












# Annual Report & Accounts 2021/22

Greater Manchester Local Pharmaceutical Committee

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Ethical Innovative Collaborative Supportive Responsive Progressive

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## Chair's Foreword

Over the past year, the pharmacy sector has undoubtedly experienced one of its most difficult times in history.

Having said this, it has given me a great sense of pride when witnessing how contractors have once again gone above and beyond their call of duty to care for patients in their communities, as the country begins to recover from the Covid-19 pandemic. I am deeply grateful to you all for keeping your doors open despite facing unprecedented pressures. In doing so, you have all demonstrated the vital role we play within the NHS landscape.

Over the course of the pandemic and beyond, mental health has been in the spotlight more so than ever. With this in mind, we have routinely cascaded useful wellbeing tools to enable Pharmacy staff to look after their mental health. This includes offers from the Primary Care Excellence Health and Wellbeing Programme, free podcasts, apps, and Connect 5 training sessions.

Issues relating to mental health, abuse in pharmacies and operational pressures have been raised with MPs and recognised at APPG Events. I am pleased that these are now being noted at a national level with related articles being published by the BBC and Manchester Evening News. GMLPC have escalated these issues to PSNC and the Greater Manchester Health and Social Care Partnership. We also published a form in order to gather contractor feedback enabling us to provide as much data to the system as possible.

Recognition of the significant work undertaken by community pharmacy has also been gained outside of the sector. During a reception for the National Pharmacy Association (NPA) earlier this year, Prince Charles paid tribute to

“the dedication and professionalism” of pharmacy staff during the Covid-19 pandemic.

Looking ahead, as the role of pharmacy continues to shift away from exclusively dispensing medication, towards an ever-increasing emphasis on the delivery of pharmacy services, GMLPC is committed to ensuring that our contractors have everything they need to fully capitalise on any new pathways for funding through service delivery.

With the introduction of the new GM Integrated Care system (GM ICS), we are committed to working closely with all of wider primary care and other key stakeholders in order to ensure a unified voice of representation and integrated working takes place, for the benefit of our patients and communities. Relationships developed at this level will form foundations for transformation of the sector, future funding, and support.

As I come to the end of my first year as GMLPC Committee Chair, I would again like to reiterate my appreciation for the fantastic work carried out by our pharmacy teams across Greater Manchester. My thanks are also extended to the GMLPC Committee members and office team for their tremendous efforts during this challenging time.

As the sector continues to evolve during these times of change, bringing with it new and exciting opportunities, GMLPC will continue to support you in any way that we can.

**Fin McCaul**  
Chair

# Highlights of the Year

Over the last year:

- GMLPC have commenced engagement and implementation of GP CPCS across 600 Pharmacies and 420 practices in collaboration with Bolton LPC, CHL and NHSE.
- 92% of contractors engaged with the 2021/22 PQS scheme. GMLPC supported contractors to achieve PQS criteria through the appointment of 100% (58/58) of PCN leads.
- We obtained IT funding for GPs and Pharmacies working with the GM ICS.
- GMLPC and Bolton LPC jointly supported contractor assurance and provided a webinar with NHSE to support contractors in delivering Covid Vaccinations.
- We advocated for the inclusion of pharmacies within the NHS Covid Vaccination Programme. This led the way for 74 sites to be set up across Greater Manchester. As of January 2022, community Pharmacy COVID-19 vaccination sites in GM have delivered over 1.28million jabs.
- A total of 70 services were recommissioned and 2 new services were commissioned in Greater Manchester.
- All MPs received communications and APPG invitations, updates on the LFT service, and information around current challenges in community pharmacy with a request for funding, in two separate rounds of communication.
- System pressures were raised, including as part of an article published by the MEN. This has led to safety and security funds being made available to all contractors in GM.
- Free HLP champion training funding has been obtained for all contractors in GM via the GM Workforce.
- We have provided contractors access to GM Mental Health and wellbeing support and training.
- To support a greener NHS, GMLPC have worked with Novo Nordisk as one of only three pilot sites in GB for their new PenCycle recycling initiative. GMLPC participated in a national webinar ahead of a soft launch and promoted the initiative to our contractors.
- A new LPC website has been relaunched for contractors with support from PSNC.
- We have supported with the rollout of DMS. 15 trust sites are currently live and this work is ongoing.
- GMLPC was shortlisted as a finalist for the 'Best Supporting LPC' category of the IPA awards based on an application focusing on the support offered to contractors around completing the Pharmacy Quality Scheme (PQS) 2020/21 during the pandemic.
- GMLPC was shortlisted as finalists for the Covid Hero – Outstanding Team Award and the Above and Beyond Award at the C+D Awards 2021.

# About GMLPC

We are the statutory body representing people who provide community pharmacy services in Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Tameside & Glossop, Trafford & Wigan in discussions and negotiations with commissioners. Commissioners have a legal duty to consult us on proposals affecting community pharmacy.

We were created in October 2016 after contractors voted to merge six smaller LPCs. We represent all pharmacies that hold NHS contracts to provide community pharmacy services in our area, from large chains to small independents and online distance-selling pharmacies.

## Our vision

To empower and enable Community Pharmacy to improve health in our local communities now and in the future.

## Our values

- Ethical
- Innovative
- Collaborative
- Supportive
- Responsive
- Progressive

## Our strategy

Our strategy has four strands:

- GM ICS Engagement and the Commissioning Model
- Workforce Development and Retention
- Service Development
- Integrated Working with Primary Care Networks and Place

## Who we are

In year ending 31<sup>st</sup> March 2022 our committee had 12 members who were nominated or elected to represent their sector:

- 5 independent contractors, elected by peers
- 2 members nominated by AIMp (Association of Independent Multiple Pharmacies)
- 5 members nominated by CCA (Company Chemists Association)

## Committee Members

- Fin McCaul, Chair (Ind)
- Ifti Khan, Vice Chair (CCA)
- Mohammed Anwar, Treasurer (Ind)
- Mubasher Ali, Vice Chair (CCA)
- Peter Marks (AIMp)
- Ali Dalal (Ind)
- Gulamhusein Arsiwalla (AIMp)
- Aneet Kapoor (Ind)
- Mohamed Patel (Ind)
- Helen Smith (CCA)
- Jennie Watson (CCA)
- Mujahid Al-Amin (CCA) (left June 2022)
- Adam Williams (left in May 2021)

We would like to extend our thanks to all previous members for their contributions to GMLPC.

## Committee sub-groups

- Executive
- HR/Finance
- Market Entry
- Business Recovery/Sustainability
- Governance and Oversight/Scrutiny group
- Academy (Training and support)
- Services
- PCN

## Office team: April 2021 – Present

- Luvjit Kandula - Director of Pharmacy Transformation, Chief Officer
- Adam Kharaz - Office Manager
- Rikki Smeeton - Principle Responsible Officer
- Karishma Visram - Communications and Engagement Officer
- Adrian Kuznicki - Business Support Officer (Feb 2022 – present)
- Imogen Halls - Senior Responsible Officer - Communications and Engagement (Aug 2020 – Aug 2021)
- James Hughes - Office Manager (June 2020 – Oct 2021)
- Esther Burrow - Senior Responsible Officer - Services - (Nov 2020 – Oct 2021)

## Committee membership and meeting attendance

The table below lists all committee members who served in 2021/22 and their attendance at committee meetings. Our committee meets every 2 months. Meetings are held in public, and contractors are welcome to attend the open part of the meeting if they inform us in advance.

