

## Report of the Committee for April 2022 to March 2023

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### INTRODUCTION

This report provides details of the work undertaken by Community Pharmacy Lincolnshire during the period 1<sup>st</sup> April 2022 to 31<sup>st</sup> March 2023.

Community Pharmacy Lincolnshire is the Local Pharmaceutical Committee, which is the representative statutory body for all Community Pharmacy contractors in the Lincolnshire area. The committee works with the ICS and other key healthcare stakeholders including local councils and other organisations, as necessary, to ensure that the provision of pharmaceutical services continues to be an integral part of Health and Social Care in the county and that community pharmacy is truly represented.

This report outlines how the Committee have complied with their duties, the work completed during the course of 2022/23 and the priority areas of focus for 2023/24.

### MEMBERSHIP

The current LPC committee was formed in April 2018 and this report covers the fifth and final year of the committee's term. During 2021/22, in order to allow for minimum disruption during the period for voting on and the implementation of changes required as a result of the Wright Review, it was agreed at the Special General Meeting on 23<sup>rd</sup> September 2021 that terms would be extended by one year, with a new committee due to be formed in April 2023. During 2022/23, to allow for the finalisation of changes following the yes vote to the RSG proposals, it was agreed at a Special General Meeting on 17<sup>th</sup> January 2023 that terms would be extended until 30<sup>th</sup> June 2023.

In addition, at the meeting on 17<sup>th</sup> January 2023, Community Pharmacy Lincolnshire chose to adopt the new PSNC model constitution. The membership of the committee is reflective of the constitution. The 10-person committee is proportional to the numbers of contracts in the area of the LPC held by Company Chemists Association (CCA members), Association of Independent

LPC Chair: Paul Jenks, BPharm (hons), MSc, MRPharmS, FRSPH

LPC Vice Chair: Marc Brooks, BSc (hons), MRPharmS

LPC Treasurer: Chris Kenny, MPharm, MRPharmS, PGCert, PhIP

Chief Officer: Dr Tracey Latham-Green, BA (hons), MBA, PhD

Multiple Pharmacies (AIMP) and Independent Contractors. The constitution of Lincolnshire LPC (now known as Community Pharmacy Lincolnshire) comprises four CCA members, four AiMP members and two Independent Contractors. There is currently one vacant CCA position.

#### Committee Members

##### **CCA**

Paul Jenks  
Robert Severn  
Christine Stafford (since July 2022)  
Vacancy

##### **AiMP**

John Broomhead  
Chris Kenny  
Marc Brooks  
Blazej Jasnowski

##### **Independents**

Andrea Mudamburi  
Chris Mulimba

Committee members who left during the financial year:

##### **CCA:**

James Stout  
Milena Krusinska

##### **Independent:**

Chirag Ahir

#### The Executive Committee

Community Pharmacy Lincolnshire Executive Committee consists of committee officers:

- Paul Jenks, Chair
- Marc Brooks, Vice Chair
- Chris Kenny, Treasurer

The Executive Committee are supported by a member for governance

- Robert Severn, Governance Lead

#### Non-Committee Member Employees

- Tracey Latham-Green, Chief Officer (0.6FTE)
- Hazel Sisson, Administration Assistant (approx. 0.1FTE)
- Stuart Hellon, Services Implementation and Support Lead (0.4 FTE, fixed term contract 1<sup>st</sup> April 2022 – 30<sup>th</sup> September 2022, reduced to 0.3 FTE 1<sup>st</sup> October 2022 – 31<sup>st</sup> March 2023)

## Governance

The Committee operates in line with its constitution and related policies, as shown on the website under [Committee Governance](#), appointing a specific governance lead from within its membership. Members are required to declare any conflicts of interest and ensure these declarations are updated when required. Declaration of Interest (DOI) forms for each committee member are available on our website. The Chair ensures members declare any conflicts of interest relating to specific agenda items at the start of each meeting. Members with relevant conflicts for items on the agenda are excluded from voting and in the event of this occurring, their voting exclusion and conflict is noted in the minutes.

## WORK PROGRAMME & PROGRESS IN 2022/23

### Meetings of the Committee

During the year, the Committee has met on six occasions. To ensure maximum economy, efficiency and effectiveness, the committee held six bi-monthly meetings a year, two of which were held virtually on Teams, with placeholders for online evening meetings for the intervening months to be used if required. Details of [Committee Meetings](#) can be found on the website.

