

Annual Report

2025 – 2026



Officers

Chair: Mr. Suk Patel

Vice Chair: Mr. Alec Meakins

Treasurer: Mr. Bindu Bhatt

Chief Officer: Mrs. Helen Murphy

About Us

'The Committee' shall be the Halton, St Helens & Knowsley Local Pharmaceutical Committee (as required by the NHS Act 2006) and known as 'Community Pharmacy Halton, St Helens & Knowsley'.

Community Pharmacy Halton, St Helens & Knowsley is the statutory body representing contractors who provide community pharmacy services in Halton, St Helens & Knowsley.

Community Pharmacy Halton St Helens and Knowsley supports contractors across three Local Authority Areas within the Liverpool City Region. The Liverpool City Region is a combined authority area in Northwest England. It has six council areas the others being Liverpool, Wirral and Sefton. The region had a population of 1,571,045 in 2022.

The LPC footprint has a combined population of 460,000 which is made up of Halton 128,000, St Helens 180,000 and Knowsley 152,000.

The population within the LPC footprint are living under extremely high levels of deprivation. All Local Authority areas sit within the top 12% of the most deprived Local Authorities within the country and Knowsley sits as the second most deprived area. All of our areas are facing a shift to a greater proportion of the population being over 65.

Our community pharmacies provide an essential component of the primary care support across the area. Over the last year we have seen our contractor numbers reduce from 109 to 106 with the remaining pharmacies working increasingly hard to support their local patients.



Welcome

Another year has passed and, like many of you, my wife and I continue to spend most of our working days in our pharmacies. We see first-hand the pressures facing community pharmacy. Every day brings new challenges, whether that is increasing clinical workload, patients struggling to access other parts of the NHS, medicine shortages or simply trying to provide the level of care our patients deserve whilst running a sustainable business.

Despite all of this, I remain incredibly proud of what community pharmacy continues to achieve. We are delivering more clinical services, supporting our GP colleagues, reducing pressure on other parts of the NHS and providing accessible healthcare for our local communities. I firmly believe we have the skills, accessibility and trust of our patients to do much more.

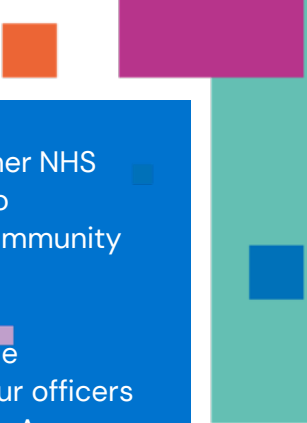
However, we must not lose sight of the fact that dispensing remains the bread and butter of community pharmacy. The new Community Pharmacy Contractual Framework gives us some certainty for the year ahead and brings further opportunities, including independent prescribing within Pharmacy First, but our core funding model still needs to be sustainable. Delays in agreeing price concessions continue to create uncertainty for contractors. Contractors may have to supply essential medicines without knowing whether they will ultimately be reimbursed fairly. This instability within our funding model needs to be addressed.

We also continue to challenge the use of branded generics locally where they adversely affect contractors and medicine supply. At the same time, pharmacy owners have had to absorb increases in the National Living Wage, National Insurance and other operating costs. Unlike some other high street businesses, community pharmacies receive no business rates relief. These pressures cannot be ignored when we are being asked to invest in our teams and deliver more for the NHS.

I welcome the continued expansion of clinical services, but one of my frustrations is that community pharmacy could still do much, much more. It remains incredibly difficult to plan a pharmacy and manage staff time when we cannot predict how many patients will walk through the door for an advanced service. One day there may be very few consultations and the next we can be inundated. We want to invest in our teams and release pharmacists and technicians to provide these services, but there needs to be enough consistency and confidence in patient referrals to allow contractors to plan for them.

Vaccination is another example. Community pharmacy has shown how successfully we can deliver Flu and COVID vaccinations, yet there remain vaccinations such as RSV and pneumococcal that we are not routinely commissioned to provide. We also want to deliver more of the newer vaccination services, but this becomes difficult when contractors cannot obtain the stock they need. We have the workforce, the accessibility and the willingness to do more; the system needs to make better use of us.

Locally, your committee has continued to work hard to make sure community pharmacy has a voice. We have maintained strong relationships with our Integrated Care Board,



Medicines Management teams, Local Authorities, Primary Care Networks and other NHS colleagues across Halton, Knowsley and St Helens. These relationships allow us to challenge issues affecting contractors, influence local services and make sure community pharmacy is involved as new ways of working develop.

One of our major areas of focus has been supporting contractors to maximise the opportunities from national services. Pharmacy First continues to develop and our officers have worked closely with GP practices and pharmacy teams to improve referrals. Across our area we have seen a 19% increase in Pharmacy First activity, a 20% increase in Hypertension consultations and a 60% increase in Contraception consultations. These figures show what community pharmacy can deliver, but there is still much more potential if referral pathways become consistent and patients are routinely directed to us.