Member	Role(s)	Service on committee	Meeting Attendance					
			April 2021	June 2021	August 2021	October 2021	December 2021	February 2022
Fin Mc Caul	Chair	Oct 2016 –	✓	✓	✓	✓	✓	✓
Ifti Khan /Katie Wright (as deputy stand-in)	Vice-Chair	Oct 2016 –	✓	✓	✓	✓	✓	✓
Mubasher Ali	Vice-Chair	Sep 2017 –	✓	✓	✓	✓	✓	✓
Mohammed Anwar	Treasurer	Oct 2016 –	✓	✓	✓	✓	✓	✓
Peter Marks	Locality Lead	Oct 2016 –	✓	+	✓	✓	✓	✓
Aneet Kapoor	Locality Lead	Oct 2016 –	✓	✓	✓	✓	+	✓
Mohamed Patel	Locality Lead	Oct 2016 –	+	✓	✓	✓	✓	✓
Helen Smith	Locality Lead	Oct 2016 –	✓	✓	✓	✓	✓	✓
Jennie Watson	Locality Lead	Oct 2016 –	✓	✓	✓	✓	✓	✓
Mujahid Al-Amin	Locality Lead	Jun 2020 – Jun 2022	✓	✓	✓	✓	✓	✓
Adam Williams	Locality Lead	Dec 2020 – May 2021	+					
Ali Dalal	Locality Lead	July 2021 –			✓	✓	✓	✓
Gulamhusein Arsiwalla	Locality Lead	April 2021 –		✓	✓	✓	✓	+

# Welcome to our Annual Report & Accounts

During the COVID-19 pandemic and beyond, Contractors and community pharmacy teams are still facing significant financial, operational and workforce challenges. Community Pharmacists and their teams have continued to exhibit resilience and great strength during arguably the most challenging period in the history of the NHS.

I would personally like to extend my thanks to all Community Pharmacy teams for the exceptional care you have all provided to our communities and patients.

We would also like to extend thanks for your engagement with the LPC over the past year by providing feedback on the contractor survey, PSNC audit and pressures survey. 92% of contractors have engaged in the PQS which is a phenomenal achievement.

The LPC have provided support to enable COVID Vaccination delivery via 74 Community Pharmacy sites. This programme will expand provision in 2022 during Phase 5.

We continue to renew and commission new locally commissioned services as well as supporting integrated working with Primary Care networks (PCNs). The hard work of the LPC and Pharmacy teams has led to recognition of our vital role within the GM ICS and to more collaborative working in GM.

We have worked closely with the GM Health and Social Care Partnership (now the GM ICS) and NHS Regional team to develop bids and proposals to support CPCF Advanced Service implementation and IT funding in GM. The GP CPCS working group (Bolton LPC, CHL and GMLPC) have worked together to achieve 95% engagement and deployment of the GP CPCS

service with 14k referrals completed successfully to date. This has involved members working with PCNs and General Practice to support on-boarding, including provision of training and go-live support.

We are always mindful of the safety, well-being and pressures on our pharmacy teams and pharmacists throughout this time and will continue to work hard to represent, lobby and support you in the best possible way. This has been achieved through engagement with Healthwatch, MPs across Greater Manchester and the safety and security monies obtained to support you.

Despite all the challenges faced, we continue to demonstrate excellence and resilience. We also acknowledge the notable contribution of our 58 Community Pharmacy PCN leads.

We will continue to remain focussed on supporting Community Pharmacy to achieve its potential through effective representation with the GM ICS and place via the Community Pharmacy Provider Board (CPPB) to ensure we support contractors to maximise uptake and quality of new and existing services.

I am delighted to present this annual report, which summarises what we accomplished from April 2021 to March 2022, and the priorities we are setting ourselves for 2022/23. We trust that this report will outline all the achievements we have made together during this challenging time. I hope that we will continue to build our collaborative relationship for the benefit of the Community Pharmacy sector and our local communities.

**Luvjit Kandula FRPharmS**  
Director of Pharmacy Transformation –  
GMLPC

# Treasurer's Report

Dear Pharmacy Contractors,

I have the pleasure of presenting the GMLPC accounts for the financial year 2021/22 ending 31st March 2022.

As Treasurer of the GMLPC, I am responsible for overseeing the management of LPC committee funds. I work closely with the LPC officers and LPC Board members to ensure that contractor's money is used as set out in the LPC constitution for the benefit of our contractors.

At the end of each financial year, the final annual accounts are submitted for audit by a registered chartered accountant (K.A Rogers) for approval at the GMLPC AGM. After approval at the AGM a further copy of the audited accounts is sent to PSNC for their records.

## Summary of accounts

Income derived from levies paid by contractors to the LPC was £465,501; this signals a reduction of £98,000. Our budgeted levy collection was £588,000. A total of £98,000 was returned to our contractors through a temporary levy holiday from July 2021 until August 2021.

The total LPC administrative and contractor support costs for the year under review totalled £233,059. This was an increased spend of £1,690 over the previous financial year.

Levies paid by the LPC to the PSNC on behalf of contractors totalled £179,472. In previous years we have paid £174,522; the slight increase in levy was due to the independent review for contractor representation and support. Moving forward, for this financial year, the committee has budgeted £174,522 for the PSNC levy.

Over 2021/2022 the cost of running the GMLPC was £282,153. This excludes the total sum of monies paid to the PSNC (£179,472). The closing balance in the bank as of 31<sup>st</sup> March 2022 was £546,768. This money includes project money and 6-months operating costs as per PSNC guidance. The opening balance for the year going forward on 1<sup>st</sup> April 2022 was £586,695.

In addition to our prepared accounts, I would also like to clarify some points that may assist you when examining these accounts.

- When the budget is prepared for the year, we apply the "Zero-base budgeting" method to ensure we get the best value for contractors. Using this approach has reduced our LPC administrative expenses over the year and helps us to scrutinise each cost.
- LPC statutory levies have remained at the same level as in the previous six years.



- An income of £7,150 was received by CHL. This was for work carried out by GMLPC employees to support the local governance process for the approval of community pharmacy COVID vaccination sites and costs towards the Community Pharmacy Provider Board (CPPB)
- Travel expenses, increased by £881 from the previous year. This covered costs for employed staff who were shortlisted for a national pharmacy award in London.
- Salary spendings has increased from £212,122 in 2020/2021 to £214,466 in 2021/2022.
- Members' expenses have decreased from £33,000 in 2020/2021 to £20,000 in 2021/2022. This is a saving of £13,000 as the office function becomes more efficient operating a hybrid approach.
- AGM costs were £1,500. However, due to a last-minute change due to Covid restrictions, the LPC had to adopt a virtual platform (zoom) for our AGM in September 2021. This credit will be carried forward to cover some of the cost incurred for the AGM in September 2022.
- Community Pharmacy Provider Board (CPPB) £10,787 was for secretary support provided for GMLPC.
- A donation of £2800 was given to "Pharmacist Support". This is an independent charity who supports pharmacists and their families. This is sponsorship money that the LPC has received.

GMLPC has succeeded in keeping our costs low whilst giving our contractors a 2-month levy holiday. To summarise GMLPC gave back £245,000 to our contractors between November 2020 and August 2021.

LPC committee members are required to attend the LPC meetings regularly. They also attend meetings on behalf of the LPC and contractors. Operating under Nolan Principles, the LPC considers that members carrying out duties on behalf of pharmacy contractors should not be out of pocket. The LPC operates within a robust accountability and Governance Framework that is regularly monitored. All members abide by our expenses policy which is routinely reviewed and updated by the LPC Finance and Governance sub-group.

