



Introduction

The committee has met on 11 occasions during 2023/24 with face-to-face meetings alternating with virtual meetings on the Zoom platform. The community pharmacy contractors and their teams in Birmingham and Solihull should be enormously proud of what they have achieved in yet another very challenging year. The Exec and committee members would like to register their appreciation to everyone providing pharmaceutical care and advice to patients and customers in their localities: pharmacists, technicians, dispensers, trainees, counter staff, delivery drivers and volunteers. Thank you.

CP BSol continues to monitor items dispensed across Birmingham and Solihull each month (BSA Data) and noted a further 3.2% **rise** in 23/24, continuing the upward trend. This was delivered against a 3.2% **decline** in contractor numbers in the year. Since the LPCs merged in 2018, contractor numbers have declined by 36 (-10.5%). This has meant additional work for almost every contractor at a time when the global sum was capped for the fifth year and at a time when the costs of operating a pharmacy continued to rise steeply.

| In March | Contractor numbers | YoY % Decline | Cumulative Decline in contracts from 2018 | Item growth v Prev Year |
|----------|-----------------------|------------------|--|----------------------------|
| 2018 | 342 | | | |
| 2019 | 337 | -1.5 | | |
| 2020 | 328 | -2.7 | -4.1 | |
| 2021 | 325 | -0.9 | -5 | |
| 2022 | 319 | -1.8 | -6.7 | 2.9 |
| 2023 | 316 | -0.9 | -7.6 | 7.1 |
| 2024 | 306 | -3.2 | -10.5 | 3.2 |

The average dispensing fee (BSA data) continued to fall year on year (again) until the final quarter adding to the financial challenges for every contractor. The challenges to obtain stock and at the right price adds time and pressure on to the daily pharmacy activity which CPE is aware of nationally but does not appear to be having any success at influencing change.

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Membership

At the first meeting in the year, the officers were (re)appointed:

| Chief Officer | Mr Jeff Blankley |
|--------------------|-------------------------|
| Chair | Mrs Rebecca Butterworth |
| Vice-chair | Mr Ameet Pancholi |
| Treasurer | Mrs Carol McNidder |
| Governance Officer | Mr Harj Sadhra |

The 12-member committee formed in July 2023 was made up of 7 independent members, 3 CCA members and 2 IPA (formerly AIMp) members. The executive would like to recognise the support given by all the members and for their hard work to represent all the community pharmacy contractors across Birmingham and Solihull.

Ways of Working

CP BSol adopted the new standard LPC constitution supporting contractors who operate in the Birmingham and Solihull Health and Wellbeing Board (HWBB) geographies. CPE commissioned Prof Wright in 2020 to undertake a review of the (then) PSNC's and LPCs' functions and ways of working which produced 33 recommendations. A national steering group was formed to agree how to take these recommendations forward and this work largely concluded in 23/24 and explained why the formation of the new committee was delayed for 3 months.

National Issues

The final year of the NHS's 5-year "flat" funding arrangements agreed nationally in England have made the financial pressures for contractors nearly impossible to cope with. There was a determination within government to see this 5-year settlement to the end of its term. Worryingly with a strategic spending review and a general election both likely to happen in "year 6", the LPC cannot see an end to the global sum pressure in the near future.

Despite all these pressures and challenges, contractors have continued to maintain uninterrupted supplies to patients wherever possible and this needs to be recognised and highlighted particularly in very trying circumstances.

Additional funding (non-global sum) was secured during the summer when £645m was made available (for 2 years) as part of the Primary Care Access Recovery Plan (PCARP). This was designed to provide additional funds to community pharmacy and came with additional work meaning the fundamental problem with the contractual framework remained. The Access Recovery Plan aimed to offer patients alternative options to always seeing their GP. Referring patients with certain minor illnesses into community pharmacy to receive a Pharmacy First consultation with the pharmacist was an integral part of the plan. This new Pharmacy First Service together with additional funds to finance increased activity of existing blood pressure check and contraception services should support primary care to use GP appointments for more complicated or complex conditions. And together with some promised IT upgrades to make transfer of information from community pharmacy to general practice smoother, contractor delivered from the first day. The aim to launch Pharmacy First in the autumn was delayed until the specifics of the service were agreed nationally, missing the "winter pressures" opportunity. Finally launching on January 31st, 2024, with 7 new clinical pathways and 23 PGDs, contractors mobilised in a few weeks of the service specification being released. A truly heroic effort considering the time of year, seasonal pressures and the upskilling pharmacists needed to deliver the service. CP BSol in collaboration with its neighbours hosted over 800 ENT training sessions and operational tips throughout the final quarter of 23/24.

