09 September 2026
9.00am – 5.00pm
The Fielder Centre, Hatfield

Lupin Healthcare & Stirling Anglian will be sponsoring the costs associated with this meeting through the purchase of stand space and a sponsored promotional slot. They have had no influence on the venue, or involvement in the development of the agenda.

No.	Agenda Item	Lead	Page
1. *9.00am*	**Welcome and Apologies**	Rachel Solanki	
2. *9.00am*	**Declaration of Interest** Members to express any specific conflicts of interest regarding items on agenda that have not already been declared.	Rachel Solanki	Appendices
3. *9.05am*	**Items of Urgent Business** Any items to be notified to the Chair at least 24 hours before the meeting.	Rachel Solanki	
4. *9.10am* 4.1 4.2 4.2.1 4.3	**Minutes of Meeting held on 26 November 2025** Minutes to be ratified Outstanding actions • Engagement Survey Completed actions (for information only)	 Rachel Solanki Helen Musson	 4-8 9 10-13 Appendices
5. *9.30pm* 5.1 5.2 5.3	**CPH Governance** Treasurers Report and Q1 Reporting 2026/27 AGM 2026 Minutes Meeting Arrangements	 Vinesh Naidoo Niru Sivanesan Helen Musson	 14-17 16-21 22-23
6. **6.1** *10:00am* 6.1.1 6.1.2 6.1.3 6.1.4 6.1.5 **6.2** *10:00am*	**Subcommittee Sessions and Feedback** Members will split into their respective subcommittees. All members are expected to have reviewed the relevant papers in advance. Each subcommittee will agree recommendations for ratification by the Committee following the meeting. **Finance & Audit Subcommittee (10.00am - 11.30am)** Chair: Sheelan Shah Members: Karsan Chandegra, Mohamed Moledina, Vinesh Naidoo, Vikash Patel • Internal Financial Controls Policy (approval/sign-off) • Officer Workload Audit and Remuneration Review • Preparing the 2027/28 CPH Budget *Members are asked to review the document and identify any changes required.* • Risk Register Review • Terms of Reference Review **Governance Subcommittee (10.00am - 11.30am)** Chair: Adrian Price Members: Girish Mehta, Parag Oza, Viral Patel, Suraj Varia		 24-30 31 32-33 Appendices Appendices

6.2.1 6.2.2 6.2.3 6.2.4 6.2.5 **6.3** *11:30am*	• Committee Member Conduct Complaints Procedure (approval/sign-off) • Officer Workload Audit and Remuneration Review • Committee Member Expenses and Honoraria Framework *Members are asked to review the document and identify any changes required.* • Risk Register Review • Terms of Reference Review **Re-convene Committee:** Each subcommittee to provide a brief verbal update and recommendations requiring committee approval or further action.		34-38 39-45 46-48 Appendices Appendices
7. *12.00pm*	**CPE Update**	Anil Sharma, East of England CPE Representative	
LUNCH 12.30pm-1.30pm			
1.30pm	**Words from our Sponsors** (the meeting has been sponsored by the below and have had no input in the agenda) • **Lupin** • **Stirling Anglian**		
8. *1.45pm*	**CPH Capacity Plan**	Helen Musson	50-51
9. *2.15pm*	**Election Preparation**	Helen Musson	52
10. *3.15pm* 10.1 10.2	**CPH Workstreams 2026/27** • Central East Update and member questions from Chief Officer video update • Workstreams Update	 Helen Musson Niru Sivanesan	53-55
11. *4.50pm*	**AOB**		
	Next Meeting 11 November 2026 (9am to 5pm) The Comet Hotel, St Albans Rd W, Hatfield AL10 9RH		

CPH committee members accepted at the first meeting of its term in October 2023 the following guiding principles for members of the Committee:

- **Accountability** - Members of CPH are accountable for their decisions and actions to contractors and the public and therefore submit to scrutiny.
- **Openness** - Members should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions, and restrict information only for short term tactical reasons, or when the wider public interest clearly demands.
- **Honesty -** Members have a clear duty to declare any private interest relating to their CPH duties and take steps to resolve any conflicts arising.
- **Leadership** - Members should promote and support the above principles by leadership and by example.
- **Representativeness** (Selflessness) - members must reflect the interests of the contractors who elected or appointed them to CPH and must make decisions in the interests of the general body of contractors; they must not make decisions to gain financial or other material benefits for themselves, family or friends.

- **Integrity** - members must not put themselves under any obligation that might influence their performance at CPH or their ability to reflect the interests of the contractors who elected or appointed them or to make decisions in the interests of the general body of contractors.
- **Objectivity** - in making decisions and in carrying out the business of CPH members should act within the constitution and make decisions only on merit.

Community Pharmacy Hertfordshire

CPH MINUTES

13 May 2026

The Fielder Centre, Hatfield

Committee Members Present

Adrian Price (AP)
Girish Mehta (GM)
Mohamed Moledina (MM)
Parag Oza – Vice Chair (PO)
Rachel Solanki – Chair (RS)
Sheelan Shah (SS)
Vikash Patel (VP)
Vinesh Naidoo – Treasurer (VN)
Viral Patel (VKP)

Professional Team Present

Helen Musson (HM)
Niru Sivanesan (NS)
Izzy Hicks (IH)
Chloe Papadopoulos (CP)

Apologies

Karsan Chandegra
Suraj Varia

Guests

Anil Sharma (Item 9)
Cathy Geeson (Item 10, 11 and 12)
Ed Knowles (Item 11)
Rytis Kalinauskas (Item 10)

Minute No.	Agenda Item
1	**Welcome & Apologies** RS welcomed members to the meeting. Apologies were received from Karsan Chandegra and Suraj Varia.
2.	**Declaration of Interests** None.
3.	**Items of Urgent Business** None.
4. 4.1 4.2	**Minutes for Meeting Held 11 March 2026** **Minutes to be ratified** The minutes were received and approved by the committee. **Outstanding Actions** The committee reviewed the outstanding actions. It was agreed that actions NOV25.2 and JAN26.2 could now be closed. **Actions** • **EC** to close actions NOV25.2 and JAN26.2
5. 5.1	**Items for Ratification** **Treasurers Report and Q4 Reporting 2025/26**

	The Q4/ End of Year Treasurer's Report for 2025/26 was approved. The committee noted the current financial position and upcoming end of year accounts timeline.
6.	**CPH Workstreams 2025/26: Celebrating Achievement** The Committee noted the summary of achievements across 2025–26 and welcomed the progress made during the year. It was agreed that future reports would benefit from adopting a similar visual format, with additional emphasis on demonstrating the value added for contractors.
8. **8.1**	**CPH Workstreams 2026/27** The committee noted the update on the 2026/27 workstream planning approach and the Quarter 1 plan. **Actions** • **IH** to create infographics for future workstream updates. **Central East Update and member questions from Chief Officer video update** The Committee noted the letters that had been sent relating to medicines shortages to MPs and CPE, which had also been referenced during the Chief Officer's update. Members commented that additional supporting information following the Chief Officer's update would have been helpful to support further discussion. The Committee agreed that CPH should avoid dedicating excessive time to national medicines supply issues that cannot be influenced locally in isolation. Instead, the focus should shift towards working with the ICB as is in development regarding local guidance, gathering patient experiences, and influencing GP prescribing and operational processes where CPH can add value and have greater impact. **Actions** • **NS** to follow up the issue as outlined in the CPE letter at the 9 June CPE regional event and to create contractor guidance on best practice approaches for managing medicines shortages and SSPs. • **IH** to gather patient stories from pharmacies relating to medicines shortages and their impact on patients to support future advocacy work. The Committee received an update on Central East ICB Strategic Engagement and Collaborative Governance and noted the active key workstreams and strategic priorities currently being progressed. The Committee was supportive of the "Memorandum of Understanding for Federated Working in Central East", subject to feedback being taken to the Central East forum to update the MOU that reflected the Committee's discussion regarding consensus-based decision-making and the voting process.

	The Committee also noted the full report outlining the strategic engagement undertaken with Jan Thomas and the ICB team. **Actions** • **HM/RS** to take the feedback on the Central East MOU to the Central East Forum regarding consensus-based decision-making and the voting process.
8.2	**Public Health Role** The Committee noted the proposed Public Health Integration and Development Officer role that would be wholly funded by Public Health Hertfordshire and the associated CPH hosting arrangement, recognising the strategic opportunity this presents for both CPH and community pharmacy. The Committee discussed the importance of ensuring that the opportunity translates into tangible and measurable outcomes for contractors.
9.	**CPE Update** Anil Sharma, East of England CPE Representative, provided an update from Community Pharmacy England (CPE). The Committee noted that, despite significant efforts from all parties involved, negotiations regarding the arrangements for the 2026/27 Community Pharmacy Contractual Framework (CPCF) remain ongoing and have not yet concluded. It was also noted that Government requirements mean that negotiations must remain confidential at this stage. The Committee discussed key priorities they would wish to see reflected within any future contractual arrangements, including an increase to the Single Activity Fee (SAF) and the reintroduction of a monthly establishment payment to provide greater financial stability for community pharmacy contractors. Members acknowledged the complexity and difficulty of the current negotiating environment, recognising the challenge of balancing the risks of taking a stronger position with the potential immediate consequences for contractors, against accepting the best achievable offer where limited meaningful change may result. The Committee expressed its support for the negotiating committee given the challenging circumstances.
10.	**South and West Herts Health Care Partnership (SWH HCP): Redesigning Health and Care Pathways** Rytis Kalinauskas, Director of Strategy at West Hertfordshire Teaching Hospitals NHS Trust, presented an update on the redesign of health and care pathways and the work currently being undertaken within the South and West Herts Health Care Partnership (SWH HCP). The initial focus areas were identified as Dermatology, Gynaecology, and MSK / T&O / Pain services. Rytis welcomed feedback from the committee on where community pharmacy could support these pathways. Dermatology and MSK / T&O / Pain services were highlighted as key areas in which community pharmacies across Hertfordshire could make a valuable contribution.

	The Committee noted that the project remains in the design phase and that no specific implications for community pharmacy workload have yet been determined. The Committee emphasised the importance of community pharmacy involvement at an early stage of pathway design and requested continued engagement as the work develops. **Actions** • **HM/ NS** to continue engaging with the programme and review the current proposed models to identify where community pharmacy can best contribute, whether further committee input is required, and how this aligns with existing workstreams.
11.	**Central East ICB Update** Ed Knowles, Director of Neighbourhood, Place and Partnerships – Hertfordshire, Central East ICB, was introduced to the Committee and provided an update on the newly established Central East ICB, including its leadership team and organisational structures. The Committee noted the evolving nature of the future landscape and the current level of uncertainty while structures and priorities continue to be developed and mapped out. Ed Knowles confirmed that he would act as the primary contact for CPH and welcomed ongoing engagement and communication, including attending future CPH meetings. **Actions** • **EC** to share Ed Knowles' presentation with the Committee. • **EC** to ensure a further invites are sent to Ed Knowles for CPH committee meetings.
12.	**Teach and Treat Update** Cathy Geeson, East of England Teach and Treat Project Lead, presented the Phase 2 Highlight Report for the Teach and Treat programme. It was noted that Cathy was employed by Community Pharmacy Hertfordshire under a Memorandum of Understanding with Central East ICB. The Committee noted that a total of 26 trainees had been allocated across the East of England, comprising 24 Teach and Treat funded trainees with four in Hertfordshire and an additional two trainees whose Designated Prescribing Practitioner (DPP) funding was provided by the former Cambridgeshire and Peterborough ICB. The Committee discussed the importance of ensuring that future cohorts prioritise permanent Hertfordshire pharmacists and contractors to maximise local workforce development and long-term benefit to community pharmacy within the area. The committee also discussed ways in which independent prescribing community pharmacists can use their skills whilst there is no NHS commissioned service in place. **Actions** • **HM** to reshare the Teach and Treat Memorandum of Understanding (MOU) with the Committee and any feedback received from the committee with Cathy Geeson about embedding learning.

