Community Pharmacy
HUMBER

Humber Local Pharmaceutical Committee

Annual Report
April 2024 to March 2025

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Chairs Annual report for 24/25

It has been a privilege to serve as Chair of Community Pharmacy Humber during a year that has brought both challenge and opportunity to community pharmacy. As I step down from the role in April 2025, I look back with pride at the resilience, innovation, and professionalism shown by contractors and Pharmacy teams across our region.

The 2024–25 period has seen our sector continue to adapt to a rapidly evolving healthcare landscape. The ongoing implementation of the NHS Pharmacy First, contraception and hypertension case-finding services and greater integration with Primary Care Networks have all demanded commitment, flexibility, and vision from our pharmacy teams. I am proud to say that Community Pharmacies in Humber have stepped up once again, demonstrating their vital role in delivering accessible, high-quality care on the frontline.

At LPC level, we have worked hard to ensure that contractors' voices are heard, and their interests represented. We have engaged constructively with the Integrated Care Board (ICB), supported contractors through contractual changes and digital transformation, and promoted the value of Community Pharmacy in local commissioning discussions. Our communications, training events, and service support have aimed to be timely, relevant, and impactful — and I thank the LPC team for their tireless efforts in making this happen.

None of this progress would have been possible without the dedication of Pharmacy teams across Humber. Whether delivering clinical services, supporting public health, or simply being a reassuring visible presence for the community, your work has made a difference every day. Thank you for your commitment and professionalism.

As I hand over the Chair role to my colleague Taffazzal Haque, I am confident that the LPC is in a strong position to continue supporting and advocating for Community Pharmacy. We have challenges ahead — including funding pressures, workforce sustainability, and the need for further service development — but also significant opportunities to build on our progress and shape the future of integrated, neighbourhood-based care.

It has been an honour to serve as Chair. I remain deeply committed to the sector and look forward to seeing Community Pharmacy Humber continue to thrive.

Joanne Lane

Chair (until April 2025)

Community Pharmacy Humber

Chief Executive Officer's Report

If 23/24 was 'Survival' what was 24/25? Groundhog-day perhaps? Survival mode continued as we waited for the CPCF deal, a wait that lasted until the very end of March 25! No matter how we feel about the 'deal', and it's still too early to truly see how it fully shakes out, either way, we are still here and 'what doesn't kill you makes you stronger'. Despite the hurdles & strife, all the changes and setbacks, the pharmacy business still went on:

- We have continued our engagement with PCN Clinical directors, the 'Places' and the ICB. We have also been watching the embryonic neighbourhood teams develop (INTs/NHPs) Community Pharmacies voice, your voice, is being heard. Feel free to share it with us. Our closer working with the LMC continues to be beneficial.
- Most current services have had their fees enhanced as well, a lengthy but worthwhile process.
- Our seasonal walk in consultation service was once again recommissioned, as WiCS3, with bigger funding and it still had to finish earlier than planned thanks to your enthusiasm. 10,801 WiCS3 interventions vs 5,032 for WiCS2 that's a +115% increase!
- We continued to see the struggles contractors had with staying open, further hours reductions helped but while we hold at 181 contracts it all feels fragile. A lot of behind-the-scenes support.
- We have also been supporting the development of the Independent Prescribing Pathfinders across the ICB, though most of the sites are in Humber. The care pathways that have been developed will put our contractors in a good position as we await expected national IP services coming in late 25/26 or early 26/27.
- Firefighting on various issues continues as always: the old favourite ordering of repeat prescriptions, queries and complaints around shortages, unplanned closures, surgery/practice pharmacist queries/asks / 'concerns' with Pharmacy First and certain private supplies of POMs…
- We have continued to Support the PCN leads, their work and ongoing recruitment & development as well as adding Place Engagement Leads to tackle PF roll out and delivery, supported by NHSE funding, that had to be lobbied for by CPE and with the ICB to secure.
- We finally settled into our new office.

In other activities: A lot of work was done to position the LPC to have your voices represented within the developing future NHS: -

Pharmacy Funding: The funding stasis continued its entropic effects with increased costs, especially with what was, and is, going on in the world, continuing to bite and push profitability into survivability for many. There had been hopes to see the 24/25 and 25/26 contract early in the year but a change of government, and the inevitable repositioning of the new incumbents, several of which were lobbied directly in local CP's, meant we only received our funding at the very end of March 2025 despite concerted campaigns to raise awareness of the dire state of our sector.