### **Mohammed Anwar**

Treasurer



**Please see pages 25 - 38 for details of the accounts**

# What we achieved in 2021/22

## Our goals

Greater Manchester Local Pharmaceutical Committee (GMLPC) is the statutory body that represents Community Pharmacy contractors across Bury, Manchester, Oldham, Rochdale, Salford, Stockport, Tameside and Glossop, Trafford, and Wigan.

We represent our contractors both across the entire footprint and at a local level in discussions with the GM Integrated Care System (GMIC), NHS England Area Team, Locality ICSs, Local Authorities, and other key stakeholders, to help plan our health and social care services. GMLPC is available to give advice to all contractors and others wanting to know more about community pharmacy.

In January 2019, NHS England set out its vision for improving care over the next 10 years by publishing its Long-Term Plan, with a greater focus on integrated working of wider health and social care with Primary Care Networks (PCNs) within each locality and neighbourhood.

The 5-year Community Pharmacy Contractual framework (CPCF) incorporates the elements of the NHS Long term plan that Community Pharmacy can deliver outlining a development plan to extend the role of Community Pharmacy, leverage the potential of the sector to deliver improved healthcare outcomes for patients. This includes integrated working with Primary Care Networks and the commissioning of a portfolio of nationally commissioned services.

ICSs (Integrated Care Systems) are now seen by NHS leaders as the future of health and care integration in England. The NHS Long Term Plan, and now the Government's white paper on health and care reform, both place Integrated Care Systems (ICSs) at the heart of the NHS. As set out in the Government's white paper, ICSs have now formed since July 2022. Over recent years, General Practice, Optometry, Dentistry and Community Pharmacy providers have worked collaboratively to establish a formal governance structure within the devolved health and social care system representing four disciplines of primary care which is called the Primary Care Board (PCB) in the currently devolved GM model. We have continued to build the strength of the Community Pharmacy voice within the new GMICS at regional and locality levels via the work of the Community Pharmacy Provider Board in partnership with wider Primary Care disciplines.

NHSE/I have delegated the responsibility for the commissioning of primary care services, including pharmaceutical services, to the ICS. The activities relating to the Community Pharmacy Contractual Framework (CPCF) currently undertaken by regional (NHSE/I) teams have been transferred to the ICS from July 1<sup>st</sup>, 2022. Negotiation of the CPCF will continue to be undertaken at national level.

In light of these developments, GMLPC have reviewed the overarching mission, vision, values, and strategy to ensure we are aligning our workplan, resource and structures to enable effective representative of Community Pharmacy within the emerging GM ICS structure, support integrated working, develop new services and support the effective implementation of CPCF developments. This will ensure contractors receive the support and guidance needed to leverage the sector's capability whilst being recognised as an integral and vital part of our GM ICS.

## **Mission**

Representing and enabling our members to support their patients and communities to improve health outcomes and well-being through integrated working within the GM Integrated Care System (ICS).

## **Vision**

To empower and enable Community Pharmacy to improve health in our local communities now and in the future.

## **Values**

We will champion our values throughout this work. Our values are:

**Ethical, Innovative, Collaborative, Supportive, Responsive, Progressive**

The overarching strategy consists of four key areas based on the emerging themes based on GMLPC Board input:

- GM ICS engagement including the development of the GM commissioning model
- Integrated working with Primary Care Networks and Place
- Service Development
- Workforce Development and Retention

Digital Transformation, System enablement and Communication and Engagement are key themes which will run throughout the workstreams.

## What we achieved

### GMLPC Workstreams



### GM ICS Engagement

**To represent and champion Community Pharmacy within the emerging GM ICS and the development of the GM Single Commissioning Framework alongside the national contract to standardise commissioning, reduce inequalities and improve access for patients via the Community Pharmacy Provider Board.**

On the 1<sup>st</sup> of July 2022, the new statutory organisation; GM Integrated Care partnership was formed.

The Greater Manchester Integrated Care Partnership is helping organisations work better together with people and communities. This will allow each local area to join up their services in a way that's best for their local communities, while the partnership, brings everyone together to share the overarching decisions, making sure care is fair across the region.

NHS GM Integrated Care builds on a strong history of collaborative working since the devolution of Health and social care in 2015. The priorities to tackle inequalities and deliver high quality NHS and care services continue to remain a priority for Greater Manchester. Community Pharmacy has been increasingly recognised by the system as being integral to helping achieve these objectives as we contributed to the COVID, Flu vaccination programme, GP CPCS, CPCS, GM Minor Ailments Scheme and PQS providing much needed high quality accessible walk-in services and have a significant role to help deliver the prevention agenda.

The new statutory organisation will bring together colleagues working at neighbourhood, locality, and city region level into closer collaboration than ever before. This will allow the system to improve health and wellbeing for the benefit of the people of Greater Manchester. Further information can be found [here](#).

## **Community Pharmacy Provider Board**

The Community Pharmacy Provider Board (CPPB) is a Board that consists of membership from Bolton LPC, CHL and GMLPC. This board is recognised by the newly formed GM Integrated Care system (GM ICS) which formed on the 1<sup>st</sup> of July 2022. We have been working to engage the system and work closely with our other Primary Care colleagues in General Practice, Dentistry and Optometry via the Primary Care Board (PCB). We work together to ensure a unified voice of wider PC is represented within the GM ICS to support transformation and integrated working for the benefit of our patients and communities.

**Objective 1:** To facilitate the inclusion of Community Pharmacy in strategic delivery plans within the GM ICS planning framework by March 2022

### **How this has been achieved:**

- ✓ Strengthening the voice of Community Pharmacy through representation at ICS system leadership level in areas such as Primary Care Provider Board Governance, Finance, Workforce, Primary Care commissioning and Digital.
- ✓ Obtained funding for Safety and Security for all contractors from the GM ICS via the Community Pharmacy Provider Board
- ✓ Development and rollout of GM Minor Ailments Scheme with a view to develop PGDs
- ✓ Obtained IT funding for GP CPCS and Hypertension Case funding via the Community Pharmacy Provider Board and GP CPCS Working Group.
- ✓ Development and input into the Primary Care Strategy including Community Pharmacy and wider primary care for 2023

### **How does this benefit Pharmacy team in Greater Manchester?**

- ✓ We have recently secured local funding for safety and security measures that have been put in place by Pharmacy teams in GM during the pandemic. This will be available to all contractors in GM. Further details will be provided in the coming weeks.
- ✓ We have secured funding for free HLP Champion and Leadership training for all contractors working with the LPN and Workforce collaborative.
- ✓ We will be providing training and support to help you review your operational models so you can become more efficient and utilise the resources you have to best effect. We understand the challenges you all face and further funding has been secured to deliver this initiative to support you.
- ✓ We have secured IT funding for national advanced service implementation such as GP CPCS, DMS and HT case finding to enable integrated referrals to be sent between care settings.
- ✓ Through our work with Primary Care Board, LPN, and Workforce collaborative, we have secured access to [health and wellbeing support](#) including connect-5 training, free helplines and a Kickstart apprenticeship scheme to help support, retain and develop the workforce.
- ✓ Access to [NW leadership Academy training](#) for CP PCN leads and aspiring leaders to support development and integrated working.
- ✓ We are developing a briefing to help address the pressures associated with increased workload due to pressures on other parts of the system. A Community Pharmacy Pressures

task and finish group was set up to discuss all the concerns that you have raised with system leaders to find a way forward. This is due to be published in the coming weeks.