	• **Committee** members to provide suggestions on how to embed learning independent prescribing into practice. .
13.	**AOB** **Delegated Responsibilities and LPC Decision Making** The Committee revisited the Delegated Responsibilities and LPC Decision Making document to ensure continued clarity for Committee members and the office regarding decision-making responsibilities and processes. Following review and discussion, the Committee agreed that the document remains fit for purpose and should continue to be used moving forward. The Committee noted that these are evolving arrangements within the Central East collaborative landscape and these governance processes will be reviewed as developments progress. **Action** • **Exec Team** to discuss how CPH will work within the Central East Forum.
	Next Meeting Wednesday 9 September 2026 (9am to 5pm) - The Fielder Centre, Hatfield, AL10 9TP

Action ID	Topic	Action Required	Owner	Deadline Date	Key Stakeholders	Achievements	Challenges
MAR26.1	10 Year Plan	Revise the 10-year plan document and circulate to committee for ratification	HM	30/05/2026		Sent by email to committee members on 27 August 2026. **Please respond by 18 September 2026** CLOSE AFTER THIS	Delayed due to staff changes, staff sickness annual leave and AGM event.
MAR26.2	10 Year Plan	Promote the CPH 10-year Plan to contractors at the AGM	HM	16/07/2026			As above - did not get in time for the AGM - will promote separately when ratfified.
JUL25.1	Contraception (Pharmacy First)	Develop communications to contractors re contraception service sharing this with stakeholders particularly noting initiation, 3-month supply and good practice.	CP	31/05/2026		Case studies ongoing with 4 completed to date (18/12/2025) Aligned with ICB via their comms team (Oct 2025) Contraception workshop for contractors organised for April 2026 where a suite of supportive materials for GP practices will be launched. Draft toolkit now shared with Chief Officer and Deputy Chief Officer. Aim to launch in September 2026.	Delayed due to staff changes, staff sickness annual leave and AGM event.
SEP25.1	Finance	CPH office to undertake the necessary next steps to set up the Metro bank account.	HM	31/05/2026	VN/RS	Attended Metro Bank. Need wet signatures on minutes and need to attend with at least two of us to set up account.	Delayed due to staff changes, staff sickness annual leave and AGM event. Wet signatures collected but now date has run out. New signatures to be collected at September meeting and will be progressed in Autumn 2026.
NOV25.5+A6 :H6	Finance	Discuss the Internal Financial Controls Policy with the Executive Team and submit the revised version to the Committee for ratification.	HM	31/08/2026	Exec Team	CLOSE AFTER SEPT MEETING AND FINAL VERSION SENT TO COMMITTEE Discussed with Exec team on 23 March, HM to implement the agreed changes, refer to the Finance Guide for the recommended signatory sign-off protocol, and circulate a clean version (without tracked changes). Has been shared with finance subcommittee for review at September meeting for sign off by committee by email. .	Due to workload for Central East, annual leave, sick leave this has been delayed.
JAN26.5	Capacity Plan	Visit Community Pharmacy Greater Manchester to gain understanding of their way of working	HM	30/10/2026	CPGM	NS met with CPGM on 24 March, shared learnings with the team, and has since reflected on and improved ways of working to be more efficient, proactive, and forward-planning.	HM still to meet with Luvjit to understand their primary care collaborative and how this works.
MAY26.8	Medicine Shortages	To raise the issue at the 9 June CPE regional event and to create contractor guidance on best practice approaches for managing medicines shortages and SSPs.	NS	30/10/2026	CPE		Delayed due to staff changes, staff sickness, annual leave and AGM event. Pushed back to October 2026
SEP25.2	Finance	Confirm written policy to address the risk that remain high and circulate to members for information.	IH	11/09/2026	VN	CLOSE AFTER SEPT MEETING To be presented at September finance subcommittee.	
MAR26.5	CPH Governance	Review the remuneration process for CPH officers	HM	30/09/2026	Finance and Governance Subcommittees	CLOSE AFTER SEPT MEETING Added as agenda item for governance and finance subcommittees at September meeting.	
NOV25.4	Auditing	VN to conduct audit of current workload.	VN	30/09/2026	HM, Exec Team	CLOSE AFTER SEPTE MEETING All officers have been recording their hours since April 2026 and this will be presented to the governance and finance subcommittees at September meeting.	
May26.10	Central East	Exec Team to discuss how CPH will work within the Central East Forum.	Exec Team	30/09/2026			
MAY26.9	Medicine Shortages	Gather patient stories relating to medicines shortages and their impact on patients to support future advocacy work.	IH	30/09/2026		Will be tied into Contractor guidance comms	Deadline may need to be pushed back due to staff sickness.
MAR26.3	Medicine Shortages	Liaise with HWE ICB to discuss and present the local medicines shortages response framework to minimise the impact of national medicine shortages on community pharmacies and patients	HM	30/10/2026	ICB	Met with Anurita and largely supportive of suggestions with some improvements on phrasing but as the ICB is now Central East - take the suggested areas to other LPCs and send a unified request to the ICB from us all. on central east workplan, will be reported with central east	Subject to discussion and agreement with other CPL COs in Central East.
MAR26.15	Resources	Investigate the creation of a "Local Surgery Directory" containing direct-dial numbers for contractors to bypass general reception queues	CP	30/10/2026			
MAR26.16	Resources	Create a webpage to provide clear and transparent information on local Independent Prescribing activities	NS	30/10/2026	IH		
MAY26.3	SWH HCP	Continue engaging with the programme and review the current proposed models to identify where community pharmacy can best contribute , whether further committee input is required, and how this aligns with existing workstreams	HM/NS	02/11/2026	SWH HCP	Further meeting booked with Rytis 4 Sept to discuss how our proposal may align with their proposed models	
NOV25.6	ECG testing	HM to scope the ECG testing service and collaborate with the interested GP to develop a pilot, subject to financial viability.	HM	31/03/2027	GP		
MAR26.9	CPH Objectives	Build a relationship with the GP collaborative	HM	31/03/2027		Relationship being built	

Action complete but next steps to be ratified at the next committee meeting
To be completed by next **committee meeting**
To be completed within the **next quarter**
To be completed within **six months**
To be completed within **a year**

09 September 2026

Title	Engagement Survey
Purpose	To provide Committee with a summary of feedback received from contractors through the 2026 engagement survey and AGM evaluation, highlighting levels of satisfaction, key support priorities and alignment with the Committee's agreed workplan and KPIs.
Report author	Helen Musson
Short summary of the paper	Community Pharmacy Hertfordshire undertook an engagement exercise following the 2026 AGM, comprising an AGM evaluation survey and a series of contractor engagement polls distributed via WhatsApp. Feedback was overwhelmingly positive. Contractors reported high levels of satisfaction with Community Pharmacy Hertfordshire's support, communications and responsiveness, with 97.8% rating Community Pharmacy Hertfordshire either 4 or 5 stars for overall engagement and support. Communications and updates were identified as the strongest contributor to positive engagement, whilst regulatory requirements, clinical services and training and education emerged as the areas where contractors would most value support during the next 12 months. Feedback from AGM attendees indicated that the AGM was positively received, with attendees particularly valuing Independent Prescribing discussions, networking opportunities and updates on Community Pharmacy Hertfordshire's activities and priorities. The findings provide assurance that the Committee's current workplan remains closely aligned with contractor priorities and expectations. **Engagement Survey Findings** **Overall Engagement with Community Pharmacy Hertfordshire** **45 responses** **Rating** / **Responses** ★★★ / 1 ★★★★ / 2 ★★★★★ / 42 **Key finding:** 97.8% of respondents rated Community Pharmacy Hertfordshire either 4 or 5 stars, with 93.3% awarding a 5-star rating.

What Has Most Influenced Your Rating?
54 responses

Response	Percentage
Communications and updates	40.7%
Service support	24.1%
Access to advice and guidance	14.8%
Training and events	11.1%
Representation and advocacy	5.6%
Networking opportunities	3.7%

Key finding:
Communications and updates were identified as the strongest contributor to positive engagement, followed by service support and access to advice and guidance.

What Support Would Have the Biggest Positive Impact Over the Next 12 Months?
91 responses

Response	Percentage
Regulatory requirements	28.6%
Clinical services	24.2%
Training and education	18.7%
Service delivery	8.8%
Pharmacy First	6.6%
Workforce and recruitment	5.5%
Leadership and management	3.3%
Communication and resources	2.2%
Digital systems	2.2%

Key finding:
Regulatory requirements, clinical services and training and education accounted for over 70% of responses, indicating these are the areas where contractors most value support from Community Pharmacy Hertfordshire.

Accessibility of Information and Communications
43 responses

Response	Percentage
Very difficult	2.3%
Neither easy nor difficult	2.3%

Easy	18.6%
Very easy	74.4%

Key finding:
93.0% of respondents found information shared by Community Pharmacy Hertfordshire easy or very easy to find and understand.

This result exceeds the Committee's KPI target of achieving an 80% positive rating regarding the ease of finding information and digesting visual updates.

AGM Evaluation Feedback
Attendees were asked to provide feedback on the AGM itself.

Overall AGM Rating
Among respondents who provided a rating:

- 4 respondents rated the AGM as **Excellent**
- 4 respondents rated the AGM as **Good**
- 1 respondent rated the AGM as **Fair**

Key finding:
89% of respondents rated the AGM as Good or Excellent.

Awareness of Community Pharmacy Hertfordshire's Work
Among respondents who answered the question:

- 5 reported feeling **Very Well Informed**
- 1 reported feeling **Well Informed**
- 3 reported feeling **Somewhat Informed**

The majority of attendees reported that the AGM improved their understanding of Community Pharmacy Hertfordshire's work, achievements and priorities.

Most Valuable Aspects of the AGM
The most commonly referenced benefits were:

- Independent Prescribing updates and discussion.
- Independent Prescribing and supervision requirements.
- Networking opportunities.
- Updates on Community Pharmacy Hertfordshire's activities and future priorities.

Suggestions for Future Topics
Suggestions for future events included:

- Independent Prescribing implementation.
- Implications of forthcoming contractual changes.
- Funding and payment arrangements.
- Practical support to deliver new and emerging services.

Discussion

	The engagement survey demonstrates very strong levels of contractor satisfaction and confidence in Community Pharmacy Hertfordshire's support, communication and engagement activities. The findings align closely with the Committee's existing 2026/27 workplan and KPI framework. In particular, the survey validates current workstreams relating to: • Communications, visual updates and contractor engagement (KPIs 17-20). • Contractor implementation support and contractual guidance (KPI 11). • Clinical services, Pharmacy First and service development (KPIs 7, 8 and 12). • Independent Prescribing and DPP support (KPI 14). • Workforce development and training (KPIs 15 and 16). • Representation, advocacy and stakeholder engagement (KPIs 1-3 and 21). The survey therefore provides assurance that the Committee's agreed priorities remain focused on areas of greatest importance to contractors. The principal theme emerging from free-text comments which is not explicitly reflected within the KPI framework is ongoing concern regarding pharmacy funding and financial sustainability. Several respondents highlighted a desire for stronger advocacy on funding issues and greater information regarding future funding arrangements. While elements of this are reflected through representation and political engagement activities, the feedback suggests this remains an area of significant importance to contractors.
Recommendations	Committee is asked to: 1. Note the findings of the engagement survey and AGM evaluation. 2. Recognise that contractor priorities identified through the survey align closely with the Committee's existing 2026/27 workplan and KPI framework. 3. Note the continued importance of advocacy and communications relating to pharmacy funding and sector sustainability.

9 September 2026

Title	Treasurers Report
Purpose	To update Committee Members on Community Pharmacy Hertfordshire's finances for Quarter 1 (FY2026-27) and provide assurance regarding the organisation's financial position.
Report authors	Vinesh Naidoo and Helen Musson
Summary of the paper	Quarter 1 closed with a deficit of **£3,355**, compared with a budgeted deficit of **£6,016**, resulting in a favourable variance of **£2,661**. Income was marginally ahead of budget and expenditure remained slightly below budget. Overall, the organisation remains in a strong financial position, with healthy reserves and cash balances significantly above the minimum reserve requirement. **New Management Accounts Format** Members will note that the Quarter 1 management accounts are presented in a revised format. Following the migration from Sage to Xero, management accounts are now generated directly from the accounting system rather than being manually collated and reformatted. This approach provides a number of benefits: • Improved transparency through direct reporting from the accounting system. • Greater consistency between management reports and the underlying accounting records. • Reduced risk of manual error. • More efficient and timely financial reporting. Whilst the presentation differs from previous quarters, the information provided continues to satisfy the requirements of the Finance Guide by: • Reporting actual income and expenditure against the approved budget. • Highlighting material variances and providing explanatory commentary. • Presenting year-to-date financial performance. • Providing visibility of the organisation's cash position and reserves. • Supporting effective financial oversight by Committee Members. The revised format therefore represents a change in presentation rather than a change in the level of financial oversight or governance. The Treasurer is satisfied that the new reporting format continues to provide Committee Members with appropriate assurance regarding the financial management of Community Pharmacy Hertfordshire.

Financial Performance (Quarter 1 FY2026-27)

Metric	Quarter 1 Actual	Quarter 1 Budget
Total Income	£113,337	£112,854
Total Expenditure	£116,147	£116,476
Surplus/(Deficit)	(£3,355)	(£6,016)
Variance	**£2,661 favourable**	

Overall financial performance for Quarter 1 was positive. Income and expenditure were both closely aligned with budget expectations, resulting in a financial position that was slightly better than budget. Whilst some variances remain due to timing differences and outstanding adjustments, no significant financial concerns have been identified at this stage of the financial year.

Treasurer's Commentary

Income

Total income for Quarter 1 was £113,337, slightly exceeding budget by £483. Statutory Levy income, which represents the largest source of income for the organisation, exceeded budget by £556 and was received broadly in line with expectations. Event sponsorship income also continues to perform strongly and remains significantly ahead of budget. An outstanding prior-year accrual remains to be processed by the accountant and will be reflected in a future reporting period.

Staffing

Staff employment costs remain below budget primarily because salaries and pension costs are lower than originally budgeted. National Insurance costs also remain below budget due to the application of Small Employers Relief during the first quarter. These variances are expected to reduce as the financial year progresses.

Meetings and Member Costs

Meeting expenditure remains significantly below budget. This is largely due to outstanding member claims yet to be submitted and lower levels of expenditure across several budget areas during the first quarter. Members are reminded to submit claims promptly to ensure management accounts accurately reflect organisational expenditure and support effective financial forecasting.

