

Annual Report and Financial Statements

2023 - 2024

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NORFOLK LPC

Officers

Chair: Geoff Ray MRPharmS

Vice Chair/Treasurer: Chris Ball MRPharmS

Chief Officer: Tony Dean MRPharmS

Deputy Chief Officer: Lauren Seamons BSc

Support Officer: Charlotte Bowles

The Committee shall be the "Norfolk Local Pharmaceutical Committee" (as required by the NHS Act 2006) and known as 'Community Pharmacy Norfolk'



Welcome & Overview

For this past year, as Chair of Norfolk LPC, my commitment has mainly been focussed on the successful transition and merger with Suffolk LPC, culminating in the formation of your new representative Committee, Community Pharmacy Norfolk and Suffolk (CPNS).

As from 1st April, I have stepped down as Chair and long-standing elected member of your Committee safe in the knowledge that my work in this regard is done. CPNS is in good hands to continue the good we have achieved for you our Contractors in the past long into the future, with Community Pharmacy and what we can offer as a sector increasingly being understood by our commissioners.

I must recognise the fantastic support, dedication, and commitment from the Norfolk LPC employed team- Tony, Lauren and Charlotte. It is great comfort knowing they form an important part of CPNS and I wish the team and CPNS the very best for the challenges ahead. You, the contractor, are in very good hands

Geoff Ray MRPharms

Chair

Norfolk LPC



Report on our Activities 2023-24

Tony Dean MRPharmS

Chief Officer



Our local service commissioning has remained strong, and response to Contractor queries second to none. We have built and maintained strong local relationships with system partners, as they themselves have evolved into the increasingly important commissioning bodies of today.

On 1st April 2024, Norfolk LPC merged with Suffolk LPC. This merger had actually been discussed sometime before David Wright's fundamental review of representation or the "Transforming Pharmacy Representation Programme" which came from that. This was due to the "like-mindedness" of our Committees and Contractor profiles, and that there was already increasingly close work between our employed teams as we sought greater efficiency and resilience. It was, simply, "The Right Thing to Do". Achieving this, however, without compromising support for Contractors at such a challenging time, with significant new services being introduced and Pharmacy's own resilience and capacities so vulnerable, was far from "simple". It has demanded huge efforts from the Committees and staff teams, and we are extremely grateful for the professional, committed and positive spirit in which the merger has been conducted. We have lost some long-standing and highly valued Members, and I would like to take this opportunity to thank all Members of Norfolk LPC across the years. I also warmly recognise that our then Deputy Chief Officer, Lauren, and Support Officer, Charlotte, have been fundamental to all that we have done and achieved. As a team, we have punched above our weight.

So now we look to the future as Community Pharmacy Norfolk & Suffolk, at a time when our sector's future remains in critical condition. We will support our national body, Community Pharmacy England. We will work as never before in a collaborative way with our Integrated Care Boards and other system partners to help integrate new services. We will be resolute in ensuring local services are attractive and viable, or we will not support them. Most of all, as a new body we must listen to what our Contractors most need from us to help them survive until, as they must, national commissioners understand the true value of pharmacy services across the board, and back this with a national contract that provides the resources for our Contractors to fully deliver on their massive potential to support patients and the wider NHS.



Contractual Support:

Norfolk LPC continued to equitably support Contractors to meet key contractual requirements, via such measures as clear reminders and links in our Newsletters to national publications, and appropriate utilisation of data provided to the LPC. As our ICB's understanding of community pharmacy grew, along with it came greater system resource to work with. We were extremely grateful that Norfolk & Waveney appointed a fantastic Community Pharmacy Clinical Lead, and also put in place a great Pharmacy Quality Lead. This meant for the first time in years we had local system partners with an interest in integrating and improving community pharmacy services to work really closely with around quality and compliance, and over the year a really positive approach was developed around supporting pharmacies, which feels much more like true commissioning rather than the more detached pure contract management of recent years.

Support for locally commissioned services:

Lauren Seamons, our exceptional Deputy Chief Officer (at the time), has been working closely with partners within Norfolk County Council to renegotiate Public Health contracts for 2024 and beyond. Meantime all Public Health commissioned services continued during 2023-4 and improvements were made to the terms of the sexual health service, and to the requirements of the supervised consumption service.

