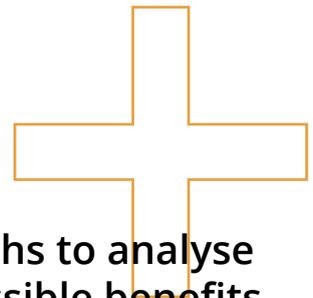


Executive summary



The RSG has worked hard over a period of 15 months to analyse the Wright Review recommendations and their possible benefits, including taking advice from change management experts and engaging widely with the sector. This report sets out their final proposals to contractors.

It is nearly two years since Professor David Wright and his team at the University of East Anglia published a report on contractor representation and support in England, **Independent Review of Community Pharmacy Contractor Representation and Support: providing best value for contractors**, known as “the Wright Review” ➔.

The Review looked at how PSNC and the LPCs were working, making recommendations to ensure contractors get best value for money from the levies that they pay.

PSNC initiated the process responding to growing pressures across the sector, LPCs and PSNC.

After extensive research, with information gathered from every LPC, trade associations and a survey of contractors representing more than 6,000 pharmacies; the Wright Review made 33 recommendations about governance, systems, structures and finance, with the aim of ensuring contractors receive better value for money.

The Wright Review overview

We recommend reading the **report The Wright Review overview** ➔ which may help you better understand the rest of these proposals.

After the Wright Review, in January 2021 PSNC and the LPCs jointly funded a small group of contractors to look at how PSNC and the LPCs should best respond to the recommendations.

The group was called the Review Steering Group (RSG) and it comprised 10 representatives from across the pharmacy sector.

The RSG has kept contractors at the heart of all of its work, as well as considering the wider healthcare context: with so many challenges ahead for contractors, LPCs and PSNC, the RSG and all those it has spoken with strongly believe that doing nothing is not an option.

This document represents the conclusion of the RSG’s work, setting out a series of proposals that have consensus across the community pharmacy sector, and which have been developed through discussion with the sector, using the Wright Review recommendations as a starting point. It is now for contractors to review these proposals and decide, via the vote in May, whether they should be taken forwards.

A ‘yes’ vote, will set a clear mandate for change. It will then be for PSNC and LPCs to respond to this and enact any constitutional or other changes.

RSG Members

Adrian Price *CCA, Tesco Pharmacy*
David Broome *Independent contractor*
Mike Hewitson *Independent contractor*
Sam Fisher *CCA, LloydsPharmacy*
Stephen Thomas *CCA, Rowlands Pharmacy*
Tricia Kennerley *CCA, Boots*

Aneet Kapoor *Independent contractor*
Mark Burdon *Independent contractor*
Peter Cattie *AIMP, PCT Healthcare*
Sandeep Dhani *AIMP, MW Phillips Chemists*
Sue Killen *RSG Convenor (non-member)*



Taking on board all of its work and the feedback from contractors, this report sets out the RSG's final proposals for a way forward. **There are four key themes within the proposals.**

1. Stronger governance

The RSG is proposing that an improved governance system be rolled out across PSNC and the LPCs to introduce independence and audits across the system, standardise visibility of Key Performance Indicators (KPIs) and strengthen accountability. The RSG also accepts name changes as proposed by the Wright Review and has made proposals for how the voice of contractors can better be heard at national level.

publish a transformation plan which will outline improvements in governance including greater transparency and a clearer separation between governance and advisory work.

There will be a renewed focus on bringing local and wider expertise to central decision-making, with PSNC working to a clearer Negotiating Strategy and a focus on how PSNC and the LPCs working with other relevant bodies can be better aligned to one vision and strategy for the sector.

2. Better alignment with the NHS

LPCs will be supported to become more efficient and to review their boundaries in line with NHS Integrated Care Systems (ICS) changes, subject to the view of local contractors and NHS England and NHS Improvement.

3. Appropriate resourcing

The RSG accepts the recommendation in the Wright Review that the current system of levy funding should be redirected towards representative activities which have the greatest impact, in particular national negotiation and policy development. This means adjusting how the levy is split between LPCs and PSNC – with a 13% redirection of the total annual contractor levy towards PSNC – to a balance that allows for improved negotiating capacity and capability, provides better local and national contractor engagement, and introduces shared services for local and national bodies.

4. Stronger collaboration

The RSG has set out proposals to increase efficiency and remove duplication across PSNC and the LPCs. At the centre, the PSNC Committee will review its size while maintaining balance between independents and multiples, and

Benefits and next steps

The RSG's proposals will provide a platform for stronger, more cohesive and forward-looking leadership for community pharmacy contractors, helping to get better recognition for the sector. The changes will ensure all contractors are supported to offer a range of innovative services, underpinning sustainable businesses and delivering high value patient services. Aligning pharmacy representation with NHS structures will help to further position the sector as a key frontline healthcare provider and recognised contributor to achieving NHS targets – strengthening local and national negotiating positions.

Contractors have a month to consider these proposals at which point they will be asked to vote on them in their entirety. You can find out about events taking place during this period on the **RSG website** →.

Further information on the vote, including what contractors will be asked and how it will be independently conducted and overseen, is included in this report.

Learn more →