Office and Administration

Office expenditure remains below budget overall. Whilst software costs are slightly higher than budget due to ongoing system requirements and the transition to Xero, these costs are expected to be accommodated within the approved annual budget. Several office-related costs also reflect timing differences which are expected to normalise during the year.

Levies and Licence Fees

The principal variance within this budget area relates to the timing of the CPE levy payment. Accountancy costs currently include expenditure associated with implementation and training for Xero. It is anticipated that a proportion of these

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<tr><td></td><td>costs will be reallocated to the Staff Training budget heading once we complete the relevant adjustments.

Finance
Corporation tax expenditure is higher than budget due to increased interest generated from organisational reserves. This liability has already been settled in full.

Cash Position & Reserves (as at 25 August 2026)
<table><tr><th>Account</th><th>Balance</th></tr><tr><td>Current Account</td><td>£154,709.67</td></tr><tr><td>Savings Account</td><td>£35,407.16</td></tr><tr><td>Total Cash Assets</td><td>£190,116.83</td></tr></table>Community Pharmacy Hertfordshire continues to maintain a strong cash position with total cash assets of £190,116.83 as at 25 August 2026.

Note on Reserves
CPH maintains a policy of holding reserves equivalent to approximately three months of planned expenditure.

Based on the approved annual expenditure budget of £469,811, the minimum reserve requirement is approximately £117,453.

With total cash assets of £190,116.83, the organisation remains comfortably above its reserve requirement. This provides financial resilience, supports day-to-day operational commitments and enables the organisation to respond effectively to unexpected expenditure pressures.

The Treasurer is therefore satisfied that Community Pharmacy Hertfordshire remains in a secure financial position and continues to meet the requirements of its reserves policy.</td></tr>
<tr><td>Recommendations</td><td>The Committee is asked to:
1. Note the Quarter 1 financial position.
2. Note the revised management accounts format following the migration from Sage to Xero.
3. Approve the Treasurer's Report and accompanying Quarter 1 Management Accounts.</td></tr>
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- **Appendices**
  - Q1 2026/27

Budget Variance

Community Pharmacy Hertfordshire
For the 3 months ended 30 June 2026

Account	Apr-Jun 2026	Apr-Jun 2026 Overall Budget	Variance	Variance %	Notes re variances	Year to date spend as at time of meeting preparation	2026-27 CPH Budget	Variance	Variance %
Income									
Statutory Levy	110,338.11	109,782.00	556.11	0.51%		147,117.50	439,128.00	(292,010.50)	-66.50%
Event Sponsorship	2,954.00	558.00	2,396.00	429.39%		4,710.00	6,280.00	(1,570.00)	-25.00%
Bank Interest	44.54	120.00	(75.46)	-62.88%	Have not yet identified alternate savings account	74.59	480.00	(405.41)	-84.46%
Other Income	0.00	2,394.00	(2,394.00)	-100.00%	Missing accrual from last year - accountant to update	47,500.00	9,572.00	37,928.00	396.24%
Total Income	**113,336.65**	**112,854.00**	**482.65**	**0.43%**		**199,402.09**	**455,460.00**	**(256,057.91)**	**-56.22%**
Cost of Sales									
Central East Expenses	544.00	2,394.00	(1,850.00)	-77.28%	Not all expenses for meetings have yet been added	635.20	9,572.00	(8,936.80)	-93.36%
Total Cost of Sales	**544.00**	**2,394.00**	**(1,850.00)**	**-77.28%**		**635.20**	**9,572.00**	**(8,936.80)**	**-93.36%**
Gross Profit	**112,792.65**	**110,460.00**	**2,332.65**	**2.11%**		**198,766.89**	**445,888.00**	**(247,121.11)**	**-55.42%**
Expenditure									
Staff Employment									
Officers Honoraria	2,919.94	2,919.00	0.94	0.03%		3,893.28	11,676.00	(7,782.72)	-66.66%
Chief Officer Salary	20,534.38	21,057.00	(522.62)	-2.48%	Not maximum salary	27,379.17	84,228.00	(56,848.83)	-67.49%
Staff Salaries	37,835.96	43,377.00	(5,541.04)	-12.77%	Not maximum salary	51,528.31	173,508.00	(121,979.69)	-70.30%
Employers NI	0.00	5,748.00	(5,748.00)	-100.00%	Small Employers relief applied for first quarter	201.47	22,992.00	(22,790.53)	-99.12%
Employers Pension	1,157.17	1,854.00	(696.83)	-37.59%	Staff pension not maximum and not applied to all staff	1,528.37	7,416.00	(5,887.63)	-79.39%
Staff Expenses	323.12	468.00	(144.88)	-30.96%	Late payments - should resolve	541.13	1,872.00	(1,330.87)	-71.09%
Staff Training	0.00	624.00	(624.00)	-100.00%		0.00	2,496.00	(2,496.00)	-100.00%
Staff Rewards	75.04	249.00	(173.96)	-69.86%		169.55	996.00	(826.45)	-82.98%
HR and Recruitment	103.51	501.00	(397.49)	-79.34%		103.51	2,004.00	(1,900.49)	-94.83%
Total Staff Employment	**62,949.12**	**76,797.00**	**(13,847.88)**	**-18.03%**		**85,344.79**	**307,188.00**	**(221,843.21)**	**-72.22%**
Office									
Rent and service charges	1,290.31	1,989.00	(698.69)	-35.13%		2,616.35	7,956.00	(5,339.65)	-67.11%
Cleaning	0.00	201.00	(201.00)	-100.00%	Will appear in next quarter	80.00	800.00	(720.00)	-90.00%
Office and Public Liability Insurance	383.06	0.00	383.06	0.00%	Paid in full - resolve by year end	383.06	0.00	383.06	0.00%
Electricity	180.39	207.00	(26.61)	-12.86%		254.26	828.00	(573.74)	-69.29%
IT Support and Software	1,596.50	1,287.00	309.50	24.05%	Will resolve by year end	2,487.58	5,148.00	(2,660.42)	-51.68%
IT Hardware and Office Furniture	0.00	126.00	(126.00)	-100.00%		0.00	504.00	(504.00)	-100.00%
Office and Equipment Repairs (contingency)	0.00	375.00	(375.00)	-100.00%		0.00	1,500.00	(1,500.00)	-100.00%
Total Office	**3,450.26**	**4,185.00**	**(734.74)**	**-17.56%**		**5,821.25**	**16,736.00**	**(10,914.75)**	**-65.22%**
Meetings									
CPH Committee meeting member expenses	960.00	3,200.00	(2,240.00)	-70.00%	Members not yet claimed for May committee meeting	960.00	16,000.00	(15,040.00)	-94.00%
CPH Committee (venue hire and/or catering)	702.00	705.00	(3.00)	-0.43%		702.00	3,525.00	(2,823.00)	-80.09%
Travel expenses (member)	0.00	375.00	(375.00)	-100.00%		0.00	1,500.00	(1,500.00)	-100.00%
Training (member)	(301.90)	879.00	(1,180.90)	-134.35%		(301.90)	3,516.00	(3,817.90)	-108.59%
Other meetings (member)	0.00	3,834.00	(3,834.00)	-100.00%		0.00	15,336.00	(15,336.00)	-100.00%
Other meetings (venue hire and/or catering)	190.00	1,425.00	(1,235.00)	-86.67%		4,825.80	5,700.00	(874.20)	-15.34%
Total Meetings	**1,550.10**	**10,418.00**	**(8,867.90)**	**-85.12%**		**6,185.90**	**45,577.00**	**(39,391.10)**	**-86.43%**
Insurance, Stationery, Telephone etc									
Directors and Officers Insurance	0.00	126.00	(126.00)	-100.00%		0.00	504.00	(504.00)	-100.00%
Printing and stationery	(1.76)	363.00	(364.76)	-100.48%		132.91	1,452.00	(1,319.09)	-90.85%
Postage	0.00	87.00	(87.00)	-100.00%		0.00	348.00	(348.00)	-100.00%
Telephone	526.07	663.00	(136.93)	-20.65%		1,013.79	2,652.00	(1,638.21)	-61.77%
Gifts	0.00	150.00	(150.00)	-100.00%		0.00	600.00	(600.00)	-100.00%
Total Insurance, Stationery, Telephone etc	**524.31**	**1,389.00**	**(864.69)**	**-62.25%**		**1,146.70**	**5,556.00**	**(4,409.30)**	**-79.36%**
Levies and License Fees									
CPE Levy	46,448.00	23,223.00	23,225.00	100.01%		46,448.00	92,896.00	(46,448.00)	-50.00%
Accountancy Fees	1,104.00	420.00	684.00	162.86%	We have started paying monthly to our accountant rather than at year end - this looks over inflated as some of it is for training costs associated with xero will will be transferred to staff training.	1,380.00	1,680.00	(300.00)	-17.86%
ICO	47.00	12.00	35.00	291.67%	ICO fee increased.	47.00	48.00	(1.00)	-2.08%
Total Levies and License Fees	**47,599.00**	**23,655.00**	**23,944.00**	**101.22%**		**47,875.00**	**94,624.00**	**(46,749.00)**	**-49.41%**
Finance									
Bank Charges	17.00	27.00	(10.00)	-37.04%		34.00	108.00	(74.00)	-68.52%
Corporation Tax Expense	57.57	5.00	52.57	1051.40%	Increase due to increase in savings. Paid in full.	57.57	22.00	35.57	161.68%
Total Finance	**74.57**	**32.00**	**42.57**	**133.03%**		**91.57**	**130.00**	**(38.43)**	**-29.56%**
Total Expenditure	**116,147.36**	**116,476.00**	**(328.64)**	**-0.28%**		**146,465.21**	**469,811.00**	**(323,345.79)**	**-68.82%**
Surplus/(deficit) after tax	**(3,354.71)**	**(6,016.00)**	**2,661.29**	**44.24%**		**52,301.68**	**(23,923.00)**	**76,224.68**	**318.63%**

09 September 2026

Title	CPH AGM Minutes
Purpose	To ratify the minutes of the 16 July 2026 AGM
Report author	Niru Sivanesan
Short summary of the paper	**CPH AGM Minutes 2026** The AGM minutes have been added to the e-news and website for comment from contractors in attendance at the AGM. No comments or suggested amendments were received from community pharmacy contractors. For governance purposes the AGM minutes are being brought to the committee for approval.
Recommendations	CPH members are asked to: • Approve the minutes from the 16 July 2026 AGM.

Appendices

- AGM Minutes 2026

AGM MINUTES

16 July 2026
The Fielder Centre, Hatfield

Present
Rachel Solanki (Chair)
Karsan Chandegra
Girish Mehta
Vinesh Naidoo
Vikash Patel
Sheelan Shah

Professional
Helen Musson
Niru Sivanesan
Eve Coletta
Chloe Papadopoulos

Apologies
Mohamed Moledina
Parag Oza
Viral Patel
Adrian Price
Suraj Varia

Guests
James Woods, CPE
Reena Saini, GPHC
Jasmine Shah, NPA
Janet Weir, CEICB
Hollie Ryder, NPA
Sokoya Babatunde, Pharmacy contractor in Essex

Community Pharmacy Contractors Present

Abell Chemist	Cristals Pharmacy
Acorn Pharmacy	Crown Pharmacy
Asda Pharmacy	FT Taylor Pharmacy
Boots Pharmacy	Gate2Pharma
Byrons Pharmacy	Globe Pharmacy
CareRx Pharmacy	Great Ashby Pharmacy
Chemilab Limited	Highfield Pharmacy
Chiswell Pharmacy	IMED Pharmacy
Johns and Kelynack Pharmacy	Riverside Pharmacy
Letchworth Pharmacy	S. L. Anderson Chemist
Lex Pharmacy	Speedwell Pharmacy

Manor Pharmacy	Swan Pharmacy
Metro Pharmacy	Tee Kay Enterprises Ltd
Morrisons	Tesco Potters Bar
Niti Pharmacy	Village Pharmacy
Oaks Cross Pharmacy	Ware Cross / Andrews
Pyramid Pharmacy	Wellswood Pharmacy
Quadrant Pharmacy	Woods Pharmacy

