-year end data we had a rise to 2248 total module views and the online system has now been utilised by over 43% of our contractors with a usage split amongst Independents, AIM and CCA sites.

Support Events

CPL organised several virtual events across the year around new service rollout as well as re initiating face to face training sessions after having listened to contractor feedback at both national and local level around the workforce pressures / capacity restraints & service delivery. CPL also wanted to help aid different contractor styles to learning and time restraints and hence commissioned Captivating Training Solutions to help deliver a series of face to face, virtual and new style shorter, sharper playback videos that could be uploaded onto our YouTube channel. This really aided our ongoing ambition of additional services revenue potential for our contractors. Some really positive



comments were received from contractors who attended the meeting and subsequent positive changes across services provision



“

CPL wanted to offer our contractors the chance to finally come together and openly share experiences and learns on the back of Covid Isolation and these face to face and virtual bitesize modules by Lynnete really encapsulated the need for all levels of contractor experience to stand back and review their skill mix opportunities and really grasp the services opportunity whilst delving into the day to day opportunities within our own model operations to create further efficiencies and maximise the available margins amongst very tough times for our Community Pharmacies

Tahir Hussain – Board Member CPL



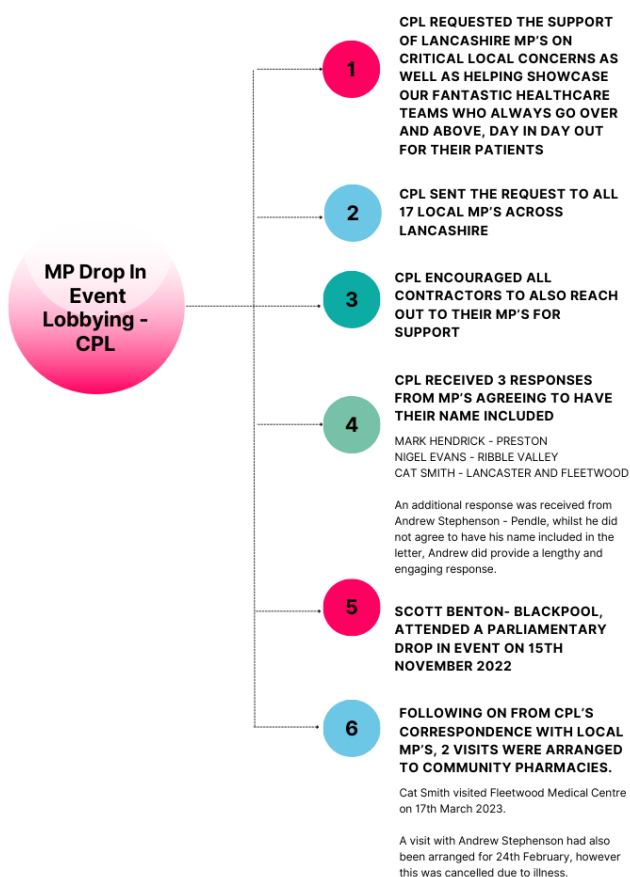
Stakeholder Engagement & Support

MP lobbying

Getting our messages across to those that can influence change in parliament is becoming ever so important and specifically tying this in with PSNC initiatives nationally allows a much bigger and more collective approach. With this in mind CPL pushed hard to keep the drum beat going around the ongoing pressures and requested the local level MP support from across the whole of Lancashire in support of the MP drop-in sessions with particular attention to the great work that our Community Pharmacies deliver on a daily basis around the Hypertension Case finding service. This then tied in with the wider support being present such as the NPA, CCA and RPS.

CPL also continued our local level lobbying efforts and planned several sessions with local MPs in association with board members. Our main aim was to pick out and really highlight the ongoing concerns with respect to unprecedented continued closure announcements and to showcase the sheer heritage and professional loss that these ongoing pressures will have within our communities

with one such example being part of a planned local MP visit was, Leedams' who have celebrated their 100 years of service to the community since 1922.