Committee Members are required to attend the LPC meetings regularly as per the constitution, which is available on the website. It is LPC policy that members who are working on behalf of the LPC should not be financially disadvantaged for performing those activities on behalf of pharmacy contractors. A breakdown of members' attendances and expenses is provided in the table below. It should be noted that over the last year arrangement of locum cover has been particularly difficult; therefore some members unable to attend meetings in person were able to read papers, feedback via email and vote by proxy on key issues. A copy of member's meeting attendance and expenses claims is detailed below. Please note, backfill is sometimes claimed by members for work outside of meeting dates, for duties such as MP visit attendance, governance related work or Market Entry related paperwork. The Chair and Treasurer receive a separate, flat rate, remuneration to cover regular work completed outside of committee meetings as noted in the accounts.

Name	Role	Attendance 2022-2023						Expenses		
		19-May All day	21-Jul Half day online	15-Sep PM & AGM	17-Nov All day	17-Jan Half day online	16-Mar All Day	Backfill and Travel for Committee Meetings	Backfill and Travel for Other general work e.g. Market Entry, ICS related, regulations, governance, PNA.*	
								From Levy	From Levy	From NRF
Paul Jenks	Chair							£1,835.33	£360.00	
Marc Brooks	Vice Chair		x					£1,020.00	£90.00	£113.50
Chris Kenny	Treasurer							£1,280.00	£240.00	£190.00
Robert Severn	Governance Lead							£330.40		
Blazej Jasnowski	Member							£835.00		
John Broomhead	Member							£1,020.00		£576.25
Chris Mulimba	Member	x						£913.40		
Christine Stafford	Member							£1,113.60		
Andrea Mudamburi	Member				x	x		£787.50		
Chirag Ahir	Member	x	x							
James Stout	Member							£280.00		
Milena Krusinska	Member		x	x						
*Excludes specific NRF funded contraceptive pilot project work								£9,156.43	£690.00	£879.75

x	Apologies
	Part Attended
	Attended
	Not a member at this date

## Sub-Committees/Groups

There are currently no active sub-committees or groups. The Governance Lead, detailed on the website, has the power to convene a governance committee as and when required. The committee can choose to set-up groups and committees as required, subject to committee agreement.

## Finance Matters

Community Pharmacy Lincolnshire's finances remained sound throughout 2022/23, as is reflected in the Treasurer's report. Financial planning aims to maintain a suitable working capital balance and retain an appropriate reserve balance in alignment with strategic plans to enhance the profile of community pharmacy in Lincolnshire. The annual levy for 2022/23 was fixed at £130,000.

During 2022/23 it was announced that as part of the TAPR programme, the amount of contractor levy requested from PSNC will increase from £44,510 in 2022/23 to £51,817 with an indicative rate for 2024/25 of £61,521 +/- 5%; max cost of £64,597 min £58,445 (var £6,152). A number of efficiency measures have been implemented to enable CPL to meet the increased financial obligations without increasing the contractor levy.

Non-recurrent funding outside of the contractor levy was acquired as detailed in the accounts to allow services development and other ICS integration support without using contractor funds.

A zero-base budget was produced for 2023/24 to reflect costs for the next financial year and presented at the November 2022 Committee meeting, providing a balanced forecast budget and reserve levels meeting as a minimum the recommended parameters for LPCs. There is a slightly higher level of reserves held than in previous years, to allow for the additional PSNC levy to be paid moving forward and to cover any potential shortfall in costs for equipment and other one-off costs. The annual accounts can be viewed on the website under [Community Pharmacy Lincolnshire Finance](#).

## Wright Review Steering Group Vote and Implications for CPL

Following the RSG vote, CPL completed a comprehensive review of CPL including ways of working, integration with other health structures in county and financial efficiencies. These were summarised and circulated in a report first to the committee, who discussed the report findings and agreed that the retention of a single LPC in Lincolnshire was preferable and then to contractors to support their decision making in relation to the future of the LPC in Lincolnshire.

In January 2023 a Special General Meeting was held where it was agreed that CPL should stay as a single, coterminous LPC in Lincolnshire working within our existing levy, adopt the New Model LPC Constitution and agree to a delay the elections for LPC membership by a further 3 months until 30<sup>th</sup> June 2023, in line with the recommendations of the committee.