The development of the NHS Neighbourhood model is another important opportunity. We have worked hard to make sure community pharmacy is represented as these new models develop. If pharmacy is not involved in those discussions now, decisions will be made without us. Work with Primary Care Networks, Neighbourhood teams and Urgent Treatment Centres is already creating opportunities to direct more appropriate patients into community pharmacy and we will continue to push for pharmacy to be an integral part of primary care.

Much of the work carried out by your LPC is not always visible to contractors. Whether it is negotiating improvements to local service fees, challenging payment problems, supporting quality assurance and contract monitoring visits, helping with smartcards and ODS code changes, or representing contractors at the many meetings taking place across our three areas, the aim remains the same – to support contractors and make sure your voice is heard.

As always, I would like to thank our Chief Officer Helen Murphy for her exceptional work and leadership throughout another demanding year. Helen continues to represent community pharmacy across an ever-increasing number of local and regional meetings and is a huge asset to our contractors. Harriet has continued to develop relationships across our areas and has played an important role in local services and Primary Care engagement. Edward has made an excellent start since joining us, quickly building relationships with contractors and GP practices whilst providing practical support to pharmacy teams. Jess continues to keep everything running behind the scenes and makes sure the committee functions efficiently. I would also like to thank David Barker for the significant contribution he made to contractors during his time as our Engagement Officer before retiring during the year.

I would also like to thank Alec, Bindu and every member of our committee, who continue to commit their time, experience and expertise to representing contractors across Halton, Knowsley and St Helens. Not every hour spent on LPC work is seen, but their contribution and support are greatly appreciated.

Finally, I would like to thank every contractor and every member of our pharmacy teams. I know how hard you continue to work because I see exactly the same commitment from my own teams every day. Community pharmacy has never been more important to the NHS, but we must make sure the foundations of our businesses remain sustainable if we are to fulfil the potential that everyone can now see in our profession.





As we look ahead there may also be changes in how contractors across our area are represented. Whatever the future holds, our priority must remain exactly the same as it has always been – to represent community pharmacy contractors fairly and make sure your voice is heard. Whether you are an independent contractor, CCA or IPA member, strong contractor representation and the local relationships built over many years must remain at the heart of everything we do.

We will continue to challenge where we need to, support contractors whenever we can and make the case for community pharmacy locally and nationally. We have shown how much more pharmacy can offer. Now we need the opportunity, funding and confidence to deliver it.

Suketu Patel

Chair

Community Pharmacy Halton, St Helens & Knowsley





Who we are

Our committee members

In the year ending 31st March 2026, our committee had 11 members who were nominated or elected to represent their sector:

- 5 independent Contractors, elected by peers
- 2 members nominated by the IPA (Independent Pharmacies Association) (formerly AIMp)
- 4 members nominated by the CCA (Company Chemists Association)

Our office team

- Chief Officer: Helen Murphy
- Services Manager: Harriet O'Neill
- Engagement Officer: Edward Murphy
- Business Support Officer: Jess Bibby

Governance

Meeting attendance

The table below lists all committee members who served in 2025/26. Our committee meets on a regular basis. Meetings are held in public, and Contractors are welcome to attend the open part of the meeting if they inform us in advance. You can find the dates on our website by clicking [here](#)

Name	Role/Status	Possible meeting attendance	Actual meeting attendance
Bindu Bhatt	Treasurer – Independent	6	6
Ali Dalal	Independent	6	4
Alec Meakins	Vice-Chair – CCA (Boots)	6	6
John Davey	Independent	6	5
Mari Williams	IPA – PCT Healthcare	6	6
Paul Knapton	CCA (Rowlands)	1	1
Tom Graves	CCA (Boots)	6	5
Suk Patel	Chair – Independent	6	5
Ben Mason	IPA – Imaan Healthcare	6	4
Paul Doherty	Independent	6	6
Alisha Summers	CCA (Well)	6	4
Joanne Murphy	CCA (Rowlands)	4	0

Governance Documentation

Committee members are required to attend meetings on a regular basis. They also attend other meetings on behalf of the LPC and contractors. The committee operates under and complies with The Nolan Principles and sign an annual declaration.

You can view our full range of policies and documentation including our Code of Conduct and Governance Framework on our [website](#)

Treasurers Report

Financial Performance for the Year

I am pleased to present the Treasurer's Report for HSHK LPC for the year ending ahead of the September 2026 Annual General Meeting.

Income for the year was £240,477.00, while expenditure totaled £181,301.00. This resulted in a surplus of £59,176.00 for the year.

