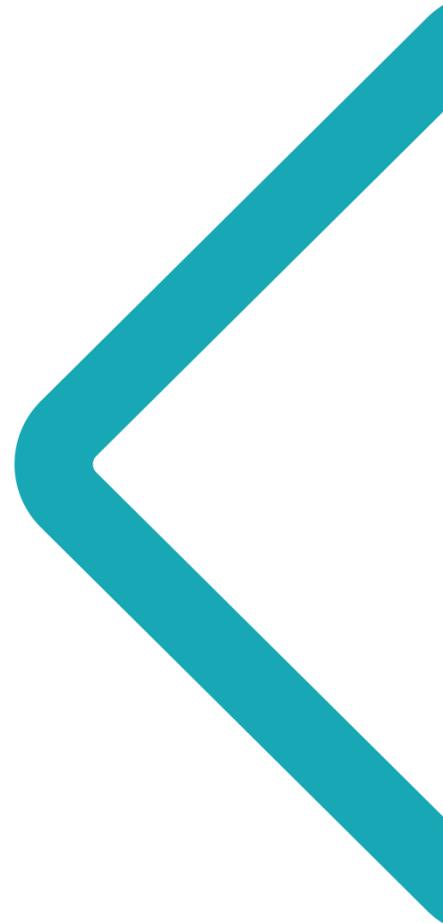


NHS Cheshire and Merseyside Integrated Care Board

Pharmacy Services Regulations Committee

Terms of Reference



Document revision history



Date Approved	Version	Revision	Comment	Author / Editor

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Pharmacy Services Regulations Committee

Terms of Reference

1. Establishment

The Pharmacy Services Regulations Committee (the Committee) is established by the Cheshire and Merseyside Integrated Care Board (the Board or ICB) as a Sub-Committee of the ICBs System Primary Care Committee in accordance with its Constitution, Standing Orders and Scheme of Reservation and Delegation (SoRD).

These Terms of Reference (ToR), will be published on the ICB website, set out the membership, the remit, responsibilities and reporting arrangements of the Committee and may only be changed with the approval of the System Primary Care Committee.

These terms of reference are based on those contained in chapter 2 of the NHS England (NHSE) Pharmacy Manual,¹ for determining applications received for new or additional premises. The Pharmacy Manual also details Commissioner responsibilities for managing control of entry to the Pharmaceutical List.

The Committee members and regular attendees' members are bound by the Standing Orders and other policies of the ICB.

2. Purpose

The Committee) is established to:

- determine those applications and notifications listed in Annex A received under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (the 2013 Regulations) and the amended NHS Pharmaceutical and Local Pharmaceutical Services Regulations May 2023 as amended
- determine those applications and notifications listed in Annex A received under the NHS (Pharmaceutical Services) Regulations 2012, as amended and the NHS (Pharmaceutical Services) Regulations 2005, as amended, which fall to be dealt with under the transitional provisions contained within Schedule 9 of the 2013 Regulations.
- take overall responsibility for resolving issues of non-compliance with the terms of service as set out in the 2013 Regulations by pharmacy and dispensing appliance contractors.
- take overall responsibility for resolving issues of non-compliance with the terms of service for pharmacy and dispensing appliance contractors that fail to be dealt with under the transitional provisions contained within Schedule 9 of the 2013 Regulations.

In line with the Pharmacy Manual, the ICB Head of Primary Care determines those applications and notifications listed in Annex B of the Pharmacy Manual. Where necessary the pharmacy contracts manager may escalate an application or notification to the Committee. If, due to annual or sick leave, the pharmacy contracts manager is unable to determine an application or notification within the regulatory timescale, it is to be determined by the Committee

3. Authority

The Committee is a stand-alone committee that is authorised by the System Primary Care Committee to:

- investigate and approve any activity as outlined within its terms of reference
- seek any information it requires within its remit, from any employee or member of the ICB (who are directed to co-operate with any request made by the Committee) within its remit as outlined in these terms of reference

¹ <https://www.england.nhs.uk/publication/pharmacy-manual/>

- commission any reports it deems necessary to help fulfil its obligations
- obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise if it considers this is necessary to fulfil its functions. In doing so the Committee must follow any procedures put in place by the ICB for obtaining legal or professional advice
- commission, review and approve policies where they are explicitly related to areas within the remit of the Committee as outlined within the TOR, or where specifically delegated to the Committee by the System Primary Care Committee.

For the avoidance of doubt, the Committee will comply with the ICB Standing Orders, Standing Financial Instructions, the SoRD, the NHSE Pharmacy Manual and associated regulations.

4. Membership & Attendance

The membership (those with a vote) of the committee shall be as a minimum:

- ICB Head of Primary Care
- ICB Assistant Chief Executive (or nominated Deputy)
- Up to 2 Lay Persons with specialised knowledge of the Pharmaceutical Services Regulations.