CPL Primary Care Network Leads

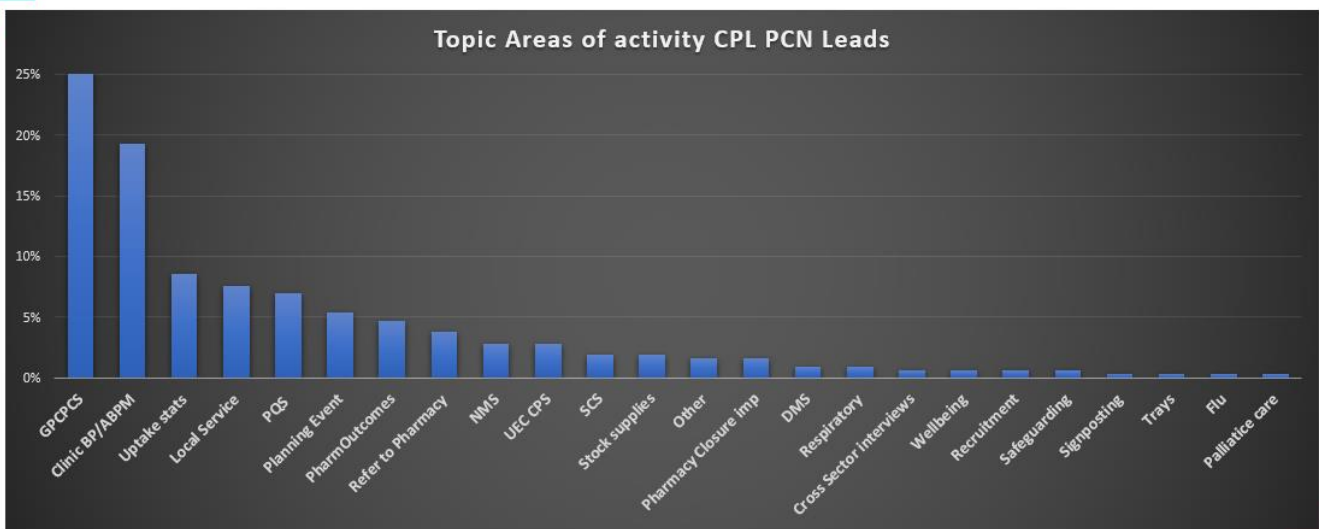
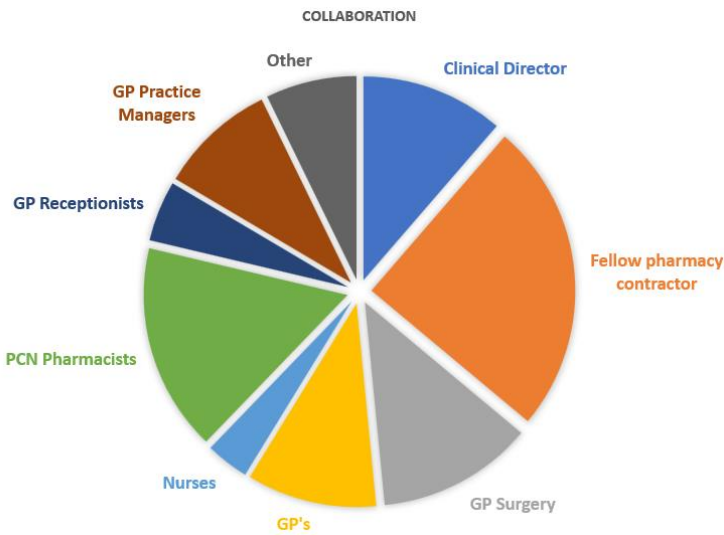
Amongst ongoing pressures and workload concerns themselves, our local CPL PCN leads continued to try and make what time they could in supporting the wider engagement with their Primary Care colleagues within their Primary Care Networks. It was great to have received the funding from the NHS PCN development fund as ring-fenced amounts, to allow our CPL PCN leads some sessional representation and for them to really help support the community access agenda for our neighbourhoods. As you will note from the graphical representation that they have certainly been very busy across the year with a real mix of activity type from multiple phone calls to attending face to face meetings.



