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Digital Pharmacy Expert Advisory Group (DP EAG) Agenda
Monday 10 January 2022, 2.00-3.30pm
By Zoom – calendar invite sent to Group members and speakers. RPS members can register to observe at: https://events.rpharms.com/200237152

1: Recognition

Introductions, apologies and declarations of interest

Present – Darren Powell (Chair), Anna Bunch, Angela Burgin, Penny Daynes, Dipak Duggal, Stephen Goundrey-Smith, Alistair Gray, Mohammed Hussain, Rob James, Maureen Spargo, Sean MacBride-Stewart, Euan Reid.

Guests – Paul Wright, NHS Digital, Stephanie Ghartey, Chief Pharmaceutical Officer (England) Clinical Fellow, NHSX

In attendance from RPS: Clare Morrison, Carolyn Rattray

17 RPS member observers

Apologies – Karan Punni, Leon Zlotos and Anna Bunch

Declarations of interest – none

1.1	Update from previous meeting	2.00-2.10
Description	Agendas and outcomes from previous meetings are published on the group's webpage at: https://www.rpharms.com/about-us/who-we-are/expert-advisors/digital-pharmacy-expert-advisory-group The previous meeting also includes recommended priorities for RPS national boards which were shared with the boards in September	
Purpose	To review the Outcomes and priorities from last meeting	
Outcome	- Defining the group's activities and KPIs – this hasn't been progress and so to be pursued offline - Recommended priorities for RPS national boards (NPBs) – Discussed by the 3 NPBs and, as a result, a digital workstream has been included in the workplan for 2022. Likely that NPBs will look for support from DP EAG. - Issues around advocacy – promoting the group to external pharmacy stakeholders as the point of contact on all digital matters. CM has contacted the other EAGs to see if this can be coordinated to ensure that external stakeholders are not contacted multiple times; awaiting their views. CM to feedback deliberations to the DP EAG. DP EAG to consider next steps. Darren Powell (DP) noted that PSNC IT group has asked for representation from RPS; DP to represent RPS and will be able to act as a conduit between PSNC IT group and the DP EAG. - DP and Stephen Goundrey-Smith (SGS) to provide vignettes to showcase digital roles. If preferred can provide over a phone call with CM.	

	• RPS Connect – No launch date as yet as part of a wider IT project. Group members can use it now but in test mode and so data wouldn't be retained. Agreed to leave until RPS Connect goes live.

2: Relevance

2.1	**Consolidated medicines records**	2.10-2.40
Description	Invited speakers: • Update on NHS Digital interoperable medicines programme (England) – Paul Wright, NHS Digital • Update on fellowship project to evaluate the impact of consolidated medication records – Stephanie Ghartey, Chief Pharmaceutical Officer (England) Clinical Fellow, NHSX Followed by Group discussion on opportunities and challenges of consolidated medicines records across all sectors, with a view to identifying principles for an RPS position statement. Note: the outcome from the previous meeting to produce such principles. *Item proposed by Darren Powell*	
Purpose	For the Group to identify principles for consolidated / shared medicines records to inform an RPS position statement. Principles will be discussed at the meeting and then circulated afterwards by email for refinement/agreement.	
Outcomes	• Principles to be developed, should include: one standard for all, ensure standards are used consistently, education is needed on dm+d and what changes mean for pharmacy teams, users and other stakeholders • Stephanie to feedback to her team Alistair's query re: compliance across the UK. • Group to feedback to Stephanie by email.	

2.2	**Use of technologies in pharmacy**	2.40-3.10
Description	There is an increasing use of technology in pharmacies, particularly in relation to automation, online pharmacy services and artificial intelligence. The PDA has raised concerns about the impact of this in an open letter available here: https://www.the-pda.org/letter-to-gphc-automation-and-safety/ The Group previously identified supporting digital innovation combined with good data foundation and infrastructure as priorities for RPS. RPS National Boards, on the basis of the Group's recommendations in September, have included "Enabling new models of practice including digital advances" in its policy workplan for 2022. This item will involve a Group discussion on the use of technologies in pharmacy and the clinical impact this brings, with a view to identify principles for an RPS position statement and/or future policy work. *Item proposed by Darren Powell*	

Purpose	To identify principles for use of technologies in pharmacy for an RPS position statement and/or future policy work. Principles will be discussed at the meeting and then circulated afterwards by email for refinement/agreement
Outcomes	• It was agreed that there needs to be a balance between patient safety and the use of technologies. Examples/case studies would be useful to demonstrate the positive and that AI/machine learning is not intended to replace the pharmacist's judgement with technology. Ref to: NICE Standards re: digital technologies for solutions including AI. • Group to provide high level principles within 1 week, with more details to follow. • DP to invite a system supplier to the next meeting to provide a demonstration to inform future policy. • Group to consider which other areas of technology should be considered. • Sub group to be established to focus on this area: DP, Dipak Duggal (DD), SGS Mohammed Hussein Hussain (MH), Linsey Carter, Helen Dillon (not members of the group). Other volunteers to contact Carolyn.

2.3	**Digital Patient Information Leaflets**	3.10-3.20
Description	RPS has been asked for a position on providing QR codes or digital Patient Information Leaflets (PILs) instead of paper leaflets (ie, not providing the paper leaflet). The RPS current position is that legislation requires a PIL to be included with all medicines and that digital exclusion would prevent a complete switch to using QR codes. However, there are environmental sustainability reasons for reducing paper use. Group members have provided initial comments on this but it was agreed a discussion at the next meeting would be useful. *Item proposed by RPS in response to RPS member enquiry*	
Purpose	To advise RPS on its position on use of QR codes for patient information leaflets.	
Outcomes	• Group concluded that RPS should feedback to member enquiry to reflect above position: legislation states that patient information leaflets are required to be supplied with meds and that digital exclusion currently prevent a complete switch to using QR codes and meeting legislative requirements. • The group also discussed other ongoing work to improve readability of patient information should be considered in any switch to QR codes.	

3: Communication

3.1	**Messages for RPS members**	3.20-3.25
Description	Sharing information with RPS members is an essential role for RPS, and the EAG's advice on what information is useful and relevant to communicate is vital.	
Purpose	To decide what aspects of the EAG's work should be shared with members, and how best to share them. To make recommendations to RPS on other communication with members needed in the EAG's subject area.	

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Outcomes	• Inviting non-members to speak is acceptable and supports expanding knowledge base. As a membership organisation, observers at the meetings should be RPS members. The agenda and outcomes are published on the website and so are open to all ensuring transparency. • Engaging with RPS Connect will be useful for communicating messages.

3.2	**Supporting digital understanding**	**3.25-3.30**
Description	At the previous meeting, the Group decided to support the development of case studies on the Group's webpage.	
Purpose	The purpose of this item is to discuss how to take this forward so case studies can be published before the group's next meeting.	
Outcomes	• DP and SGS to provide case studies for the DP EAG web page • CM to create a case study template for Group members to use. • Continue to post on social media • Share meeting dates and agendas	

4: Any other business

- **Alistair Gray – question about bar code scanning for administration of medicines for packed down items.** This is already being used in some secondary care settings and also some care homes.
- **Angela Burgin – Volunteers required for a research project (Leeds and UCL) looking at the capability of electronic patient records.** This is a national project to design a tool for assessing the usability and functionality of Electronic Patient Records. The tool will be multi-professional and more objective than current tools. The researchers are keen to hold workshops in different settings including with volunteers from the DP EAG. Angela to email group with further information and a request for volunteers.

Meeting closed at 3.16 pm