

## ENGLISH PHARMACY BOARD MEETING – OPEN BUSINESS

Minutes of the open meeting held on Tuesday 17 September 2024 at 9.30am on Zoom.

**Present:**

**English Pharmacy Board**

Erutase (Tase) Oputu (TO) (Chair), Adebayo Adegbite (AA), Claire Anderson (CA), Martin Astbury (MA), Danny Bartlett (DB), Sibby Buckle (SB), Steve Churton (SC), Ciara Duffy (CD) (in part only due to internet issues), Sue Ladds (SL), Michael Maguire (MM), Ewan Maule (EM), Matthew Prior (MP)

**In attendance:**

**RPS Staff**

Paul Bennett (PB) Chief Executive (from 10.30am), Osman Ali (OA), (CPhO Clinical Fellow), Prof Diane Ashiru-Oredope (DAO), Deputy Chief Scientist, Corrine Burns (CB), News Reporter PJ, James Davies, Director for England, Yvonne Dennington (YD) Business Manager, England, Amandeep Doll (AD), Head of Professional Belonging and Engagement, Hanna Jenvey (HJ), Events and Sponsorship Manager, John Lunny (JL), Public Affairs Lead England, Heidi Wright (HW), Practice and Policy Lead for England,

**RPS Member Observers:** None

**Guests:** Sunayana Shah, (SS), Chair of Industrial Pharmacy Advisory Group

**Apologies**

Brendon Jiang (BJ),

<b>24.09.EPB.01</b>	<p><b>Welcome and Apologies</b></p> <p>The Chair welcomed board members and staff to the English Pharmacy Board open business session.</p> <p>Apologies were received from Brendon Jiang. Ewan Maule gave apologies for 11am – 11.30am when he will have to leave the meeting for another appointment. Ciara Duffy did not attend the full meeting due to internet failure.</p> <p>The Chair welcomed Osman Ali, the new CPhO Clinical Fellow for 24/25. She also paid tribute to Clare Thompson, the outgoing Clinical Fellow, and for the work she has done on the Repeat Prescribing Toolkit.</p>	
<b>24.09.EPB.02</b>	<p><b>Declarations of Interest</b></p> <p>The EPB noted paper 24.09.EPB.02</p> <p>Further amendments to declarations of interests were received from:-</p> <ul style="list-style-type: none"><li>• SL – addition of member of the GPhC Statutory Committee</li><li>• DB – addition of role with NHS England (start date not yet confirmed) and removal of PCN</li></ul> <p><b>Action 1:</b> Update declarations of interest and put on website.</p>	
<b>24.09.EPB.03</b>	<p><b>Approval of the minutes and actions from the previous meetings held on 18<sup>th</sup> and 19 June 2024</b></p> <p>The minutes of the EPB meeting held on <b>18<sup>th</sup> June 2024</b> were accepted as a true and accurate record of the meeting.</p> <p>Minutes Approved by: Adebayo Adegbite and Seconded by Danny Bartlett</p> <p>The minutes of the EPB meeting held on <b>19<sup>th</sup> June 2024</b> were accepted as a true and accurate record of the meeting subject to the amendments below:-</p> <ul style="list-style-type: none"><li>• All track changes in the document were accepted</li></ul>	

	<ul style="list-style-type: none"><li>• 24.06.EPB.12 – England 2025 planning – page 8 – para Inclusion and Diversity – add: “The Board <b>agreed</b> that Inclusion and Diversity should remain as a separate workstream.”</li><li>• 24.06.NPB.13 – page 11 – after “net promoter score” add (satisfaction and customer loyalty) as a way to explain the term.</li><li>• 24.06.NPB.13 - page 15 – Action 6 – add “subject to action 5 above”</li><li>• Action List: Action 6 is missing – insert with amendment.</li></ul> <p>Minutes Approved by Steve Churton and Seconded by Claire Anderson.</p> <p>There was a board discussion raised by SB regarding future minutes attributing points raised to individual board members rather than anonymising comments. Board members <b>were in agreement</b> with this change of style for future EPB minutes.</p>	
<b>24.09.EPB.04</b>	<p><b>Science and Research Update</b></p> <p>The EPB noted paper 24.09.NPB.04</p> <p>The Chair welcomed Prof Diane Ashiru-Oredope to the meeting.</p> <p>DAO presented a set of slides on behalf of herself, Amira Guirguis (Chair of SRC) and Parastou Donyai (RPS Chief Scientist)</p> <p><b>Action 2:</b> Circulate S&amp;R slides to board members.</p> <p>The presentation covered the S&amp;R team and committee with a focus on ongoing work, project work and suggested policy areas for the Board to consider.</p> <p>The team are focused on developing research capability and capacity in pharmacy alongside driving innovation and building the evidence base. The work of the team has an external (member focused) and internal focus.</p>	

