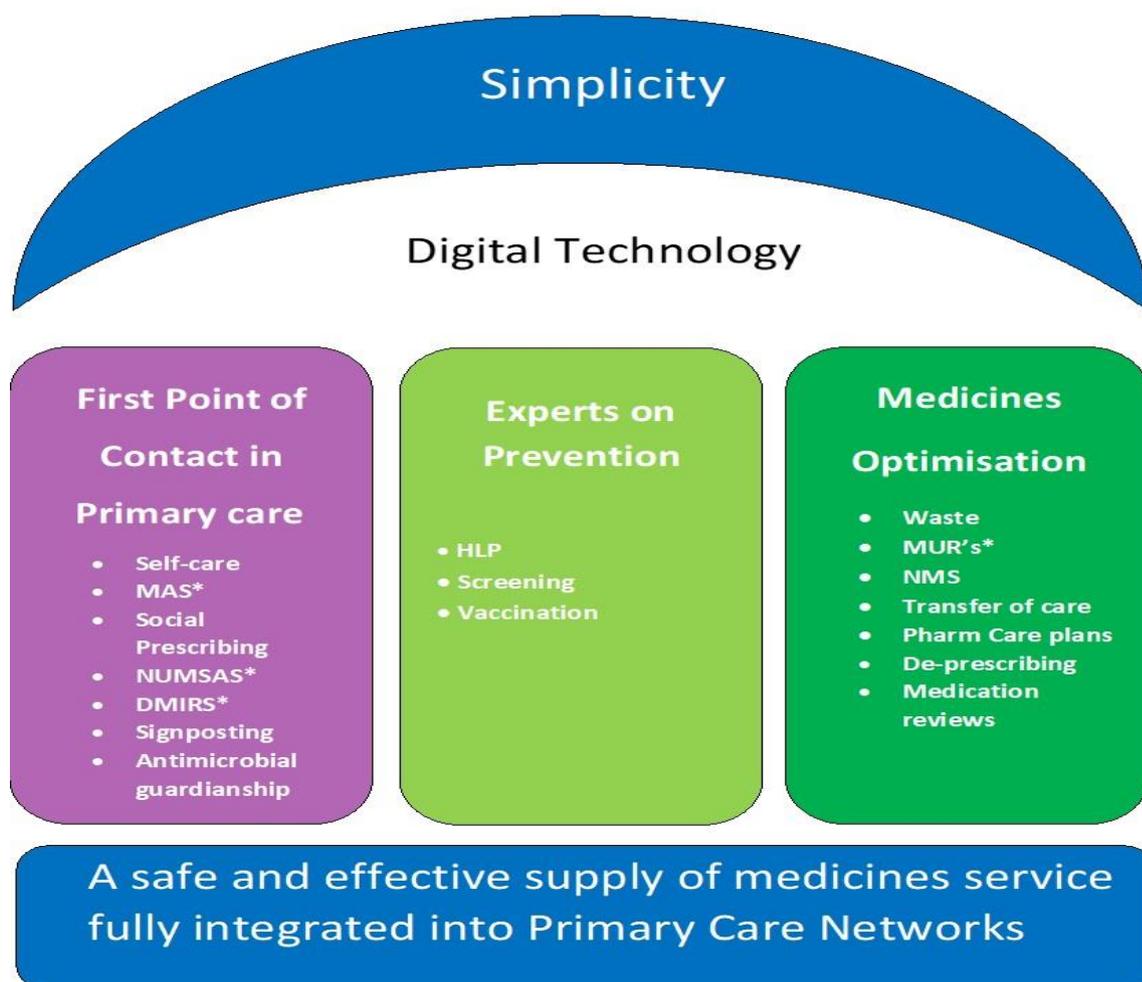


Annual Report

April 2019 to March 2020



LPC Chair's Report

2019/2020 was another difficult year for pharmacy contractors in our area. The new contractual framework, and 5-year funding settlement, was announced halfway through the year and it was regrettable that there is no increase in the funding envelope over the 5-year period. However, there are some positive signs of recognition of the role of community pharmacy in improving the NHS particularly regarding urgent care and the prevention of disease. It was also encouraging to see clear links between the pharmacy contract and the new GP contract which can only help the integration of Community Pharmacy into Primary Care. The creation of Primary Care Networks (PCNs) was a key development within the GP contract and in our footprint we have twenty of these new organisations. The LPC was proactive in ensuring that each PCN had a lead pharmacist appointed and, using its excellent relationships within NHSE/I and the Humber Coast and Vale STP, ensured that community pharmacy is seen as a key partner in primary care networks. This was a key factor in our successful bid for £12,000 from the STP to fund a development programme for PCN pharmacy leads.



The expected impact of the cuts to the number of pharmacy contractors began to manifest itself with further pharmacy closures and sales such that we ended the year with 201 contractors in the Community Pharmacy Humber footprint. This represents a 3.5% reduction in the number of pharmacy contracts since the cut to the global sum was implemented. This has an impact on the average levy charged to contractors as although the total levy has not increased since 2015, the loss of contractors impacts on the average levy per contract which now stands at £1,410 per contract.

Community Pharmacy Humber strives to provide the best possible value for the contractor levy which represents 77% of our total income as detailed in our accounts. The levy paid by the LPC to fund the work of PSNC takes 22% of our levy and the remainder, along with our non-levy income, is invested in providing the best possible representation and services to our contractors. Much of our focus in the year was on the retention and development of local services, and we were successful in supporting contractors to achieve around £1.2 million in income from local enhanced and public health services in the year. This averages out at £5970 per contract which represents a good return on the investment, for every £1 you gave CPH there was £5.42 returned.