Only members of the Committee have the right to attend Committee meetings, however meetings of the Committee will also be attended by the following individuals who are not members of the Committee:

- ICB Pharmacy Contracts Manager (or equivalent)
- Pharmacy Professional Advisor (or equivalent) on an ad hoc basis.

Other individuals may be invited to attend all or part of any meeting as and when appropriate to assist it with its discussions on any particular matters.

No deputies may be appointed unless there is good cause, for example long-term sick leave. Where deputies are required, these must be agreed with the Chair and must have a good understanding of the Pharmaceutical Services Regulations.

The Chair may ask any or all of those who attend meetings, but who are not members, to withdraw to facilitate open and frank discussion of particular matters.

Exclusions

Those who may not take part in any decision made at the Committee under the 2013 Regulations, or any decision made by virtue of the transitional provisions in schedule 7 of those regulations, include anyone who:

- is included in a pharmaceutical list or is an employee of such a person (to avoid doubt this includes anyone who provides services as a locum);
- assists in providing pharmaceutical services under Chapter 1 of Part 7 of the NHS Act 2006;
- is a local pharmaceutical services chemist, or provides or assists in providing local pharmaceutical services;
- is a provider of primary medical services;
- is a member of a provider or primary medical services that is a partnership or a shareholder in a provider of primary medical services that is a company limited by shares;
- is employed or engaged by a primary medical services provider; or
- is employed or engaged by an APMS contractor in any capacity relating to the provision of primary medical services.

This is irrespective of whether or not their involvement would give rise to a reasonable suspicion of bias. Members will sign declarations to confirm they meet this requirement.

Also, no other person is to take part in making a decision if because of an interest or association they have, or because of a pressure to which they may be subject, their involvement would give rise to a reasonable suspicion of bias.

Members and attendees to the Committee are to advise the Chair of any conflicts of interest on receipt of the Committee papers.

Declarations of any conflict of interest will be made and recorded at the beginning of each meeting.

5. Meetings

Leadership

The ICB Head of Primary Care will be the Chair of the committee.

The Committee can identify and determine a Vice Chair drawn from its membership. If the Chair is not present, then the Vice Chair will chair the meeting.

The Chair will be responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these ToR.

The Chair will be responsible for ensuring the Committee and its members accurately record any conflicts of interest.

Quorum

For a meeting to be quorate a minimum of two of the members with voting rights, one of which must be the Chair or Vice Chair and the other a Lay Member. If necessary, the Chair / Vice Chair has the casting vote.

Where these quorum requirements are unable to be met the meeting date will be rearranged.

If any member of the Committee has been disqualified from participating in an item on the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.

If on an occasion a Committee meeting is due to start but the quorum has not been reached, then the meeting may proceed if those attending agree, but no decisions may be taken. Alternatively, the meeting can be called to a halt and an agreement reached to rearrange an additional meeting.

Decision-making and voting

Decisions will be taken in accordance with the Standing Orders and within the authority as delegated to the Committee. The Committee will ordinarily reach conclusions by consensus. When this is not possible the Chair may call a vote.

Only members of the Committee may vote. Each member is allowed one vote and a majority will be conclusive on any matter.

Where there is a split vote, with no clear majority, the Chair of the Committee will hold the casting vote.

If a decision is needed which cannot wait for the next scheduled meeting, the Chair may conduct business on a 'virtual' basis through the use of telephone, email or other electronic communication. Decisions will be recorded and formally minuted and ratified at a subsequent formal meeting of the Committee.

Frequency

The Committee will meet monthly. It may also be convened urgently to discuss an urgent case.

In accordance with the ICB Standing Orders, the Committee may meet virtually when necessary and members attending using electronic means will be counted towards the quorum.

Administrative Support

The Committee shall be supported with a secretariat function provided by the ICB Primary care Team, and which will include ensuring that:

- the agenda and papers are prepared and distributed in a timely manner having been agreed by the Chair
- attendance of those invited to each meeting is monitored
- conflicts of interest are recorded
- keep a record of decisions, matters arising, action points and issues to be carried forward
- action points are taken forward between meetings and progress against those actions is monitored.

6. Accountability and Reporting Arrangements

The Committee is accountable to the System Primary Care Committee.

The Committee shall report to the System Primary Care Committee on how it has discharged its responsibilities, outlining its decisions taken and the outcome of any appeals on those decisions.

The minutes of the meetings shall be submitted to the System Primary Care Committee.

Decisions of the Committee will also be reported to applicants and interested parties, as defined by The Regulations.

The ICB pharmacy contracts manager will also report to each System Primary Care Committee on decisions taken and the outcome of any appeals on those decisions.

7. Review

The Committee will review its effectiveness at least annually

These terms of reference will be reviewed at least annually and earlier if required. Any proposed amendments to the terms of reference will be submitted to the System Primary Care Committee for approval.