Flu Vaccination Service: Another solid year for Flu in Community Pharmacy, with little hard data to share, alongside making a significant impact on the Covid vaccination effort. Pharmacy is increasingly being seen as the home of vaccinations thanks to your work.

Market Entry & Exit [Formally Control of Entry]: despite losing so many contracts in 23/24 we still lost a few but mainly of note was the number of relocations, consolidations and sales still going on.

Services: A busy year for renegotiating and implementing new funding with tweaked services. This has been lengthy and involved, but eventually most services have been renewed and received fee increases, something Caroline will expand upon.

However, it has been a good year for services. Comparing 23/24 with 24/25, and only those services that can be compared as we still don't have access to all of your activity due to outsourcing, we see 36.1% growth in the total services value year on year, with that services total reaching **£1,242,863.46** up from £913,088.19 previously, a significant chunk of this will be from the fee increases we negotiated but there's also increased activity.

To put the value of LPC secured services into context, for every £1 paid to the LPC in contractor levy a minimum of £4.38 comes back as services opportunity. This doesn't include the outsourced services we don't see data for, or a share of the national advanced services that were negotiated by CPE but built locally by the LPC. That £4.38 would be much higher all things considered.

Of course, the big new service this year was Pharmacy First (PF). Grouping & rebranding several existing services under one PF umbrella and rolling out the 7 clinical pathways with a plethora of PGDs. Even with compromised IT, MFA creeping in causing chaos, and referrals impacted by GP consolidated action, we provided continued support though comms, resources and support for the PCS service through a joint event with CPPE in February 2025. As well as a pioneering event back in October, in Barton, to support technicians as they transition to PGD delivery.

Workforce: Workforce issues have been identified as a key issue for us in the Humber, as well as nationally. The LPC has tasked itself to get involved more deeply within the NHS structures to fight our case for support in this matter. We are now involved in various workforce initiatives and boards within the ICS; I am the ICS Pharmacy workforce lead now with all the involvement that title brings.

In 24/25 a lot of work was done to formalise Community Pharmacy's workforce position, and needs, within the primary care workforce, culminating in the launch of the HNY Pharmacy workforce plan in December, a series of workstreams being taken on across the ICB. A lot more to come on this topic.

Summary of LPC events / workshops offered April 2024 - March 2025: The LPC directly facilitated PCN leads & PELs meetings with their contractors, PF support/training in February. Throughout the year the LPC supported and signposted to various meetings by: CPPE, NHSE, PCNs, CPE. More is planned in 25/26.

The Committee: Over the course of the year, we have managed to fill all the vacant seats, CCA and independent, and now have a full committee.

Our employed chair took up a CEO post with another LPC, we wish her luck, resulting in a new committee chair appointed in April 2025. More from him in next year's report.

What's ahead:

We now have an NHS 10-year plan, a new contractual framework rolling out, new services such as national EHC and NMS expansion upcoming, neighbourhoods developing, also potentially negotiations on the next contract deal sooner than later, and big changes coming from summer 2026.

So much change, even just what we already know of, there's a lot to watch out for and lobby for our involvement in. Whether this is enough to keep Community Pharmacy afloat, or even return CP to rude health, is way too early to tell but it's still worth engaging with just to see what's around the corner…

Local Pharmacy Services Income (commissioned by ICB) 2024-25										
	Optical referral for HCF	**Minor Ailments Scheme**	**Medication records charts**	**EL23 / Medication support service**	**Palliative Care stock holding**	**Out of Hours Palliative care service**	**Walk in consultation service**	**Covid Medication Supply Service**	**Extended hours service**	**Total income per area**
East Riding	£2,180.30	£60,953.43	£26,251.80	£0.00	£2,233.69	N/A	£30,908.50	£729.00	N/A	**£123,256.72**
Hull	£800.00	£291,617.42	£30,794.20	£5,788.50	£2,275.67	N/A	£61,434.80	£1,399.00	N/A	**£394,109.59**
North East Lincolnshire	£710.70	£49,350.12	N/A	N/A	£75.00	£25,551.19	£43,781.80	£800.50	N/A	**£120,269.31**
North Lincolnshire	£600.00	£96,438.96	N/A	N/A	£1,655.53	£22,026.23	£13,139.60	£637.00	£30,720.00	**£165,217.32**
Total income for services commissioned by HNY ICB 2024-25										**£802,852.94**