The Covid 19 pandemic hit us at the end of the LPC year and had a massive impact on the workload, and cash flow, of pharmacy contractors and has delayed the implementation of many of the service developments within the new contract. The LPC used its excellent relationships with NHSE/I and local commissioners to secure a significant number of benefits for our contractors including emergency access to PPE through the local resilience forums, access to pillar one Covid 19 testing and most importantly the protection of the £1.2 million of local service income. This was achieved by an agreement with our commissioners to pay average payments to contractors based on last year's activity, despite the suspension of many of these services due to social distancing measures.

The LPC will continue to do all it can to support contractors through difficult and changing times. I would like to take this opportunity to thank our team of employees and all the members of the LPC committee for their hard work and commitment to community pharmacy in the Humber region in 2019/2020.

Paul Robinson

Chief Executive Officer's Report

Janet Clarks last year, before her well-deserved retirement, leaves me to provide a basic commentary on the team's successes under her leadership last year which include:



- Securing easy access to the 5F code for pharmacists required to work across several pharmacies.
- Securing the addition of Paracetamol tablets to the East Riding CCG minor ailments scheme.
- Securing an increase in number of contractors commissioned to provide the palliative care service.
- Securing a compensation method for increased cost of medicines supplied through local services.
- Agreed a financial compensation process with Renew CGL to guarantee contractors supervised consumption income despite the move to take away doses.
- Agreed in principle a similar compensation scheme for NHS England commissioned services such as Minor Ailments.
- Produced new and effective communications regarding the managed repeats withdrawal and implications of the agreed pause for those who had not commenced the withdrawal.
- Supported PCN communications through the PCN leads, their ongoing recruitment & development, leading to significant progress with the implementation of eRD in at least one PCN.
- Firefighting around the management of repeat prescriptions.
- Producing Covid patient facing communications regarding the use of community pharmacy services, repeat prescription ordering and restricted hours of trading including press releases, a video presentation from Karen Murden and a crib sheet for the emerging local Authority Covid-19 hubs.
- Securing a 10K small business grant from East Riding council as part of the government compensation scheme for costs arising from Covid-19.