Although the IT developments lagged behind the service delivery, the first 2 months of activity shows a very promising start with positive feedback from patients and surgeries where the engagement, collaboration and cooperation worked well. Thank you.

| Month | Clinical Pathways Consultations - Acute Otitis Media | Clinical Pathways Consultations - Acute Sore Throat | Clinical Pathways Consultations - Impetigo | Clinical Pathways Consultations - Infected Insect Bites | Clinical Pathways Consultations - Shingles | Clinical Pathways Consultations - Sinusitis | Clinical Pathways Consultations - Uncomplicated UTI |
|--------------|--|---|---|---|---|--|--|
| Feb- | | | | | | | |
| 2024 | 461 | 1,415 | 121 | 108 | 82 | 395 | 1,008 |
| Mar- 2024 | 603 | 1,810 | 127 | 112 | 73 | 334 | 927 |

There is still a long way to go! There are over a third of surgeries not offering this service to their patients and the majority of activity is still originating from NHS 111 and self-referrals. In total contractors claimed 12,000 Pharmacy First consultations per month in the first two months following the service launch.

The payments received by contractors for dispensing prescriptions remain the most significant revenue stream and the most under pressure. NMS is the biggest advanced service and revenue for CP BSol contractors - although delivery is still variable, a pleasingly improving trend has been seen in 23/24

| Month / Year | Completed NMS Claimed on FP34C | Number of pharmacies delivered NMS | Number of pharmacies delivered zero NMS |
|-----------------|-----------------------------------|---------------------------------------|--|
| Apr-23 | 6,721 | 253 | 66 |
| May-23 | 6,936 | 246 | 74 |
| Jun-23 | 7,220 | 236 | 81 |
| Jul-23 | 7,595 | 239 | 80 |
| Aug-23 | 7,671 | 243 | 71 |
| Sept-23 | 7,582 | 250 | 59 |
| Oct-23 | 8,313 | 262 | 43 |
| Nov-23 | 8,991 | 268 | 41 |

| Dec-23 | 9,336 | 265 | 44 |
|--------|--------|-----|----|
| Jan-24 | 9,264 | 261 | 47 |
| Feb-24 | 9,643 | 261 | 47 |
| Mar-24 | 10,013 | 255 | 52 |

This service generated c£2.5m of income together with huge patient benefits in 23/24 and almost £1m more than in 22/23. With c2.2m items dispensed by B Sol contractors per month, the potential NMS opportunity is c22,000 pm – so collectively we are delivering at c45% of the opportunity.

The NHS Hypertension Service (Bp Check Service) has seen very variable growth as other services compete for the limited capacity in some pharmacies. Easier referrals are welcome and, screening at the community pharmacy with trained staff has made this a very popular service in some locations. There remain some questions to be asked as to why "ABPM-eligible" patients do not take up the next level of service.

| | | | СР |
|------------|-----------|------|---------------|
| Month | BP Checks | ABPM | Participating |
| Apr-2023 | 4,158 | 298 | 114 |
| May -2023 | 4,815 | 249 | 124 |
| Jun -2023 | 4,988 | 248 | 137 |
| Jul -2023 | 6,122 | 250 | 139 |
| Aug - 2023 | 3,670 | 213 | 83 |
| Sept- 2023 | 3,906 | 164 | 131 |
| Oct -2023 | 4,813 | 275 | 134 |
| Nov-2023 | 5,323 | 294 | 152 |
| Dec-2023 | 3,103 | 248 | 151 |
| Jan-2024 | 3,991 | 247 | 169 |
| Feb-2024 | 4,613 | 469 | 184 |
| Mar-2024 | 4,706 | 424 | 183 |

The NHSE Contraception Advanced Service progressed slowly in 23/24. This seemed to be the service needing most time to become accredited (unless already providing via the Umbrella service) and both Pharmacy First and Bp Checks were easier for the contractors to mobilise first. The increased activity towards the end of the year can be attributed to contractors migrating Umbrella OC services to the NHS service because of uncertainty and complexity with the umbrella commissioning arrangements and a higher fee from the NHS service.

| Month/ Year | Number of Community Pharmacy Contraceptive Ongoing Consultations | Number of Community Pharmacy Contraceptive Initiation Consultations | Number of CP delivering Ongoing service | Number of CP delivering Initiation Service |
|----------------|---|---|---|--|
| Apr-23 | 3 | | 1 | |
| May-23 | 38 | | 1 | |

| Jun - 23 | 66 | | 3 | |
|----------|-----|-----|----|---|
| Jul - 23 | 122 | | 6 | |
| Aug - 23 | 74 | | 9 | |
| Sept- 23 | 108 | | 9 | |
| Oct-23 | 108 | | 13 | |
| Nov-23 | 142 | | 15 | |
| Dec-23 | 394 | | 28 | |
| Jan-24 | 275 | 56 | 38 | 7 |
| Feb-24 | 386 | 106 | 54 | 7 |
| Mar-24 | 333 | 99 | 60 | 9 |

The NHS Advanced 'Flu Service activity delivered through community pharmacy contractors in B Sol was lower than the previous season's activity: 66983 'flu administered (-14.2% v 22/23) mainly due to changes to the eligible cohorts between seasons. Contractors delivering Covid vaccinations are now providing c50% of the activity across the B Sol system, although figures are not easily accessible to the LPC.