- ✓ NW assisted Medicines Taking Guidance – this has been work led by the NW Regional Chief Pharmacist Karen O’Brien with input from a wide range of stakeholders across the system including LPCs across the NW. This supports the previous guidance issued by the RPS in 2019 and will be useful to ensure that MDS is used appropriately.
- ✓ We are currently engaging the system and working with NHSE/I colleagues to implement the Hypertension case finding service, DMS and Stop Smoking Service. We anticipate that the integrated IT referral EMIS system for Hypertension case finding will be agreed imminently. To support this, CPPB and the Academy will be providing contractors with a toolkit to engage with practices and a webinar for Pharmacy teams.
- ✓ The GPCPCS Working Group (Bolton LPC, CHL, NHSE and GMLPC) continue to work with all Pharmacies and Practices to deploy and implement GP CPCS. As of April 2022, our collaborative efforts have resulted in the engagement of 94% of GP practices in Greater Manchester. Further information can be found [here](#)

**Objective 2:** To develop and implement the GM commissioning model for locally commissioned services by March 2023

The purpose of the GM commissioning model is to develop standardised service specifications, SLAs, and harmonised fee structures at GM ICS level for all locally commissioned services to improve access, support reduction in inequalities and improve patient outcomes. This is progressing via the work of the Community Pharmacy Provider Board In partnership with wider Primary Care via the Primary Care Board.

**How this has been achieved:**

- ✓ Engagement with ICS Finance and Governance leads over the last 12 months
- ✓ Development of Financial flows Paper with GM ICS finance leads including the GM commissioning model proposal to inform Primary Care Commissioning.
- ✓ Inclusion of Community Pharmacy representation in the GM ICS Primary Care Commissioning Committee and 10 place-based PC commissioning committees which are designated-sub board of the ICB to inform future commissioning of services.

**Objective 3:** To implement digital integration for Community Pharmacy into the wider NHS system by accessing system support and funding

**How this has been achieved:**

- ✓ Engagement and inclusion of Community Pharmacy in GM NHS Regional and GM ICS Digital Board Strategies via CPPB.
- ✓ Secured IT funding for GP CPCS IT for GP practices and Community Pharmacy via CPPB.
- ✓ Secured IT funding for DMS for trusts and Community Pharmacy via CPPB.
- ✓ Secured funding for HT case finding for GP practices and Community Pharmacies via CPPB.

## Workforce development and Retention

**To work with the GM Integrated Care System (ICS) and the Local Professional Network (LPN) to provide contractors with support via training and initiatives to support retention and development of the Community Pharmacy Workforce via CPPB.**

**Objective 1:** To ensure inclusion and access to key offerings for the Community Pharmacy network in GM via the development of the Primary Care Excellence programme

### How this has been achieved:

- ✓ Development of Apprenticeship Scheme with the Workforce Collaborative
- ✓ We have secured funding for free HLP Champion training for all contractors working with the LPN and Workforce collaborative.
- ✓ We have access to GM ICS [Health and Wellbeing Support](#) offers for all Community Pharmacy teams across GM
- ✓ Access to [NW leadership Academy training](#) for CP PCN leads and aspiring leaders to support development and integrated working.
- ✓ Ensure inclusion of Community Pharmacy and Wider PC in development of GM ICS workforce development and retention plans

**Objective 2:** Build plan from the output of Workforce Development and retention strategies with the LPN and GMHSCP via the Community Pharmacy Provider Board

### How this has been achieved:

- ✓ Inclusion of Community Pharmacy and Wider PC in development of GM ICS workforce development and retention plans since July 2022
- ✓ Development of local GM Workforce survey to inform future investment into workforce development and retention plans

**Objective 3:** To provide oversight, scrutiny, steer and clinical input into The Healthcare academy operations and strategy via the GMLPC Workforce subgroup by monthly updates

### How this has been achieved:

- ✓ Regular oversight and input from the GMLPC Workforce subgroup
- ✓ Delivery of CPCF related training and engagement events via CPPB e.g., GP CPCS, DMS, COVID vaccinations
- ✓ Ensuring that the LPC committee Board provide oversight and scrutiny on behalf of contractor and Community Pharmacy teams.

**Objective 4:** Provide closure and carry out correct hand over of the academy board by March 2022

**How this has been achieved:**

- ✓ The Academy has been transferred to the Community Pharmacy Provider Board in February 2022 to ensure all Community Pharmacy contractors and teams benefit from GM ICS offering working closely with the LPN, GM NHSE and GM Workforce collaborative.
- ✓ The Community Pharmacy Provider Board (CPPB) work collectively on behalf of all contractors across the GM ICS to develop and host events relating to clinical updates and delivery of clinical services.

## Service Development

**To re-commission existing services and develop new services to improve contractor income and patient outcomes.**

**Objective 1:** Referrals sent via GP CPCS per contractor (average) in NHS Year 2021/22 is in the top 20% percentile (country total)

**How this has been achieved:**

- ✓ Extensive system engagement with NHS England and Primary Care colleagues including GMHSCP, Primary Care Excellence Team, Primary Care Networks, Clinical Directors, Heads of Medicines Optimisation and other CCG colleagues, Practice Managers and their practice staff teams
- ✓ Deployed and trained approx. 420 General Practice teams across 67 Primary Care Networks across Greater Manchester in collaboration with Bolton LPC and CHL.
- ✓ Extensive communication and engagement with Community Pharmacy colleagues including Community Pharmacists, General Practice based Pharmacists, Area Managers and Community Pharmacy Teams
- ✓ GPCPCS Training for Community Pharmacy Teams Webinar Series via the Academy
- ✓ Development of a vast range of training tools and resources for both Community Pharmacy and General Practice teams
- ✓ Post deployment support for both Community Pharmacy and General Practice teams

**Objective 2:** NMS referrals per contractor (average) in NHS Year 2021/22 is in the top 20% percentile (country total)

**How this has been achieved:**

- ✓ As of Q4 2021/22 Greater Manchester Community Pharmacies were ranked +19.8% above the national average
- ✓ GMLPC will continue work to support contractors to deliver the service and maximise the opportunities that arise



**Objective 3:** Flu vaccinations undertaken per contractor (average) in NHS Year 2021/22 is in the top 20% percentile (country total)

- ✓ Over 550 Greater Manchester community pharmacies signed up to deliver the service
- ✓ Supported by the PQS PCN domain, regular focused communications, and reminders to complete a minimum of 30 flu vaccinations (in any eligible at-risk group) were sent out via NHSmail, newsletters, PCN WhatsApp groups and hosted on the website

**Objective 4:** PQS gateway criteria met in NHS Year 2021/22 is in the top 20% percentile (country total)

- ✓ 92% of Greater Manchester community pharmacies participated in and achieve one or more of the domains
- ✓ Dedicated Monday Memo newsletter designed to regularly update contractors and pharmacy teams on the most recent developments, updates, and deadlines in a n easily digestible format
- ✓ Development of contractor calendar highlighting important information, updates, and deadlines with a breakdown of each of domain criteria and required tasks to be completed
- ✓ Targeted support to community pharmacy teams on a number of the measurable domains
- ✓ Regular communications via NHSmail, newsletter, PCN WhatsApp groups, social media, and website updates
- ✓ Review and relaunch of website to allow a more user-friendly experience

**Objective 5:** Up to date specifications, PGDs and service extension letters are accessible to contractors from GM LPC website where possible