In other activities: 2019/20 was the second year of a three-year co-commissioning arrangement for pharmacy enhanced services with NHS England (Yorkshire & Humber) North local team. Meaning services remained as enhanced services within the pharmacy NHS contract, but the monitoring and payment would be the remit of the relevant Clinical Commissioning Groups (CCGs), discussions begin shortly on its successor. All services are claimed via the PharmOutcomes platform.

The enhanced services currently commissioned by NHS England, Local Authorities and CCGs can be found here: <https://communitypharmacyhumber.co.uk/services-by-area/>. The LPC continued to use PharmOutcomes with all four local authorities for all or some of their public health local pharmacy services.

PharmOutcomes Data

PharmOutcomes is now utilised for the public health services by East Riding of Yorkshire, Hull City, North Lincolnshire, and North East Lincolnshire Councils. The LPC has been able to use the existing data captured to demonstrate its value to other commissioning partners.

The value of services provided using the system has reduced from £1,328,185.47 in 2018/19 to £934,104.60 in 2019/20. This reduction is largely down to some services changing commissioners and not claiming via our PharmOutcomes platform.

Pharmacy Funding Cuts

The funding cuts have continued to bite, and we have seen a further 3 pharmacies close in 2019/20.

CP Humber Ltd:

The decision was made to close the provider company and the process for doing so is nearing completion.

Flu Vaccination Service:

Thanks to Covid we do not have a complete dataset for accurate comparisons.

Quality Payment Scheme:

The LPC staff worked extensively, provided training, communications, and pharmacy visits to support all pharmacies to achieve the maximum quality points during 2019-20, however due to Covid we have no data on how well contractors met the criteria.

Pharmacy Awards 2019 – cancelled:

Considering the announcements on the new Community Pharmacy Contractual Framework, and the work pharmacies and the LPC were facing at that time, we regrettably had to make the decision to cancel the 2019 awards celebration. We thank all who had taken the time to submit a nomination, we will celebrate community pharmacy successes and achievements in the future.

Market Entry & Exit [Formally Control of Entry] The current Pharmaceutical Needs Assessments (PNAs) covering the period 2018 to 2021 are available via the following link:-

<https://communitypharmacyhumber.co.uk/resources-a-z/i-p/pna/>

A quiet year initially, however by its end and the closure of the market entry process due to Covid, there were several applications held in suspension: Relocations, Distance Selling, 100hr closure, changes of ownership. These will all be captured in 2020/21.

Summary of LPC events / workshops offered April 2019-March 2020

- **50 events have been held or supported locally with LPC involvement with a selection of partners including CPPE, RPS, HEE and local councils and CCGs.**

<https://communitypharmacyhumber.co.uk/wp-content/uploads/sites/22/2020/09/Summary-of-LPC-events.pdf>

Enhanced Pharmacy Services Income (commissioned by CCG) 2019-2020

	NHS Emergency supply (PURMS)	Minor Ailments Scheme	EL6B Medication records charts	Point of Dispensing Intervention Service (PODIS)	EL23	Palliative Care	TB DOT	Total income per area	Blood Pressure testing (Hull & East Riding) funded by BHF & CCGs
East Riding	£5,663.89	£48,804.23	£17,763.20	£9,850.09	N/A	£1,701.41	N/A	£83,782.82	£9,670
Hull	£21,933.47	£140,081.39	£21,767.20	£20,492.73	£9,075.50	£1,695.46	£1,270.30	£216,316.05	
North East Lincolnshire	N/A	£55,079.38	N/A	£8,961.50	N/A	-£212.30 Payment adjustment overpayment 2018/19	N/A	£63,828.58	N/A
North Lincolnshire	N/A	£38,830.94	N/A	£10,114.32	N/A	£139.47	N/A	£49,084.73	N/A