In terms of the primary care and wider stakeholder collaboration ambition, that was anticipated from these roles, we can see that our PCN leads displayed a great depth and breadth of communication from keeping their local contractors up to date as well as regular liaison with Clinical Directors and other PCN Pharmacists as well as many other key stakeholders on behalf of their fellow contractors across the year.

When it comes to help driving a patient focussed approach and aiming to improve

patient access through additional NHS services via their local contractors the PCN leads have really aligned their efforts with those that have been a National and Regional NHS / ICS / Public Health focus and showing a truly diverse ability in getting involved in wide ranging subject matters as can be seen by the percentile representation. It depicts a heavy percentile towards the GPCPS and



Hypertension Case Finding service as well as other local services, overview of PQS delivery as well as IT mechanics used to support such work. This is further evidence that continued funding to help release our local CPL PCN Leads is critical to aid a robust primary care partnership of which Community Pharmacy is core.

In September the PCN Leads were invited by the ICB Pharmacy Local Professional Network to apply for a grant to support them in improving access to community pharmacy-based services. Several PCN Leads submitted applications based around the GP CPCS and the case finding hypertension service.

The work of our PCN Leads is vitally important as a communication conduit with the PCNs. The PCNs continued to mature, and are beginning to work together themselves to form Integrated Neighbourhood Teams, these allow for greater pooling of health and social care-based resources across a population, and it is key that community pharmacy teams are included as healthcare partners within these structures. To this end this is real opportunity for our PCN Leads to get involved and CPL continue to encourage their active participation and involvement within the available envelope of funding currently available.

Should you wish to know more about the work of the PCN Lead role or indeed become one, then please email office@cplsc.org.uk for more details and one of the team shall be in touch.



“

As a Primary Care Network (PCN) LEAD, covering key neighbourhoods across Blackpool, it was absolutely crucial I supported my Community Pharmacies, with the aim of aligning our efforts alongside our other primary care colleagues on the hypertension case finding service and support the critical EARLY detection for our local communities and subsequent prevention of future CVD risk, thus allowing them to live a better and healthier life

**Saif @ Grange Pharmacy
Clinician Pharmacist Manager
& PCN Lead CPL**



Wider Community Pharmacy Outreach & NPA Joint Materials

Workforce is a huge issue for our local contractors, and to this end we continued to work with various Pharmacy Workforce groups within the Integrated Care Board (ICB)¹ to develop our local workforce of pharmacists and pharmacy technicians.