- ✓ Review of currently commissioned services in GM to ensure information is up to date on our website and where required, work with commissioners to develop the service offering and review fees
- ✓ All information is regularly reviewed and up updated on the website to allow easy access for contractors and pharmacy teams
- ✓ GMLPC website redesign and relaunch to allow a more user-friendly experience that allows quick access to service documentation

**Objective 6:** The LPC manages an active repository of all service documents and actively engages commissioners 3 months before service is due to expire

- ✓ Development and maintaining of the services matrix; designed to track all commissioned services and agreed fees for each locality. This has supported with identifying gaps in provision and has allowed GMLPC to have conversations with the commissioner to improve the service offer and fees in line with other localities
- ✓ Regular protected time slots to review the matrix for due to expired and expired service documentation
- ✓ Utilisation of pre-programmed date formulas to highlight where services are due to expire so the LPC office team can proactively engage with commissioners

## Primary Care Networks (PCNs)

**To support integration of Community Pharmacy to develop the role of the sector within Primary Care Networks (PCN), Neighbourhood Networks and at Place to achieve the PQS PCN domains.**

**Objective 1:** To facilitate and support the CP PCN Lead appointment process with a view of attaining of 100% (58), where possible.

**How this has been achieved:**

- ✓ Extensive communication and engagement with Community Pharmacy colleagues including Community Pharmacists, General Practice based Pharmacists, Area Managers and Community Pharmacy Teams
- ✓ Extensive communication and engagement with NHSE, Greater Manchester Local Leaders Networks, Greater Manchester Primary Care Networks and Clinical Directors
- ✓ Appointing and retaining 100% of Community Pharmacy PCN Leads in post
- ✓ Development of a range of effective PCN support guides, resources, and guidance
- ✓ PQS Training Webinar specifically designed for PCN Lead development
- ✓ PCN Lead toolkit (in collaboration with PSNC and other LPCs across the country)
- ✓ PCN Lead 1-2-1 coaching (pre and post contractor engagement call and pre and post Clinical Director/PCN meeting where responses from Clinical Directors were received)

**Objective 2:** To facilitate and support integrated working of Community Pharmacy PCN Leads and PCN Clinical Directors as identified in the year 3 CCPF announcements

**How this has been achieved:**

- ✓ Extensive communication and engagement with Primary Care Network colleagues such as Clinical Directors, PCN managers, Practice Managers and PCN Pharmacists to explain the role of the Community Pharmacy PCN Lead and the Community Pharmacy offer
- ✓ Facilitated introductory meetings with Clinical Directors/CP PCN Leads and provided suggested meeting agenda templates to support the attainment of the PQS domain
- ✓ Supported and coached PCN leads with

**Objective 3:** To support contractors to achieve above national average PQS PCN domain % (2020-21 = 92%)

**How this has been achieved:**

- ✓ PQS Training Webinar specifically designed for PCN Lead development
- ✓ PCN Lead toolkit (in collaboration with PSNC and other LPCs across the country)
- ✓ PCN Lead 1-2-1 coaching (pre and post contractor engagement call and pre and post Clinical Director/PCN meeting where responses from Clinical Directors were received)
- ✓ Dedicated PQS Monday Memo Newsletter highlighting key updates and deadlines for contractors and PCN Lead

- ✓ Facilitation of communication and engagement – PCN email hubs (using NHS shared mail accounts) and WhatsApp groups for PCN pharmacies and the respective PCN leads
- ✓ Facilitation of engagement with Clinical Directors and PCN colleagues
- ✓ Electronic contractor survey designed to capture important influenza vaccination service information and business continuity plan arrangements which were collated and distributed by the LPC on behalf of the PCN Leads
- ✓ Targeted contractor support – reminder emails, phone calls and WhatsApp messages to complete contractor survey
- ✓ Administrative support - organisation and co-ordination of contractor attendance to PCN contractor engagement calls, set up and distribution of Microsoft Teams meeting invites, save the dates and reminders

## Covid-19 Pandemic Support

- ✓ GMLPC put a number of support measures in place to ensure pharmacy teams submitted their Covid cost claims between 5th July and 15th August 2021 for extra costs they incurred during the pandemic.

This included:

- Developing a [GMLPC briefing](#)
- Developing a [dedicated website subheading](#) to Claiming Covid Costs
- Signposting to other useful resources including [PSNC briefings and FAQs](#); [PSNC Practical FAQs](#); PSNC's support webinar [recording](#) and [slide deck](#); and the [NHSBSA website](#).

All Contractors and Area Managers with outstanding claims were contacted to encourage claims to be submitted.

- ✓ Signposted contractors to published guidance, staff training to deliver vaccines and supported with queries in relation to the EOI for **Community Pharmacy COVID-19 Vaccination - Phase 3 Booster Programme**
- ✓ Over 70 vaccination sites were set up by contractors across Greater Manchester
- ✓ Monday memo was used to send the latest information to contractors on a weekly basis relating to how to claim for extra costs incurred due to the COVID-19 pandemic, including how to claim, what can be claimed and links to COVID cost webinars.
- ✓ In order to promote walk-in pharmacy-led Covid-19 Vaccination sites, a weekly Grab a Job survey was sent out to contractors, these results were collated and cascaded for publication
- ✓ At the end of March 2021, the new advanced lateral flow device distribution service, Pharmacy Collect, was added to the Community Pharmacy Contractual Framework. GMLPC encouraged sign up to the service. Our efforts resulted in over 90% of GM contractors participated in the service.

## Communications and Engagement

**Objective 1:** To build effective internal and external communications to engage community pharmacy and support implementation and compliance to CPCF and contractual requirements

### How this has been achieved:

- ✓ Conducting a survey to measure level of contractor engagement with the LPC, understand contractor concerns, identify areas for improvement and implement changes. 259 responses received
- ✓ Regularly review and update key communications channels including the website, social platforms, and WhatsApp groups to support contractors
- ✓ Cascade key information and resources to contractors via regular newsletters and NHSmail
- ✓ Developing and distributing targeted communications for reminders and follow-ups including individual calls to pharmacies for important service and funding deadlines or claims such as PNAs PQS, PSNC Pharmacy Advice Audit, PhAS Review, GP CPCS, Antibiotic checklists, NMS, RSG Proposal
- ✓ Increasing online presence on social platforms to increase engagement and raise awareness of GMLPC, local community pharmacies in GM, and the wider pharmacy sector
- ✓ Gathering intelligence and feedback on matters affecting Community Pharmacy through regular contact with contractors via phone and video calls

**Objective 2:** To support external engagement to champion and promote the profile of community pharmacy

### How this has been achieved:

- ✓ Engaging with 24 local MPs across Greater Manchester to provide updates on the Lateral Flow Test (LFT) service, raise awareness of key challenges faced by the sector and ask for support from the Government
- ✓ Promoting the All-Party Pharmacy Group (APPG) tool to contractors to encourage engagement with local MPs
- ✓ Writing and sending press releases and articles on key sector updates to local MPs, journalists and Healthwatch organisations, including 'Community Pharmacy Pressures' which was featured in Healthwatch ebulletins and websites and contributing to an article published by the Manchester Evening News detailing how healthcare staff have experienced increasing levels of abuse and violence over the past two years.
- ✓ GMLPC was shortlisted as finalists for the C+D Above and Beyond and Covid Hero Outstanding Team Awards
- ✓ GMLPC was shortlisted as a finalist for 'Best Supporting LPC' category of the Independent Pharmacy Awards
- ✓ Collaborated with Novo Nordisk to roll out PenCycle, a first-of-its-kind recycling initiative. Greater Manchester Community Pharmacies were selected as one of only 3 pilot areas in the country. This innovative pilot was also presented at the UN Climate Change Conference.