Enhanced pharmacy services TOTAL INCOME	£422,682.18
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Local Pharmacy Services – Public Health 2019-2020						
	NHS Health checks	Emergency Hormonal Contraception (EHC)	Smoking Cessation	Needle exchange	Supervised Consumption	Total income per area
East Riding	£1,820	£25,708.23	£118,610.80	£6,169	£153,365.08	£305,673
Hull	N/A	£47,010.12	£62,835.79	£47,431.44	Unknown Commissioner controlled	£157,277.35
North East Lincolnshire	N/A	£31,092.80	N/A	Unknown Commissioner controlled	Unknown Commissioner controlled	£31,092.80
North Lincolnshire	N/A	£10,033.45	£7,345.73	Unknown Commissioner controlled	Unknown Commissioner controlled	£17,379.18

Advanced Services	
MUR	NMS
Due to Covid and the Lockdown, as well as contractual changes, the annual dataset is incomplete and noncomparative.	

Other Services
TCAM
Available
Available
N/A
N/A

Local pharmacy services: Public health TOTAL INCOME (where known)	£511,422
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Combined Total services income (where known)	£934,104.62
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The Teams Year – Full Reports found

<https://communitypharmacyhumber.co.uk/resources-a-z/a-c/annual-report/>



Caroline Hayward: Professional Development Pharmacist

2019-2020 was another hectic and varied year which centred on a variety of activities: Positive relationship building with key pharma representatives resulting in financial sponsorship to support LPC committee meetings, and training events, and securing a training package to support the development of the LPC committee members.

Planning, and delivery of the 'Pharmacy Embracing the Future' training event which covered CPCF, PQS, PCNs and CPCS which was a huge success gaining the engagement of contractors with the new initiatives.

April 2019 launched the BP testing service in 40 pharmacies within Hull and ERY, following extensive work to develop the service spec, provide equipment, train the staff, and support via media promotion on Look North TV and radio Humberside. Contractor engagement was slow to start; hence additional training delivered in Nov 2019. The ever-growing pressures and challenges faced by community pharmacy teams during 2019-20 impacted service levels, with Covid-19 temporarily ceasing service delivery completely.

Several enhanced service contracts were due to expire March 2020; following successful negotiation with commissioners, all these services were recommissioned, and new contracts offered to pharmacies for: Sexual health (ERY, NL, NEL, Hull), smoking cessation (Hull- new commissioner CGL, ERY), NHS health checks (ERY), Palliative care medication (Hull, ERY, NEL, NL), Needle exchange and supervised consumption (ERY, Hull, NEL, NL). Additional work to included review and preparation of Patient Group Directions for each area; updated guidance documents and resources for each service, plus updates / rebuilds of PharmOutcomes platforms in line with service specification changes.

Palliative care service specifications were changed in March 2020 due to Covid-19 with rapid development of a Covid drugs formulary to support palliation in Covid-19 patients. Also, expansion of the service into additional pharmacies was rapidly agreed and implemented with PharmOutcomes platforms rebuilt.

A new service specification was developed to support a revised TB DOT (Directly Observed Therapy) service across Hull, ER and NL. Service fees were renegotiated, and a significantly improved funding offer secured. A PharmOutcomes platform was built to support the delivery and payment claims for the service.

Work to develop a medication support service, to replace the current EL23 service, across the ERY was undertaken and a revised service specification and superior funding model agreed.

Expressions of interest were shared with contractors prior to the Covid pandemic; however, the new service has not yet launched. A PharmOutcomes platform has been developed in readiness.

March 2020 activity centred around the Covid-19 pandemic which created an unprecedented challenge to pharmacies. My focus was the provision of support to contractors; timely renegotiation and agreement with commissioners to change service models to allow remote service delivery, and the securement of average financial payments for commissioned services during the pandemic.

Work regarding PharmOutcomes included a review of PharmOutcomes license fees, developing a standardised fee structure to ensure profitability; provision of data reports to commissioners; regular payment verification exercises, and contractor notification / support with data input to ensure all appropriate service fees were successfully claimed.

Additional activity: tender evaluation for Hull City Council; Audit of the Hull sexual health service and revision to include 'Quick start contraception' and ongoing oral contraception to clients; Involvement in a range of cardiovascular/diabetes new community service pathways workstreams to include community pharmacy; development of a respiratory MUR+ model. Progression of each of these initiatives has been halted due to recognition of the capacity issues and pressures prevailing within community pharmacies.