Minute No.	Agenda Item
1	**Words from our sponsors & Networking** – Gurmeet Khaira at Cipla, Rizwan Akhtar at RA Accountants and Amit at Ziplanerx Limited. We would like to thank our other sponsors who contributed and had a stand: Exeltis, Cambrian Alliance, Viatris, Titan PMR, Meditech and Chiesi
2	**WELCOME** Chair welcomed everyone to the meeting.
3	**CONFIRMATION of 2025 AGM MINUTES** The minutes were approved and signed off by the Chair. They are on the CPH website.
4	**ANNUAL REPORT** Chair presented the Annual Report and reported on CPHs' achievements. Chair reminded everyone that CPH is here to support all contractors. Chair thanked the committee for their support and office staff for their continued work.
5	**APPROVAL of CPH ACCOUNTS 2024/25** The Statement of Accounts and supporting papers were circulated to all contractors at least 30 days prior to the meeting. Advance votes received were: Well (2), Morrisons (2), Tesco (12), and Boots (28). A further 31 votes were cast by pharmacies via paper ballot at the meeting. All votes received were in favour of approving the accounts. There were no abstentions and no votes against. The accounts were approved.
6	**Panel 1: Supervision, Delegation and Operational Reality** Confirmed Expert Panel: National Pharmacy Association (NPA) and General Pharmaceutical Council (GPhC). Panel members Reena Saini and Jasmine Shah discussed December deadline and how to safely manage workflow between RPs and technicians, update your SOPs under pressure, and protect your professional liability during pharmacist absences.
7	**Panel 2: Independent Prescribing (IP) Local and National Outlook** Confirmed Expert Panel: National Pharmacy Association (NPA) and Local Pathfinder IPs. Panel Members Hollie Ryder, Janet Weir, Babatunde Sokoya, Bipan Sharma & Hok-yan Wong discussed how to prepare for the upcoming Autumn national IP

	rollout and transitioning from rigid PGDs to autonomous prescribing, building trust with local GP practices, and whether IP is commercially viable for business.
8	**Navigating the 2026/27 Contract** James Wood provided an overview of the 2026/27 Community Pharmacy Contract, highlighting its complexity, common pitfalls to avoid, and practical actions contractors can take to maximise available funding and support the sustainability of their pharmacies. An interactive workshop followed, with attendees working in small groups to discuss a series of questions relating to the contract. Feedback from each group was shared with the wider meeting and will be collated to inform future work. The session concluded with a question-and-answer discussion, during which James Wood responded to attendees' queries and provided further clarification on key aspects of the contract.
9	**CPH AWARDS of COMMUNITY PHARMACY in HERTFORDSHIRE** Community pharmacies were presented with awards to recognise their achievements across the following sectors: • *Community Pharmacy of the Year 2025/26* Winner – **Riverside Pharmacy, Rickmansworth** Highly Commended – **Wellswood Pharmacy, Crescent Pharmacy, CareRx Pharmacy, Tesco Pharmacy (Potters Bar), Barnes Pharmacy and JE Williamson Chemist** • *Contraception Award 2025/26* Winner – **SL Anderson, Stevenage** Highly Commended – **Great Ashby, Superdrug (Hemel Hempstead), Boots (Watford, Harlequin) and Asda (Hatfield):** • *Hypertension Award- 2025/26* Winner – **Wellswood Pharmacy, Borehamwood** Highly Commended – **Stevenage Pharmacy, Boots (Watling Street), Tesco (Potters Bar), IMED Pharmacy (St Albans), Ridge House Pharmacy** • *Clinical Integration Award-2025/26* Winner – **SL Anderson, Stevenage** Highly Commended – **Letchworth Pharmacy, Johns & Kelynack Pharmacy, Prestwick Chemist and Tesco Pharmacy (Potters Bar)**
10	Chair and Chief Officer thanked everyone for attending. The meeting was formally closed.

09 September 2026

Title	Meeting Arrangements
Purpose	To seek CPH Committee members' approval of proposed meeting arrangements, including the 2027/28 Committee meeting schedule, arrangements for a Special General Meeting of contractors, and CPH representation at the Conference of LPC Representatives.
Report author	Niru Sivanesan and Helen Musson
Short summary of the paper	This paper sets out proposed meeting arrangements for CPH, including the Committee meeting schedule, arrangements for convening a Special General Meeting of contractors to consider adoption of the revised LPC Constitution, and representation at the 2026 Conference of LPC Representatives. **Committee Meeting Schedule 2027/28** The 2027/28 CPH Committee meeting schedule is proposed below, based on the scheduling principles agreed by the Committee in the previous year. A consistent meeting cycle supports effective forward planning, enables committee members and guests to manage their availability, and facilitates attendance from relevant representatives. The proposed scheduling principles are to: • Hold meetings on the second Wednesday of alternate months where possible. • Avoid major religious holidays where possible. • Avoid clashes with CPE Committee meetings to support attendance from CPE regional representatives. • Avoid school holiday periods where possible. • Ensure appropriate separation from the CPH Annual General Meeting (AGM) period. The proposed 2027/28 CPH Committee meeting dates are: • 13 January 2027 • **14 April 2027** • 12 May 2027 • 8 September 2027 • 10 November 2027 • 12 January 2028 • 8 March 2028 As 2027 is an election year, it is proposed that no Committee meeting takes place in March 2027. Instead, the first meeting of the new Committee term will be held in April 2027. Members should note that, because of this revised meeting schedule, the January 2027 Committee meeting will be the final meeting of the current Committee term and therefore the last opportunity

	for the Committee to formally ratify or approve any outstanding decisions before the conclusion of the term. In recognition of the contribution made by members completing their term of office, and to provide an opportunity to acknowledge those leaving the Committee, a separate celebration and recognition event will be held in March 2027. To support forward planning, it is proposed that the meeting cycle be approved through to the end of the 2027/28 financial year (March 2028). The CPH Annual General Meeting will take place separately on: • 7 July 2027 The proposed schedule has been reviewed against key calendar considerations, including public holidays, school holiday periods and major religious observances. **Special General Meeting – LPC Constitution** Community Pharmacy England (CPE) has issued a revised model LPC Constitution and supporting documentation. In accordance with the current CPH Constitution, any constitutional amendment must be approved by pharmacy contractors at a Special General Meeting. It is proposed that CPH convene an online Special General Meeting via Microsoft Teams on **Wednesday 23 September 2026 from 8.00pm to 8.30pm**. Subject to Committee approval, the Office Team will issue the formal notice of meeting and supporting documentation provided by CPE in accordance with constitutional requirements. **Conference of LPC Representatives 2026** The Conference of LPC Representatives will take place in London on **Thursday 26 November 2026 from 11.00am to 4.00pm**. CPH is entitled to nominate four representatives to attend on behalf of Hertfordshire contractors.
Recommendations	CPH Committee members are asked to: 1. Ratify the proposed Committee meeting dates for 2027/28. 2. Approve the convening of a Special General Meeting of contractors on 23 September 2026 to seek approval for adoption of the revised LPC Constitution. 3. Agree the four CPH representatives to attend the Conference of LPC Representatives 2026 on 26 November 2026.

Community Pharmacy Hertfordshire

CPH Finance and Audit Subcommittee 09 September 2026

Item	Internal Financial Controls Policy
Report author	Helen Musson
Purpose	To review the draft Internal Financial Controls Policy and agree any amendments before recommending it to the Committee for approval.
Background	The draft policy has been developed to strengthen CPH's financial governance arrangements and provide a clear framework for financial controls, authorisation, expenditure approval, procurement, monitoring and risk management. The policy also clarifies the role of the Finance & Audit Subcommittee in overseeing financial controls and supporting the Committee's financial assurance responsibilities.
Key Discussion Points	• Does the policy provide appropriate financial oversight and accountability arrangements? • Are the proposed authorisation and approval arrangements proportionate and practical for CPH? • Does the policy provide sufficient safeguards regarding conflicts of interest, expenditure approval and segregation of duties? • Are there any amendments required before the policy is recommended for approval? • Are there any implementation considerations or future review requirements that should be highlighted to the Committee?
Supporting Documents	1. Draft Financial Controls Policy
Outcome	The Finance & Audit Subcommittee is asked to: • Recommend approval of the Internal Financial Controls Policy, with any agreed amendments. • Identify any implementation actions or future review requirements for consideration by the Committee.

Internal Financial Controls Policy

Date adopted: TBC
Approved by: CPH Committee
Owner: CPH Finance & Audit Subcommittee
Next review: [insert date, usually annually]

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1. Purpose

The purpose of this policy is to ensure that Community Pharmacy Hertfordshire (CPH) maintains effective internal financial controls, protects organisational resources, promotes transparency and accountability, and complies with the principles set out within the Community Pharmacy England Governance Framework.

This policy establishes:

- Financial governance arrangements.
- Authorisation responsibilities and approval thresholds.
- Segregation of duties requirements.
- Payment and procurement controls.
- Monitoring and reporting arrangements.
- Procedures for reporting financial control concerns.

This policy should be read alongside:

- CPH Expenses Policy.
- Staff Handbook (Expenses Policy).
- Conflicts of Interest Policy.
- Governance Framework.

2. Scope

This policy applies to:

- Committee members.
- Officers.
- Employees.
- Contractors and consultants acting on behalf of CPH.
- Members of any CPH subcommittee or working group with financial responsibilities.

The policy applies to all financial transactions, commitments, contracts, purchases, payments, reimbursements and financial records undertaken on behalf of CPH.

3. Governance and Accountability

The CPH Committee has overall responsibility for ensuring that appropriate financial controls are in place and that organisational funds are used solely for approved CPH purposes.

The Committee delegates detailed oversight of financial controls to the Finance & Audit Subcommittee.

The Finance & Audit Subcommittee is responsible for:

- Reviewing internal financial controls.
- Monitoring financial risks and mitigation measures.
- Supporting annual budget preparation.
- Overseeing compliance with financial policies and procedures.
- Recommending improvements to financial controls where required.

The Treasurer acts as the Committee's lead officer for financial oversight and reporting.

4. Authorised Signatories

An Authorised Signatory is an individual formally designated by CPH to approve financial transactions in accordance with this policy.

The following positions are recognised as Authorised Signatories:

- Treasurer
- Chief Officer
- Chair
- Vice-Chair
- Chair of the Finance & Audit Subcommittee

Authorised Signatories must exercise appropriate judgement, ensure expenditure is legitimate and within approved budgets, and declare any conflicts of interest in accordance with the CPH Conflicts of Interest Policy.

The Committee may designate additional authorised signatories where required to maintain operational resilience and business continuity

5. Approval and Authorisation Framework

CPH operates a delegated authority model. Approvals must be obtained before expenditure is incurred where required by this policy.

Transaction Type	Primary Approval	Secondary Signature Approval
Committee member and officer invoices and payments (including Chair)	Chief Officer	Treasurer
Treasurer invoices and payments	Chief Officer	Chair
Chief Officer expenses and payments	Treasurer	Chair
Staff expenses	Chief Officer	Not required unless claimant is the Chief Officer
Budget-approved expenditure within approved budget limits	Chief Officer	Not required (see Section 7)
Unbudgeted expenditure, commitments and payments up to £500	Chief Officer	Not required
Unbudgeted expenditure, commitments and payments exceeding £500	Chief Officer	Chair of the Finance & Audit Subcommittee

The approval routes set out above represent the normal approval process for CPH transactions and payments.

Where the designated approver is unavailable, has a conflict of interest, or where a transaction is operationally time-sensitive, an alternative Authorised Signatory may approve the transaction. The reason for the substitution should be recorded as part of the supporting documentation and appropriate segregation of duties maintained.

No individual may approve:

- Their own expenditure.
- Their own invoice.
- Their own reimbursement.
- Their own remuneration adjustment.
- Any transaction where they have a material conflict of interest.

Any conflict of interest must be declared and managed in accordance with the CPH Conflicts of Interest Policy.

6. Segregation of Duties

CPH seeks to maintain appropriate segregation of duties to reduce the risk of fraud, error or conflicts of interest.

Where practicable, responsibility for initiating expenditure, approving expenditure, processing payments and reviewing financial transactions should be separated between different individuals.

However, CPH recognises that, as a small organisation, complete segregation of duties may not always be achievable. In such circumstances, alternative controls must be in place to provide appropriate oversight and assurance.

Such controls may include:

- Independent approval of expenditure in accordance with this policy.
- Review of quarterly management accounts by the Treasurer and Committee.
- Oversight of budget performance by the Committee.
- Independent review of bank reconciliations where practicable.
- Review of supporting documentation during internal or external financial review processes.

Where operational circumstances require an individual to undertake more than one stage of a financial process, the transaction must remain appropriately authorised and supported by sufficient documentation.

No individual may approve their own expenditure, invoice, reimbursement, remuneration adjustment or any transaction where they have a material conflict of interest.

7. Payment Controls

All payments must be supported by appropriate evidence, including invoices, receipts, approved expense claims, contracts, committee minutes, purchase orders or other authorised documentation.

Budget Approved Expenditure

The annual budget approved by the CPH Committee constitutes authority to incur and pay expenditure included within that budget, provided:

- The expenditure remains within the approved budget allocation.
- The expenditure relates to the approved purpose.
- The expenditure is monitored and reported through quarterly management accounts and budget reports.

Examples may include:

- Community Pharmacy England levy payments.
- Committee meeting venue costs.
- Approved contracts and service agreements.
- Payroll costs.
- Insurance premiums.
- Software licences and subscriptions.

Budget-approved expenditure does not require secondary signature approval solely because an individual payment exceeds £500.

Unbudgeted Expenditure

Where expenditure has not been approved through the annual Committee budget:

- Transactions, payments or commitments up to £500 require approval from the Chief Officer.
- Transactions, payments or commitments exceeding £500 require approval from the Chief Officer and secondary signature approval from the Chair of the Finance & Audit Subcommittee.
- Significant or unusual expenditure may additionally be referred to the Treasurer, Chair or Finance & Audit Subcommittee for review.

Where either approver is unavailable or has a conflict of interest, another Authorised Signatory may provide approval.

All amendments to salaries, honoraria, bonuses or other remuneration arrangements must be approved by the Committee before implementation.