## Strengthening the Role of Our Provider Company

CHL and GMLPC continue to build collaborative approaches for the benefit of contractors in Greater Manchester by working together on key services. For further information on how LPC and CHL work together please visit the [CHL website](#).



## Commissioning Model & Contract Management

GMLPC, Bolton and CHL regularly collaborate to recommission existing services and develop new innovative ones to support patients and citizens in the localities across GM.

The key successes we have collaborated on in 2021/22 are the following;

- Working together as part of the GP CPCS Working Group to support the implementation of the service across Greater Manchester, GP practices and community pharmacies.
- Reviewing the Rochdale stop smoking fees and service offer to ensure contractors are appropriately remunerated
- Smoking Cessation Service (SCS) Service (advanced service)
- Stop Smoking Services (locally commissioned service)
- Substance Misuse
- Renewal of End of Life Palliative Care services

## CHL Directors & Governance in 2021/22:

CHL's governance structure in 2021/22 required it to have:

- Two directors representing the LPCs; and
- Up to three additional directors

The current directors are:

- Aneet Kapoor (LPC Director)
- Varun Jairath (Director)
- Louise Gatley (Director)
- Peter Marks (LPC Director)

CHL's operations are overseen by a scrutiny committee of nominees from GMLPC and Bolton LPC.

## GM Healthcare Academy



We developed the Greater Manchester Healthcare Academy (GMHCA) to ensure that pharmacies across Greater Manchester could access cohesive, high-quality training and development that supports and empowers them today and in the future.

GMHCA focuses on developing the whole pharmacy team and provides practical guidance so pharmacies can put their learning into daily practice. Events are usually free to attend and operated on a not-for-profit basis supported by sponsorship and funding from external sources.

GMHCA is a partnership between GMLPC, Bolton LPC, CHL, GMHSCP and the Pharmacy Local Professional Network (LPN). It is supported by the Centre of Pharmacy Postgraduate Education (CPPE) and has been hosted by CHL in 2020/21.

In 2020/21 GMLPC have delivered the below training in collaboration with GMHCA to support pharmacy contractors with the following;

- Discharge Medicines Service (DMS)
- Community Pharmacy Consultation Service (CPCS)
- General Practice Community Pharmacy Consultation Service (GP CPCS) - for community pharmacy
- General Practice Community Pharmacy Consultation Service (GP CPCS) – for GPs
- Flu Vaccination training

## Collaborative Working with Wider Partners

We have developed very strong and positive working relationships with several neighbouring LPCs, including Bolton LPC, Community Pharmacy Lancashire and other LPCs in the North-West.

We work particularly closely with Bolton LPC as our closest neighbour and our partner in GM ICS and CHL. Bolton has been fully involved in our proposals for the new commissioning model and is working with us to develop standardised service specifications via the CPPB which includes CHL, Bolton LPC, GMHSCP and GMLPC.

We work closely with the Local Professional Network Chair, Aneet Kapoor and the regional NHS team to support implementation of the CPCF 5-year contract, representation of community pharmacy in the new ICS and workforce development.

In partnership with Primary Care partners from optometry, dentistry, general practice, we work collectively via the primary care board to strengthen the voice and representation of Primary Care within the GM ICS.

# Priorities for 2022/23 and Conclusion

Our workplan for this year builds on what we achieved in 2021/22 and is informed by the strategic context in which we operate, the commissioning landscape nationally and in Greater Manchester, and the issues that contractors said they wanted us to prioritise. These include:

- GM ICS Engagement and the Commissioning Model
- Workforce Development and Retention
- Service Development
- Integrated Working with Primary Care Networks and Place

GMLPC also conducted a contractor engagement survey between January 2022 and May 2022 to understand contractor concerns and collate feedback on general LPC performance in terms of offering support. We received a total number of 259 responses from 239 different pharmacies.

Understandably, the majority of concerns were operational pressures, Covid-19-related, followed by concerns about the setting up of new services and having more personalised one-to-one support from the LPC.

On a scale from 1-5 (poor-excellent), 73% rated the LPC's performance and level of support either a 4 (very good) or 5 (excellent). A number of suggestions were made for ways in which our support can be improved and these will be implemented over the coming months.

Through the implementation of these changes and ensuring that our workplan is aligned to the new commissioning landscape, our GMLPC team can ensure we are focusing on the right priorities and have the right people, skills, and structures in place to deliver what our contractors need from us over the next five years.

Our workplan for this year builds on what we achieved in 2021/22 and is informed by the strategic context in which we operate, the commissioning landscape nationally and in Greater Manchester, and the issues that contractors.

# Mental Health and Wellbeing Resources

GMLPC have collated these resources to support contractors and pharmacy teams, working collaboratively with the GM Workforce leads.

If you, a patient, or member of your team need immediate support **please call the Samaritans helpline** below. It is freely available 24/7 to support anybody in crisis.

- **116 123**

**If you need someone to talk to**, the NHS have introduced a **confidential text support service**, you can access support by texting **FRONTLINE to 85258** for support 24/7.

This service is available to all our NHS colleagues who have had a tough day, who are feeling worried or overwhelmed, or who have a lot on their mind and need to talk it through.

Alongside this, there are a range of additional support offers in place for NHS colleagues:

Resource	Link
Pharmacist Support	<a href="https://pharmacistsupport.org/">https://pharmacistsupport.org/</a>
Greater Manchester Wellbeing Toolkit	<a href="https://gmprimarycarecareers.org.uk/greater-manchester-wellbeing-toolkit/">https://gmprimarycarecareers.org.uk/greater-manchester-wellbeing-toolkit/</a>
Health and Wellbeing Champion - E-learning Programme	<a href="https://www.e-lfh.org.uk/programmes/health-and-wellbeing-champions/">https://www.e-lfh.org.uk/programmes/health-and-wellbeing-champions/</a>
Greater Manchester Resilience Hub	<a href="https://www.penninecare.nhs.uk/mcrhub-covid19">https://www.penninecare.nhs.uk/mcrhub-covid19</a>
Primary Care Excellence	<a href="https://primarycareexcellence.org.uk/">https://primarycareexcellence.org.uk/</a>
Health and Wellbeing Podcast	<a href="https://primarycareexcellence.org.uk/health-wellbeing/health-wellbeing-podcast/">https://primarycareexcellence.org.uk/health-wellbeing/health-wellbeing-podcast/</a>
Health and Wellbeing Apps Library	<a href="https://primarycareexcellence.orchs.co.uk/">https://primarycareexcellence.orchs.co.uk/</a>
LGBT Foundation: Pride in Pharmacy Toolkit	<a href="https://greater-manchester.communitypharmacy.org.uk/resources/supporting-the-lgbtq-community/">https://greater-manchester.communitypharmacy.org.uk/resources/supporting-the-lgbtq-community/</a>
GMLPC Health and Wellbeing Hub	<a href="https://greater-manchester.communitypharmacy.org.uk/resources/mental-health-and-wellbeing-support/">https://greater-manchester.communitypharmacy.org.uk/resources/mental-health-and-wellbeing-support/</a>



# **Annual Accounts**

## **2021/22**

**Accounts for the period ending 31<sup>st</sup> March 2022**

**Independent Examiner's Report to the Members of  
Greater Manchester LPC (GMLPC)**

**GREATER MANCHESTER LPC**  
**ACCOUNTS**  
**YEAR ENDED 31 MARCH 2022**

# **GREATER MANCHESTER LPC**

## **Report of the Committee Members**

**Year ended 31 March 2022**

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### **Contents**

#### **Page No**

1 - 4	Report of the Committee Members
5	Statement of Committee Members' Responsibilities
6	Independent Examiners Report
7	Income and Expenditure Account
8	Balance Sheet
9 - 11	Notes to the Financial Statements

#### **Accountants**

Proud Goulbourn  
Chartered Accountant  
Office 16, Hamilton Davies House  
117c Liverpool Road  
Cadishead  
M44 5BG

# **GREATER MANCHESTER LPC**

## **Report of the Committee Members**

**Year ended 31 March 2022**

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### **Principal Activities**

Greater Manchester LPC is a Local Pharmaceutical Committee ("LPC") acting in the role of a local NHS representative organisations.