The supporting paperwork relating to this decision-making process can be accessed at the links below:

- Report: [Report to be sent with SGM Voting Papers](#)
- Report Appendix 1: RSG Recommendations: [Report Appendix 1 RSG Proposals](#)
- Report Appendix 2 and 2b: New Model PSNC Constitution: [Report Appendix 2 Constitution Final Clean Dec 22](#) [Report Appendix 2B – Constitution with highlighted changes.](#)

## Health System Engagement

The LPC continued to employ flexible ways of working across the healthcare system, to further strengthen the voice of community pharmacy within the county and the wider Midlands region.

The Midlands Medicines and Pharmacy Co-ordination Group (MaPCOG) formed in 2021/22 continued, with LPCs and the NHSE&I Midlands teams (East and West) to meet weekly to discuss policy changes, issues, and plan solutions to increase resilience and address some of the challenges being faced by pharmacies during the pandemic. These meetings continue to be an opportunity for liaison with colleagues from the NHSE&I teams and to share insights across the Midlands LPCs. Within Lincolnshire, we continue to attend the ICS Pharmacy and Prescribing meetings, enabling us to take a similar approach at a more local level, allowing us to work with Lincolnshire ICS and provide clarity on pharmacy issues.

Regular attendance at meetings, advice and input has continued to develop the position of community pharmacy within the ICS. We have continued to highlight to the ICS that community pharmacies do not align fully to PCN locations in Lincolnshire, which can cause confusion for patients. We are therefore engaged with the ICS to ensure that services are commissioned widely, ideally on a county basis but as a minimum based geographically on clusters of PCNs, to minimise patient confusion and potential health inequalities.

The Lincolnshire ICS is co-terminus with the Community Pharmacy Lincolnshire footprint, which has more easily facilitated inclusion of pharmacy's voice in the development of integrated working across the system. The Lincolnshire ICS will take delegated responsibility for commissioning of Pharmacy, Optometry and Dental Services in 2023/24, working towards this in shadow form during 2022/23. Over the year we have continued to work with representatives from the 'Four Pillars of Primary Care' being pharmacy, general practice, ophthalmology and dentistry to approach the ICS as one voice, with the aim of strengthening the voice of primary care within the ICS to try and rebalance the historic focus on secondary care within the county.

CPL has representation at strategic level within the ICS Care and Clinical Directorate, with the Chair having a seat on the Care and Clinical Directorate Strategic Board, who meet monthly and being the vice chair of the Primary Care Advisory Group, which feeds into the ICS Board via the Primary Care Board member who Chairs the PCAG meetings. It also feeds into the Primary Care Commissioning Committee. PCAG provides an expert clinical voice across all four pillars of primary care, ensuring appropriate decisions are made in areas including primary care service commissioning and pathway redesign for patients.

Representation for CPL has been secured on a number of working groups including the Primary Care Transitional Oversight Group and the ICS Integrated Medicines Optimisation Programme (IPMO) groups. Committee members have been involved in the ICS IPMO programme with each individual attending regular meetings with representatives from the system on their relevant topics as follows: John Broomhead (Polypharmacy), Marc Brooks (Mental Health Prescribing) and Paul Jenks (Opioids).

Working with the other pillars of primary care, Community Pharmacy Lincolnshire continues to meet quarterly as a group with ICS representatives and LMC Representatives, allowing us to further strengthen relationships and support the development and roll-out of services.

The role of Community Pharmacy Leads within Primary Care Networks (PCNs) has not developed to expand upon the work completed as part of the Pharmacy Quality Scheme, and the work undertaken to support contractors and Community Pharmacy Primary Care Network leads last financial year. There is still no clearly defined role and resource available for PCN Community Pharmacy Leads in Lincolnshire, even though we as an LPC put forward a proposition to the Local Pharmaceutical Network to fund development in this area. Unfortunately, our funding bid was rejected, as were proposals to the ICS to fund PCN CP Lead engagement on local boards. As the representative for pharmacy contractors, particularly in line of the current financial and workforce pressures, we believe that any engagement by CP PCN Leads in PCN meetings should be appropriately funded and continue to put forward this message to the ICS. As of 31<sup>st</sup> March 2023, there are three PCN Lead vacancies. Our website provides comprehensive information about PCN membership.