Karen Murden: Pharmacy Services Lead

Successfully worked in collaboration with NECs, CCGs, LMC and other stakeholders to **phase out pharmacy repeat ordering** to reduce workload in pharmacies. As an integral member of the task & finish group I worked on implementation and the communications plan, and timelines, for all stakeholders. This included organising and facilitating 3 successful events in Feb 2020, attended by 242 community pharmacy teams and practice pharmacists



Successfully applied for £10k funding for LPC to support rollout of **Refer to Pharmacy (TCAM)**. With Academic Health Science Network (AHSN) and Hull University Foundation Trust (HUFT), and organised successful training and networking event in June 2019, organised and attended monthly project meetings, analysed data, produced reports, attended Regional Community of Practice and regularly contacted pharmacies to support completion of referrals. We await IG approval to attach discharge summary to referrals and for North Lincolnshire and Goole Trust to agree to support TCAM rollout.

Attended **CPCS** Regional event and PSNC teleconferences. Produced and presented CPCS interactive workshop at the LPC event on 20th October 2019. Developed networks with NHS 111, DoS Team and local Out of hours providers. Attended regular CPCS progress meetings and agreed a local escalation process. Encouraged participation and provided support for contractors.

Organised another successful **flu** training event in July 2019 and provided ongoing support for contractors. Attendance at Humber flu group and local public health meetings and ongoing liaison. Provided 27 **contractor support visits** to support and encourage engagement with CPCF, PQS, CPCS, NMS, PODIS, HLP & Virtual outcomes. Identified and supported **PCN leads** for North Lincs and North East Lincolnshire. Regularly **represent LPC at meetings** including Medicines Management Interface group (MMIG) and HCV Pharmacy Leaders.

Anthony Bryce: Health Integration and Public Health Lead

Healthy Living Pharmacy – 85% of Community Pharmacies within the Humber locality are currently registered as an HLP. A vast amount of work, and support, has been provided to all contractors to maintain HLP status and comply with the requirement that all community pharmacies are to be HLP level 1 by 2020/21. Support included: pharmacy visits, training opportunities, and attending local network events showcasing HLPs in action. A thorough communications strategy has been implemented that includes a designated HLP Facebook page for contractors (228 members), an HLP Twitter account and HLP monthly newsletter. Local relationships have developed with many external services, stakeholders, and organisations to ensure HLP becomes a trusted, and respected brand not only to these groups but also the public. HLPs have been pro-active in local and national public health initiatives and campaigns. Many barriers were broken down between pharmacy organisations which allowed good practice, and lessons learnt, to be shared amongst the pharmacy community from a more unified and joined up approach.



Virtual Outcomes (VO) – The LPC initially commissioned the online training platform in Jan 2019 for 12 months. Due to the excellent feedback from contractors and perceived value for money the LPC agreed in Nov 2019 to re-commission for all contractors for a further 12 months (Jan 2020 / Jan 2021). By the end of Q3 in 2019 Community Pharmacy Humber were positioned 19th out of 44 LPCs for contractor usage. Humber LPCs 37.4% was above the 36% national average and by the end of 2019 had risen to **45%**. Since Jan 2019, a total number of 824 courses had been viewed / completed by contractors which, though predominantly independent, also has substantial usage by CCA and AIMP contractors.

Primary Care Networks (PCNs) – The NHS Long Term Plan included the creation of PCNs that aim to deliver integrated services at neighbourhood levels based around pro-active, personalised, integrated social health care. Each locality has several PCNs based around populations of 30-50,000 to be small enough to offer personalised care but large enough to deliver economies of scale. By the 1st July 2019 there were 20 PCNs serving the Humber locality, each PCN required a Community Pharmacy representative (PCN Pharmacy Lead) to act as a representative of all pharmacies within that PCN acting on their behalf when discussing the health and wellbeing of patients within the locality. A thorough process of organising pharmacies into PCN boundaries occurred, Pharmacy PCN Leads were chosen by pharmacies to represent them in each of the 20 PCNs. Training was provided to all PCN leads in Jan 2020 and further development opportunities will be provided in 2020/21. PCNs are still very much in their infancy, however, there have been some fantastic achievements already realised by building closer relationships at a local level with GPs and external partners. Community pharmacy is very much looking forward in continuing to work within PCNs and become a valuable and respected partner in the work surrounding the health and wellbeing of local populations.