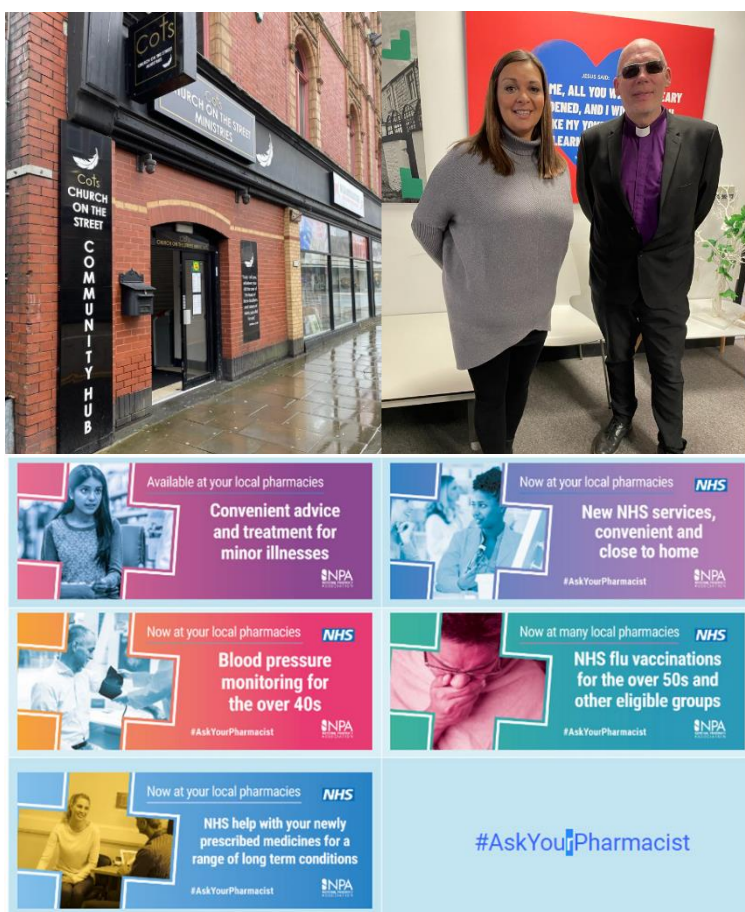
The NHS has undergone a significant restructure, a journey that began in 2016 in adapting how care is delivered, with the NHS in our footprint becoming the Integrated Care Board (ICB) for Lancashire and South Cumbria, taking over the delegated commissioning of community pharmacy from NHSE. To this end CPL have been heavily involved with this transition to ensure that our community pharmacies are seen as an integral part of this system. We have been working with the various ICB teams to ensure that community pharmacy is embedded in the work plans, both at the system level of Lancashire and South Cumbria and the four Places that this is divided up into, to allow more targeted care appropriate to the local residents helping to reduce inequalities.

¹ <https://www.lancashireandsouthcumbria.icb.nhs.uk/>

In collaboration with the NPA we worked hard to create show materials for third party hosting and visuals to ensure our contractors were able to continue their fantastic NHS services work in line with appropriately commissioned services. This would also help support the important need to inform the public of the availability of such NHS services direct from their Community Pharmacies.

As part of our community outreach work CPL supported Church on the Street, or COTS, as the locals like to call it, in Burnley. This is a faith in action charity, who have open doors for anyone who needs their help. On certain days of the week, they invite healthcare professionals and others to come and be on hand to provide various services and information. On the day CPL visited the local CCG was there, an organisation doing health checks and an optical practice doing eye checks. These all help local people access their much-needed healthcare.

A local pharmacy had already been to one of these events, and we were asked how can we increase the knowledge of the local pharmacies and the services they provide. To this end we reached out to the National Pharmacy Association (NPA) who helped produce a superb suite of posters in association with CPL that could be used in COTS, examples of which you can see here, and we took along when we went to meet both Nicola Leverett their Support Manager and founder Pastor Mick Fleming; both in the photograph. More details about COTS can be found at <https://www.cots-ministries.co.uk/>



Finance

Introduction

Community Pharmacy Lancashire is funded by a fixed statutory levy which NHS England (managed through the NHS Business Services Authority) is empowered by regulation to deduct from the remuneration paid to community pharmacy contractors.

Income Sources

CPL income for 2022/23 raised from pharmacy contractors via the levy was £275,000, an average of £781 per NHS pharmacy contract for the year. This was approximately 12% higher than last year's levy payment per contract, as we made slow returns to pre-Covid levels. Additional sums we received for support with GP CPCS and continued representation and support with community pharmacy PCN leads, with nominal committee meeting sponsorship from the industry. All of these combined were just under £183,000.



CPL Levy Spend 2022-23



Spending

For every £1 of levy income raised:

- 51p was spent directly supporting and representing contractors locally (via Community Pharmacy Lancashire and some Board members undertaking local representation).
- 39p was sent to PSNC to fund their work nationally for contractors in Lancashire.
- 10p was spent on administration and governance costs (making sure that we are a well-run, accountable organisation that meets its constitutional duties) – 56% of these costs being committee meetings.