	<p>The committee currently has 3 working groups and plans to form a fourth working group on “new medicines and emerging technologies”.</p> <p>Some suggested policy areas for the boards to consider were put forward:-</p> <ul style="list-style-type: none"><li>• Taking a strong stance on vaping</li><li>• Raising public awareness of dangers of online purchasing</li><li>• Position statement on Medicines Reuse</li></ul> <p>SC asked what collaboration there was currently with the RPS and Pharmacy Research UK, which is an independent charity and draws funding from National Institute for Health and Care Research. DAO said that conversations were ongoing regarding the next conference and there was a willingness to work together and access funding opportunities.</p> <p>CA asked if the medicines shortages literature review will be going to peer review and then published. DAO said that was in the plan.</p> <p>S&amp;R will be running a webinar for members and non-members highlighting the S&amp;R webpages – this will be open access and will demonstrate the value of the member proposition.</p> <p>AA mentioned World Suicide Day and any publications going out about this should not mention specific drugs. DAO said she will check any messages that go out from the media team to ensure drug names are not mentioned.</p> <p>AP raised the issue of pharmacy services being evaluated and the RPS position on this. DAO said she would report back on this question.</p> <p><b>Action 3:</b> DAO to report back on the RPS position in relation to evaluating pharmacy services, adding that this may be for the Boards and Executive team to consider.</p> <p>The RPS has no direct influence on NHIR but does have influence on the Pharmacy Research Advisory Group, which is co-chaired by the Chief Pharmaceutical Officer and</p>	
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	<p>Christine Bond, (Emeritus Professor, Freelance Research Consultant and Member of the RPS Panel of Fellows). CA also represents Nottingham University on this group. It was noted that the Pharmacy First evaluation is being funded by NHIR.</p> <p>DAO added that currently work was going on with the Pharmacy Deans on how the pharmacy profession contribute and impact on pharmacy services – how can we justify the time away from core role to do research – there is a systematic review taking place. SC asked if this would include an economic evaluation, DAO said that this is not included currently but could be in the future.</p> <p>SB referred to the suggested work on taking a strong stance on vaping and asked if there was more evidence in this field. Robust clinical evidence was needed and suggested this work could be done in partnership with other Royal Colleges. DAO said she would look for updated evidence on which the Board could base its decision on whether to take this work forward.</p> <p><b>Action 4:</b> DAO will check if S&amp;R have any updated evidence on vaping and report back in the form of an options paper.</p> <p>The Chair raised the issue of improving diversity in the field of research noting also the lack of diversity in the shortlist for the OPERA (Outstanding Pharmacy Early Career Researcher) award. DAO said that the Chief Scientist was active in this area and was having conversations on the diversity of those put forward and those on judging panels. The Chair said that as this is a GB wide issue it may need to go to Assembly for consideration.</p> <p><b>Action 5:</b> Chair to raise I&amp;D aspects of OPERA award via Assembly.</p> <p>The Chair thanked DAO for attending and thanked her and the team for their contributions to the EPBs workstreams.</p>	
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24.09.EPB.05	<b>Open Display of P medicines – update</b>	
	<p>JD gave an update saying that this item was discussed in some detail at the June Board meeting by all three Boards and emphasised that the RPS policy position remains unchanged at this point.</p> <p>After the June meeting a call for evidence was published and this closed on 6 September. The S&amp;R team are working through the responses and have also carried out a literature review. The results of the call for evidence and the literature review will be put together in a pack for Board members at their joint meeting on 7 November, to enable board members to make a decision on the way forward.</p> <p><b>Action 6:</b> Open Display of P Medicines literature review and call for evidence results will be forwarded to Board members in time for their meeting on 7 November.</p>	
24.09.EPB.06	<b>Public Affairs Update</b> <p>The Chair welcomed JL to present at the meeting.</p> <p>JL highlighted the following</p> <ul style="list-style-type: none"><li>• Election in July – new government – new ministerial team</li><li>• Huge turnover of MPs – Labour has large majority – over half MPs are new</li><li>• Political landscape – challenging – NHS waiting lists/constrained public finances</li><li>• Labour keen to set out challenges and saying will take a few years to address</li><li>• They need to build an NHS fit for the future</li><li>• Health and growth agenda – cut waiting times/getting people back into work/creating jobs in the NHS</li><li>• Darzi Review – called for evidence – review reported quickly - NHS broken – new government will take time to address problems – setting the stage – 10 year plan</li><li>• Review mentioned a community pharmacy prescribing service</li></ul>	