In summary, Members, Officers and employees of Community Pharmacy Lincolnshire continue to represent Lincolnshire community pharmacy contractors, with membership of and/or representation on the following bodies:

- Midlands Medicines and Pharmacy Co-ordination Group (MaPCOG)
- Lincolnshire Pharmacy and Prescribing Cell
- Lincolnshire Prescribing and Clinical Effectiveness Forum (PACEF)
- East Midlands Clinical Senate Council (representing East Midlands LPCs)
- PSNC Rural Working Group (national)
- Pharmacy Competency Group (national)
- Lincolnshire Prescribing System Improvement Programme (SIP) Steering Group
- Lincolnshire Antimicrobial Stewardship Group
- Lincolnshire Controlled Drugs Local Intelligence Network (CD LIN)
- Lincolnshire Local Professional Network (LPN)
- Lincolnshire Health & Wellbeing Board Pharmaceutical Needs Assessment (PNA) Committee
- Lincolnshire NHS Integrating Pharmacy and Medicines Optimisation (IPMO) steering and working groups
- Lincolnshire System Improvement Programme Clinical Working Groups
- ICB Primary Care Transition Oversight Group
- ICB Four Pillars of Primary Care Quarterly Group
- Tobacco Dependency Steering Group
- ICB Clinical and Care Directorate Strategic Board

- ICB Primary Care Advisory Group (within Clinical and Care Directorate)
- Lincolnshire Palliative and End of Life Care Operational Group
- Lincolnshire Pharmacy Faculty
- Lincolnshire Pharmacy Workforce Planning Group
- Lincolnshire Executive Planning Covid Vaccine Group and Lincolnshire Seasonal Influenza Vaccination Planning Group (now combined)
- GPCPCS Steering Group (local implementation team)
- Community Pharmacy Midlands Working Group
- Midlands Pharmacy Integration Fund Contraceptive Pilot Steering Group
- Community Pharmacy East Midlands Working Group
- Lincolnshire Pharmacy Operational Group

## Local University and Academic Engagement

### The Lifeguard Project

CPL supported this innovative project, piloting a potential support service in pharmacies for domestic abuse victims and those experiencing suicidal thoughts. Chris Kenny, Superintendent Pharmacist at Lincolnshire Coop Pharmacies and Treasurer of CPL and Tracey Latham-Green, Chief Officer, CPL sat on regular meetings with the University Steering Group. The pilot project ends in September 2023.

### University of Lincoln Research Group

The Chief Officer of CPL remains a Visiting Senior Fellow at the University of Lincoln, which has allowed a relationship to be built between the University and CPL that will be useful for future service development and upskilling opportunities.

## Contractor Engagement and Support

Engagement with contractors continues via the weekly newsletter circulation, including upcoming deadlines, shared directly to registered mailboxes, via twitter, Facebook and the website. The weekly newsletter continues to provide a summary of key interest areas for contractors including upcoming deadlines and available training and resources.

We meet regularly with LPC colleagues across the East Midlands LPC representatives to discuss key issues that jointly affect us, to ensure maximum efficiency and avoid duplication. We are also part of a similar working group with other LPCs across the entire Midlands footprint, meeting monthly.

### Quality Payments

Community Pharmacy Lincolnshire continued to provide support to contractors to maximise any potential payments available through the Quality Payments Scheme and ensure deadlines are met, providing links to resources on the website and important information and reminders in regular newsletters.

## Public Engagement

The public facing webpage continues to promote community pharmacy in Lincolnshire ensures maximum visibility of community pharmacy across the county. Patients landing on the CPL website homepage are prompted via a pop-up window to visit the public facing website at [www.lincolnshirepharmacies.co.uk](http://www.lincolnshirepharmacies.co.uk), which is clearly highlighted on CPL's Facebook page. The website is designed to signpost and link patients to centrally managed NHS pharmacy resources as well as show the locations of pharmacies within the county. Whilst public events have been limited this year, we have shared leaflets to promote the role of community pharmacy with various organisations and individuals including Healthwatch and all MPs to have available in their constituency offices and to share at health related events they attend or organise.

## Parliamentary Engagement

Following regular correspondence, updating MPs on the work of community pharmacies and their importance to population health and well-being, another of our MPs Karl McCartney, visited a pharmacy this year, meaning six of the seven current Lincolnshire MPs have now visited a community pharmacy in Lincolnshire.