Local Pharmacy Services income – Public Health 2024-2025

	Local Pharmacy Services – Public Health 2024-25 (* Commissioner Controlled Data)								Advanced Services/ other pilot services/ essential services			
	NHS Health checks	Sexual health / Emergency Hormonal Contraception	Smoking Cessation NRT	Needle exchange	Supervised Consumption Methadone	Supervised Consumption Buprenorphine	C-Card Scheme/ condoms with EHC	Total Income	PF Flu & Vaccs	NMS in HNY	HTCF	PCS
East Riding	£406.00	£23,419.14	£192,351.25	£4,678.65	£ £79,982.60	£70,278.30	1995.0	£373,110.94	PF went from 4719 per month at the start of the year and reached 6239 by the end, +32.21%, despite many issues with IT/referrals. Flu had a good year with many Covid Vaccs also.	Grew from 11,821 in Apr 24 to 15,783 in Mar 25.	Great growth in BP checks from 4096 in Apr 24 to 4625 in Mar25. With YoY increases at Places from +42% to +105%. ABPM/BP ratio improved from 8.5% to 11.6% Impressive!	Over the year a 311% increase from 210 in Apr24 to 864 Mar25.
Hull	N/A	£25,577.59	Unknown *	£23,973.12	Unknown	Unknown *	N/A	£49,550.71				
North East Lincolnshire	N/A	£17,228.07	N/A	Unknown *	Unknown *	Unknown *	£108.0	£17,336.07				
North Lincolnshire	N/A	N/A	£12.80	Unknown *	Unknown *	Unknown *	N/A	£12.80				
Public health commissioned services TOTAL INCOME (where known)								**£440,010.52**				

2024/25 Combined Total services income PH & ICB (where known) £1,242,863.46

For comparison purposes: 2023/24 Combined Total services income PH & ICB (comparable where known) = £913,088.19

The Teams Year –

Caroline Hayward: Professional Development Pharmacist

Another very busy year which, for me, focused on service continuity; service redesigns; service fee uplift negotiations and implementation; development and introduction of new services; design and creation of new PharmOutcomes service platforms for all commissioned services along with the merger of the Humber and North Yorkshire LPCs PharmOutcomes accounts and the creation of joint service platforms across the HNY ICB / Humber area as well as support for national pharmacy services; design and delivery of training events and preparation of Patient Group Directions to support our local pharmacy services.

Each ICB commissioned service specification was re-reviewed and updated, with service specifications modified to include the introduction of additional funded options for the EL23 Medication support service and the Optical Referral for HCF service.

Following extensive negotiation uplifted service fees were finally introduced for all ICB services which were backdated to 1st April 2024.

In November 2024, a revised North East Lincolnshire ACT (Advice Contraception & Treatment) service and a new C-Card service were introduced with new service specifications, PGDs, PharmOutcomes platforms and a significant increase to previous service fees. The service specification and PGDs allow both registered pharmacy technicians as well as pharmacists to provide EHC under the PGD in line with the amendment to Human Medicines Regulations (26.6.2024), which permits registered pharmacy technicians to supply and administer medicines under a PGD in the course of their professional practice .

North Lincolnshire agreed also to implement a new EHC, via PGD, service in North Lincolnshire and following negotiation, agreed to match the fees secured for North East Lincolnshire and to include registered pharmacy technicians as well as Pharmacists in the service.

Additional service launches included implementation of a further 'Walk in Consultation Service' across Humber and North Yorkshire on 1st December 2024 when additional funds were secured from the ICB to support winter pressures. This service aligned with the national Pharmacy First minor illness service but allowed patients to self-refer.

Other services amended and relaunched during the year included:

- Covid Medication Supply service: an additional eligible cohort in June 2024 required an update to the previous service specification and PharmOutcomes service platforms.
- Palliative Care services: Introduction of a revised medication formulary across the Humber area with updated Humber wide PharmOutcomes service platforms.
- Optical HCF Referral: Introduction of a new Optical HCF Referral Acceptance Platform which generates an activity payment to pharmacies when data is recorded.

Contract negotiations: Several locally commissioned public health service contracts were due to end on 31.3.2025: following extensive negotiations, every contract and service was re-secured.