	<ul style="list-style-type: none"><li>• New Parliament – new shadow ministers – new select committees – new Pharmacy APPG (RPS co funds this) – new health select committee</li><li>• Medicines shortages – great interest from MPs</li></ul> <p>The Chair said there was a huge amount going on and there will be many MPs who do not have a great understanding of pharmacy.</p> <p>MP raised the issue of secondary care and not forgetting about this sector. The Chair responded saying that evidence was submitted for secondary care but we are aware of the large lobbying group for community pharmacy.</p> <p>DB added that we should make the most of opportunities and raise the profile of “prevention” on the NHS agenda and now was a good opportunity to shine the light on pharmacy. AP added that there needs to be a greater understanding of general practice and pharmacy.</p> <p>EM raised the issue of the rising cost of drugs and the financial impact. Pharmacy is a big part of the budget and pharmacy teams could be impacted. It is important to raise the profile of what pharmacy teams do.</p> <p>SB added that there is still an issue with bringing the legacy workforce up to speed with prescribing and asked if RPS should be doing anything about this.</p> <p>JL thanked the board for their comments and said the 10 year plan will be the opportunity to push areas of concern forwards.</p> <p>The Chair thanked JL and said the discussion had been a good precursor to the upcoming session in confidential business on the EPB/GB workplan for 2025. She added that the discussion was testament that the EPB spans across the whole of pharmacy.</p>	
24.09.EPB.07	<b>Events update</b> <p>The Chair welcome HJ to the meeting.</p>	

	<p>HJ gave some background on the team and the work they do. So far this year they have held 89 events with 9000 attendees. They have a further 44 events planned for the autumn, 64% are in person events.</p> <p><b>Constitution and Governance (C&amp;G) Roadshows</b></p> <p>14 in person events have been planned and 2 events on zoom. There has been positive engagement so far and 15% of the bookings have been from non-members. HJ asked Board members to book on to events asap to enable the team to identify any gaps. AA said he had been promoting the events on his networks and had forwarded some suggestions to LNorth which he would share with HJ.</p> <p>SC asked if there was the opportunity to add more events. HJ replied that they have already had requests to host an event in the East of England, most likely Cambridge, and were looking into this.</p> <p>The London Event was expected to draw the most people and it was taking place at the RPS offices.</p> <p>AP requested tools to promote these events. PB assured board members that LNorth had this on her agenda.</p> <p>The timings of the evening meetings have been adjusted following requests from Board members to accommodate community pharmacy opening times. HJ was asked to state the timing of the presentations, HJ said that all information was in the confirmation for those attending in the form of an agenda for the evening.</p> <p><b>RPS Conference – 8 Nov</b></p> <p>HJ gave a short update on the conference planning to date:-</p> <ul style="list-style-type: none"><li>• 204 abstracts/ posters have been received</li><li>• Our conference is gaining recognition and is “the place to be”</li><li>• 4 content streams</li><li>• Key note speaker Dr Liz O'Riordan</li><li>• Across 2 floors again this year but enhancements have been made to feel better connected</li><li>• Conversations are continuing with perspective sponsors</li><li>• Dedicated RPS Zone – will be manned by staff and board members</li></ul>	
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	<ul style="list-style-type: none"><li>• Board members to use dedicated link to book for conference</li><li>• AP offered help in facilitating sessions – HJ said she would be in touch with board members about facilitating sessions and manning the RPS zone.</li></ul> <p>HJ said she would be having a further briefing meeting with the keynote speaker. SL asked her to highlight technical services and cancer treatments needing aseptic services.</p> <p><b>Action 7:</b> HJ to link in with JL and SL to discuss technical services/aseptic services for key note speech.</p> <p>HJ reminded board members to let her have any leads for potential sponsors for the conference.</p> <p>The Chair thanked HJ and the team for supporting the work of the EPB.</p>	
<b>24.09.EPB.08</b>	<p><b>Papers for noting and a short update.</b></p> <p>The EPB noted papers 24.09.NPB.08 (i), (ii), (iii) and (iv).</p> <p>JD gave a short update on some areas covered in the above papers.</p> <p><u>Prescribing</u> – mentioned by the new Labour Government – community pharmacy prescribing service. RPS website change – engaging with members on prescribing – all information in one place and supporting members with prescribing.</p> <p><u>Access to Designated Prescribing Practitioners (DPPs)</u> – working in collaboration with National Pharmacy Association. Hosted roundtable and produced report re improving access to DPPs for community pharmacy and foundation trainees – highlighting the challenges. A follow up roundtable (on-line) is planned for 9 October to understand the progress made in this area.</p> <p><u>Prescription Charges coalition</u> – continue to campaign with patient groups in this area.</p> <p><u>Supervision</u> – awaiting (new) government response – this will lead to legislative change – looking at early 2025.</p>	