Our goal is to enable Community Pharmacy to improve health now and in the future.

### **The Committee**

Greater Manchester LPC is an association whose functions and procedures are set out in our Constitution.

During the year ended 31 March 2022 Greater Manchester LPC had 12 members on its main committee as follows:

- 5 members from CCA
- 2 members from AIMp
- 5 Independent members

Full details of these members can be found on Greater Manchester LPC website <https://greater-manchester.communitypharmacy.org.uk/>

All members have continued to adhere to corporate governance principles adopted by the Committee and the code of conduct.

## **GREATER MANCHESTER LPC**

### **Report of the Committee Members**

**Year ended 31 March 2022**

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#### **Overview**

The main areas of the LPC's activity included:

- 92% of contractors engaged with the 2021/22 PQS scheme. GMLPC supported contractors to achieve PQS criteria through the appointment of 100% (58/58) of PCN leads.
- GMLPC have commenced engagement and implementation of GP CPCS across 600 Pharmacies and 420 practices with Bolton LPC, CHL and NHSE.
- We obtained IT funding for GPs and Pharmacies working with the GM ICS.
- GMLPC and Bolton LPC jointly supported contractor assurance and provided a webinar with NHSE to support contractors in delivering Covid Vaccinations.
- We advocated for the inclusion of pharmacies within the NHS Covid Vaccination Programme. This led the way for 74 sites to be set up across Greater Manchester. As of January 2022, community Pharmacy COVID-19 vaccination sites in GM have delivered over 1.28million jabs.
- A total of 70 services were recommissioned and 2 new services were commissioned in GM
- All MPs received communications and APPG invitations, updates on the LFT service, and information around current challenges in community pharmacy with a request for funding in two separate rounds of communication.
- System pressures raised including as part of article published for the MEN. This has led to safety and security funds being made available to all contractors in GM.
- Free HLP champion training funding obtained for all contractors in GM via the GM Workforce.
- Access to GM Mental Health and wellbeing support and training.
- To support a greener NHS. GMLPC have worked with Novo Nordisk as one of only three pilot sites in GB for new PenCycle recycling initiative GMLPC participated in national webinar ahead of soft launch and promoted initiative to our contractors.
- A new LPC website has been relaunch for contractors with support from PSNC
- We have supported with the rollout of DMS. 5 trusts are currently live, and this work is ongoing.
- GMLPC was shortlisted as a finalist for 'Best Supporting LPC' category of IPA awards based on an application focusing on the support offered to contractors around completing the Pharmacy Quality Scheme (PQS) 2020/21 during the pandemic.
- GMLPC was shortlisted as finalists for the Covid Hero – Outstanding Team Award and the Above and Beyond Award at the C+D Awards 2021.

#### **Governance and Finance**

- Contractor levy holiday from July 2021 - August 2021, cost saving of £98,000 to contractors.
- The total LPC administrative and contractor support costs for the year under review totalled £233,059. This was an increased spend of £1,690 over the previous financial year.
- Members' expenses have decreased from £33,000 in 2020/2021 to £20,000 in 2021/2022. This is a saving of £13,000 as the office function becomes more efficient operating a hybrid approach.

## **GREATER MANCHESTER LPC**

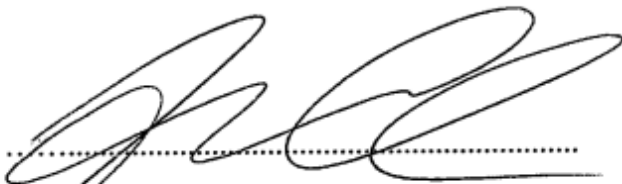
### **Report of the Committee Members**

**Year ended 31 March 2022**

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- A donation of £2800 was given to “Pharmacist Support”. This is an independent charity who supports pharmacists and their families. This is sponsorship money that the LPC has received.
- Completed GMLPC elections at the start of 2021 and the new GMLPC committee took office at the beginning of April 2021.

This report was approved by the Committee on 8<sup>th</sup> August 2022 and signed on its behalf by:

A handwritten signature in black ink, appearing to read 'Fin McCaul', written over a horizontal dotted line.

**Fin McCaul - Chair of the Committee**



## **GREATER MANCHESTER LPC**

### **Statement of Committee Members' Responsibilities**

**Year ended 31 March 2022**

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The committee members are responsible for preparing the Report of the Committee Members and the financial statements in accordance with applicable law and regulations.

The committee members are required to prepare financial statements for each financial year. The committee members have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law), including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'.

In preparing these financial statements, the committee members are required to:

- a) select suitable accounting policies and then apply them consistently;
- b) make judgments and accounting estimates that are reasonable and prudent;
- c) prepare the financial statements on the going concern basis, unless it is inappropriate to presume that the committee will continue in operation.

The committee members are responsible for keeping adequate accounting records that are sufficient to show and explain the committee's transactions and disclose with reasonable accuracy at any time the financial position of the committee. They are also responsible for safeguarding the assets of the committee and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The committee members are responsible for the maintenance and integrity of the financial information included on the committee website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.



## **GREATER MANCHESTER LPC**

### **Independent Examiners Report to the members of Greater Manchester LPC**

**Year ended 31 March 2022**

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I report on the accounts of the LPC for the year ended 31 March 2022 which are set out on pages 7 to 11.

#### **RESPECTIVE RESPONSIBILITIES OF MEMBERS AND EXAMINER**

The LPC members are responsible for the preparation of the accounts. The LPC members consider that an audit is not required for this year in accordance with the rules and that an independent examination is needed.

It is my responsibility to:

- examine the accounts;
- follow the procedures laid down in the rules of the LPC; and - state whether particular matters have come to my attention.

#### **BASIS OF INDEPENDENT EXAMINER'S STATEMENT**

My examination was carried out in accordance with the rules of the LPC. An examination includes a review of the accounting records kept by the LPC and a comparison of the accounts presented with those records. It also includes consideration of any unusual items or disclosures in the accounts and seeking explanations from you as members concerning any such matters. The procedures undertaken do not provide all the evidence that would be required in an audit, and consequently no opinion is given as to whether the accounts present a "true and fair view" and the report is limited to those matters set out in the statement below.

#### **INDEPENDENT EXAMINER'S STATEMENT**

In connection with my examination, no matter has come to my attention:

1. which gives me reasonable cause to believe that in any material respect the requirements
  - to keep accounting records in accordance with the rules of the LPC, and
  - to prepare accounts which accord with the accounting records and to comply with the rules of the LPC have not been met; or
2. to which, in my opinion, attention should be drawn in order to enable a proper understanding of the accounts to be reached.