For every £1 of non-levy income raised:

- 28p was spent directly on the ring-fenced purpose for the investment, most notably GPCPCS Lancashire wide office and clinical lead support as well as the

ongoing ring-fenced support for our CPL PCN leads from among our own contractor base in strengthening links between contractors and their home PCN. This is in addition to the ringfenced £40,000 spent during the previous year 2021/22.

- 72p was rolled-over to 2023/24 where each pot continues to be utilised for the same ring-fenced purposes.

Prior to the Covid-19 pandemic, we had created a surplus holding and had reduced our levy accordingly to run this down. During the Covid-19 pandemic we temporarily lowered our costs further and still ended the year with a surplus therefore we gave this back to contractors by reducing the levy again during 2021/22. In recognition of this not being sustainable indefinitely with continued dual reductions as well as having to contend with a lot of movement of team members and ongoing recruitment costs, at the end of 2022/23 we re-adjusted the levy back to more long-term sustainable levels to ensure it allows for effective governance, risk mitigation and effective frontline team support for our Lancashire contractors. This also aligns to the figures as released via PSNC under the TAPR realignment monetary forecasts.

Outlook

In budgeting for 2023/24 we have accounted for the pre pandemic level spends and completed a thorough zero-based budgeting forecast as outlined by PSNC and have allowed for expected uplifts in Local representation costs as well as border realignment as voted for in line with the TAPR and RSG principles. This meant that we could give more certainty to contractors by avoiding fluctuations in monthly levies. Outside of this we are aiming to be able to absorb the PSNC levy increases for 2023/24 and 2024/25 and aim to avoid needing to increase the contractor levy accordingly.

Benjamin Fell
Independent Treasurer
Community Pharmacy Lancashire

Governance

The role of CPL's governance subcommittee's is to ensure adherence to the required governance framework and LPC constitution. The Governance subcommittee comprises of three CPL members who meet regularly. It was also agreed following recommendations from the new CE mid-term that assignment of additional scrutiny principles should be incorporated into this sub group to add an additional layer of review and good practice on behalf of the board members. Therefore, the sub group was amended to better reflect the fighter control as Governance & Scrutiny subcommittee.



Key activities 2022-23:

- ✓ Overseeing the complexities of the RSG and TAPR border alignments which played a heavy part of the subcommittee in terms of oversight over the latter end of the year to progress the mandate as approved by the majority of contractors
- ✓ Reviewing the internal SOPs and Market Entry regulatory procedures and policies
- ✓ Overseeing the ongoing Health and Safety report for CPL's employees. This time we needed to consider how our team's day to day ways of working had changed post pandemic with a return to face to face meetings and a combined hybrid model of working. This was also true in terms of direct contractor support as we also embarked on an improved digital model of support for our contractors and stakeholders
- ✓ Ensuring that the committee members were up to date with all their regulatory sign offs and declarations such as GDPR / Nolan Principles, Personal Liability and declarations of interest
- ✓ Completing and updating the required Governance self-evaluation and exploring potential procedural changes to further enhance our rating in the very small number of categories which were not already rated at the highest category of exemplary.
- ✓ Ensuring that our complaints procedure is robust and followed in acting in an open and transparent manner on any feedback regarding alleged breaches of governance received during the year.
- ✓ Reviewing and updating our risk register to ensure previously identified risks were still relevant and identify any new risks to our business continuity arrangements. This also included the CE introducing an RCA tool for improved learnings and analysis ongoing.
- ✓ Financial scrutiny was also applied to zero based budgeting principles and specifically an introduction of 'community' style venue options for meetings and events where appropriate capacity allowed
- ✓ The ongoing review of detailed minutes and more appropriate timelines was also introduced via the CE to allow for internal efficiencies and more up to date transparency of discussions on behalf of our contractors

Roger Balshaw
CPL Board Member
Chair, Governance & Scrutiny Sub Committee
Community Pharmacy Lancashire

Choose Health

2022/2023 has seen Choose Health secure a further twelve-month extension to deliver the NHS Health Checks contract and be awarded the NHS Health Checks contract for workplaces and places of worship.

