

Community Pharmacy Lead Officer (CPLO) Biographies and PCN Allocations

V1.1



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1.0 Introduction to the Community Pharmacy Lead Officer (CPLO) Role

The CPLO role is a Black Country-wide initiative established to strengthen integration and collaboration between community pharmacy, Primary Care Networks (PCNs), Integrated Neighbourhood Teams (INTs), and the wider primary care system.

The role has been developed jointly by Black Country Integrated Care Board (ICB) and Community Pharmacy Black Country Local Pharmaceutical Committee (LPC), in response to national priorities to improve access to primary care, increase utilisation of community pharmacy clinical services, and support neighbourhood-based models of care. The programme is funded collaboratively by the ICB and the LPC and forms part of the strategic direction for 2026/27 onwards, as set out in the PCN Assurance Framework and supporting Memoranda of Understanding.

Each CPLO acts as a named engagement lead for one or more PCNs and/or INTs, providing dedicated capacity to support effective communication, pathway development, and service uptake between general practice and community pharmacy. CPLOs attend PCN and INT meetings, support the implementation of national and local pharmacy services (including Pharmacy First, Hypertension Case-Finding, Oral Contraception, and Discharge Medicines Service), and help address variation in service utilisation across practices and pharmacies. The role is collaborative and supportive in nature and does not replace existing governance or performance management arrangements.

The CPLO programme is jointly overseen by the Senior Responsible Officers:

- Stephen Noble, Chief Executive Officer, Community Pharmacy Black Country LPC
ceo@cpblackcountry.org
- Sukhy Somal, Head of Community Pharmacy Clinical Services, Black Country ICB
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Operational leadership and delivery oversight is supported by the Deputy Leads:

- Dr Jaswinder Dhap
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- Inderpreet Kaur
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Together, the CPLO network provides a consistent, system-wide approach to embedding community pharmacy more effectively within neighbourhood and primary care delivery across the Black Country.



2.0 How to Use This Document

Below are the biographies of CPLOs appointed across the Black Country. This information helps PCNs, INTs, GP practices, community pharmacies, and system partners identify their assigned CPLOs.

Use the table of contents to find your PCN and assigned CPLO. Each biography details the CPLO's professional experience and role in the programme, and serves as a reference for local engagement, meeting participation, and ongoing collaboration.



Deputy CPLO Lead and Named CPLO for:

- Dudley & Netherton PCN
- Stourbridge, Wollescote & Lye PCN
- Walsall East One PCN
- Walsall West One PCN



Inderpreet Kaur
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Professional Background

I am an experienced Clinical Pharmacist and Independent Prescriber with over ten years' experience working across community pharmacy, PCNs, ICBs, hospitals, and national NHS leadership roles. My career has focused on improving access to care, strengthening clinical governance, and supporting the integration of community pharmacy within primary care systems.

I currently work as a Lead Clinical Pharmacist for a PCN in Birmingham. In my PCN role, I provide strategic leadership for medicines optimisation, service delivery, workforce development, and clinical governance. I work closely with PCN Clinical Directors, GP partners, practice managers, and colleagues from the Integrated Neighbourhood Team to support pathway development, data-driven improvement, and safe, effective prescribing practice.

I have significant experience supporting community pharmacy services and collaboration with general practice, including Pharmacy First, hypertension case-finding, structured medication reviews, diabetes management, and contraception services. I have led quality improvement projects that improved prescribing safety, medicines reconciliation following hospital discharge, and uptake of self-care and Primary Care Access Recovery Plan aligned services, delivering measurable improvements in patient safety and value for money.

Previously, I worked as a National Chief Pharmaceutical Officer's Clinical Fellow where I developed national education programmes, worked with senior NHS leaders, and supported policy implementation across pharmacy and primary care. I have applied my learning locally and continue to support community pharmacies in Black Country. I am the clinical lead for three NHS Independent Prescribing Pathfinder pilot sites, where have implemented prescribing services in community pharmacies. Supporting the IP pathfinder the last 12 months has strengthened my understanding of the wider health and care landscape, population



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health priorities, and the importance of effective communication between community pharmacy, PCNs, and system partners.

This combination of frontline, system, and national experience enables me to understand the challenges community pharmacies face while working constructively with PCNs and INTs to improve access, outcomes, and integration.

As the co-deputy CPLO, I lead and coordinate all CPLOs in Black Country. I bring a combination of frontline, system, and national experience, enabling me to understand the challenges community pharmacies face while working constructively with PCNs and INTs to improve access, outcomes, and integration in the Black Country.

Approach as a CPLO

I adopt a supportive, collaborative, and solutions-oriented approach. My top priority is fostering trusted partnerships with community pharmacies, PCNs, and INTs by promoting transparent, two-way communication and cultivating a shared understanding of local priorities.

I am dedicated to empowering pharmacies to engage meaningfully with PCNs and neighbourhood teams, identifying opportunities to broaden service delivery, optimise referral pathways, and alleviate pressures on general practice. I collaborate closely with stakeholders to eliminate operational barriers, advance workforce development, and align local initiatives with national priorities such as PCARP and neighbourhood health objectives.