**K.A.ROGERS**  
Chartered Accountant  
Office 16, Hamilton Davies House  
Cadishead  
Manchester M44 5BG  
Date: 30/08/2022

GREATER MANCHESTER LPC

Income & Expenditure Account

Year ended 31 March 2022

	2022	2021
	£	£
<b><u>Income</u></b>		
Statutory Levies	465,501	465,500
Sponsorship	2,850	12,500
CHL Income	7,150	0
Other Income	2,118	2,198
<b>Total Income</b>	<b>477,619</b>	<b>480,198</b>
<b><u>Expenditure</u></b>		
<b><u>Administrative Expenses</u></b>		
Salary	214,466	212,122
Office Rent	9,148	9,919
Telephone & Internet	6,464	5,652
Printing, Stationery & Postage	-45	1,963
Computer expenses & equipment	1,816	1,384
Travel Expenses	1,210	329
<b><u>P.S.N.C. Expenditure</u></b>		
Levy	179,472	177,451
<b><u>Meetings</u></b>		
Hire of Rooms	0	0
Members Expenses - LPC Meetings	19,757	32,764
AGM Costs	1,500	0
<b><u>Project Costs</u></b>		
CHL	625	0
PCN	1,440	9,720
Transfer project monies to CPGM Healthcare Ltd	0	20,000
Flu Project	0	27,858
CPPB	10,787	14,260
CPCS	0	7,428
Other project costs	4,816	2,736
<b><u>Other Expenses</u></b>		
Sponsorship	0	5,000
Honorarium	0	0
Accountancy Fees	1,740	2,420
HR Professional Support	3,981	3,903
Software costs	439	432
Insurance	311	307
Staff Training	180	0
Staff Recruitment	683	1,697
Sundry Expenses	35	35
Donation	2,800	950
Bank Charges	0	0
<b>Total Expenditure</b>	<b>461,625</b>	<b>538,330</b>
<b>Surplus for the Year before tax</b>	<b>15,994</b>	<b>-58,132</b>
<b>Corporation Tax Payable</b>	<b>0</b>	<b>0</b>
<b>Surplus/(Deficit) for the Year after tax</b>	<b>15,994</b>	<b>-58,132</b>

# GREATER MANCHESTER LPC

## Balance Sheet

Year ended 31 March 2022

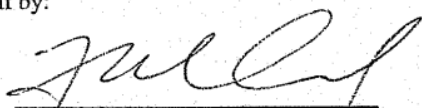
### GREATER MANCHESTER L.P.C.

#### Balance Sheet

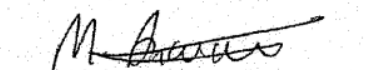
Year ended 31 March 2022

	Notes	31.3.22		31.3.21	
		£	£	£	£
<b>Fixed Assets</b>					
Tangible Assets			0		0
			<u>0</u>		<u>0</u>
<b>Current Assets</b>					
Debtors	3	31,300		31,300	
Cash at Bank		546,679		524,549	
		<u>577,979</u>		<u>555,849</u>	
<b>Current Liabilities</b>					
Creditors: Amounts falling due within one year	4	20,097		13,961	
		<u>20,097</u>		<u>13,961</u>	
<b>Net Current Assets</b>			557,882		541,888
<b>Net Assets</b>			<u>557,882</u>		<u>541,888</u>
<b>Represented by:</b>					
<b>General fund</b>					
Balance at 1 April 2020			541,888		600,020
(Deficit)/Surplus for the year			15,994		-58,132
Balance at 31 March 2021			<u>557,882</u>		<u>541,888</u>

These financial statements were approved by the Committee on 8th August 2022 and signed on its behalf by:



Fin McCaul - Chair of the Committee



M Anwar - LPC Treasurer

*The notes on pages 9 to 11 form part of these financial statements*

# **GREATER MANCHESTER LPC**

## **Notes to the Financial Statements**

**Year ended 31 March 2022**

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### **1 Accounting Policies**

With the exception of some disclosures, the financial statements have been prepared in compliance with FRS 102 Section 1A and under the historical cost convention. The financial statements are prepared in sterling, which is the functional currency and monetary amounts in these accounts are rounded to the nearest £. The financial statements present information about the committee as a single entity. The following principal accounting policies have been applied:

#### **Income and Expenditure**

Both income and expenditure are accounted for on the accruals basis. The primary source of income shown in the financial statements consists of levies from NHSBA Contractors in respect of that period.

#### **Judgements and Key Sources of Estimation Uncertainty**

The preparation of the financial statements requires management to make judgements, estimates and assumptions that effect the amount reported. These estimates and judgements are continually reviewed and are based on experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

#### **Taxation**

Any surplus arising from the activities of the LPC on its non-mutual activities is subject to corporation at 19%.

#### **Pension Costs**

The amounts paid during the year are charged to the income and expenditure account. Details are shown in note 6 of these accounts.

#### **Operating Leases**

Rentals in respect of operating leases are charged to the income and expenditure account as incurred.

#### **Financial Instruments**

The committee only enters into basic financial instrument transactions that result in the recognition of financial assets and liabilities like other debtors and creditors. Financial assets and liabilities are recognised when the company becomes a party to the contractual provisions of the instruments.

# GREATER MANCHESTER LPC

## Notes to the Financial Statements

Year ended 31 March 2022

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### 1. Accounting Policies (continued)

#### Debtors and creditors

Basic financial assets and liabilities, including trade debtors, other debtors and other creditors, are initially recognised at transaction price, unless the arrangement constitutes a financing transaction, where the transaction is measured at the present value of the future receipts discounted at a market rate of interest. Such assets and liabilities are subsequently carried at amortised cost using the effective interest method, less any impairment.

#### Going concern

The committee members consider that there are no material uncertainties about the committee's ability to continue as a going concern. In forming their opinion, the committee members have considered a period of one year from the date of signing the financial statements.

### 2 Employees

Staff costs consist of:	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>
Wages and salaries	192,464	184,707
Social security costs	15,027	14,378
Pension costs	6,975	6,105
Locum cover and other employment costs	0	6,932
	<u>214,466</u>	<u>212,122</u>

The salary of the Chief Executive Officer was £nil (2021 £nil).

The average monthly number of persons employed during the year was 6 (2021:

#### 6). 3 Debtors

	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>
Loan - CPGM Healthcare	31,300	31,300
	<u>31,300</u>	<u>31,300</u>

## GREATER MANCHESTER LPC

### Notes to the Financial Statements

Year ended 31 March 2022

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#### 4 Creditors: amounts falling due within one year

	2022	2021
	£	£
Other creditors and accruals	15,212	8,989
Other taxation and social security	4,885	4,972
	<u>20,097</u>	<u>13,961</u>

#### 5 Pension Scheme Costs

The employer's contributions to the money purchase scheme are 3% (2021: 3%), if employees contribute 4%. The employer will pay contributions to this maximum. The total pension charge for 2021 was £6,975 (2021: £6,105).

#### 6 Related Party Transactions

During the year the following expenses were paid to committee members:

Amount	2022		2021	
	N.O of Members		N.O of Members	
£0 to £10,000		9		9
£10,001 to £20,000		0		0
	<u>0</u>	<u>9</u>	<u>0</u>	<u>9</u>



**GMLPC**

Supporting Community Pharmacy  
in Greater Manchester