The Discharge Medicines Service (DMS) remained dormant again from the UHB hospital sites in 23/24. CP BSol has escalated its concerns nationally but referrals from UHB are still not happening. As an essential service patients discharged in Birmingham and Solihull are not receiving a service from community pharmacy available across other systems in England. Disappointing. The Royal Orthopaedic Hospital has started making referrals using the recognised pathway, but activity is low.

Interestingly, UHB have worked hard in 2023 to support patients who smoke (at admission) to quit during an inpatient stay and tried to refer the patients who wish to continue their quit attempt (once discharged) to the community pharmacy NHS Advanced Smoking Discharge Service using the PharmOutcomes pathway. The overall claims by community pharmacy remain very low even though many patients indicate a willingness to be referred whilst in hospital. The LPC continues to seek to understand why opportunities to support smokers to quit have resulted in so few successes.

Local Issues

Smoking Cessation Services continued to be commissioned directly by Birmingham City Council (BCC) and via a partner in Solihull. The re-procurement of the Birmingham service in October 2023 resulted in significantly fewer contractors signing up. This could have been due to an overcomplicated tender submission, or lack of capacity to deliver this service with all the new services coming online. BCC has continued to encourage more community pharmacy contractors to provide the service especially where there are "gaps" in some parts of the city. Fees were increased with the new contract. The LPC looks forward to more success as nationally additional grants will be provided to work towards smokefree by 2030.

Sexual Health Services continued to be procured from "Umbrella" (University Hospitals Birmingham - UHB) by the City Council and by Solihull MBC directly. The BCC <> UHB contracting arrangements

ended in March 2023 and although UHB was confirmed as the main sexual health provider in Birmingham, the contracts have not been signed preventing any subcontracting arrangements (Umbrella <> community pharmacy contractors) to be agreed. This has been a disappointment throughout the second half of 23/24. Although community pharmacies have been assured payments will continue, it is unsatisfactory that no contracts are in place. CP BSol is disappointed with the proposed fee increase after a 7-year freeze in fees over the original contract period. Contractors need to consider how the oral contraception service is delivered now there are two services available (the NHS Contraception and Umbrella). The LPC believes the umbrella fees are now uncompetitive.

Substance Misuse Services through community pharmacy continued with the existing prime provider in Birmingham – CGL and SIAS in Solihull. It is pleasing to report an increase to supervision fees from CGL was agreed at the beginning of 2023 and an expectation of a similar review to the needle syringe programme fees in 2024.

A small number of contractors continued to provide a palliative care service which is valued by patients and their carers/relatives at a time of urgent need.

As locally commissioned services are being re-tendered, CP BSol encourages contractors to review the costs of providing the service and the revenue generated and is keen sensible decisions are made by contractors so undue additional pressures are not added to the day-to-day activity for the pharmacy teams without a reasonable return.

CP BSol welcomed the B Sol Integrated Care Board's (ICB) decision to appoint a Community Pharmacy Clinical Lead (Shalina Anwar) and go on to make the role permanent quickly. The exec team and the committee enjoy a very good relationship with Shalina who provides a community pharmacy voice within the ICB and has provided great support to primary care to enable the new services to be understood better by GPs and their teams. We are very lucky to have such an advocate of community pharmacy who understands community pharmacy in the ICB - that now has delegated responsibility for the community pharmacy contract for the B Sol system (as well as the dental and optometry professions)

CP BSol has had, for many years, an independent Governance Officer. With the RSG recommendations being actioned and governance arrangements needing to be more consistent in LPCs, the LPC was sorry to see Harj Sadhra step away from the role in early 2024 and the LPC has appointed a Governance Subcommittee from non-exec members of the committee to ensure governance standards are maintained. The committee would like to express its appreciation to Harj for his contributions to the governance of the LPC over the past 4 years.

Future

There continues, yet again, to be significant changes ahead which will impact how community pharmacy delivers care and services to patients and CP BSol looks forward to being an active stakeholder, with other organisations, to support contractors during these changes.

We look forward to the funding announcements for 24/25 and beyond as well as a review of the community pharmacy contribution to the PCARP and the recognition community pharmacy is contributing to primary care as the NHS organisational changes mature.

And finally, these changes will coincide with the new pharmacist training programme as newly qualified foundation year pharmacists enter the profession with a prescribing qualification from 25/26. CP BSol will be supporting the IP Pathway sites in 23/24 and will continue to seek clear communications from NHSE, HEE (WT&E) and CPPE which support contractors navigate these changes and continue to be edgy with these organisations when community pharmacy is not fully considered.

Accounts

For contractors' information, the LPC's 23/24 accounts are attached in line with new accounting practices recommended by CPE. Contractors will see costs have been well controlled again and we look forward to your approval at the AGM.

Thank you.