Primary Care Appeals - Pharmacy User Group

6 June 2024
11:30am
Via MS Teams

Members	Job Title/Organisation
Jonathan Haley (JDH)	Head of Appeals, NHS Resolution
Rachel White (RW)	Technical Case Manager, Primary Care Appeals
Abby Davies	Case Manager, Primary Care Appeals (Minutes)
Phil Bratley (PB)	Panel Member (Pharmacy), Primary Care Appeals
Jo Severn (JS)	Boots UK Ltd
Katrina Worthington (KW)	Community Pharmacy England
Sally-Anne Kayes (SAK)	North East London ICB
Marie Wharton (MW)	West Yorkshire ICB
Kelvin Rowland-Jones (KRJ)	NHS England
Charlotte Goodson (CG)	Primary Care Commissioning
Apologies	**Job Title/Organisation**
Sanjay Sekhri (SS)	Deputy Director of Advice and Appeals
Jane Horsfall (JH)	NHS England
Noel Wardle (NW)	Temple Bright LLP
Clare Smithies (CS)	Well Pharmacy

Minutes

Item		Action
1.	Apologies for absence JDH noted apologies had been received from Sanjay Sekhri, Jane Horsfall, Noel Wardle and Clare Smithies. Karina Worthington was representing CPE and Charlotte Goodson was welcomed to the meeting.	
2.	Minutes of last meeting (Doc A)	JDH

	The minutes from the last meeting were agreed and will be published.	
3.	Outstanding actions (Doc B) Item 76 – KRJ confirmed that he had followed this up at a contract manager meeting on 23/11/23. JDH noted that we would not see the outcome of whether the approach had been adopted until the next batch of bank holiday directed hours cases appear. Item 78 – see Item 4 below.	
4.	Terms of reference (Doc C) JDH thanked those who had commented on the updated draft terms of reference. Membership of the group had been reviewed following the Lloyds Pharmacy representative resigning. JDH advised that he had received an enquiry from a law firm which represents contractors on appeal asking to be part of the group. KRJ noted that we have representation on the group from commissioners and contractors. Solicitors/representatives are working on behalf of contractors therefore one step removed. Their presence could be useful given their knowledge of the law. SAK noted that when the group originally began it was for individuals who had been part of the original group and/or dealt with Appeals on a regular basis. JDH stated that whilst extending membership was positive, this needs to be off-set against the group having too many members. CG agreed that there is a potential for the group to become unwieldy. KRJ suggested setting a fixed number of representatives from those who represent contractors. Continuity of membership helps and changing would be a burden. Overall, there were no objections to offering SH a place but that the terms of reference should try and cap the number of members. **Action**	JDH
5.	Appeals update (Docs Di and Dii) JDH referred to document Di which provides an overview of activity for 2023/24 of which Annex A will be published soon. Comparative data from 2022/23 was available at document Dii. There were no questions.	
6.	Demographic data collection (Doc E) JDH gave an overview of the EDI data which had been collected over the first year. He accepted that given the volume of responses, there is no meaningful data as yet, but we will continue to collect data and discuss with stakeholders. CG suggested there will be gaps in the data given body corporates.	

	JDH confirmed we are just asking for data from whomever completed the application or is instructing the representative to act for that entity. The data will not give us the full picture, but it is difficult to get around this.	
7.	Customer survey outcomes (Doc F) JDH referred to the document outlining the outcomes of the recent customer survey and highlighted that the survey covered all Appeals' workstreams i.e. including dental, medical, ophthalmic. JDH reported that Appeals were overall satisfied with the outcomes. There will always be those who are dissatisfied with a decision. JDH added that a selection of the comments received were included in the document as it is important to take note of feedback on potential service improvements, along with our response to each point (bearing in mind some of these could be for other case types, not just pharmacy). KRJ noted that the number of responses could easily be skewed by those dissatisfied, but that doesn't appear to have happened. He understood the point regarding being undermined at an oral hearing as they can be quite intimidating but noted that hearings are there for a purpose and there is a need to question parties' submissions. JDH commented that deep dive sessions were held 2/3 years ago which were useful as it was possible to delve into matters in more detail. With this survey it is a case of trying to read between the lines of the comments received. SAK noted that most comments seem to be about something having not gone the respondent's way, so they wanted to complain about it. In terms of service improvements, CG suggested that a better search functionality for decisions would be useful for commissioners i.e. to be able to search for applications refused under a particular regulation e.g. Regulation 31. JDH responded that we have raised the search function with our Digital team.	
8.	Primary Care Appeals published guidance notes (Doc G) RW advised that she has been reviewing all Appeals' technical guidance notes to ensure that they are up to date. JDH commented that the next stage would be to include more recent decisions. JDH added that a new guidance note has been created for Regulation 31 which is available for members to review. JDH asked members to respond by 21 June with any comments. **Action** JDH advised that GH (CPE) had asked whether Appeals will be producing a guidance note regarding change of opening hours.	All

	JDH indicated that if a note were produced now, it would contain too many gaps. Therefore, we need to wait until we see more decisions before drafting.	
9.	<u>CPE article and briefing</u> KW drew the group's attention to the article on CPE's website (link provided) concerning market entry delays and which highlights some ways in which to avoid some of the usual delays in getting an application through the process. KRJ commented that there is some misunderstanding by applicants of the clock stopping and starting during the application process, with a lot being done within the regulatory timescales allowed. He noted that there is no measure of how many are within the timescales and how many are not. SAK responded that there are other delays – once the completed form is received, PCSE advises the applicant that their application will be dealt with within 30 days, but the process for obtaining referees etc. can take much longer than this and there is nothing in the letter to explain this to the applicant, which is where some of the issues are starting from. CG commented that there are ICBs who are sitting on cases. Also, in some cases there are GPhC investigations which hold the process up but the ICB is not allowed to tell the applicant about this. JDH commented that whilst Appeals are aware of delays on applications, our approach is not to comment on this in our decisions.	
10.	<u>AOB</u> None. JDH advised that the next meeting will be in late November/early December; one of the Appeals team will be in touch. The meeting closed at 12:14pm	

Actions Summary:

Action	Owner	Date Required
Arrange for November 2023 minutes to be published	JDH	21 June 2024
Offer a place on group to SH	JDH	21 June 2024
Review Terms of Reference regarding fixed number of representatives	JDH	21 June 2024
Comments regarding Reg 31 guidance note	All	21 June 2024