Joanne Carter: Office Manager & Kate Stark: Administration Officer

Another successful year has drawn to a close. The admin team communicated with our contractors via 54 Weekly Digests, Quarterly Newsletters, our Website, Twitter, and Facebook. The team have done their absolute best to support contractors via these communication methods, and over the telephone, to encourage and facilitate completion of the Pharmacy Quality Scheme and other day to day issues. We hope you found value in these communications.

Over the year lots of work has gone into the mapping of pharmacies into their PCNs and the development of PCN One Pagers and Gaggle Groups. Communication via gaggle groups continues as resources are kept up to date.

Many events were held, very successfully, during the year including: 'Embracing the Future Together' which helped our contractors understand the new Community Pharmacy Contractual Framework, the Pharmacy Quality Scheme, new Consultation Service and Primary Care Networks. Excellent feedback was received from an information packed day. Our Cessation of Pharmacy Ordering Repeat medications events were warmly received and hopefully, by now, have saved contractors valuable time and energy. Sadly the 2019 Community Pharmacy Humber Awards had to be cancelled but will return.

This year had a financial focus which largely looked at cost saving and budgeting. Early in the year a zero-balance budget was produced centring on value for money. We supported the NHS 'axe the fax' promotion, re-vamped the finance report, produced a simpler treasurer's report. Also, we: Recalculated financial risks, reviewed financial liabilities and Invoices, as well as changing the LPC meeting venue.

The announcement of Janet Clark retiring came late in the year, prompting a Covid interrupted process of successfully recruiting a new Chief Executive Officer. Finally, the year saw a transition into remote

working for all the office staff. This transition went very smoothly and has seen a very productive start to the new financial year.

Members' attendance at LPC meetings 2019-2020

Members of the committee are required to attend the LPC meeting regularly and provide input to those meetings. Members are also required to attend meetings on behalf of the LPC and pharmacy contractors. Expenses incurred by LPC members representing the LPC at meetings and events, including mileage claims. These include locum cover paid to contractors.

Members			Possible	Attended	Expenses
Joanne Lane	Vice Chair	Independent	11*	9	£1300
Karen Stone		CCA	6	5	£1131.95
Shaun Davies	Left March 2020	CCA	11	9	£0
Annette Mauder		CCA	6	5	£0
David Miller	Treasurer	CCA	3*	2	£0
Ian Woolley		Independent	6	5	£1397.65
Jon Whitelam		CCA	11*	11	£516
John Banks	Joined June 2019, left March 2020	CCA	5	5	£0
Lisa McGowan		CCA	6	4	£46.45
Claire Smeaton	Left May 2019	CCA	1	1	£0
Mari Williams	Joined October 2019	CCA	3	2	£0
Rui Guo		Independent	6	5	£936.36
Manuel Mestres Valdes		CCA	6	6	£1080
Kate Knapik		Independent	6	6	£1186.80
Neil Mowbray		AIMp	6	4	£812
Appointed Officers					
Janet Clark		Chief Officer	11*	11	N/A
Joanne Carter		Office Manager	11*	11	N/A
Caroline Hayward		PDP	6	3	N/A
Karen Murden		PSL	6	6	N/A
Katie Stark		Admin Officer	6	2	N/A
Anthony Bryce		HIPHL	7*	5	N/A
Paul Robinson		Employed Chair	11*	11	N/A
PSNC Representative					
David Broome		PSNC	6	4	N/A

* Includes LPC Executive Committee meetings

LPC Account 2019/20

Details of Meetings and Travel Expenses

PSNC – Events and Seminars registration fees	£85
LPC Meeting Venue costs	£2167.75

Treasurer's Report



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 which is regularly monitored.