	<p><u>Environmental sustainability</u> – developing Greener Pharmacy Toolkit for hospital and community pharmacy giving support to decarbonise. Currently undergoing usability testing and sign off from NHSE. Launching early 2025.</p> <p><u>Medicines Shortages</u> – receiving more data through the support line re ethical responsibilities. Currently working on thought leadership piece – project adhering to timelines – 3<sup>rd</sup> advisory group meeting next week – parliamentary launch event at the end of November.</p> <p>The board thanked JD for the Friday emails and asked for them to continue.</p> <p>The Chair thanked JD and suggested that board members read the papers for noting as they contain a lot more detail.</p>	
<b>24.09.EPB.09</b>	<p><b>Papers for Noting</b></p> <p>The EPB noted papers 24.09.NPB.09 (i) and (ii)</p> <p>(i) Education update (ii) Accreditation and credentialing update</p>	
<b>24.09.EPB.10</b>	<p><b>Any other business</b></p> <p>The Chair introduced this item saying that MA asked for the following item to be discussed under any other open business:- “a vote to support or otherwise the Assembly’s governance proposals”. She added that board members had been kept informed and had the opportunity to feedback about the Assembly’s proposal.</p> <p>The Chair made the point that a vote in the EPB is not binding on the Assembly. She added that the EPB function is for pharmacy policy and not for voting on Assembly matters as Assembly had a different function relating to the strategy for the organisation</p>	

	<p>MA said he felt the current proposals for the Senate disadvantaged those members who are from England and was hoping that the Assembly could look at this issue again. He asked for his request for a vote to be withdrawn at this stage.</p> <p>SB made the point that the Chair's comments on the different roles of the Assembly and Boards makes it sound that non-Assembly members were being excluded and we have always been inclusive, and this matter is about the future of the organisation. The Chair responded saying that she has taken significant steps to ensure that all board members have the opportunity to feed in their points to the Assembly on any matter, especially the current proposals for change.</p>	
<b>24.09.EPB.11</b>	<p><b>Dates of next NPB/EPB meetings:</b></p> <p>7 November 2024– face to face in London (day before RPS conference)</p>	
<b>24.09.EPB.12</b>	<p><b>Close of meeting at 11.25am</b></p>	

**Action list**

Action No	Action	By whom	Open/Closed/Comments
<b>June</b>			
<b>24.06.EPB.13</b>	<b>Action 5:</b> Review RPS position on self-selection of P Medicines in Community Pharmacy using evidence to support any changes and to use the RPS Expert Advisory groups when gathering evidence	<b>Chairs and Country Directors</b>	<b>Open – on agenda for EPB meeting on 17 Sept and 7 November</b>
<b>24.06.EPB.13</b>	<b>Action 6:</b> Review MEP and professional guidance subject to Action 5 above.	<b>Support Team/JD</b>	<b>Open - As required</b>
<b>September</b>			
<b>24.09.EPB.02</b>	<b>Action 1:</b> Update declarations of interest and put on website	<b>YD</b>	
<b>24.09.EPB.04</b>	<b>Action 2:</b> Circulate S&R slides to board members.	<b>YD</b>	
<b>24.09. EPB.04</b>	<b>Action 3:</b> DAO to report back on the RPS position in relation to evaluating pharmacy services adding that this may be for the Boards and Exec	<b>DAO</b>	<b>Nov</b>
<b>24.09.EPB.04</b>	<b>Action 4:</b> DAO will check if S&R have any updated	<b>DAO</b>	<b>Nov</b>

	evidence on vaping and report back in the form of an options paper		
<b>24.09.EPB.04</b>	<b>Action 5:</b> Chair to raise I&D aspects of OPERA award via Assembly	<b>TO</b>	<b>Nov</b>
<b>24.09.EPB.05</b>	<b>Action 6:</b> Open Display of P Medicines literature review and call for evidence results will be forwarded to Board members in time for their meeting on 7 Nov	<b>JD/YD</b>	<b>End Oct</b>
<b>24.09.EPB.07</b>	<b>Action 7:</b> HJ to link in with JL and SL to discuss technical services/aseptic services for key note speech	<b>HJ/JL/SL</b>	<b>Nov</b>