Detailed arrangements for member and officer expenses are contained within the CPH Expenses Policy. Detailed arrangements for employee expenses are contained within the Staff Handbook.

8. Procurement Controls

All expenditure must support the approved objectives and activities of CPH.

Expenditure included within an approved annual budget may proceed without further individual approval provided:

- The expenditure remains within the approved budget allocation.
- The expenditure follows the approval requirements contained within this policy.

This includes routine budgeted operational costs such as approved contracts, subscriptions, licences, recurring levies, venue costs and ongoing service agreements.

Unbudgeted expenditure and significant new financial commitments must be approved in advance by the appropriate Authorised Signatory or the Committee, depending on value and risk.

All procurement decisions must demonstrate value for money and be supported by appropriate records.

9. Financial Records and Monitoring

CPH will maintain appropriate financial records, including:

- Invoices.
- Receipts.
- Expense documentation.
- Payment approvals.
- Budget reports.
- Bank records.
- Financial Risk Register.
- Declaration of Interests Register.
- Any other records required to support governance, audit or regulatory requirements.

The Declaration of Interests Register will be maintained and reviewed in accordance with the CPH Conflicts of Interest Policy.

Financial records must be retained securely and be available for inspection, audit or assurance purposes where required.

Management accounts will be prepared quarterly and reviewed by the Committee. Budget performance will be reported to the Committee through the quarterly management accounts to provide oversight of expenditure against approved budgets.

10. Financial Risk Management

CPH will maintain a Financial Risk Register identifying key financial risks, associated controls and mitigating actions.

The Register will be reviewed at least annually by the Finance & Audit Subcommittee and updated where significant risks or changes arise.

11. Breaches of Financial Controls

Any actual or suspected breach of this policy must be reported immediately to:

- The Chair of the Finance & Audit Subcommittee.
- The Chair, where appropriate.

The Finance & Audit Subcommittee will determine whether further investigation or escalation is required.

Where appropriate, concerns may also be considered under the CPH Whistleblowing Policy and Governance Framework.

12. Review

This policy will be reviewed annually by the Finance & Audit Subcommittee and approved by the CPH Committee.

Any material changes to financial systems, governance arrangements or authorisation responsibilities will trigger an earlier review.

Community Pharmacy Hertfordshire

CPH Finance and Audit Subcommittee 09 September 2026

Item	Officer Workload Audit and Officer Remuneration Framework
Report author	Helen Musson
Purpose	To consider whether there are any financial considerations, risks or budget implications arising from the current officer remuneration framework.
Background	The Governance Subcommittee is undertaking a review of the current officer remuneration framework, including the officer workload audit, current honoraria arrangements and the relationship between honoraria and additional claims. The purpose of this item is not to duplicate the Governance Subcommittee discussion but to provide the Finance & Audit Subcommittee with an opportunity to identify any financial considerations that should be considered as part of the review.
Key Discussion Points	• Are the current officer honoraria arrangements financially sustainable? • Are there any financial risks or concerns associated with the current framework? • Are there any budget implications that should be considered as part of any future review? • Are there any financial recommendations that should be referred to the Governance Subcommittee or Committee?
Supporting Documents	Please refer to the Governance Subcommittee paper: Officer Workload Audit and Officer Remuneration Framework, including all appendices.
Outcome	The Finance & Audit Subcommittee is asked to identify any financial considerations arising from the current arrangements and advise whether any further financial review is required.

Community Pharmacy Hertfordshire

CPH Finance and Audit Subcommittee 09 September 2026

Item	Preparing the 2027/28 CPH Budget
Report author	Helen Musson
Purpose	To review the draft 2027/28 budget, consider key assumptions and priorities, and provide feedback to inform development of the final budget proposal.
Background	An initial draft budget for 2027/28 has been prepared based on the current approved budget, known commitments and planning assumptions. Key assumptions currently include inflation being applied to selected income and expenditure lines, continuation of existing services and work programmes, and inclusion of funding for a Community Pharmacy/Public Health Integration role. The draft budget remains at an early stage and is intended to support discussion rather than seek approval at this stage.
Key Discussion Points	• Are the assumptions used within the draft budget reasonable and appropriate? • What strategic priorities should be reflected within the 2027/28 budget? • Are there any anticipated cost pressures, risks or opportunities that should be incorporated? • Should any budget lines be increased, reduced or reviewed further? • What recommendations should be considered as part of the detailed budget development process?
Supporting Documents	1. Draft 2027-28 Budget
Outcome	The Finance & Audit Subcommittee is asked to: • Review and discuss the draft budget assumptions. • Identify any areas requiring further analysis or amendment. • Provide feedback and recommendations to support development of the final 2027/28 budget proposal for Committee consideration.

Overall Budget
Community Pharmacy Hertfordshire
April 2027 to March 2028

Account	Apr-2026	May-2026	Jun-2026	Jul-2026	Aug-2026	Sep-2026	Oct-2026	Nov-2026	Dec-2026	Jan-2027	Feb-2027	Mar-2027	2026-27	2027/28 Proposed	3.10% Inflation as at July 2026
Income															
Statutory Levy (200)	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£36,594.00	£439,128.00	*£452,740.97*	Inflation applied
Bank Interest (270)	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£40.00	£480.00	*£480.00*	Inflation not applied - based on current assumptions
Event Sponsorship (260)	£0.00	£558.00	£0.00	£3,490.00	£0.00	£558.00	£0.00	£558.00	£0.00	£558.00	£0.00	£558.00	£6,280.00	*£6,280.00*	Inflation not applied - based on current assumptions
Management Fee (275)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	No expected income
Other Income (280)	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£797.67	£9,572.04	*£55,000.00*	Funding for CP/PH Integration Role
Total Income	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£40,921.67**	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£37,989.67**	**£455,460.04**	***£514,500.97***	
Less Cost of Sales															
Cost of Services (310)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£55,000.00*	Funding for CP/PH Integration Role. Does not include Central East costs currently.
Direct Expenses (325)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	
Direct Wages (320)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	
Total Cost of Sales	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	***£55,000.00***	
Gross Profit	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£40,921.67**	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£37,989.67**	**£37,431.67**	**£37,989.67**	**£455,460.04**	***£459,500.97***	
Less Overheads															
Accountancy Fees (451)	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£140.00	£1,680.00	*£1,732.08*	Inflation applied
Bank Charges (471)	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£8.50	£102.00	*£105.16*	Inflation applied
Chair Honoraria (400)	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£506.00	£6,072.00	*£6,072.00*	Kept at same rate - to be discussed
Chief Officer Salary (403)	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£7,019.27	£84,231.26	*£86,842.43*	Inflation applied
Cleaning (421)	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£66.67	£800.04	*£824.84*	Inflation applied
Corporation Tax Expense (500)	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£4.00	£48.00	*£150.00*	Larger savings mean larger fee
CPE Levy (450)	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£7,741.33	£92,895.96	*£95,775.73*	Inflation applied
CPH Committee (venue hire and/or catering) (431)	£0.00	£705.00	£0.00	£0.00	£0.00	£705.00	£0.00	£705.00	£0.00	£705.00	£0.00	£705.00	£3,525.00	*£3,634.28*	Inflation applied
CPH Committee meeting member expenses (430)	£0.00	£3,200.00	£0.00	£0.00	£0.00	£3,200.00	£0.00	£3,200.00	£0.00	£3,200.00	£0.00	£3,200.00	£16,000.00	*£16,000.00*	Kept at same rate - to be discussed
Directors and Officers Insurance (441)	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£500.04	*£515.54*	Inflation applied
Electricity (423)	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£69.40	£832.80	*£858.62*	Inflation applied
Employers Liability Insurance (440)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	Provided free from CPE or within office insurance
Employers NI (405)	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£1,915.50	£22,986.00	*£23,698.57*	Inflation applied
Employers Pension (406)	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£617.90	£7,414.74	*£7,644.60*	Inflation applied
Gifts (445)	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£50.00	£600.00	*£600.00*	No expected increase
HR and Recruitment (410)	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£166.67	£2,000.04	*£2,000.00*	No expected increase
ICO (452)	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£4.33	£51.96	*£47.00*	No expected increase
IT Hardware and Office Furniture (425)	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£41.67	£500.00	*£500.00*	No expected increase
IT Support and Software (424)	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£428.58	£5,142.96	*£5,302.39*	Inflation applied
Loan Interest (470)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	No costs
Marketing costs (460)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£500.00*	Put marketing costs in due to interest at educational institutions to support pharmacy services
Office and Equipment Repairs (contingency) (426)	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£1,500.00	*£1,500.00*	No expected increase
Office and Public Liability Insurance (422)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£400.00*	Missing from last year - based on costs and increases
Other meetings (member) (434)	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£1,277.67	£15,332.04	*£15,332.00*	No expected increase
Other meetings (venue hire and/or catering) (435)	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£475.00	£5,700.00	*£5,876.70*	Inflation applied
Other Office Administration Costs (446)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	No expected increase
Postage (442)	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£29.16	£349.92	*£350.00*	No expected increase
Printing and stationery (444)	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£121.00	£1,452.00	*£1,452.00*	No expected increase
Professional Fees (453)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	No expected increase
Rent and service charges (420)	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£663.02	£7,956.24	*£8,202.88*	Inflation applied
Staff Expenses (407)	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£156.25	£1,875.00	*£1,875.00*	No expected increase although better baseline at end of Q2
Staff Rewards (409)	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£83.33	£999.96	*£1,000.00*	No expected increase
Staff Salaries (404)	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£14,458.81	£173,505.69	*£178,884.37*	Inflation applied
Staff Training (408)	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£208.33	£2,499.96	*£2,500.00*	No expected increase
Telephone (443)	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£220.50	£2,646.00	*£2,700.00*	No expected increase
Training (member) (433)	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£293.34	£3,520.08	*£3,500.00*	No expected increase
Travel expenses (member) (432)	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£125.00	£1,500.00	*£1,000.00*	Reduced due to not meeting budget
Treasurer Honoraria (402)	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£187.00	£2,244.00	*£2,244.00*	Kept at same rate - to be discussed
Vice-Chair Honoraria (401)	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£280.00	£3,360.00	*£3,360.00*	Kept at same rate - to be discussed
Total Overheads	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£37,524.89**	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£41,429.89**	**£469,823.69**	***£482,980.18***	
Less Depreciation															
Depreciation (490)	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	£0.00	*£0.00*	
Total Depreciation	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	**£0.00**	*£0.00*	
Total Expenses	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£37,524.89**	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£41,429.89**	**£37,524.89**	**£41,429.89**	**£469,823.69**	***£482,980.18***	
Net Profit	**-£93.22**	**-£3,440.22**	**-£93.22**	**£3,396.78**	**-£93.22**	**-£3,440.22**	**-£93.22**	**-£3,440.22**	**-£93.22**	**-£3,440.22**	**-£93.22**	**-£3,440.22**	**-£14,363.65**	**-£23,479.22**	

Community Pharmacy Hertfordshire

CPH Governance Subcommittee 09 September 2026

Item	Committee Member Conduct Complaints Procedure
Report author	Niru Sivanesan
Purpose	To review the proposed CPH Committee Member Conduct Complaints Procedure and agree any amendments before recommending it to the Committee for approval.
Background	A draft procedure has been developed using Community Pharmacy England's template as a basis and adapted to reflect CPH's governance arrangements, including the role of the Governance Subcommittee. The procedure aims to provide a clear, fair and consistent framework for managing complaints regarding the conduct of Committee members.
Key Discussion Points	• Does the procedure provide a fair and proportionate approach to managing conduct concerns? • Are the roles and responsibilities of the Chair, Governance Subcommittee and Committee sufficiently clear? • Are there any gaps or amendments required before implementation? • Is the proposed Governance Subcommittee oversight and review process appropriate?
Supporting Documents	1. Draft Procedure for Dealing with Complaints about CPH Committee Members 2. Chairs in Need Terms and Conditions (May 2025)
Outcome	The Governance Subcommittee is asked to: • Recommend approval of the CPH Committee Member Conduct Complaints Procedure, with any agreed amendments. • Confirm arrangements for future oversight and review of the procedure.

Procedure for dealing with Complaints about Community Pharmacy Hertfordshire Committee members

Date adopted: TBC
Approved by: CPH Committee
Owner: CPH Governance Subcommittee
Next review: [insert date, usually annually]

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1. Purpose and Scope

The Code of Conduct for Community Pharmacy Hertfordshire sets out the expected values and behaviours of all Committee members to best support their work and the long-term success of community pharmacy in England.

The Code describes how Committee members can individually and collectively support the Values and Behaviours including highlighting and calling out potential instance of non-compliance. However, there more be instances where a Committee member is unable or unwilling to do this, or where a non-Committee member, for example a member of staff, a pharmacy owner or member of the public, has a complaint about a specific Committee member.

The Committee takes any complaints against Committee members seriously. This procedure sets out how such complaints can be reported and how they will be handled.

The Code of Conduct and this procedure apply to Committee members and any observers with the Committee and subcommittee, as well as members of other sub-groups, for example working groups. The use of the term "Committee member" in this procedure includes all of the above roles.

This procedure relates to complaints about the conduct of an *individual* Committee member. It may also be used to investigate complaints relating to a breach of confidentiality where no Committee member is identified but one is suspected.