LPC members and the LPC office team have attended PSNC events, STP meetings, workshops, and seminars, to facilitate the maintenance and development of meaningful working relationships with commissioners on behalf of Community Pharmacy across the Humber area. The LPC regularly engages with contractors at local events and a significant number of pharmacy visits. This supports service delivery and helps to inform the LPC strategy. All LPC staff are directly employed and offered a pension that meets the government's requirements under auto-enrolment.

The LPC is funded by a contractor levy which was unchanged in 2019/2020 and has not increased since 2015. The levy stands at £23,628 per month and is collected as a percentage of net ingredient cost from contractors by the NHS BSA. The average levy per contractor at the start of the year was £113.05 per contractor per month and this increased to **£118.14 per contractor per month** as the number of contracts in the Humber LPC area declined to 201.

It should be also noted that some operational costs and receipts do not occur evenly across the year and are therefore non-comparable. The Levy is not the only source of income for the LPC as funding grants and income from commissioners for the administration of pharmacy services combined with levy income of £283,536 to produce a total income of £367,252.

Reserves at 31.3.20 stood at 7.0 months operating expenses, compared with last year when the reserves were 5.5 months at 31.3.19. This increase was principally due to merging the main LPC account with a separate funding account, which resulted in a transfer of £36,899 into the Humber LPC Receipts and Payment account. This transfer increased the receipts in the accounts to £404,162.

The LPC took the decision to close its provider company CP Humber Ltd during the year. This resulted in the refund of membership subscriptions to contractors and the repayment of the remainder of the original £10,000 loan from Humber LPC to CP Humber Ltd. The balance of this loan was written off as detailed in the accounts.

The LPC funds the work of the PSNC through an annual levy which is now paid monthly each year, following a policy change from the biannual payment halfway through the year. The total levy paid by Community Pharmacy Humber to PSNC in 2019/2020 was £62,178, unchanged on the previous year. PSNC's levy in 2019/2020 represents 22% of the money taken by the LPC from contractors, just under £26 per contractor per month. Aside from employment costs and the PSNC levy, the greatest single item of expenditure remains the PharmOutcomes licences and the staff time associated with administering and developing the services on the system. This investment is recovered through charges to commissioners, such as CCG's, for the IT licences and administrative support given to them in managing the services.

The new LPC office structure was embedded in 2019/2020 and continued to focus on supporting Contractors to meet the challenge of the new pharmacy contractual framework and latterly Covid-19. Payroll costs were well controlled and showed a reduction of £13,440 on the previous year. The payroll costs of the LPC account for 58% of our income, down from 63% in the previous year.

Financial statements and balance sheet for the period are presented below for your information.