The community contract has been configured differently with a significant shift towards focussing on areas of health inequality and adopting a Making Every Contact Count, community development approach to working with those communities and individuals experiencing the most disadvantage and poorest health.

Choose Health are proactively working on business development and intend to enter into tenders for a number of community service contracts during 2023/24.

The snapshots showcase the efforts being made by Head of Operations James Knowles at Choose Health, in really getting out to relevant communities such as the Armed Forces Day at Preston Barracks and the support he received from Sir Lindsay Hoyle as part of the NHS Health Checks.



Suzy Knowles & Sophie Smith
Co-Chief Executives
Choose Health



CPL Membership 2022-23

CPL Member	Representing	Attendance
Aisling O'Brien	Independent	3 out of 5
Ali Dalal	Independent	4 out of 5
Arifbhai Bhuriya	CCA	4 out of 5
Asif Adam	Independent	5 out of 5
Georgina Barber	CCA	2 out of 2 (Joined Nov)
Hamzah Hasan	CCA	0 out of 1 (resigned May)
Keri McCourt	Independent	4 out of 5
Khalid Khan	Independent	5 out of 5
Mari Williams Vice Chair (mid-term)	CCA	2 out of 2
Michael Ball Vice Chair (mid-term)	Independent	5 out of 5
Mubasher Ali	CCA	2 out of 3 (resigned Sept)
Riaz Hinglotwala	Independent	4 out of 5
Richard Wood	CCA	4 out of 5
Rima Bagratyan	CCA	1 out of 5
Roger Balshaw	CCA	5 out of 5
Tahir Hussain	AIM	4 out of 5
Yusuf Oomer	CCA	5 out of 5

The committee of CPL consists of 15 members; a full list is shown in the table above. Sadly, due to work commitments we had to say farewell to Mari Williams our Vice Chair and CCA representative who was replaced by Georgina Bamber who joined the Board.

We also had to say farewell to team members Nicola Feeney Interim Chief Officer, Laura Dunkley Operations and Contractor Lead and Mubena Isap Business Support Officer.

We would like to thank everyone for their contributions and participation during their time with CPL.

Following these changes with the Board, Kath Gulson became the Executive Chair of CPL, with Mike Ball as Vice Chair, and during the year we welcomed Mubasher Ali as our Chief Executive and Naomi Parker as Business Support Officer.

Fin Mc Caul continued as our Pharmaceutical Services Negotiating Committee (PSNC) Regional Representative, attending our meetings, and always available for help and support and feeds your comments and news directly into the meetings of PSNC.

Any contractor is able to attend our meetings, you simply have to let us know of your intention, so we can arrange access. This is an ongoing and open invitation.

2022/23 was the final year of this current committee cycle. Normally a four-year cycle, this committee term had been extended by one year to provide time and space to work on the recommendations laid out by the community pharmacy Review Steering Group (RSG) following the Wright Review and Transforming Pharmacy representation (TAPR) work stream that resulted in the publication of 37 recommendations for both Local Pharmaceutical Committees (LPCs) and PSNC.

CPL called a Special Meeting of Contractors in February 2023 to look at the recommendations of community pharmacy representation going forwards and the adoption of the new CPL Constitution. Adoption of the new constitution was unanimously approved, enabling the work to continue including preparation for elections for a new Board to begin in July 2023

*all the data sets were taken from national sources NHSBSA / PSNC and local PO datasets and were correct at the time of extraction but may include minor LPC / ICS border alignment data

CPL's Vision

Community Pharmacy Lancashire – Practical, Representative & Visionary