An uplift to service fees was achieved for the following services:

- Hull needle exchange service
- Hull NRT stop smoking service (CGL)
- Hull EHC via PGD service (CHCP)

An uplift to the current fees is still under negotiation for the following services:

- Hull Drug Misuse service: Supervised consumption
- North Lincolnshire Drug misuse services: Supervised consumption and Needle Exchange

Following a review of Humber LPC PharmOutcomes arrangements with HNY ICB, an extensive program of work was undertaken to redesign and build new service platforms for all their commissioned services. The platform builds included the introduction of combined service platforms for services operating across all Humber place areas within the ICB, and the introduction of joint platforms for services operating across both Humber and North Yorkshire.

Patient group directions (PGD) for Varenicline were readied for the hoped launch of Varenicline under PGD across Hull, East Riding of Yorkshire, North & North East Lincolnshire: Services will be introduced later this year once service specifications, resources and training have been finalised.

Training activities during the year included preparation of presentations for face-to-face training for the 'Working with Patient Group Directions (PGDs)' event, and the preparation and delivery of training videos, and resources to support the Optical HCF service.

Additional activities included development of a data sharing agreement with HNY ICB to allow data sharing with commissioners; a regular review of product files and data within PharmOutcomes platforms, service data analysis and preparation of reports; monthly review of Optical referral service clinical data and activity; creation of service guides and resources to support locally commissioned services; preparation of articles for the Humber weekly Digest; responding to and resolving complaints, queries and issues raised to Humber LPC; representation of community pharmacy on the HNY ICB Area Prescribing subcommittee, Optical Hypertension steering group, Hull Drugs and Alcohol strategic partnership, Hull and East Riding Sexual Health network group, HNY ICB PCN and practice pharmacist groups, Independent Prescriber Pathfinder clinical steering group, HNY Pharmacy First Steering group, North Lincolnshire PCN clinical directors group, Hull and ERY Contraception task and finish group, East Riding council pharmacies Process group, East Riding of Yorkshire council contract monitoring meetings; attendance at Humber LPC committee meetings; continued interactions and meetings with pharma companies and their representatives.

Anthony Bryce: Health Integration & Public Health Lead

Healthy Living Pharmacy (HLP)

The Healthy Living Pharmacy (HLP) framework is aimed at achieving consistent provision of a broad range of health promotion interventions through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities.

All pharmacies across the Humber locality are now registered as a 'Healthy Living Pharmacy' (HLP) all of which collectively take part in public health initiatives and campaigns, both locally and nationally, in collaboration with local services and stakeholders. The adoption of HLPs marked a significant development for community pharmacy and its contribution to health promoting interventions.

Community Pharmacies continue to provide valuable information and support to patients, clients, and customers in their efforts to remain both physically and mentally healthy as well as signposting individuals to local services, groups, and the voluntary sector.

HLP wellbeing zones, and the information contained within them, are also used to maintain, and support, workforce wellbeing for Community Pharmacy staff. The HLP Facebook page continues to go from strength to strength with over 280 members. This communication medium is a valuable tool for Pharmacy contractors to share good practice as well as being a vital resource for information and support around healthy living within the Humber locality for the benefit of both patients and Pharmacy staff.

HLP's continue to be a welcome and accessible location for clients, patients and customers to receive both flu and covid vaccinations as well as blood pressure readings via the Hypertension Case Finding Service. There are plans / discussions ongoing to increase services such as vaccinations within a Community Pharmacy setting which will allow more patients the opportunity to access health care services from an accessible location within their local community.

There has also been an increase in off-site hypertension case finding which refers to Community Pharmacy-based blood pressure checks offered outside of a traditional Pharmacy setting, such as at events or workplaces. These checks aim to identify undiagnosed cases of hypertension and have included both clinic checks (initial blood pressure readings) and ambulatory blood pressure monitoring (ABPM). Many local businesses have engaged with Community Pharmacies and the ICB in relation to off-site hypertension case finding and a number of further events have been planned for 2025 / 2026.

Primary Care Networks (PCNs)

Primary Care Networks (PCNs) are a key part of the NHS Long Term Plan, with general practices being a part of a network, typically covering 30,000-50,000 patients. The networks provide the structure, and funding, for services to be developed locally in response to the needs of the patients they serve. It is fundamentally important, therefore, that Community Pharmacy teams are fully involved in the work of their PCN, as PCNs will be critically important to the development of primary care services within our local area.

Community Pharmacy, via the implantation of PCN pharmacy leads in each PCN area, has continued to engage with PCNs (clinical directors, clinical pharmacists, PCN managers, practice managers) throughout 2024/2025 as well as other local stakeholders such as the local authority and voluntary sector.