Additionally, we facilitated the attendance of three Lincolnshire MPs at a PSNC event in London which attracted almost 40 MPs in total. This event highlighted the financial issues in community pharmacy, whilst also promoting the positive impact community pharmacy can have via the hypertension service. The event lasted for two hours, during which MPs had the opportunity to drop-in and have their blood pressure measured by pharmacists with experience of working on the front-line and were briefed on the urgent need for action to address the pressures on the sector.

Overall, these visits and communications have allowed CPL to highlight the importance of the work that pharmacies are doing and the vital support they give to populations, both directly related to healthcare and also more widely in terms of social impacts. The role of pharmacies in things such as long-term condition management support, care for vulnerable populations, and potential reduction in re-offending via methadone maintenance treatment and accessibility, particularly during the pandemic when isolation and loneliness was an issue for many patients were discussed. We also shared our concerns around inadequate resourcing of community pharmacies, providing a briefing showing the impact of flat funding on the sector, pressing for MPs to push for greater funding at Westminster and highlight the important role of pharmacies in the NHS long term plan and wider society. During the year when corresponding or meeting with MPs, summary briefings were provided to MPs both in hard copy and via email covering the key areas for their reference.

Now that PSNC are taking an active roll in MP engagement, we have moved our focus to supporting PSNC coordinated communication with MPs in county, so that a uniform message is presented across the country. The existing relationships we have built with our local MPs and continue to maintain has been shown to assist PSNC greatly in terms of MP responses. This work resulted in Karl McCartney signing a letter to the government pressing for a more sustainable funding model



and urgent financial support. Mr McCartney was also quoted in the National Press supporting a fairer deal for community pharmacy. Dr Caroline Johnson MP also contacted the health minister directly to raise relevant concerns following our correspondence.

### Recognition for Engagement Work

On Friday 30th September the Chair and Chief Officer were invited to attend the Independent Pharmacy Awards, as Community Pharmacy Lincolnshire were shortlisted in the Best Supporting Local Representative Group (LRG) category – this was in reflection of the work we had done in a number of areas including relationship building and community pharmacy representation with the local Integrated Care System, liaising with MPs, promoting community pharmacy to the public and keeping contractors well represented and updated on relevant issues through avenues such as this regular newsletter. Whilst we did not win the award, we were recognised as highly commended with our good stakeholder engagement with MPs and progress made getting pharmacies established with local structures being noted. The event provided an excellent opportunity to network with other pharmacy professionals and increase visibility of Lincolnshire Community pharmacies.

### Pharmacy Applications

Where requests for comment were received, the committee continued to provide appropriate responses based upon the views of contractors. Applications during this period included changes of ownership, consolidations, no significant change relocations and an application for a distance selling pharmacy. Community Pharmacy Lincolnshire were also notified of several permanent changes to contractors' supplementary hours during this period.

### Pharmacy Local Services

Community Pharmacy Lincolnshire carried on its work with the Lincolnshire Integrated Health System to ensure that services continued to be delivered to the standards demanded by community pharmacy contractors for service users. This included suggestions around healthy living support and frailty related services. The need to commission on a county wide or location basis rather than a PCN basis was highlighted, reflecting patient understanding of pharmacy services. The Lincolnshire ICS will take over local pharmacy commissioning from 1<sup>st</sup> April 2023, and we have supported the ICS in moving to this point. We also provide advice and guidance through our various working groups and meetings to ensure that decisions are not made around services and other projects within the ICS that could negatively impact pharmacy contractors in relation to their dispensing income and that any new services and initiatives developed provide reasonable notice to contractors of any likely increased demand for medication in an area.

CPL accessed non-recurrent funding support to engage a Services Implementation and Development Lead, initially working on GP Referral into the Community Pharmacy Consultation

Service (GP-CPCS), building relationships between community pharmacy, PCNs and GP practices and more recently to support the roll out of other services such as DMS. The Chief Officer and Services Implementation and Development Lead have also attended events to promote pharmacy services to general practice including at the LMC conference, at a recent PCN away day and virtually delivering webinars to specific PCN teams, supported by the Chair of CPL. Additionally, a range of resources have been developed to support GP-CPCS and CPCS that are available on our website.