Separate procedures are in place for complaints about the services provided by Community Pharmacy Hertfordshire.

The Governance Committee is responsible for overseeing the operation and periodic review of this procedure and ensuring complaints are managed fairly, consistently and in line with CPH's governance arrangements.

2. Making a Complaint

Complaints should be made to the Chair of the Committee, or to the Vice Chair of the Committee if the complaint relates to the Chair of the Committee. Complaints should be sent by email to Rachel Solanki, Chair, rachel.solanki@nhs.net, or, Parag Oza, Vice Chair, parag.oza@boots.co.uk.

3. Procedure for dealing with Complaints

3.1 Initial Assessment

The Chair of the Committee will make an initial assessment of the complaint and decide whether to deal with the matter themself, or to refer it for formal review and investigation.

This initial assessment will take account of a range of factors including the nature of the complaint and evidence provided, the circumstances, proportionality, any previous complaints and any previous concerns regarding the Committee member's behaviour. It is recognised that a failure to exhibit exemplary or good conduct does not necessarily mean that a Committee member is in breach of the Code of Conduct. Even where there is evidence that the Code may have been breached, the Chair of the Committee may decide that dealing with the matter themselves, informally, is in the best interest of Community Pharmacy Hertfordshire, for example, by providing advice, guidance or support or formal rebuke to the Committee member.

Community Pharmacy Hertfordshire will not consider abusive, persistent, frivolous or vexatious complaints.

The Chair of the Committee, or their nominee, will usually contact the complainant within ten working days and inform them of initial steps and expected timeframes. They may decide:

1. To deal with the complaint themselves.
2. To refer for formal investigation under this complaints procedure.
3. To refer to a different complaints process.
4. The complaint should be closed and will explain why - this may be because they do not consider it meets the threshold for a complaint to be dealt with under (1), (2) or (3) above, or that it is abusive, persistent, frivolous or vexatious.

Exceptionally, the Chair of the Committee may decide that the matter is so serious that it needs to be referred to another body.

The Committee member concerned will usually be informed at this stage about the complaint and if/how it will be investigated. However, there may be circumstances where it is not appropriate to inform the Committee member.

In instances where the complaint relates to a breach of confidentiality where no Committee member is identified but one is suspected, the Chair of the Committee may ask the Chief Officer to undertake an initial investigation to ascertain which Committee member (if any) has breached confidentiality. The Chair of the Committee will then decide whether to deal with the complaint themself, refer for formal investigation or to close the complaint.

The Chair may seek advice from the Governance Committee where appropriate, particularly where the complaint involves complex governance matters, potential conflicts of interest, or concerns relating to the Chair or Committee officers.

The decision of the Chair of the Committee in terms of communicating with relevant parties is final. The complainant may appeal to the Governance Subcommittee] against the decision determining the course of action.

3.2 Formal investigation

Responsibility for overseeing the formal investigation of complaints remains with the Chair of the Committee, with support from the Governance Committee where appropriate. The Chair will determine the appropriate form of investigation, including how it will be undertaken and by whom, taking account of the nature and seriousness of the complaint, confidentiality considerations, proportionality, available resources and any potential conflicts of interest. This may include appointing an independent investigator or seeking support from another LPC where appropriate.

The aim of any investigation is to understand the circumstances and identify any action needed to enable the effective operation of Community Pharmacy Hertfordshire in the long-term best interest of community pharmacy in England.

The Chair of the Committee, which may appoint an investigator to assist its investigation of the complaint, will usually inform both the complainant and the Committee member concerned of the Chair of the Committee's decision regarding the form of investigation and the anticipated timeframe for the investigation. They will usually do this as soon as practicable; however, there may be instances when they decide it is not appropriate to update either the complainant or Committee member concerned.

The Chair of the Committee has the right to determine that an investigation is not needed and that the complaint should be closed. This may be because it does not consider it meets the threshold for a complaint to be dealt with, or that it is abusive, persistent, frivolous or vexatious. The complainant will be informed if this is the case.

The investigation will be undertaken in accordance with the Chair of the Committee's agreed approach and timeline.

The Committee member shall be invited to provide an explanation or to comment to the investigator before the report is prepared. The complainant and/concerned may be asked for more information as part of this process and statements under oath may be requested. All Committee members are expected to cooperate with the investigation and provide relevant factual information, and statements under oath, including the Committee member who is the subject of the investigation.

3.3 Determinations

Following completion of the investigation, the Governance Committee will consider the findings and determine whether there is a case to answer. Where appropriate, it may conclude that there is no breach of the Code of Conduct and that no further action is required.

Where the Governance Committee determines that a complaint is upheld, it will make recommendations to the CPH Committee regarding any appropriate action to be taken. In reaching its recommendations, the Governance Committee will take account of the seriousness of the complaint, the evidence presented, any mitigating factors, and the need to act fairly, proportionately and in the best interests of CPH.

If the Committee decides to uphold the complaint, it will agree any action needed in relation to the Committee member concerned. It may determine:

1. To give informal advice or support to the Committee member
2. To give a warning to the Committee member
3. To suspend the Committee member from the Committee for a specified period
4. To remove the officer or member from the Committee. In this case, the member shall not be eligible for election or appointment to the Committee for the current Term of the Committee or 12 months, whichever is the greater.

The Committee, or its investigator, will inform both the complainant and Committee member concerned when the Committee have concluded their deliberations. The complainant may be informed of the outcome and action being taken, but this will be dependent on the nature of the complaint and circumstances, including any need for confidentiality.

4. Appeals

4.1 Complainant

Decisions of the Committee are final and there is no right of appeal for the complainant.

4.2 Committee member

Committee members have no right to appeal any sanctions determined by the Committee but if there is an error of fact or law identified by the Committee member, the Committee will review its decision.

5. Review of the Procedure

The Governance Committee will review the procedure at least every three years and recommend any changes to the Committee for its approval.

Community Pharmacy Hertfordshire

CPH Governance Subcommittee 09 September 2026

Item	Officer Workload Audit and Remuneration Framework Review
Report author	Helen Musson
Purpose	To review the current officer remuneration framework and consider whether the existing arrangements continue to support transparency, consistency, accountability and good governance within CPH.
Background	CPH currently operates a fixed annual honoraria arrangement for the Chair, Vice-Chair and Treasurer roles. The purpose of these payments is to recognise the additional responsibilities associated with officer positions and the work undertaken on behalf of the organisation over and above that normally expected of a Committee member. Officers are paid at the same hourly rate as Committee members (£40 per hour). The policy also allows officers to submit separate claims where they undertake additional work on behalf of CPH. As part of the Committee's ongoing review of governance arrangements, officer activity information has been collated alongside information regarding additional claims made outside the honoraria arrangements. This information is intended to support discussion regarding the current framework. This exercise is not intended to assess individual performance or contribution, nor is it intended to suggest that any officer is receiving remuneration that exceeds the work they undertake. The activity monitoring returns provide useful information but may not capture all activity associated with undertaking an officer role, including informal discussions, stakeholder engagement, emails, telephone calls, preparation work and time spent considering issues between meetings. The information should therefore be viewed as indicative rather than a complete record of officer activity. No conclusions or recommendations have been reached at this stage. The intention is to gather views, consider the available information and determine whether any further work is required before any matters are considered formally through the governance process. **Information to Inform Discussion** To support this discussion, the Subcommittee has been provided with officer activity monitoring information together with a summary of officer honoraria arrangements and additional claims submitted during the review period. The activity monitoring information should be viewed as indicative rather than a complete record of officer activity. Officer roles frequently involve:

	• Informal discussions and stakeholder engagement. • Telephone calls and emails. • Preparation and follow-up activity. • Time spent considering issues between meetings. • Ad hoc organisational leadership activities. • Supporting members, contractors and the office team outside formal meetings. Workload can also fluctuate significantly throughout the year depending on organisational priorities, strategic projects, governance reviews, elections and external developments. The information currently available reflects different reporting periods and recording practices. For example, activity monitoring submitted by the Vice-Chair demonstrates variation between reporting periods, with recorded activity ranging from 4.5 hours to 13.5 hours per month during the period reported. This highlights the challenges of drawing conclusions from a limited period of activity monitoring alone. The Subcommittee should also note that the current framework allows officers to submit claims for additional CPH activity outside the fixed honoraria arrangements. Officers may choose to utilise these arrangements to differing degrees and the level of additional claims submitted should not be interpreted as a measure of overall workload or contribution. The Committee is currently considering wider questions regarding member and officer payment arrangements, including the relationship between honoraria payments, additional claims, invoicing arrangements and relevant Finance Guide recommendations. These matters will be considered separately and are not the focus of this review. The information provided should therefore be considered primarily in the context of whether the current officer remuneration framework remains transparent, consistent, fair and fit for purpose.
Key Discussion Points	The Subcommittee is invited to consider: • Do the activities identified within the Expenses Policy accurately reflect the responsibilities currently undertaken by officers? • Do the current arrangements continue to reflect the responsibilities and time commitment associated with officer roles? • Is the distinction between activity included within the officer honoraria arrangements and separately claimable activity sufficiently clear? • Does the current framework support transparency, consistency and fairness? • Does the framework provide sufficient assurance to contractors regarding stewardship of levy funding? • Does the current approach support effective succession planning and encourage members to undertake officer responsibilities? • Should any alternative approaches be explored in the future?

	• Is any further information required before the Committee considers whether any changes to the framework may be necessary?
Supporting Documents	1. Officer Activity Audit 2. Officer Honoraria and Additional Claims Summary
Outcome	The Governance Subcommittee is asked to: • Review the information provided. • Discuss whether the current officer remuneration framework remains appropriate. • Identify any governance considerations that should be explored further. • Advise whether any further work is required before the matter is considered by the Committee.

Appendix 1: Officer Activity Audit

Full officer activity monitoring returns submitted during the review period.

Reporting Period – enter month and year e.g. April 2026	Total estimated hours for this period – high level total of all work done during the month – enter time e.g. 14 hours	Exec team meeting (scheduled)	Administrative tasks (emails, planning)	Member support / liaison	Exec Team Liaison / preparation	Request for support/approval from CPH office team either email or phone	Central East Forum or other meeting	Central East Liaison / preparation	Other	Enter summary of key outputs – if you would like to highlight the time taken on particular projects/topics or to explain the other activity identified in the table above.
Jan-26	13.5	1 to 2 hours	3 to 4 hours	30 mins or less	1 to 2 hours	30 mins or less	4 to 6 hours	1 to 2 hours	0	Key elements: Exec fortnightly meeting, prep for Exec fortnightly meeting, Central East ICB collaboration meeting & prep, review of NRT agreement, review of Capacity Plan and CPH Budget, post meeting review of documents,)- Central Each Collaboration meeting 15.1.2026, document review for Central Each Collaboration meeting

Feb-26	11.5	1 to 2 hours	1 to 2 hours	30 mins or less	4 to 6 hours	1 to 2 hours	0	0	0	Key elements: Review of budget (capacity plan), meeting with chair- review of workstreams, Exec fortnightly meeting, Prep for Exec fortnightly meeting, Review & feedback of three draft clinical proposals for Central East ICB, Review of Draft T & T PCCC paper & draft MOU, Review of CPH Workstreams, Prep for Exec fortnightly meeting, Salary & capacity plan, Salary benchmarking
Mar-26	4.5	30 mins to 1 hour	0	30 mins to 1 hour	30 mins to 1 hour	30 mins or less	0	30 mins to 1 hour	0	Key elements; Feedback on Central East MOU, Financial controls policy reading, Meeting ref smoking protoco, Exec fortnightly meeting, Prep for Exec fortnightly meeting
Apr-26	4.5	1 to 2 hours	30 mins or less	0	1 to 2 hours	0	0	0	0	Key elements: Exec meeting & prep.
Apr-26	6	30 mins to 1 hour	1 to 2 hours	0	30 mins or less	30 mins to 1 hour	0	0	1 to 2 hours	Oversight of the Q4 and end of year closing, including review of Q4 budget vs actual figures with Chief Officer to ensure accuracy ahead of session with accountant. Produced the Q4 and Annual treasurer report for committee. Review and approving expenses and April payroll.
Apr-26	12	1 to 2 hours	1 to 2 hours	0	1 to 2 hours	30 mins to 1 hour	30 mins to 1 hour	1 to 2 hours	4 to 6 hours	Appraisal 16/4 - pre-work and meeting,
May-26	4.25	30 mins to 1 hour	30 mins to 1 hour	0	0	30 mins to 1 hour	0	0	0	Review of accountant's accounts, payroll, exec meeting etc.