The LPC continues to support PCN pharmacy leads across the Humber locality and has prepared several useful resources which contain information about the PCN as well as providing a dedicated PCN gaggle-group (email address), which is the communication method community pharmacies use to engage with one another and share good practice. Continued workforce pressures that Community Pharmacies face, coupled with Pharmacy closures across the Humber locality, has meant that it has been another challenging year for PCN Pharmacy leads.

PCN pharmacy leads with the support of the LPC continue to look at ways of engaging with PCN's and the Integrated Care Board (ICB) and the various contacts throughout the Humber locality. As such 'place' based PCN Engagement Leads (PELS) were introduced during 2024 / 2025. The Community Pharmacy PCN Engagement lead role has been established to support the regional implementation of the Pharmacy Primary Care Access Recovery Plan (PCARP) requirements, including supporting the implementation of the Pharmacy First Service and expanding the Blood Pressure Checks Service and Pharmacy Contraception Service. This role has helped to develop the vital partnership between general practice and Community Pharmacy as all teams work to manage demand across primary care. PELS work closely with PCN leads and offer support, advice and guidance and we look forward to developing the role further in 2025 / 2026.

Virtual Outcomes (VO) – Online Training Platform

Humber LPC recommissioned the online training platform, Virtual Outcomes in 2024 / 2025. Virtual Outcomes allows contractors throughout the Humber locality to access training sessions & resources on a single, accessible online platform https://virtualoutcomes.co.uk/ providing equitable access for all Community Pharmacies across the Humber geography to upskill employees. The platform is user friendly, and most training sessions can be completed in twenty minutes.

The training has proved to be popular amongst contractors and feedback from Pharmacy staff has been excellent. There has been an increased uptake in the number of Pharmacies accessing Virtual Outcomes, and of many of the online training opportunities provided by the online platform during 2023 / 2024. Uptake and increased usage has been supported by PCN Pharmacy leads within locality networks.

By the end of Q4 in 2023/24 Community Pharmacy Humber's contractor usage, **59%,** was well above the **45%** national average. On average 10-60 courses were accessed per month and had been viewed / completed by contractors which, though predominantly independent, also had substantial usage by CCA and AIMP/IPA contractors.

Virtual Outcomes has continued to develop and provides additional courses such as the NHS Pharmacy Contraception service, Advanced Lateral Flow Device Test service, Pharmacy First, Flu Vaccination service, Dispensing Errors, Public Health campaigns, Oral Contraception, DMS, Smoking Cessation service (SCS), Hypertension Case Finding service and courses on the New Pharmacy contract and HLP, all of which are being widely utilised by contractors throughout the Humber locality.

Joanne Carter: Office Manager & Kate Stark: Administration Officer

We hope you are all enjoying the improvements we have made to our Website and Weekly Information Digest over the past year following your suggestions. Our website brings you a wealth of information to support you in your day-to-day roles. You can find information on the Pharmacy Contract, Latest News, Training/Events, Local/National Services, an A-Z Library of resources, Podcasts, and much more... Why not take a look now! www.communitypharmacyhumber.co.uk

Again, we hope you are enjoying the improvements we have made to our Weekly Information Digest. We sent you 50 Digests this year and 4 Quarterly Newsletters packed full of information to keep your teams informed of the latest updates as they happen. You can view or sign up to receive our Weekly Digest via our website. You can also keep up to date by following us on Facebook and X.

The admin team have helped to organise several training sessions for you including PGD updates, Sexual Health and Contraception. We hope all that attended found these events useful and we aim to support you by offering more training events in the future. The LPC still has a contract with Virtual Outcomes, offering FREE training modules to our Humber Pharmacies. There have been some great, short training modules released over the past year including Pharmacy First Skin Conditions/ Pharmacy First Hint, Tips and Learnings/ Compliance Aids/ Prostate Cancer/ Original Pack Dispensing (OPD) and much more. Access VO training and other training via our website.

Finally, if there is anything else you would like to see from us, training you would like to see offered please do let us know at humber.lpc@nhs.net.