CPL worked with the LMC to gain funding for an integrated IT system PharmRefer/EMISweb for GP practices to use to refer patients into the CPCS service, the benefit of which to pharmacy contractors is twofold. Firstly, referrals come straight into PharmOutcomes rather than via nhs.net, making them easier to manage, especially when locums are in store and secondly the use of a triage tool in the system reduces inappropriate referrals to pharmacies from GP practice (which result in the pharmacy having to 'bounceback' patients to the GP practice) from 30% to around 5% - meaning a better experience for the patient, the pharmacy and the GP Practice. We are pushing for the funding to be extended for the next financial year and are confident this will be achieved.

CPL also accessed funding to support roll out of the Contraceptive Pilot Service, which will provide an excellent baseline for engagement when the national Tier 1 contraceptive service is launched in 2023.

We will continue to work with regional and local colleagues, including the LMC, ICS and PCN representative, to ensure service income for community pharmacies is maximised.

## Pharmaceutical Needs Assessment (PNA) 2022

The Pharmaceutical Needs Assessment (PNA) is a crucial part of the market entry system, and supports commissioning decisions based on patient needs, it is important that Health and Wellbeing Boards (HWBs) prepare PNAs to national comparable standards. During the year, CPL assisted in distribution of the contractor survey for the next PNA. The Chair and Chief Officer sat on the steering panel for PNA drafting, commenting extensively on the first draft of the document, despite very tight timelines. The PNA was published in August 2022.

## SUMMARY AND WORK PLAN FOR 2023/24

Moving forward, in order to meet the reduced financial envelope for LPCs, the committee will meet quarterly as from the 1<sup>st</sup> April 2023, with initial meetings planned for June 2023 (face to face), September 2023 (face to face), November 2023 (virtual) and March 2024 (virtual).

Workforce pressures continue to be an issue in county and we have been engaging with the system to ensure local primary care providers are working together for the benefit of their patients, recognising the challenges all parties face.

Ways of working facilitated during the pandemic have continued relationship developments across the region with neighbouring LPCs, NHS representatives and wider health and care professionals. The pace of change and demand on the committee's, officers' and employees' time continues to be significant. During 2023/24, we will continue to devote time and effort to ensuring that pharmacy contractors in Lincolnshire can continue to deliver services to their patients, and to look critically at the services currently being commissioned, with a view to ensuring that these are safe, effective and adequately funded.

Relationships built with the system and engagement in key work groups and committees have allowed stakeholders to discuss ideas and concerns earlier, allowing for outcomes beneficial to contractors. After another positive year working with the ICS representatives in the county, and with primary care local committee representatives for dentistry, ophthalmology and general practice, we will further fortify these relationships and benefits in 2023-24.

As we move into 2023/24 we will continue to support contractors in relation to service development, including the continued roll out of the Community Pharmacy Consultation Service to include GP referrals, through continued liaison with the LMC and ICS with the aim of maximising service potential. We have extended the appointment of our Services Implementation and Development Lead for a further year at 11.5 hours per week, utilising external funding, to further develop the GPCPCS roll out and help with development and roll out of other services as the year progresses including DMS, Hypertension and the new national tier 1 contraception service when it launches.

Last year we hoped to see ULHT roll-out the Discharge Medicines Service, which as an essential service should see improved patient outcomes, growth of interprofessional networks and an increase in income for contractors across the county. Unfortunately, this did not happen due to operational pressures within ULHT. We continue to encourage the CCG/ICS to make ULHT's role in Discharge Medicine Service roll-out a priority, as it should positively impact patient outcomes and the system as a whole and we will continue to work with the system to ensure the roll out is managed in a sustainable, staged way with appropriate notice of its launch given to Lincolnshire Pharmacy Contractors. We will also continue to work with cross border secondary care providers to ensure smooth functioning of existing DMS referrals.

As healthcare systems continue to evolve, the activities and approaches of LPCs and the PSNC must do so too. The committee of Community Pharmacy Lincolnshire continue to look at how we can best serve contractors in a large rural county, being mindful of national changes and recommendations.

I would again like to take this opportunity to formally thank the members of the LPC committee for their hard work and devotion during the year. In particular, I would like to share my gratitude for the support of Marc Brooks (Vice Chair) and Chris Kenny (treasurer).

I would also like to extend this to Tracey Latham-Green, our Chief Officer and to Hazel Sisson, our Administrative Assistant for their continued hard work.

## ASSURANCE STATEMENT

I confirm that the committee has met its duties and recommend that the committee continues its work under the terms of the constitution.

**Paul Jenks**  
**Chair of Community Pharmacy Lincolnshire**

**March 2023**