



Title of paper:	Governance Framework for the Pharmacy and Public Health Forum (PPHF) April 2014 onwards
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GOVERNANCE ARRANGEMENTS FOR THE PHARMACY AND PUBLIC HEALTH FORUM (PPHF)

Context

Ministers, Department of Health (DH) and Public Health England (PHE) are very clear of the central role that community pharmacy has in protecting and improving people's health in England. The unique community pharmacy offer of its location in the heart of communities, their access on the high street, in supermarkets, and in every shopping centre with long opening hours, and staff that reflect the social and ethnic backgrounds of the communities they serve, make them an ideal location from where to deliver public health services.

Overarching objectives

The PPHF will provide leadership for the development, implementation and evaluation of public health practice for pharmacy.

It will do this by using every opportunity to raise awareness of pharmacy as an effective delivery mechanism integrated into the rest of the public health workforce, working alongside the new NHS and public health system architecture and a wide range of stakeholders, including Local Government.

In delivering its objectives, the PPHF will ensure that it takes account of local and national Government's public health priorities.

Terms of Reference

1. Purpose

The PPHF will:

1.1 Position pharmacy as an integral part of the public health workforce delivering high quality public health services.

It will do so by:

- 1.11 Providing leadership and advice on the future public health role of pharmacy to maximise its contribution to all three domains of public health - health improvement, health protection and healthcare public health, including emergency planning and preparedness and the reduction of health inequalities.
- 1.12 Identifying a clearly defined work programme for the Pharmacy and Public Health Forum.
- 1.13 Developing and implementing a prioritisation process for the work programme which will stand up to public scrutiny.
- 1.14 Agreeing priorities informed by PHE's priorities and ambitions for improving and protecting people's health.
- 1.15 Agreeing and co-ordinating the roles of each member organisation and individuals in taking forward all aspects of the PPHF's work programme. The expectation is that the organisations will deploy resources to assist with implementation.
- 1.16 Building and implementing a communication and engagement strategy to support the re-positioning of community pharmacy as an integral part of the public health workforce, in the planning and delivery of an integrated public health system at local and national levels, within a revised NHS and public health system architecture.
- 1.17 Identifying any new /innovative public health developments for pharmacy to engage in delivering, ensuring the appropriate infrastructure is in place to deliver such services.
- 1.18 Responding to appropriate consultations, calls to action, NICE guidance etc. in a timely manner, to ensure that pharmacy is appropriately and effectively embedded in such developments.
- 1.19 Working within the PHE governance framework for all aspects of the work programme, to ensure that there is a clear and transparent process for deliverables of the PPHF and its Task groups.

1.2 Roll out Healthy Living Pharmacies.

It will do so by:

- 1.21 Providing leadership to enable and ensure the spread and acceleration of the roll out of Healthy Living Pharmacies across the country, building on achievements to date.

- 1.22 The PPHF will support NHS England to embed the Healthy Living Pharmacy framework within the Community Pharmacy Contractual Framework at the earliest opportunity, in a way that maximises population health and appropriately incentivises pharmacy contractors.

1.3 Develop professional standards for public health practice for pharmacy.

It will do so by:

- 1.31 Supporting the communication and implementation of the professional standards for public health practice for pharmacy teams, working in the different sectors and at different levels - from defined public health specialists to the wider work force in community and hospital pharmacies developing and delivering public health services.
- These standards align with the standards for other public health professionals.
 - The standards should have expectations of professionals and employers

1.4 Consolidate and develop the evidence-base and research for pharmacy's contribution to public health.

It will do so by:

- 1.41 Advising on the current state of the evidence base in relation to the role of pharmacies in public health and on any gaps in the evidence base that would be amenable to research and work with other Task groups, to ensure that opportunities for evaluation and research are maximised.
- 1.42 Advising the DH and PHE of research and development priorities.

1.5 Identify how and where community pharmacy sits within the new system architecture for the NHS, public health and social care.