Members' attendance at LPC meetings 2024-2025

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		**Represents**	**Possible**	**Attended**	**Expenses**
Annette Mauder	Vice Chair	CCA	13*	5*	£0
Jon Whitelam	Treasurer	CCA	13*	12*	£1500
Tom Hajdas		CCA	7	4	£1256
Jiun Chow		Independent	7	4	£1240
Abayomi Olusanya		Independent	13*	12*	£2695.62
Nick Hamilton		CCA	7	7	£2204.60
Taffazzal Hague		Independent	7	5	£2111.20
Andre Amaral		Independent	7	5	£1080
Owynn Baker		Independent	5	2	£1394.20
Andrei Dudas-Alexe		Independent	6	4	£1356
Lisa McGowan		Independent	1	1	£400
Manuel Mestre-Valdes		Independent	1	1	£400
Appointed Officers					
Paul McGorry		CEO	13*	13	N/A
Joanne Carter		Office Manager	13*	12	N/A
Caroline Hayward		PDP	7	1	N/A
Katie Stark		Admin Officer	7	0	N/A
Anthony Bryce		HIPHL	7	0	N/A
Joanne Lane		Employed Chair	13*	13*	N/A
PSNC Representative					
David Broome		CPE	6	3	N/A

*Includes LPC Executive Committee meetings

LPC Account 2024/25

Details of Meetings and Travel Expenses

Events – Venue & catering	£1949.34
LPC committee meeting expenses – venue & catering	£3594.10

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.

The LPC is funded by a contractor levy which was once again unchanged for the ninth consecutive year. 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 levy also contributes to the activities of Community Pharmacy England (CPE); the LPC paid £80,833 in levies to CPE across 2024/25 on your behalf, an increase of £11,018 over the previous financial year. As with previous years the Levy was not the only source of income for the LPC, some funding grants from NHS England, NHSE&I and the Humber and North Yorkshire Partnership ICB (HNYP) continued into this financial year. We also continued to trade successfully with commissioners through the provision of PharmOutcomes (PO) licences, and platform development services, which totalled £86,978 and covered our purchase of PO licences for you, our contractors. Our gross income for the year was £378,914.

Costs were well controlled over the year. The total expenditure for the year of £360,138 resulted in a gross surplus of £18,776 at the end of the year. In 2024 / 2025 we moved from a working from home model for LPC staff to an office that is smaller and more cost effective than previous premises used by the LPC. As anticipated the move to new premises and associated equipment saw establishment costs increase over the previous year, but this was well within budget and offset by cost savings elsewhere. Payroll was well controlled and ended the year within the agreed budget. This year's payroll represented 55 % of our income compared to 39% in 2023 / 2024.

Our bank balance of £544,133 is higher than our closing figure of £496,015 in 2023/2024. This is the result of securing of new grants during this financial year, and a higher than anticipated trading income.

The balance of the grants which remain unspent are shown, within the "creditors falling due within one year" section of the accounts and total £214,331. When this is subtracted from our bank balance it shows a true LPC balance of £329,802, which is fractionally lower than our closing balance in the previous year.

The levy to CPE for 25/26 will increase to £83,413 pa, an increase of £2580 over the previous year. The LPC is confident it can still accommodate this increase without increasing the contractor levy.

This is the first full year with our new accountants Robson Jackson, and it is clear their services better suit the needs of the organisation and contractors.

Financial statements for the period follow for your information.

Jonathan Whitelam: Treasurer

REPORT OF THE DIRECTOR AND

UNAUDITED FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

FOR

HUMBER LOCAL PHARMACEUTICAL COMMITTEE

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FOR THE YEAR ENDED 31 MARCH 2025

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COMPANY INFORMATION
FOR THE YEAR ENDED 31 MARCH 2025

SECRETARY:	P J McGorry
REGISTERED OFFICE:	Suite 18a Dunston House Livingstone Road Hessle East Yorkshire HU13 0EG
REGISTERED NUMBER:	(England and Wales)
ACCOUNTANTS:	Jackson Robson Licence Limited 33-35 Exchange Street Driffield East Yorkshire YO25 6LL

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REPORT OF THE DIRECTOR
FOR THE YEAR ENDED 31 MARCH 2025

The director presents report with the financial statements of the company for the year ended 31 March 2025.

DIRECTOR

This report has been prepared in accordance with the provisions of Part 15 of the Companies Act 2006 relating to small companies.