Item	Amount
Income	£240,477.00
Expenditure	£181,301.00
Surplus	£59,176.00

Bank Balance and Reserve Position

The current bank balance is £189,621.00. This represents a substantial over-provision compared with the amount required to cover six months' expenditure, which is £90,650.50.

The bank balance is therefore £98,970.50 above the six-month expenditure provision.

Reserve Measure	Amount
Current bank balance (Cash at bank and in hand)	£189,621.00
Debtors	£4,333.00
Six months' expenditure provision	£90,650.50
Excess over provision	£98,970.50

Recommendation

In light of this strong financial position and the level of reserves currently held, I will be proposing a levy holiday at the next committee meeting, to come into force as soon as possible.

This recommendation is intended to ensure that funds held by HSHK LPC remain proportionate to anticipated expenditure while continuing to maintain adequate reserves for operational needs.

Bindu Bhatt
Treasurer, HSHK LPC

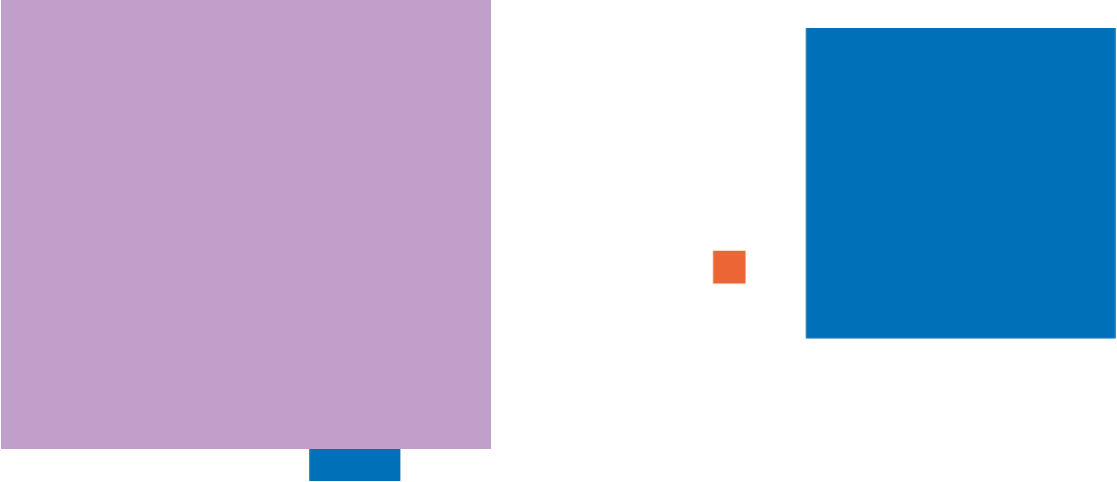


COMMUNITY PHARMACY
Halton, St Helens & Knowlsey

FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2026

See report from DJH Limited





Chief Officer Report

This year brought further changes to the team. David Barker retired at the end of September 2025, and we thank him for the significant contribution he made to contractors during his time as Engagement Officer. Edward Murphy joined us as his replacement in early October. With existing experience from his part-time role with Sefton LPC, Edward has quickly settled into HSHK supporting contractors effectively.

Jess Bibby, Business Support Officer, and Harriet O'Neill, Service Development Manager, continue in their roles. I would like to thank and recognise the whole team for their ongoing support to contractors and for the work they have carried out on your behalf over the past year.

The team remains committed to providing contractors with a high standard of service and support.

Support with contractual and national service priorities

The team continues to assist contractors with key contractual obligations, many of which are highlighted in the weekly LPC newsletter. We encourage all contractors to read the newsletter, as it covers important local and national updates and sets out any essential actions required.

National services and training

This year, we have focused support on national services, including the transition of Emergency Contraception from a local service to the national service and updates to the Pharmacy First pathways. These areas were the focus of the joint LPC training meeting held in November 2025.

The LPC has also provided updated Pharmacy First counter guides, myth-busting information, and a Hypertension briefing on how staff can be used most effectively to deliver the service. We continue to encourage contractors to increase the proportion of eligible patients who go on to accept ABPM testing.

Referral engagement and service growth

David and Edward have liaised with GP practices to help ensure their teams are well placed to make appropriate referrals into community pharmacy. This work has contributed to a noticeable increase in referrals in St Helens, which had previously recorded much lower referral levels.

Contractors have delivered strong growth across key services this year:

- 19% increase in Pharmacy First activity
- 20% increase in Hypertension consultations
- 60% increase in Contraception consultations

The Integrated Care Board's ambition is for community pharmacy to become the delivery system of choice for oral contraception consultations, and we will continue to support contractors to help achieve this.