The ICB-commissioned local direct Emergency Supply Service continued, as did the Norfolk Medicine Support Service, although the LPC has now flagged serious concerns at the viability of the latter without review. A new funded service was also commissioned by the ICB in Norfolk and Waveney for the supply of Oral Covid Antivirals through community pharmacies. Again, this was a targeted service but ensured robust access for patients to this important service whilst also rewarding contractors for the time involved in the robust delivery of this service. This was not the case in many other ICBs across the region. Norfolk & Waveney ICB should also be congratulated for taking close responsibility for the commissioning of Bank Holiday opening arrangements. Recognising the special needs of our population due to our rurality and seasonal surges in demand, our ICB is now commissioning opening on all Bank Holidays, rather than the more limited commissioning in other parts of the region.

Working with key NHSE regional partners and neighbouring LPCs, Norfolk LPC took the lead in the negotiation and development of a local Resilience Service, which remunerated pharmacies for providing the ICB with some basic information and key contacts to form the basis for early ICB communications with pharmacies. In Norfolk & Waveney (and indeed Suffolk) that resulted in almost all pharmacies being able to claim an additional £1,485. This funding level was devolved to the other ICBs in the region too, with some adopting the "Norfolk model" and directly funding pharmacies, whereas in some areas the funding was used to e.g. help expand the "Community Pharmacy PCN Leads" initiative. This workstream, therefore, had a value to Contractors of c. £1.2 million regionally. We are extremely grateful to the NHSE Regional personnel involved in this, and equally our ICB pharmacy lead(s) for their massive input into navigating the contracting and mechanisms for delivery of this funding to our Contractors.

It is absolutely recognised that, going forwards, local services must be viable and attractive to our pharmacies if they are to remain relevant against a backdrop of

increasingly important national services, and we are working closely to ensure that system partners understand the potentially conflicting pressures on pharmacy teams and co-produce services which will benefit all. This also includes the need for a recognition that the procurement and sign-up processes need to be standardised as much as possible, and proportionate to the value of the service to those delivering. There may be a move towards more targeted commissioning of local services determined by population health data, and indeed this may assist securing truly viable services in places that need them the most. It also seems likely that we may see more preventative services incorporated into national discussions, which would be welcomed.

Support for National Services:

It is clearly a role for LPCs to support the integration of nationally-commissioned services, and Norfolk LPC continued to do this during 2023-4.

How LPCs do this varies considerably nationally. Here in Norfolk, we have long held the view that, while we can do a great deal to help Contractors ourselves, and do so via our News, special emails, webinars, Contractor visits etc., acting alone with only Contractor levy as resource that help is clearly limited. The representative function of an LPC, though, is equally important in ensuring that all interested parties have a stake in responsibility for the success of national services, and as the overall responsibility now sits with our Integrated Care Board, we have also focussed on working in a truly collaborative way with our key ICB contacts. The implementation of Pharmacy First was a good example of that. Working together, we identified the national and regional support that had been made available and took a "fill the gaps" approach to determine what local actions would be most beneficial. This resulted in ICB-funded local training sessions on ENT clinical knowledge, and also on the need to make good contemporaneous clinical records. We worked with the ICB on local communications and messaging, which required a fine balance between service awareness and the need for some early expectation management. As 2024 progresses, and the ICB finalises some restructuring and subsequent appointment of staff to roles, we expect the level of promotion of, and integration work on the Pharmacy First service to ramp up, as it must do if pharmacies are to achieve the thresholds for the monthly payment which is so fundamental to engagement and service success.

Norfolk LPC continued to offer appropriate support for contractual requirements where data was provided to allow us to do so. Responding to Contract Applications and changes continued, although sadly this year saw an acceleration of pharmacy closures and reductions in opening hours, made inevitable by the funding crisis.

Ever-keen to drive forward the clinical opportunities for our pharmacies to make a difference to patient outcomes, this year we commenced participation in an NHSE Integration Fund supported pilot of a Community Pharmacy Cancer Referral Service. This exciting initiative is being undertaken in partnership with a wide range of stakeholders, including NHSE, the ICB, County Council, and Regional Cancer Alliance. The LPC received funding to support the pilot implementation and delivery. As this is written it is still early days, and much data is confidential as yet, but progress has been extremely encouraging. This is being recognised nationally. The success so far reflects the extensive long-term relationships we enjoy with so much of our system, but I must take

this opportunity to single out the wonderful project management provided by our Support Officer, Charlotte Bowles, which has been so crucial to the results.

