

LPC Conference Resolutions 2011

Conference Administration

R1 This LPC believe that it is important the PSNC should manage the timings of the Conference better to ensure that every item on the agenda is given its fair and equal time for discussion.

South Staffordshire LPC

Funding

R2 This conference has no confidence that the Cost of Service Inquiry has adequately considered the implications for contractors of the medicines supply situation. We therefore urge PSNC to include costs that have occurred since the COSI data was gathered when negotiating the implementation of the results of the Inquiry.

Bury & Rochdale LPC

R3 Wirral LPC believes that Community Pharmacy Contractors should benefit from the savings generated from services contractors provide. We call for the PSNC to utilise the analysis from the New Medicines Service to persuade the DoH to reinvest a percentage of these savings into the Global Sum.

Wirral LPC

R4 Supply remains the most significant component of contractor income. Whilst recent focus has been on services, inequalities have increased so that many small contractors, not able to spread margins over several businesses, are more affected by low margin dispensing and dispensing at a loss. This conference urges PSNC to re-examine the averaging system to ensure that smaller contractors, at the heart of the community, are not continued to be systematically disadvantaged by increasing pressure on dispensing margin.

Lambeth, Southwark and Lewisham LPC

R5 This conference resolves to work with other bodies to present a strong, united front in the fight against category M withdrawal of funding mechanism.

Swindon and Wiltshire LPC

Patient Information

R6 This Conference calls on PSNC to secure appropriate access for pharmacists to patients clinical records.

Doncaster LPC

Prescription pricing

R7 This Conference calls on the NHS BSA to provide a full statement to contractors showing the pricing of each prescription submitted each month so that contractors can check the accuracy.

Kingston, Richmond and Twickenham LPC

R8 We ask that PSNC challenges the PPD so that switched scripts are returned for clarification and not, as present, have the prescription charge deducted without recourse.

Hertfordshire LPC

R9 Lincolnshire LPC considers the level of prescription switching carried out by NHSBSA PPD to be excessive and intrinsically unfair. We strongly believe that where there is uncertainty regarding the payment status of a prescription that the NHSBSA PPD should pay for the medicines supplied but return the form to the contractor for clarification. The current system is effectively an open ended tax on pharmacy contractors.

Lincolnshire LPC

R10 Lincolnshire LPC considers the current mechanism to fund contractors for those items for which NCSO concession has been agreed to be inefficient and fundamentally unfair. We believe that publication of the list of NCSO concessions should be timed to allow for contractors to review prescriptions effectively and make claims based upon the products supplied. Where there is uncertainty regarding the details of a claim, Lincolnshire LPC strongly believes that NHSBSA PPD should return the prescription form to the contractor for further clarification.

Lincolnshire LPC

Contractual Framework

R11 Many pharmacy enhanced services (notably minor ailments, smoking cessation and seasonal flu vaccination) are of benefit to the public regardless of where they live. This conference calls on PSNC and the DoH to take immediate steps to commission all such pharmacy enhanced services on a national basis in England and Wales, building on the proven success of schemes in Scotland.

Oldham, Tameside & Glossop

R12 This conference no longer has confidence in the current pharmacy contractual framework.

North East London LPC

R13 This conference urges the PSNC to seriously consider the time pressures on and the workload demand expected of Pharmacists when in negotiations for new services .

Wirral LPC

R14 This conference urges PSNC to develop in partnership with the LPCs a strategy to engage LPCs, contractors, and all relevant stakeholders in the formulation of a new pharmacy contractual framework and engage meaningfully to deliver the strategy.

North East London LPC

LPC Levy

R15 This LPC asked that PSNC reviews the method LPCs collect levy from contractors to determine if a more stable and fairer model can be proposed.

East Riding and Hull LPC

R16 Avon LPC proposes there should be a nationally agreed maximum levy that LPCs can raise from contractors.

Avon LPC

PharmaBase

R17 Hertfordshire LPC's contractors have fully supported (by additional levy) the development and implementation of PharmaBase in its current format. We ask that the next stage of development ensures that PharmaBase integrates into pharmacy systems and PMRs (at the very least the data should be able to be exported from the pharmacy systems into PharmaBase) to reduce the additional workload resulting from two systems.

Hertfordshire LPC

Rural

R18 This Conference calls on PSNC to establish a team representing contractors operating rural pharmacies which has the necessary expertise to provide to those negotiating with DoH information on the demographic, logistic and geographical challenges peculiar to this sector which effect its ability to compete in the new NHS market.

North of Tyne LPC

R19 This Conference calls on PSNC to review its current policy on rural dispensing and consider seeking amendments to the Rural Regulations to ensure they are fit for purpose.

Joint Resolution from North of Tyne LPC and Cambridge and Peterborough LPC

Prescription direction

R20 This Conference urges PSNC to ensure that better systems are in place to investigate and deal with any cases of suspected direction of prescriptions by GPs.

Doncaster and Nottinghamshire LPCs

R21 Shropshire LPC calls for an investigation into cross-border prescriptions whereby English residents are being offered free prescriptions by English branch surgeries of Welsh GP practices, at the detriment of English pharmacies, since an unfair advantage is being offered by the GPs to keep prescriptions. This is unfair trade and a loophole that should be closed.

Shropshire LPC

Sponsorship

R22 This conference believes that PSNC should end sponsorship arrangements with drug companies unless they change the implementation of their DTP schemes.

Shropshire LPC