Additional support provided

The team has also supported contractors with:

- Smartcard issues and updates, supported by Edward's role as a Registration Authority representative
- Payment issues for local services, helping to secure resolution and payment for contractors
- CPAF Lite submissions and wider contractual obligations
- Concerns about nomination changes made without patient consent
- Relationship and system issues raised by pharmacies or GP practices
- Price concession payments for supplies made through Care at the Chemist which are applied via the LPC.
- Vaccination processes for Flu and COVID arrangements
- Palliative Care pharmacy data to support the Pharmacy Quality Scheme

Support for Locally Commissioned Services

The LPC team has worked closely with local representatives across three Place-based organisations, three Local Authorities, and lead providers such as Axxess Sexual Health. This work has helped address emerging service delivery issues, secure contract renewals or extensions, and review service fees.

Care at the Chemist formulary review

The Care at the Chemist formulary was reviewed and updated, with the required changes incorporated into a simplified PharmOutcomes template.

In Knowsley, the Smoking Cessation Service was decommissioned and replaced with a Carbon Monoxide validation service to support the recording of smoking quits.

Knowsley services have been recommissioned for a three-year period, while St Helens and Halton remain on annual review cycles.

Harriet has been linking with local Commissioners and Service Fee changes were made as follows.

Halton

- The Occupational Health Flu Vaccination Service fee was increased, bringing it in line with the Knowsley fee and the Needle and Syringe Service received an increase in the retainer.

Knowsley

- Fee increases were made to:
 - The Occupational Flu Vaccination Service,
 - NRT Voucher Service (bringing it in line with the Halton service),
 - The Lifestyles Referral Service, alongside expanded eligibility criteria for referrals,
 - Needle and Syringe Programme supply fee and Supervised administration Service fee.
- As the EHC service moved to the national service, a pregnancy test supply service was commissioned locally.

St Helens

- Fee increases were made to the NRT Voucher Service, Vitamin D Supply Service and Needle and Syringe Programme.

Cheshire and Merseyside-wide services

All LPCs worked closely with the ICB on the commissioning of services across the Cheshire and Merseyside footprint.

- The ICB Palliative Care Service was implemented on 1 April 2026, replacing the existing Place-based services.
- The Rota Service direction of pharmacies and associated fee were reviewed, resulting in a significant uplift to Rota payments, aligned with other ICB areas in England.

Relationships and representation

The LPC continues to engage with local service commissioners to make the case for fair remuneration for the services contractors provide to local populations, and to support the adaptation or development of new services.

NHS Neighbourhood model

The NHS Neighbourhood agenda aims to deliver more integrated, proactive, and person-centred care closer to where people live. It brings together health, social care, voluntary sector, and community services around the needs of local populations, with a focus on prevention, reducing health inequalities, supporting people with long-term conditions, and enabling multidisciplinary teams to coordinate care within neighbourhoods.

During the year, the Government announced its pilot sites for the Neighbourhood model of healthcare, with St Helens identified as a pilot site. The LPC has promoted the benefits that community pharmacy can offer local populations through Neighbourhood Steering Group meetings and workshops.

We continue to build relationships with Primary Care transformation leads and system partners across each area. In Halton, this has supported the implementation of a process, at the Urgent Treatment Centres, to signpost patients more effectively to community pharmacy for the seven clinical conditions.

The LPC has also worked with the PCN engagement lead in Halton to support increases in national service activity and strengthen positive relationships between GP practice staff and pharmacies.

Representation across the system

The LPC has represented contractors and community pharmacy in meetings with representatives from:

- NHS England's Integrated Care Board (ICB) team
- NHS regional representatives
- NHS education and workforce planning leads
- Place-based Medicines Management Teams
- Local Authorities

The LPC also continues to respond to pharmacy contract applications.

At the end of March, several key personnel left their NHS roles and the LPC is awaiting further details of the new structures.

Looking ahead to 2026/27

The team will continue to support contractors with contractual matters, local service recommissioning, and changes linked to the 2026/27 Community Pharmacy Contract settlement, particularly the introduction of independent prescribing to Pharmacy First.

We will continue to make the case for community pharmacy as a key delivery partner within the NHS Neighbourhood model, due to the accessibility pharmacies offer to their local patient populations. We will also advocate for a shift in local funding from secondary care to primary care.

The frail elderly patient population is a key focus area for the Cheshire and Merseyside healthcare system, and we have already commenced work to identify opportunities to maximise the community pharmacy offer in this area.

These are the key points, but if you would like any further information, please do not hesitate to ask. We are here to support LPC members and contractors, so please share your feedback and let us know how we can better support you.

Helen Murphy

Chief Officer

Community Pharmacy Halton, St Helens and Knowsley

Get in touch

Visit: <https://halton-st-helens-knowsley.communitypharmacy.org.uk>

Email: enquiries@hshk-lpc.org.uk