Support for Workforce:

The LPC worked closely with ICB workforce leads on key initiatives such as DPP support for the IP upskilling and the Foundation year 2025-6, and "translating" NHSE WTE initiatives into a language more easily understood by busy Contractors. We continue to work with the University of East Anglia on undergraduate student placements. While clearly wider workforce initiatives require significant resources, with LPC capacity for such matters limited, given the ongoing crisis of available Pharmacists and increasingly Technicians within the area, we will be continuing to influence our system partners to offer equitable levels of support for our Contractors.

Relationships:

As already stated, we were extremely fortunate that Norfolk & Waveney ICB was able to recruit an exceptional Community Pharmacy Clinical Lead, which made a huge difference to much of the work outlined above. That this vital contact has now been promoted and provided with some more resource in her team bodes well for the further integration of community pharmacy services within Primary Care. Indeed, we now have a GP Practice & Community Pharmacy Operational Delivery Group, which looks at all significant data and performance of these two cornerstones of Primary Care together. We continue to maintain and grow relationship within the wider ICB.

Our working relationships extend way beyond our immediate commissioners, though, and we have regular meetings with a wide range of bodies and organisations, including Local Medical Committee, Healthwatch Norfolk, Local optical and dental Committees, many charities and more.

This year we have also been increasingly active in terms of media interaction and output, with significant LPC/Pharmacy coverage on local radio and TV, as well as in the print and social media. We have also facilitated many pharmacy visits with our MPs (and prospective MPs).

Representation:

As above, a fundamental workstream this year has involved preparations for the merger of the Norfolk and Suffolk LPCs, as firmly mandated by the special vote of Contractors in May 2023.

Both LPCs moved to national branding in April 2023 and became "Community Pharmacy Locals". This allowed alignment of websites, social media, and other branding to reflect the national Community Pharmacy England identity in preparation for the planned local merger. Joint meetings were held in November 2023, January, and March 2024 to start to strengthen relationships between the members of both Committees. HR advice was taken to ensure that all officers were supported through the transition.

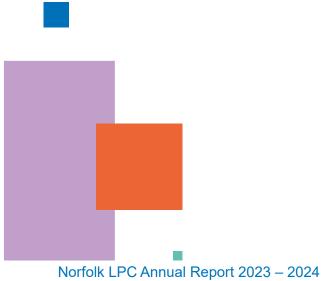
An election process took place in January 2024 to select the members of the new committee and Community Pharmacy Norfolk and Suffolk was officially formed with a new 12-member Committee and merged officer team on the 1st of April 2024.

The merger unfortunately saw Tania Farrow, former Chief Officer of Suffolk LPC, take the opportunity to stand down from her role and take things a little easier. We have worked so closely with Tania for so long that I cannot begin to thank her for what she has done for both Committees, and also for her peer support, wisdom and friendship over so many years. Thank you, Tania.

The Future:

Community Pharmacy Norfolk and Suffolk, due to meticulous planning in the run up to the merger, has been able to hit the ground running. With a change in Government and the indicated additional emphasis on adequately funding Primary Care to reduce demand on Secondary Care, there are opportunities nationally to develop the community pharmacy contractual framework to support this. However, this would have to be with adequate funding, flowing both through the national contract and through local service development to meet the needs of communities at place level. It will remain to be seen how this situation evolves.

With the new Committee in a stronger position financially, with established local and national relationships and dedicated and talented Officers, there is everything to play for. Norfolk and Suffolk Contractors will continue to receive exemplary support from their LPC as we begin to navigate a significantly altered landscape.