May-26	9.5	1 to 2 hours	1 to 2 hours	30 mins or less	1 to 2 hours	30 mins or less	3 to 4 hours	0	0	Central East forum, review of MOU & collaborative update, shared admin resource
May-26	16	1 to 2 hours	1 to 2 hours	0	1 to 2 hours	30 mins to 1 hour	6 to 8 hours	30 mins to 1 hour	0	Exec team x2, Central east (invoicedx10), shared admin review etc,Phone calls incl discussion ref board member
Jun-26	4.5	1 to 2 hours	30 mins to 1 hour	0	0	30 mins to 1 hour	0	0	30 mins to 1 hour	Exec Team meetings, Treasurer report for AGM, Review expenses and payroll
Jun-26	10	1 to 2 hours	0	0	1 to 2 hours	0	4 to 6 hours	30 mins to 1 hour	0	Central East F2F meeting
Jun-26	28	1 to 2 hours	30 mins or less	0	30 mins or less	30 mins or less	6 to 8 hours	30 mins to 1 hour	6 to 8 hours	CPE East England/ Chairs forum/ Central east forum (paid), Appraisal review HM email, other emails etc
Jul-26	10	3 to 4 hours	30 mins to 1 hour	0	30 mins or less	30 mins or less	1 to 2 hours	30 mins or less	3 to 4 hours	Other = AGM (I think as Chair necessary but can deduct 3 if not- added speach writing to other column)
Jul-26	6.5	1 to 2 hours	0	0	1 to 2 hours	30 mins or less	1 to 2 hours	30 mins to 1 hour	0	

Appendix 2: Officer Honoraria and Additional Claims Summary

Current annual honoraria arrangements are:

Officer Role	Annual Honoraria
Chair	£6,080
Vice-Chair	£3,360
Treasurer	£2,240

Current officer honoraria arrangements are set out within the CPH Expenses Policy. Officers may submit claims for additional CPH activity in accordance with the Expenses Policy where appropriate.

Additional claims submitted by the Chair and approved by CPH during the review period:

Activity	Amount
Jan Thomas CEICB Meeting	£40.00
Central East Forum May 2026	£80.00
Central East Forum June 2026	£240.00
Central East Forum July 2026	£80.00
CPE Regional Meeting July 2026 (includes travel)	£368.60
CPE Chairs Forum July 2026 (includes travel)	£346.10
Total	**£1,154.70**

Community Pharmacy Hertfordshire

CPH Governance Subcommittee 09 September 2026

Item	Committee Member Expenses and Payment Framework
Report author	Helen Musson
Purpose	To review the current arrangements for reimbursing and remunerating Committee members undertaking CPH business and consider whether the existing framework remains fair, transparent, practical and aligned with current Community Pharmacy England guidance.
Background	CPH operates an Expenses Policy which aims to ensure that members undertaking approved CPH business are not financially disadvantaged because of carrying out those activities. The policy includes arrangements for attendance allowances, travel expenses, accommodation, officer honoraria and other approved activity. The CPH Constitution gives the Committee authority to agree remuneration and expenses for officers and attendance allowances and expenses for Committee members engaged on Committee business. The Constitution also requires transparency regarding payments made under these arrangements. The Community Pharmacy England Finance Guide highlights the importance of transparency, effective stewardship of pharmacy owner levy funding and ensuring that expenses and remuneration arrangements comply with appropriate governance, financial and employment requirements. The guide also contains specific guidance regarding the payment of attendance allowances and honoraria. During routine review of current arrangements, a number of practical questions have arisen regarding the operation of the current framework and the different mechanisms through which members may receive payment for activity undertaken on behalf of CPH. **Information to Inform Discussion** CPH's current Expenses Policy provides arrangements for: • Attendance allowances for approved CPH activity. • Reimbursement of travel and subsistence costs. • Officer honoraria. • Additional approved activity undertaken on behalf of CPH. The Community Pharmacy England Finance Guide and CPH Expenses Policy set out the mechanisms through which payments should be made to members undertaking Committee business. In most cases, attendance allowances and payments for Committee activity are paid to the member's employer or pharmacy business rather than directly to the individual

	undertaking the work. Payments made directly to individuals generally require processing through PAYE arrangements. During review of current arrangements, it has become apparent that the practical impact of these arrangements may differ between members depending upon their employment circumstances. Whilst the current arrangements comply with the Finance Guide and Expenses Policy, some members may not directly benefit from payments made to their employing organisation or pharmacy business. This may influence how members view participation in CPH activities and the value of submitting claims. The Community Pharmacy England Finance Guide identifies circumstances where payments may be processed through payroll arrangements. Such arrangements would require agreement between the member, their employer (where relevant) and CPH and would need to comply with tax, payroll and governance requirements. In addition, questions have arisen regarding the most appropriate mechanisms for making payments via the pharmacy company and the associated tax and VAT implications of this. Further advice has been sought from Community Pharmacy England and clarification is currently awaited. The purpose of this discussion is not to review individual claims or payment arrangements. Rather, it is to consider whether the current framework remains fair, transparent and practical for members with differing employment circumstances, and whether CPH should explore additional options to support members whilst remaining compliant with Community Pharmacy England guidance and relevant financial requirements. Any changes to payment mechanisms arising from this review would require further consideration of the associated financial, payroll, tax and VAT implications before implementation and may require referral to the Finance & Audit Subcommittee for further consideration.
Key Discussion Points	• Do the current payment arrangements provide equitable opportunities for members to be reimbursed for time spent undertaking CPH business? • Does the requirement for attendance allowances and activity payments to be made via an employer or pharmacy business create any unintended barriers to participation? • Are the current arrangements sufficiently clear to members? • Are there any governance, tax, payroll or VAT considerations that require further review? • Is additional guidance required for members regarding the payment options available to them?
Supporting Documents	1. Expenses Policy 2. CPE Finance Guide

Outcome	The Governance Subcommittee is asked to: • Review the current framework. • Identify any governance, practical or compliance issues arising from the current arrangements. • Consider whether additional payment options should be explored for members, whilst remaining compliant with Community Pharmacy England guidance.

09 September 2026

Title	Organisational Capacity Plan
Purpose	To update the Committee on the Executive Team's discussion regarding organisational capacity and agree the proposed next steps.
Report author	Helen Musson
Short summary of the paper	The Executive Team considered whether Community Pharmacy Hertfordshire should undertake a standalone organisational capacity review. The Executive Team concluded that organisational capacity should be considered as part of the strategic planning process rather than through a separate review. Organisational structure and resources should be reviewed in the context of the priorities and objectives set out in the Strategic Plan. As changes have already been made to the office team structure to operate within the agreed budget, the Executive Team recommends that a discussion paper is brought to the November 2026 Committee meeting to review how those arrangements are working in practice and whether any further changes may be required to support delivery of the remaining Strategic Plan objectives within existing resources. The Executive Team also agreed that future strategic planning exercises should include consideration of organisational capacity and resource requirements alongside organisational priorities.
Recommendations	The Committee is asked to: 1. Note the Executive Team discussion and attached notes. 2. Agree that future strategic planning processes should include consideration of organisational capacity and resource requirements alongside organisational priorities. 3. Agree that a discussion paper is brought to the November 2026 Committee meeting to review the current organisational arrangements, their effectiveness in supporting delivery of the remaining Strategic Plan objectives, and any recommendations from the Chief Officer for changes within existing resources.

Appendices

1. Executive Team notes 17 August 2026

Community Pharmacy Hertfordshire

09 September 2026

Title	Committee Elections 2027 and Succession Planning
Purpose	To update the Committee on preparations for the 2027 Committee elections, agree key decisions required to commence the election process and begin succession planning for the next Committee term. The current term of office of Committee members ends on 31 March 2027, with the new Committee taking office from 1 April 2027.
Report author	Helen Musson
Short summary of the paper	Community Pharmacy England has published guidance for the 2027 LPC elections, which sets out the timetable and key decisions required to establish the next Committee. The guidance requires the Committee to appoint a Returning Officer and determine the size of the future Committee before the election process begins. To support planning for the next Committee term, members are also invited to consider their current intentions regarding standing for re-election and any succession planning requirements for Committee Officer roles. Based on current contractor demographics and election calculator modelling, it is recommended that Community Pharmacy Hertfordshire retains an 11-member Committee for the 2027-2031 term. Maintaining an 11-member Committee provides the most proportionate distribution of seats across contractor groups under the current election arrangements. **Background** The term of office for the current Committee expires on 31 March 2027. Community Pharmacy England's election guidance requires LPCs to begin preparations during 2026, including determining the size of the future Committee and appointing a Returning Officer. The guidance notes that Committee size should be determined by the Committee and recorded in the minutes. It further states that the Returning Officer would usually be the Chief Officer, provided they are not an elector. **Committee Size** The current contractor profile has been reviewed using the Community Pharmacy England election calculator. Based on current contractor numbers: • Total contractors: 217 • CCA pharmacies: 51 • IPA pharmacies: 24 • Independent pharmacies: 142

	Modelling indicates that an 11-member Committee would result in: • 3 CCA seats • 1 IPA seat • 7 Independent seats This provides the most proportionate representation across contractor groups based on current contractor demographics. An 11-member Committee is therefore recommended for the 2027-2031 term. **Succession Planning** The elections provide an opportunity to consider future Committee leadership and continuity arrangements. To support planning, members will be invited to discuss their current intentions regarding standing for election for the next Committee term and any succession planning considerations for Committee Officer positions. This discussion is intended to support future planning and does not commit any member to seeking re-election or standing for an Officer position. **Election Timetable** Key milestones include: • **September 2026:** Committee confirms future Committee size and appoints Returning Officer. • **31 October 2026:** Contractor data cut-off date. • **November 2026:** Allocation of contractor group entitlements. • **January/February 2027:** Nomination process. • **March 2027:** Election process completed and results declared. • **1 April 2027:** New Committee takes office.
Recommendations	The Committee is asked to: 1. Note the timetable and requirements for the 2027 Committee elections. 2. Agree that Community Pharmacy Hertfordshire will retain an 11-member Committee for the 2027-2031 term of office. 3. Appoint the Chief Officer as Returning Officer for the 2027 Committee elections. 4. Agree the proposed next steps for succession planning for Committee membership and Officer positions.

Appendices

1. Election calculator modelling based on current contractor demographics.

11 members

LPC Elections	
Number of LPC members	11
Total contractors	217
Number of CCA pharmacies	51
Max number of CCA seats	3
Number of CCA seats actually taken	3
Number of AIMp pharmacies	24
Number of AIMp seats	1
Regional multiples	1
Multiple 1 - number of pharmacies	0
Number of seats (multiple 1)	0
Multiple 2 - number of pharmacies	0
Number of seats (multiple 2)	0
Number of independent premises	142
Number of independent seats	7

10 members

LPC Elections	
Number of LPC members	10
Total contractors	217
Number of CCA pharmacies	51
Max number of CCA seats	2
Number of CCA seats actually taken	2
Number of AIMp pharmacies	24
Number of AIMp seats	1
Regional multiples	1
Multiple 1 - number of pharmacies	0
Number of seats (multiple 1)	0
Multiple 2 - number of pharmacies	0
Number of seats (multiple 2)	0
Number of independent premises	142
Number of independent seats	7

12 members

LPC Elections	
Number of LPC members	12
Total contractors	217
Number of CCA pharmacies	51
Max number of CCA seats	3
Number of CCA seats actually taken	3
Number of AIMp pharmacies	24
Number of AIMp seats	1
Regional multiples	1
Multiple 1 - number of pharmacies	0
Number of seats (multiple 1)	0
Multiple 2 - number of pharmacies	0
Number of seats (multiple 2)	0
Number of independent premises	142
Number of independent seats	8

2. CPE LPC Elections 2027 Guidance Notes

Community Pharmacy Hertfordshire

09 September 2026

Title	Workstreams Update
Purpose	This paper provides an update on progress against Community Pharmacy Hertfordshire's 2026/27 Strategic Workstreams and associated Key Performance Indicators (KPIs) covering Quarter 1 and activity completed during the early part of Quarter 2. A detailed KPI dashboard is provided in Appendix 3. Progress has continued across several strategic priorities, with several important foundations now in place. Notable achievements include the launch of the Pastoral and Professional Support Hub, establishment of the Innovation Hub, continued contractor implementation support, expansion of locality engagement activity and ongoing political and system engagement.
Report author	Niru Sivanesan and Helen Musson
Short summary of the paper	**1. Executive Summary** **Overall KPI Position** **Status** / **Number of KPIs** **Green** / **7** **Amber** / **16** **Red** / **7** **Total** / **30** ***RAG definitions are included within Appendix 3.*** The majority of KPIs are either achieved or progressing towards delivery within planned timescales. Several KPIs have target dates later in the year and remain in development. A smaller number of KPIs have been identified as requiring enhanced management focus over the remainder of Quarter 2 and into Quarter 3 to support achievement of year-end objectives. The main areas of focus for the remainder of Quarter 2 and Quarter 3 will be: • strengthening clinical service delivery and continuity; • progressing locality-led initiatives and Pharmacy First activity; • development of contractor-facing resources and digital tools; • workforce development and engagement activity; • continued political and stakeholder engagement; and • delivery of KPIs requiring enhanced management attention. The CPH office remain confident that most annual objectives remain achievable. The Pharmacy Value Factsheet remains the main area where delivery timescales may require review to ensure the final product is sufficiently evidenced and useful for external partners.