It will do this by:

- 1.51 Recommending how public health services can be commissioned from community pharmacies in the future.
- 1.52 Identifying and articulating community pharmacy's unique offer, in the delivery of public health services playing to its strengths of accessibility, confidentiality and flexibility.

1.6 Identify workforce implications, including the capacity and infrastructure for training and development.

It will do so by:

- 1.61 Considering the workforce implications of the development and implementation of enhanced public health practiceⁱ for all members of the pharmacy team across all sectors of pharmacy, including the capacity and infrastructure for training and development.
- 1.62 Identifying what needs to be put in place to develop pharmacists and their teams to deliver public health, helping to improve population health or the public's health and reduce health inequalities; this will take into account the identified competences/standards.
- 1.63 Identifying appropriate models and channels for workforce development.
- 1.64 Considering leadership development and future learning and networking needs of pharmacists and their teams delivering public health services.
- 1.65 Considering any training requirements of pharmacy staff delivering public health services.
- 1.66 Identifying potential workforce barriers to pharmacy's contribution to public health and develop solutions to overcome them.

2. Timing of meetings

- 2.1 PPHF meetings will be held 4 times a year with dates agreed at the beginning of the financial year.
- 2.2 Task groups will be set up, which will meet more frequently depending on business needs to take forward areas of work.

3. Membership of the PPHF (Annexe A)

To achieve the responsibilities the membership will:

- 3.1 Be reviewed regularly (annually) by the Chair of the Forum, National Director Health and Wellbeing, PHE or deputy, and the lead pharmacist PHE.
- 3.2 Include representatives from pharmacy and public health organisations, NHS England, Health Education England, PHE, Local Government Association, other relevant organisations, and networks and pharmacists.
- 3.3 Include at least one lay member, who will be appointed to ensure that all new developments/initiatives will take account of the impact of these on individual members of the public.

3.4 The Chair and membership of the PPHF should be re-viewed every 3 years¹.

4. Roles and responsibilities of members

- 4.1 The PPHF members will personally promote the pharmacy team as an integral part of the public health system and delivery channel at local, regional and national levels.
- 4.2 The PPHF members will be expected to be conduits of information to and from the PPHF, for the constituents, organisations and groups they represent.
- 4.3 The PPHF members will gain agreement of the Chair in liaison with the PHE's National Director Health and Wellbeing, if communicating on its behalf.
- 4.4 National organisation representatives from e.g. NHS England HEE, PHE, LGA and the Pharmacy and Public Health organisations will provide support for implementation of PPHF programmes of work.

5. Conflicts of interest

- 5.1 The aim of declaring interests is not to satisfy curiosity but to support transparency and probity. The guiding principle when declaring interests is that matters should be declared which, in the perception of others, might be seen to give material or other advantage to the individual concerned or her/his close family members, either directly or indirectly (for example to a business or another organisation).
- 5.2 A declaration of interest form will be signed at the beginning of each financial year and published by all members of the Forum.
- 5.3 The agenda for the Forum will include an item at the beginning under which the Chair will remind members of the requirement to make any new declarations of interest.
- 5.4 Members of the Forum should declare an interest in a specific agenda item at the beginning of the discussion. It then is at the discretion of the Chair, whether the individual member declaring an interest may take part in the discussion, remain for the discussion, but not take part or vote, or should leave the meeting for the duration of the item. Declarations of interest and the decision of the Chair on how the declarer will take part in the meeting will be noted in the minutes.

6. Reporting arrangements for the PPFH

¹ Appointment process to be confirmed

The Chair of the PPHF will be accountable to PHE's National Director Health and Wellbeing and provide progress updates to the Parliamentary Under Secretary of State for quality and Parliamentary Under Secretary of State for public health annually.

