

FHSAU Pharmacy User Group

Monday 27 November 2017

12.00pm

DAC Beachcroft, St Paul's House, 23 Park Square South, Leeds

Members		Job Title/Organisation
Lisa Hughes (LH)		Head of FHSAU
Jonathan Haley (JDH)		FHSAU Business Services Manager
Jill Jackson (JJ)		FHSAU Case Manager
Phil Bratley (PB)		FHSAU Panel Member (Pharmacy)
David Reissner (DR)		Charles Russell Speechlys
Matt Cox (MC)		Lloyds Pharmacy
Emma Griffiths-Mbarek (EGM)		Well Pharmacy
Jo Severn (JS)		Boots UK Ltd
Gordon Hockey (GH)		PNSC
Sally-Anne Kayes (SAK)		NHS England
Marie Wharton (MW)		NHS England
Apologies		Job Title/Organisation
Angela Lydon (AL)		PCSE
Papers		
1	Draft minutes of last meeting	
2	Outstanding issues	
3	PLPS Regulations Review	
4	Contractor training evaluation	

Minutes

Item	Description	Action
1.	<u>Apologies for absence</u> JDH reported that AL had given her apologies.	
2.	<u>Draft minutes of last meeting</u> These were agreed without amendment and would be published.	JDH
3.	<u>Outstanding issues</u> <u>Item 15 – NHSE decision letter to refer to FHSAU guidance</u> JDH reported that this had been resolved by way of him providing Charlotte Goodson with the web link which she would include in the Pharmacy Manual.	

	<p><u>32 – members to provide wish list for new website</u> JDH reported that MC and Susan Hunneyball had indicated a wish to be part of user testing. Regrettably, development of the site is some way off.</p> <p><u>35 – liaise with Chairs regarding skeleton arguments</u> JDH reported that he was currently reviewing this as part of a wider review of the OH Rules which he will discuss at the FHSAU Panel event on 5 December.</p>	
4.	<p><u>PCSE update</u> AL provided an update by email which JDH disclosed to members.</p> <p>Since the last meeting PSCE has divided the team into the same four regions. The Area Team and PSCE have set up monthly calls between the team members and their counterparts in the various regions. In July PSNC visited and PCSE continues to receive support from Charlotte Goodson. PCSE has provided feedback and support for the rewrite of the Pharmacy Manual which is also being picked up by Charlotte on behalf of NHS England. Applications are still being processed within the timescales and PCSE are providing feedback to NHSE in relation to blockers or delays outside of PCSE which are impacting the processing of applications.</p> <p>GH commented that market entry application processing and notifications managed by PCSE/Capita have improved.</p> <p>DR commented that the content of NHS England’s decision letter is still not consistent in that not all contain reasons. JDH queried why there would be such variation if Area Teams were meant to be working in line with the same procedures. SAK commented that the smaller Area Teams might have a knowledge issue. SAK and JDH to feedback to Charlotte Goodson.</p> <p>MC was concerned about inconsistent approaches to dealing with fitness to practise checks although SAK clarified the process as to when information may or may not be requested. JDH will feedback to PCSE.</p> <p>MW commented that there is still some confusion within PCSE as to the checks that need to be done with regard to change of ownership. SAK and MC will try and resolve via the Pharmacy Manual.</p>	<p>SAK/JDH</p> <p>JDH</p> <p>MW/SAK</p>

<p>5.</p>	<p><u>PLPS Regulations Review</u></p> <p>GH asked whether there was anything arising from the review that this Group should discuss.</p> <p>MC had concerns about why appeal rights exist for change of ownership. LH advised that this was a policy matter and whilst there are few appeals, they can be quite technical.</p> <p>GH commented that some are using distance selling pharmacies (DSPs) exemption as a means of establishing pharmacies to provide services – avoiding the needs-based test which is fundamental to the proper working of the regulations</p> <p>DR commented that the process remains that the application must satisfy the test although EGM said that what is said in the application does not reflect reality. GH reported that he was discussing his concerns with the Department of Health. EGM was concerned about directing prescriptions from the surgery and that one control could be to limit ownership of the pharmacy. PB reported on the devastating effect of directing prescriptions.</p> <p>EGM raised concerns about the notification of applications and appeals referencing a case where NHSE had notified a branch but the branch had not forwarded the application to Head Office resulting in Well not being invited to make representations on the appeal. GH suggested that the FHSAU should be able to apply some discretion and that he would like to take forward. LH agreed subject to clear regulatory parameters on the use of discretion being established.</p> <p>SAK commented that notification issues might be addressed via the Pharmacy Manual which she will look into.</p>	<p>SAK</p>
<p>6.</p>	<p><u>Performance related sanctions</u></p> <p>GH also raised the recent FHSAU decisions relating to out of pocket expenses and there was discussion on the system to reclaim overpayments and the system of performance and market exit (breach notices). The question was raised about the appeal route against reclaiming overpayments (under regulation 94).</p> <p>GH also queried NHSE’s decision making processes which enabled NHSE to recover out of pocket expenses/overpayments and at the same time impose breach notices. In his opinion, the two are separate matters.</p>	

	LH reported that the FHSAU can only deal with the breach notice but with regard to the overpayment issue, Section 9 of the NHS Act allows health service bodies to appeal to the Secretary of State.	
7.	<p><u>Oral hearing venues – lack of space</u></p> <p>DR reported that at a recent hearing he had asked the FHSAU to enquire if NHSE had any additional meeting room space for him and his client. NHSE had reported back that a café area was available. DR said that such communal areas were not appropriate for client meetings. After some discussion about the cost implications of not using meeting rooms, it was agreed that the FHSAU would ask parties to indicate prior to the hearing if they required any such space and it will enquire of NHSE although no guarantees could be made.</p>	JDH
8.	<p><u>Oral hearing – parties entering the hearing room at different times</u></p> <p>DR reported that at a recent hearing, he had entered the hearing room to find other parties already present along with the panel which was not appropriate. LH agreed to address this is at the next Panel event as Panel's need to take ownership of this and ensure it doesn't happen.</p>	JDH
9.	<p><u>Contractor training evaluation</u></p> <p>JDH reported on the feedback from the recent contractor training sessions. The Leeds session scored 4.3/5 and the London session scored 4.1/5 on content. JDH said the FHSAU will consider the additional comments in the evaluation and look at any areas for improvement.</p>	
10	<p><u>Terms of Reference – membership for 2018 onwards</u></p> <p>JDH reported that DR was retiring in Spring 2018 and as a result there was a vacancy on the Group. The Group agreed that Noel Wardle should be asked to replace David's vacant position. JDH to amend the Terms of Reference.</p>	JDH
11	<p><u>Any other business</u></p> <p><u>Branding</u></p> <p>DR queried the use of NHS Resolution branding in correspondence. LH explained that this whilst FHSAU is the service descriptor, the appeal function is delivered by NHS Resolution.</p> <p><u>DTS</u></p> <p>JS enquired as to how parties can send material via the document transfer system. JJ will provide JS with the user guide</p>	
12	<p><u>Date of next meeting</u></p> <p>To take place sometime in weeks 7 and 14 May 2018</p>	JDH