Manuel Mestre Valdes: Treasurer

Humber Local Pharmaceutical Committee

Receipts and Payments Account

for the year ended 31st March 2020

	Year ended 31st March 2020		Year ended 31st March 2019	
	£	£	£	£
Receipts				
Statutory levies received		283,536.06		283,536.12
Bank interest		547.63		356.63
Transfers from CP Humber Limited		4,120.66		266.27
Net transfers from funding account		36,909.69		41,645.40
PharmOutcomes services		42,939.48		37,861.41
Other services support		35,009.18		13,237.60
Events and awards		-		1,014.00
Funding		<u>1,100.00</u>		<u>23,325.00</u>
		404,162.17		401,242.43
Payments				
Levies paid to P.S.N.C.	62,178.00		62,178.00	
Travelling and meeting expenses - employees	4,062.51		5,080.36	
Travelling and meeting expenses - members	10,592.10		12,971.50	
Printing, stationery and postage	2,016.83		2,580.07	
Telephone	992.69		1,046.77	
Insurance	1,194.69		1,135.06	
Accountancy and payroll management costs	3,218.00		3,194.00	
Bank charges	-		91.10	
Wages and salaries	188,586.55		201,017.39	
Employer's National Insurance Contributions	14,174.73		15,218.98	
Employer's pension contributions	13,115.82		13,080.73	
PharmOutcomes expenditure	33,469.85		28,105.30	
Rent and service charges	14,360.28		13,799.40	
Computer and website costs	8,897.33		4,689.82	
Sundry	3,668.91		3,480.43	
Awards event	454.00		5,704.09	
Advertising	544.95		1,472.78	
Corporation tax on bank interest	82.46		236.36	
Office equipment	280.37		-	
Events services support	1,838.13		-	
Events training	4,035.32		-	
CP Humber Ltd loan write off	6,432.61		-	
		<u>374,196.13</u>		<u>376,072.38</u>
(Deficit)/surplus for the period		29,966.04		25,170.05
Funds at 1st April 2019		<u>183,162.83</u>		<u>157,992.88</u>
Balance at 31st March 2020		<u>213,128.87</u>		<u>183,162.83</u>
Bank current account		61,977.35		75,183.17
Bank deposit account		<u>151,151.52</u>		<u>107,979.76</u>
		<u>213,128.87</u>		<u>183,162.93</u>

Humber Local Pharmaceutical Committee Funding Account

for the year ended 31st March 2020

	Year ended 31st March 2020		Year ended 31st March 2019	
	£	£	£	£
Receipts				
CP Humber Limited		-		-
Bank interest		10.39		77.66
Transferred from receipts and payments account		-		33,569.46
		<u>10.39</u>		<u>33,647.12</u>
Payments				
Training		-		-
Transferred to receipts and payments account	36,909.69		68,870.40	
	<u>36,909.69</u>	36,909.69	<u>68,870.40</u>	68,870.40
(Deficit) for the period		<u>(36,899.30)</u>		<u>(35,223.28)</u>
Funds at 1 April 2019		36,899.30		72,122.52
Balance at 31 March 2020		-		36,899.30
Bank current account		-		25,679.52
Bank deposit account		-		11,219.78
		<u>-</u>		<u>36,899.30</u>
		<u><u>-</u></u>		<u><u>36,899.30</u></u>
The funding account balance is allocated to the following items:				
LPC Projects		-		73,899.30
CP Humber Limited loan		-		(10,000.00)
Advanced rent payment		-		(27,000.00)
		<u>-</u>		<u>36,899.30</u>
		<u><u>-</u></u>		<u><u>36,899.30</u></u>

Humber Local Pharmaceutical Committee

Independent Examiner's Report

for the year ended 31st March 2020

We report on the accounts of the LPC for the year ended 31st March 2020 which are set out on pages 1 and 2.

This report is made solely to the members of the LPC, as a body. Our examination has been undertaken so that we might state to the LPC's members those matters we are required to state to them in an examiner's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the LPC and the LPC's members as a body for our examination work, for this report and for the statements we have made.

Respective Responsibilities of the LPC and the Examiner

As members of the LPC, you are responsible for the preparation of the accounts. It is our responsibility to issue this report on those accounts.

Basis of Independent Examiner's Report

Our examination includes a review of the accounting records kept by the LPC and a comparison of the accounts with those records. It also includes considering any unusual items or disclosures in the accounts and seeking explanations from you as trustees concerning any such matters. The procedures undertaken, as set out in our engagement letter dated 23rd April 2008, do not provide all the evidence that would be required in an audit and consequently we do not express an audit opinion on the view given by the accounts.

Independent Examiner's Statement

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

- (1) which gives us reasonable cause to believe that in any material respect the requirements,
 - (i) to keep accounting records; and
 - (ii) to prepare accounts which accord with the accounting recordshave not been met; or
- (2) to which, in our opinion, should be drawn in order to enable a proper understanding of the accounts to be reached.

Smailes Goldie
Chartered Accountants
Regent's Court
Princess Street
Hull
East Yorkshire
HU2 8BA