- 6.1 Quarterly and annual meetings will be held between the Chair of the PPHF and the PHE's National Director Health and Wellbeing.
- 6.2 An annual and 6-monthly written report and quarterly updates will be provided by Chair of the PPHF to PHE's National Director Health and Wellbeing, setting out deliverables achieved and reasons for any slippages.
- 6.3 A draft agenda will be sent to the PHE's National Director Health and Wellbeing before being finalised for information.
- 6.4 Minutes of meetings will be routinely sent to the PHE's National Director Health and Wellbeing, which can inform the Director of PPHF developments and deliverables.
- 6.5 Agreement should be sought from the Chair of the PPHF when members speak at events/conferences, on behalf of the PPHF.
- 6.6 The PPHF will continue to be able to express an independent view, whilst working within PHE's governance arrangements. In situations where the PPHF intends to make a public formal communication, agreement should be sought from PHE's National Director Health and Wellbeing, on behalf of PHE. The PPHF should take account of any concerns that PHE may have before publication, to avoid any conflict of messages.
- 6.7 The PPHF can advise Ministers or PHE on a certain course of action. Ministers/PHE reserve the right to accept or reject the recommendation.

7. Communications

- 7.1 The PPHF will have a dedicated section on the PHE website and must conform to the gov.uk requirements.
- 7.2 The agendas of the PPHF meetings will be made available on the dedicated section of the PHE website. Requests for minutes should be on application.
- 7.3 A communication plan of the PPHF will be included on the dedicated section of the PHE website as well as any deliverables or other communications from the Forum, which organisations can use to cascade to their constituents.

8. Support for the Pharmacy and Public Health Forum

- 8.1 Lead pharmacist, Health and Wellbeing Directorate, PHE will be the liaison person between PHE and the PPHF.

8.2 Secretariat support for the PPHF will be provided by PHE.

Membership of the Pharmacy and Public Health Forum:

Function on forum:	Organisation:
Chair	Non-executive member of the Public Health England Board
Member	Community pharmacist x3
Member	Company Chemists Association
Member	Faculty of Public Health
Member	Royal Society for Public Health
Member	LA Director of Public Health and Wellbeing
Member	Royal Pharmaceutical Society
Member	National Pharmacy Association
Member	NHS England
Member	Public Health England x 3
Member	NHS Confederation
Member	General Pharmaceutical Council
Member	Pharmaceutical Services Negotiating Committee
Member	Department of Health
Member	National Association Primary Care NHS Confederation
Member	Senior Adviser (Public Health), Local Government Association
Member	Health Education England
Ex-Officio Member	Chief Pharmaceutical Officer
Member	Expert Adviser (Adhoc)

Secretariat

Public Health England

*The Chair of the Forum will review membership of the Forum regularly.

**PUBLIC HEALTH ENGLAND
MEMBERS OF THE PHARMACY AND PUBLIC HEALTH FORUM
ANNUAL DECLARATION OF INTERESTS
(for the period 1 April 2014 to 30 March 2015)**

Declared interest or received hospitality	Please state
Share holdings or other interests in pharmaceutical companies or other private or public companies that may have real or potential conflicts of interest with the work programme of the Pharmacy and Public Health Forum	
Receipt of departmental, staffing or personal sponsorship from the pharmaceutical industry or other private/public companies that may have real or potential conflicts of interest with the work programme of the Pharmacy and Public Health Forum	
Commercial gains to be had by any individual or organisation from the work programme of the Pharmacy and Public Health Forum	
Directorships, including non-executive Directorships held in private companies or PLCs (with the exception of those of dormant companies)	
Ownership, or part ownership, of private or public companies, businesses or consultancies held which could result in commercial gains from the work programme of the Pharmacy and Public Health Forum	
Majority or controlling share holdings in organisations likely to benefit from the work of the Pharmacy and Public Health Forum	
Position of authority in a charity or voluntary body in the field of health and social care that could result in potential gain from the work programme	

Name:

Date:

Employing organisation:

Signed:

***Please return signed forms to:
Gul Root, Lead pharmacist, Health and Wellbeing Directorate, Public Health
England, gul.root@phe.gov.uk***