Governance, structure and management 2023-4



May 18 th 2023	November 15 th 2023 (Joint with Suffolk LPC
July 27 th 2023	January 17 th 2024 (Joint with Suffolk LPC)
September 21 st 2023	March 20 th 2024 (Joint with Suffolk LPC)

Members of the Committee in 2023-4

Committee Role	Name of Member	Contractor Group	Meetings Attended
Chair	Geoff Ray	IND	6/6
Vice Chair/ Treasurer	Chris Ball	IND	5/6
	Ben Ampomah	IND	5/6
	Alister Huong	CCA	5/6
	Gurpreet Kular	IND	5/6
	Simon Ingham	IND	6/6
	Caroline Steels	CCA	1/3 left Oct 2023
	Darren Wales	CCA	5/5 joined July 2023
	Mike Hebron	CCA	5/5 Joined July 2023
	Katie Steel	CCA	4/6
	Jainaba Njie	CCA	1/1 on maternity
	Dee Hebron	CCA	1/1 left May 2023

LPC Governance:

Community Pharmacy Norfolk adopted all TAPR-recommended governance changes up until January 2024, when further adoption of updated policies was temporarily suspended until after the merger to minimise duplication and disruption.

For information, the new Community Pharmacy Norfolk & Suffolk have now adopted ALL national updates to governance policies. For more information, please see;

Governance Documents - Community Pharmacy Norfolk and Suffolk (cpns.org.uk)

Norfolk LPC FINANCIAL STATEMENTS

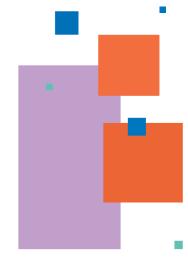
FOR THE YEAR ENDED 31 MARCH 2024

Accountants Larking Gowen LLP Prospect House Rouen Rd Norwich



Report of the

Committee Members



Year ended 31 March 2023

Principal Activities

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

Our goal is: To represent community pharmacies, working in collaboration with others, to improve the health and well-being of the people in our county.

The Committee

NORFOLK LPC is an association whose functions and procedures are set out in our Constitution [and rules].

During the year ended 31 March 2024 NORFOLK LPC had 12 members on its main committee as follows:

5 members from INDEPENDENT PHARMACIES

7 members from the CCA

A non-executive chair.

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

Overview

Please refer our Annual Report for details of our work during 2023-24

Please also note that, from 1st April 2024 the Norfolk LPC formally merged with Suffolk LPC to create a new organisation: Norfolk & Suffolk LPC, trading as Community Pharmacy Norfolk & Suffolk. As such, this is the last financial report from Norfolk LPC.

Contractors may wish to note that, as part of the merger retained funding reconciliation, Norfolk Contractors were provided with a levy holiday, which affected the yearly levy income.

We also sought to obtain appropriate sponsorship for committee meetings to minimise the expense to contractors. The employed staff continue to work from home offices and have not seen a need to return to in-person meetings as frequently as before the pandemic. This has meant a significant decrease in travel



Statement of Committee Members' Responsibilities

Year ended 31 March 2023

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'. The committee members must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and of the surplus or deficit of the committee for that period.

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;
- 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.

The committee members confirm that so far as they are aware, there is no relevant audit information of which the committee's auditors are unaware. They have taken all the steps that they ought to have taken as committee members in order to make themselves aware of any relevant audit information and to establish that the committee's auditors are aware of that information



Income and Expenditure Account

Year ended 31 March 2024

	Notes	2024	2023	
Income	£	£	£	£
HHSBA Contractors		160,458.67	182,54	4.87
Other income		6,305.56	4,00	
Cancer Project		32,500.00		
Meeting Sponsorships		400.00	1,30	0.00
Interest Received		1,174.38	15	8.61
		200,838.61	188,00	4.87
Expenditure				
Staff employment cost	2			
Gross Wages		117,854.73	106,752.	
Employer NI		5,676.08	10,393.	
Auto enrolment pensions		6,812.92	5,559.	
Locum cover Human resource services		3,630.00	1,875. 936.	
Training costs		1,014.00	930.	-
		134,987.73	125,516.	42
Establishment costs Office and Equipment repairs IT Support costs Software licenses Depreciation of fixtures, fittings and IT		1,959.12 144.47 1,358.81 9.21 3,471.61	2 81	3.67 8.78 0.58 2.29
Meeting costs				
Refreshments and catering for meetings		1,616.50	91	5.37
Room hire for meetings		2,975.50	1,63	2.81
Travel and subsistence		2,220.35	2,18	0.72
		6,812.35	4,72	8.90
Insurance, PPS, Telephones etc				
Office stationary		184.46	5	8.95
Postage & Carriage		4.40		7.60
Mobile charges		576.00		7.37
				3.92