2. Key Achievements

Progress has continued across several strategic priorities during Quarter 1 and the early part of Quarter 2. Notable achievements include:

- Continued representation of community pharmacy at ICB and wider system forums, ensuring pharmacy input into key transformation discussions.
- Ongoing Central East collaborative working to strengthen regional influence and support joint strategic submissions where appropriate.
- Delivery of rapid contractor implementation support, including Flash Updates, PQS resources and wider practical support materials.
- Launch of the Pastoral and Professional Support Hub ahead of the September 2026 target date.
- Launch of the CPH Innovation Hub to support sharing of good practice and innovation across the network.
- Continued delivery of the Locality Support Programme, with dedicated support activity completed in Hertsmere, Dacorum and Stevenage, Stort Valley underway and Lower Lea Valley planned for October 2026. A separate infographic summarising outcomes and learning from the programme is provided for information in appendix 2.
- Growth of the WhatsApp Broadcast List beyond the agreed KPI target.
- Continued engagement with MPs, councillors and wider stakeholders to raise awareness of community pharmacy priorities and challenges.

3. Areas Requiring Continued Focus

While overall progress is positive, several workstreams require continued focus during the remainder of Quarter 2 and into Quarter 3.

The key areas requiring enhanced management attention are:

- clinical service embedding and continuity;
- progression of Pharmacy First activity and referral pathways;
- development of the Resource Toolbox;
- contractor engagement and satisfaction measures;
- progression of external funding opportunities;
- completion of the Pharmacy Value Factsheet; and
- consistent capture and sharing of locality success stories.

Further detail regarding individual KPIs and associated RAG ratings is provided within Appendix 3.

4. Activity Outside the KPI Framework

The KPI framework is intended to monitor delivery of the strategic workstreams but does not capture all activity undertaken by CPH.

Significant activity delivered during Quarter 1 and the early part of Quarter 2 includes:

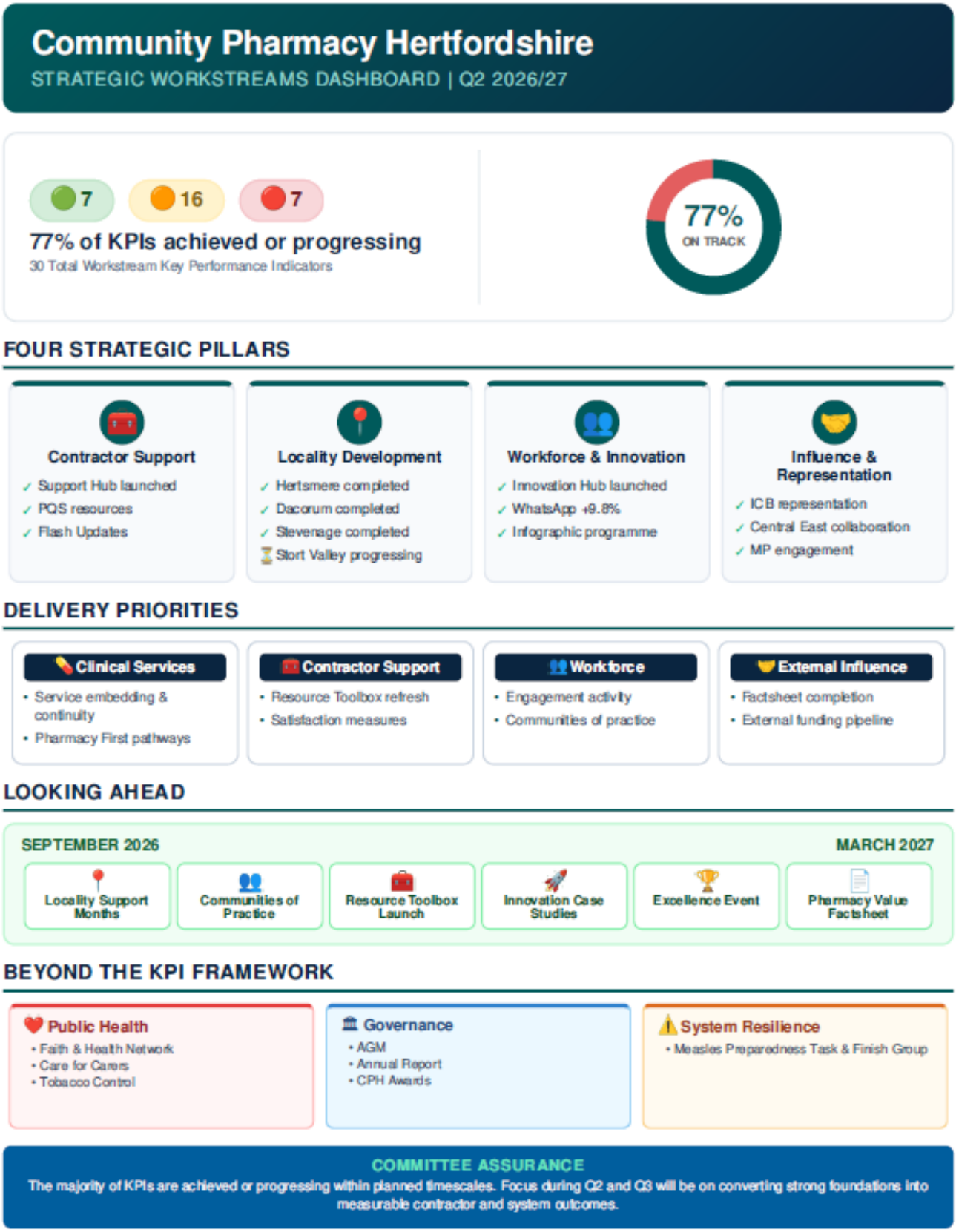
Public Health and Community Engagement

- Hertfordshire Tobacco Control Strategy engagement.

	• Community Pharmacy Public Health Integration Officer activity. • Faith and Health Network engagement. • Care for Carers Programme activity. **Governance and Organisational Development** • Community Pharmacy Hertfordshire Annual General Meeting. • Development of the 2026 CPH Awards programme. • Production of the CPH Annual Report. **System Resilience** • Participation in the Measles System-wide Pre-Incident Preparedness Task and Finish Group. These activities support CPH's wider strategic objectives and system leadership role but are not fully reflected within the KPI framework. ## 5. Capacity and Delivery The initial months of 2026/27 included a period of reduced organisational capacity associated with team transition and temporary workforce absence. During this period, resources were prioritised towards: • contractor support and contractual implementation; • contractor engagement activities; • governance requirements; • system representation; and • time-critical service implementation activity. This has resulted in some development activity being concentrated into the remainder of Quarter 2 and Quarter 3. Capacity has now stabilised and delivery plans remain in place to support achievement of the remaining annual objectives. The Pharmacy Value Factsheet remains the primary area where delivery timescales may require review to ensure the final product is sufficiently evidenced and useful for external stakeholders.
Recommendations	The Committee is asked to: 1. Note progress against delivery of the 2026/27 Strategic Workstreams. 2. Note the KPI position set out in Appendix 3. 3. Note the areas requiring continued focus and the planned delivery priorities for the remainder of Quarter 2 and Quarter 3.

Appendices

1. At A Glance Infographic



2. Locality Development Spotlight Report September 2026

3. KPI Position

Key Performance Indicator	RAG Rating		CPH Office Lead
1. Representation: Maintain consistent pharmacy presence at high-level ICB transformation forums with demonstrable positive outcomes for Hertfordshire contractors.		CPH has maintained representation at high-level system meetings.	Helen
2. Unified Voice: Deliver strategic submissions to the ICB as a joint Central East position where regional scale adds value.		Central East collaboration is continuing. Further strategic submissions will be progressed where a joint regional position adds value, e.g. Community Pharmacy PCN leads	
3. Collaborative Partnership: Secure written inclusion or a formal seat for community pharmacy within at least two local "Place" Provider Collaborative framework boards.		Engagement with relevant system and Place stakeholders is continuing. Formal written inclusion/formal seats have not yet been confirmed.	
4. System-Wide Integration: Achieve formal inclusion of new local pharmacy service models in at least one ICB-level strategy document and both local Place-based care plans.		Foundations are being laid through system engagement and development of locality-based service models.	Niru
5. Network Stability: Ensure communication channels exist in all 10 localities to support peer-to-peer engagement.		Hertsmere, Dacorum, Stevenage, all have whatsapp groups. Stort Valley is being progressed.	
6. Collaborative Delivery: Evidence of 3+ locality-level initiatives where pharmacies have shared protocols to meet local neighbourhood health needs.			
7. Consultation Growth: Aim for a measurable increase in Pharmacy First consultations across the network vs 2025 baseline.		This has not been the primary Q2 focus. Locality meetings are now being used to identify practices where Pharmacy First referrals are low and understand barriers to referral.	Chloe
8. Service Embedding: 80% of pharmacies consistently delivering/claiming for at least two major clinical services monthly.		Baseline complete.	
9. Equitable Access: Delivery of 2+ joint initiatives with community partners to improve service awareness in health inequality hotspots.		Public health and community engagement activity is progressing, including the Faith and Health Network and Care for Carers Programme.	
10. Locality Coverage: 10 Hertfordshire localities have receive a dedicated "Support Month" by March 2027 with demonstrable positive outcomes for Hertfordshire contractors.		Hertsmere, Dacorum, Stevenage and Stort Valley	Chloe
11.Contract Local Implementation Support: Provide a 'Flash Update' within 3 working days of significant contract changes followed by practical implementation tools within 15 working days.		CPH has continued to provide rapid contractual communications and practical implementation support. The Flash Update element has been delivered. The approach to practical implementation support has evolved through the PQS Resource Pack and wider resources throughout the year. Further implementation resources, including IP/Pharmacy First support, are planned.	
12. Service Continuity: 85% of pharmacies maintain consistent delivery of the full clinical service suite - Pharmacy First, Hypertension and Contraception versus the 2025 baseline.			
13. Support Hub and Resource Access: Launch the Pastoral and Professional Support Hub on the CPH website by September 2026 with a baseline of 50+ unique visits in Q4 to ensure contractors are successfully "signposted."		**Achieved:** The Pastoral and Professional Support Hub has launched ahead of the September target. **Next:** Monitor usage and establish the Q4 baseline of 50+ unique visits.	Niru
14. IP and DPP facilitation: Publish a "DPP Access Guide" (hints/tips) and complete a "Teach and Treat" evaluation report by Jan 2027 to support future funding lobbying.			
15. Community Engagement: Establish communities of practice with at least 20 active members across the four target cohorts (Trainees, Newly Qualified Pharmacists, Technicians and IPs) by February 2027.			
16. Workforce Visibility: Deliver quarterly targeted feature updates specifically highlighting funded training pathways for both Pharmacists and Technicians.			
17. Platform Refresh: Launch a redesigned "Resource Toolbox" by Oct 2026, structured by 3–5 core themes (e.g., Pharmacy Services, Workforce, Governance) for easier manual navigation.			Izzy
18. Visual Asset Output: Produce and distribute 6 "High-Impact" infographics (approx. 1 every 5-6 weeks) via WhatsApp/Social Media by Oct 2026.		CPCF,Medicine shortage	
19. Contractor Satisfaction: Achieve an 80% positive rating in the 2026 annual survey regarding the ease of finding information and digesting visual updates.			
20. Broadcast Reach: Increase the WhatsApp Broadcast List by 5% by Oct 2026 through active promotion of the new "Visual-First" updates.		Whatsapp broadcast list has increased by 9.8% (12.08.26)	
21. MP and Councillor Engagement: Deliver 3 bespoke "Impact Briefings" using local Herts data to key political stakeholders (MPs/Councillors) by Oct 2026.		Political engagement has progressed, including the medicines shortages briefing and further stakeholder engagement.Victora collins, Alister strathern and Matt Tomain	Helen
22. External Funding Pipeline: Identify and register CPH for at least 2 non-NHS funding portals (e.g., Local Authority or Community Grants) by January 2027.		Target: January 2027	
23. Pharmacy Advocacy Tool: Create a "Pharmacy Value Factsheet" (1-page) that highlights the social and economic impact of Herts pharmacies for non-clinical partners by Sept 2026.		Development remains outstanding. There is a risk that the September date may require re-profiling to ensure the factsheet is sufficiently evidenced and useful for external partners.	
24. Innovation Hub Launch: Populate the "Innovation Hub" with at least 3 local case studies or workflow tips by Oct 2026.		CPH Innovation Hub now launched	Izzy
25. Locality Engagement: Capture and share at least one "Locality Success Story" per month via the e-News or WhatsApp to build content for the 2027 event.			
26. Excellence Event Planning: Secure a date, venue/platform, and draft agenda for the Feb 2027 "Excellence Event" by Oct 2026.		This was not a Q2 priority and is scheduled for the next phase of delivery.	
27. Stakeholder Mapping: Identify and invite at least 5 key ICB or political stakeholders to the Excellence Event to witness local pharmacy impact.		Stakeholder mapping has not yet commenced as a Q2 priority.	
28. Business Resource Signposting: Update the CPH website by Oct 2026 to include a "Sustainability Signposting" page with links to national bodies and professional associations.		Target: October 2026	Chloe
29. Benchmarking Support: Produce one "How-to" guide by Oct 2026 helping contractors use national data tools to track their NHS service performance.		Target: October 2026	
30. Diversification Case Studies: Feature 2 peer-led "Innovation Spotlights" in the e-News by January 2027, showcasing how peers have diversified to support their core business.		Target: January 2027	

	KPI achieved or on track to achieve the target within agreed timescales.
	KPI in progress, awaiting further evidence, or delivery scheduled for a later point in the year.
	KPI currently off-track, not yet sufficiently progressed, or requiring focused management attention to achieve the target.