ON BEHALF OF THE BOARD:

PJ McGorry
Director

Date: 24th July 2025

INCOME STATEMENT
FOR THE YEAR ENDED 31 MARCH 2025

	Notes	2025 £	2024 £
TURNOVER		378,914	515,426
Cost of sales		360,138	404,675
GROSS SURPLUS		18,776	110,751
Administrative expenses		30,092	26,935
OPERATING (DEFICIT)/SURPLUS	4	(11,316)	83,816
Interest receivable and similar income		5,013	4,387
(DEFICIT)/SURPLUS BEFORE TAXATION		(6,303)	88,203
Tax on (deficit)/surplus		-	-
(DEFICIT)/SURPLUS FOR THE FINANCIAL YEAR		(6,303)	88,203

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The notes form part of these financial statements

HUMBER LOCAL PHARMACEUTICAL COMMITTEE (REGISTERED NUMBER:)

BALANCE SHEET
31 MARCH 2025

	Notes	2025 £	£	2024 £	£
FIXED ASSETS					
Tangible assets	5		1,240		1,892
CURRENT ASSETS					
Debtors	6	29,250		19,892	
Cash at bank		514,883		476,123	
		544,133		496,015	
CREDITORS					
Amounts falling due within one year	7	214,331		160,562	
NET CURRENT ASSETS			329,802		335,453
TOTAL ASSETS LESS CURRENT LIABILITIES			331,042		337,345
RESERVES					
Income and expenditure account			331,042		337,345
			331,042		337,345

The company is entitled to exemption from audit under Section 477 of the Companies Act 2006 for the year ended 31 March 2025.

The members have not required the company to obtain an audit of its financial statements for the year ended 31 March 2025 in accordance with Section 476 of the Companies Act 2006.

The director acknowledges responsibilities for:

(a) ensuring that the company keeps accounting records which comply with Sections 386 and 387 of the Companies Act 2006 and

(b) preparing financial statements which give a true and fair view of the state of affairs of the company as at the end of each financial year and of its surplus or deficit for each financial year in accordance with the requirements of Sections 394 and 395 and which otherwise comply with the requirements of the Companies Act 2006 relating to financial statements, so far as applicable to the company.

The financial statements have been prepared in accordance with the provisions applicable to companies subject to the small companies regime.

The financial statements were approved by the Board of Directors and authorised for issue on ..... and were signed by:

.....
Director

DRAFT

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

1. STATUTORY INFORMATION

Humber Local Pharmaceutical Committee is a private company, limited by guarantee, registered in England and Wales. The company's registered number and registered office address can be found on the Company Information page.

2. ACCOUNTING POLICIES

Basis of preparing the financial statements

These financial statements have been prepared in accordance with Financial Reporting Standard 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" including the provisions of Section 1A "Small Entities" and the Companies Act 2006. The financial statements have been prepared under the historical cost convention.

Turnover

Turnover is measured at the fair value of the consideration received or receivable, excluding discounts, rebates, value added tax and other sales taxes.

Tangible fixed assets

Depreciation is provided at the following annual rates in order to write off each asset over its estimated useful life.

Taxation

Taxation for the year comprises current and deferred tax. Tax is recognised in the Income Statement, except to the extent that it relates to items recognised in other comprehensive income or directly in equity.

Current or deferred taxation assets and liabilities are not discounted.

Current tax is recognised at the amount of tax payable using the tax rates and laws that have been enacted or substantively enacted by the balance sheet date.

Deferred tax

Deferred tax is recognised in respect of all timing differences that have originated but not reversed at the balance sheet date.

Timing differences arise from the inclusion of income and expenses in tax assessments in periods different from those in which they are recognised in financial statements. Deferred tax is measured using tax rates and laws that have been enacted or substantively enacted by the year end and that are expected to apply to the reversal of the timing difference.

Unrelieved tax losses and other deferred tax assets are recognised only to the extent that it is probable that they will be recovered against the reversal of deferred tax liabilities or other future taxable profits.

Pension costs and other post-retirement benefits

The company operates a defined contribution pension scheme. Contributions payable to the company's pension scheme are charged to profit or loss in the period to which they relate.

3. EMPLOYEES AND DIRECTORS

The average number of employees during the year was 6 (2024 - 6).