Levies and license fees		
Pharmoutcomes Licenses	1,174.50	2,610.00
PSNC Levy	55,288.71	45,706.00
Accountancy Fees	1,122.00	1,045.20
Professional Fess	600.00	
	58,185.21	49,361.20
Communications		
Website Costs	-	142.93
Events - Other costs	1,897.20	-
	1,897.20	142.93
Total Costs	206,118.96	181,658.69
Surplus before Tax	(5,280.35)	6,346.18
Corporation tax	223.06	30.21
Surplus after tax	(5,503.41)	6,315.97

NORFOLK LPC

Balance Sheet

as at 31 March 2024

	Notes		2024			2023	3
		£		£	£		£
Fixed assets							
Tangible assets	3			27.63			36.84
				27.63		_	36.84
Current assets							
Current account Business base rate tracker account		29,359.13 98,641.09			35,756.86 97,544.70		
Current liabilities		128,000.21	-		133,301.56		
Creditors: Amounts falling due within one year	6	(223.06))		(30.21)		
Net current assets			127,	777.15		1	33,271.35
Total assets less current liabilities			127,8	804.78		1	33,308.19
Net assets			127,8	804.78		1	33,308.19
Represented by: General fund						_	
Balance at 1 April 2023			133,3	308.19		1	26,992.22
Surplus for the year			(5,5)	03.41)			6,135.97
Balance at 31 March 2024			127,8	804.78		1	33,308.19

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Notes to the Financial Statements

Year ended 31 March 2024



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 \pounds . 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.

Depreciation

Depreciation is calculated on a straight line basis on computer and office equipment:

Computer and Office Equipment - 25%

Taxation

Any surplus arising from the activities of the 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.

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.

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

• •	2024	2023
	£	£
Staff costs consist of:		
Wages and salaries	94,786.04	86,610.25
Social security costs	28,744.77	30,356.02
Pension costs	6,812.92	5,559.15
Locum cover and other employment costs	3,630.00	1,875.00
Staff Expenses	1,897.20	142.93
	135,870.93	124,543.35

The salary of the Chief Executive Officer was £51,997.55 (2023 £47,921.37).

The average monthly number of persons employed during the year was 5 (2023: 5).

3 Tangible Assets

	Computer and Office Equipment	Total
	£	£
Cost		
At 1 April 2023 Additions	1,744.74	1,744.74
Disposals	-	-
At 31 March 2024	1,744.74	1,744.74
Depreciation		
At 1 April 2023	1,707.91	1,707.91
Provided for year	9.21	9.21
	-	-
At 31 March 2024	1,717.12	1,717.12
Net Book Value	 =	
At 31 March 2024	27.63	27.63
71. 31 March 2024		27.03
At 31 March 2023	36.84	36.84

INDEPENDENT CHARTERED CHARTERED ACCOUNTANTS' REVIEW REPORT TO THE COMMITTEE MEMBERS OF NORFOLK LPC

In accordance with our engagement letter dated 16 February 2023 we have prepared for your approval the financial information of Norfolk Local Pharmaceutical Committee for the year ended 31 March 2024 which comprises the Revenue Receipts and Payments Account and the Balance Sheet from the accounting records and information and explanations you have given to us.

The financial information has been compiled on the accounting basis set out in note 1 to the financial information. The financial information is not intended to achieve full compliance with the provisions of UK Generally Accepted Accounting Principles.

As a member firm of the Institute of Chartered Accountants in England and Wales (ICAEW), we are subject to its ethical and other professional requirements which are detailed at icaew.com/regulations.

Our report is made solely to the Members of Norfolk Local Pharmaceutical Committee. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the members, for our review, for our report, or for the opinion we have formed.

Larking Gowen LLP

Chartered Accountants

1st Floor Prospect House Rouen Rd Norwich NR1 1RE

Date: 19/06/2024



LPC Contact Details

Community Pharmacy Norfolk & Suffolk

Email: info@cpns.org.uk

Community Pharmacy Norfolk and Suffolk (cpns.org.uk)