4. OPERATING (DEFICIT)/SURPLUS

The operating deficit (2024 - operating surplus) is stated after charging:

	2025	2024
	£	£
Depreciation - owned assets	877	877

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5. TANGIBLE FIXED ASSETS

	Plant and machinery etc £
COST	
At 1 April 2024	3,508
Additions	225
At 31 March 2025	3,733
DEPRECIATION	
At 1 April 2024	1,616
Charge for year	877
At 31 March 2025	2,493
NET BOOK VALUE	
At 31 March 2025	1,240
At 31 March 2024	1,892

6. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025 £	2024 £
Trade debtors	29,250	16,516
Other debtors	-	3,376
	29,250	19,892

7. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2025 £	2024 £
Trade creditors	1,953	2,891
Taxation and social security	6,372	4,242
Other creditors	206,006	153,429
	214,331	160,562

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CHARTERED ACCOUNTANTS' REPORT TO THE DIRECTOR
ON THE UNAUDITED FINANCIAL STATEMENTS OF
HUMBER LOCAL PHARMACEUTICAL COMMITTEE

In order to assist you to fulfil your duties under the Companies Act 2006, we have prepared for your approval the financial statements of Humber Local Pharmaceutical Committee for the year ended 31 March 2025 which comprise the Income Statement, Balance Sheet and the related notes from the company's accounting records and from information and explanations you have given us.

As a practising 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 within the ICAEW's regulations and guidance at http://www.icaew.com/en/membership/regulations-standards-and-guidance.

This report is made solely to the director of Humber Local Pharmaceutical Committee in accordance with our terms of engagement. Our work has been undertaken solely to prepare for your approval the financial statements of Humber Local Pharmaceutical Committee and state those matters that we have agreed to state to the director of Humber Local Pharmaceutical Committee in this report in accordance with ICAEW Technical Release 07/16AAF. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than Humber Local Pharmaceutical Committee and its director for our work for this report.

It is your duty to ensure that Humber Local Pharmaceutical Committee has kept adequate accounting records and to prepare statutory financial statements that give a true and fair view of the assets, liabilities, financial position and loss of Humber Local Pharmaceutical Committee. You consider that Humber Local Pharmaceutical Committee is exempt from the statutory audit requirement for the year.

We have not been instructed to carry out an audit or a review of the financial statements of Humber Local Pharmaceutical Committee. For this reason, we have not verified the accuracy or completeness of the accounting records or information and explanations you have given to us and we do not, therefore, express any opinion on the statutory financial statements.

Jackson Robson Licence Limited
33-35 Exchange Street
Driffield
East Yorkshire
YO25 6LL

Date: .....

HUMBER LOCAL PHARMACEUTICAL COMMITTEE

DETAILED INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 31 MARCH 2025

	2025		2024	
	£	£	£	£
Turnover				
Statutory levies received	283,536		283,536	
PharmOutcomes services	74,055		88,190	
Other services support	12,923		33,840	
Funding	5,850		106,510	
Events and training	-		1,000	
Sponsorship	2,550		2,350	
		378,914		515,426
Cost of sales				
Levies paid to PSNC	80,833		69,815	
PharmOutcomes expenditure	35,243		46,096	
Events services support	1,624		2,172	
Events training	-		1,380	
PCN expenses	4,080		17,860	
Travel and meeting expenses - employees	4,047		4,910	
Service support - equipment	-		633	
Travel and meeting expenses - members	18,613		15,561	
Service fee	5,296		45,684	
Wages and salaries	182,664		174,624	
Employer National Insurance	13,387		12,065	
Employer pension contributions	14,351		13,875	
		360,138		404,675
GROSS SURPLUS		18,776		110,751
Establishment costs				
Rent and service charges	4,260		717	
Insurance	3,288		2,924	
Light and heat	-		283	
		7,548		3,924
		11,228		106,827
Administrative expenses				
Post and stationery	528		1,157	
Advertising	557		2,403	
Office equipment	86		182	
Computer and website costs	12,705		7,709	
Sundry expenses	5,621		7,328	
Accountancy and payroll	1,882		3,039	
		21,379		21,818
		(10,151)		85,009
Admin extra 1				
Gifts		201		232
		(10,352)		84,777
Finance costs				
Bank charges		87		84
Carried forward		(10,439)		84,693

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HUMBER LOCAL PHARMACEUTICAL COMMITTEE

DETAILED INCOME AND EXPENDITURE ACCOUNT
FOR THE YEAR ENDED 31 MARCH 2025

	2025		2024	
	£	£	£	£
Brought forward		(10,439)		84,693
Depreciation				
Computer equipment		877		877
		(11,316)		83,816
Finance income				
Deposit account interest		5,013		4,387
NET (DEFICIT)/SURPLUS		(6,303)		88,203