What Pharmacies, PCNs & INTs Can Expect

As a CPLO, I will:

- Act as a clear, accessible, and consistent point of contact for community pharmacy within PCNs and INTs.
- Champion the uptake, quality, and consistency of commissioned pharmacy services.
- Facilitate open, two-way communication between pharmacies, PCNs/INTs, the LPC, and the ICB.
- Promote the sharing of best practices, data insights, and learning across neighbourhoods.
- Proactively escalate challenges and system barriers, seeking constructive solutions.
- Operate in a supportive, partnership-focused capacity that encourages improvement, not enforcement.
- My overarching goal is to strengthen relationships, enhance service delivery, and ensure community pharmacy is recognised and embedded as a key partner within neighbourhood-based care.



Deputy CPLO Lead and Named CPLO for:

- Central Health Partnerships PCN
- Newcomen PCN
- Walsall West Two PCN



Dr Jaswinder Dhap
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Professional Background:

I am a pharmacist with over 20 years' experience spanning community pharmacy, PCNs, secondary care, and national system roles. My background includes service transformation, clinical leadership, and workforce strategy. I currently work as Strategic Lead for Programmes at NHS England, where I lead national education and transformation programmes. I completed my Doctorate in Pharmacy (DPharm) from the University of Bradford in 2021, with a research focus on pharmacist-led care models for Parkinson's Disease and long-term conditions.

Locally, I have supported the implementation of independent prescribing Pathfinder services in community pharmacies, led COVID-19 vaccination clinics, and increased clinical service uptake through mentoring and peer development. I am a trained QSIR (Quality, Service Improvement and Redesign) practitioner with extensive experience in service redesign, clinical model implementation, and stakeholder engagement.

Nationally, I was one of the Chief Pharmaceutical Officer's Clinical Fellows and held positions within NHS England's Leadership Academy and Pharmacy Workforce teams. In my previous role, I was the Primary Care Programme Manager for the People, Talent and Culture team in NHS Midlands. I commissioned and delivered training sessions, service evaluation pilots, and clinical education events across the Black Country and Midlands. As a mentor, I have supported over 60 pharmacists, many from female and ethnic minority backgrounds, in progressing to roles in PCNs, hospitals, academia, and industry.

As the Deputy CPLO Lead, I bring my expertise in compassionate leadership, workforce development, clinical pathway design, and inclusive professional advancement.



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Approach as a CPLO

As a CPLO, I aim to build trusted relationships with pharmacy teams, PCNs, and stakeholders to support local clinical service delivery. I take a collaborative, solution-focused approach, using my experience in service design and mentoring to help pharmacies increase engagement with commissioned services. I'll work with LPCs and ICBs to escalate challenges, support readiness, and align priorities across community and primary care. My leadership style is inclusive and developmental, ensuring pharmacy representation in local transformation discussions.

What Pharmacies, PCNs & INTs Can Expect:

As a CPLO, I will:

- Be a named point of contact for pharmacies within the PCN/INT.
- Support uptake and improvement of Pharmacy First, hypertension, contraception, and other commissioned services.
- Facilitate two-way communication among community pharmacies, PCNs, ICBs, and the LPC.
- Share innovation and best practice examples across sites.
- Escalate service barriers when necessary and proactively resolve them.
- Work in a supportive capacity across Black Country.



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Named CPLO for:

- Kingswinford & Wordsley PCN



Claire Downing
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Professional Background

I am a practice-based pharmacy technician with over 29 years' experience across community pharmacy and PCN settings. I have supported the delivery of key NHS services including Pharmacy First, the Discharge Medicines Service, and Hypertension Case-Finding, consistently demonstrating a strong commitment to high-quality service delivery and patient care.

During my time in community pharmacy, I was actively involved in dispensing and managing blister tray medication, administering flu vaccinations and supporting compliance with the Pharmacy Quality Scheme. Since transitioning into general practice, my role has focused on medication optimisation, medication reviews, and medicines safety, contributing to improved prescribing quality and patient outcomes.

I have a particular interest in women's health and led a medicines safety audit to ensure appropriate endometrial protection was prescribed in line with individual oestrogen doses. This work supported safer, evidence-based prescribing and highlighted the value of pharmacy technicians in clinical quality improvement.

I have delivered presentations across multiple platforms to promote the capability and value of pharmacy technicians as healthcare professionals. This has included highlighting our use of professional judgement, clinical skills, and strengths in project and audit work. I continue to actively support the development of pre-registration pharmacists and fellow pharmacy technicians through mentorship, guidance, and shared learning.

Approach as a CPLO

As a CPLO and advocate for community pharmacy, my role is to support community pharmacies to engage effectively with PCNs and INTs. I will work to identify opportunities to increase service delivery and to help remove barriers by collaborating closely with the LPC and ICB. I believe this collaborative approach is



essential to fully utilising the vital skills that pharmacists and pharmacy technicians bring to the wider healthcare system. Stronger communication and closer multidisciplinary working are, in my view, key to improving patient outcomes and enhancing job satisfaction across the profession.

What Pharmacies, PCNs & INTs Can Expect

As a CPLO, I will

- Act as a named point of contact for community pharmacy within the PCN/INT
- Support uptake and quality of commissioned pharmacy services
- Facilitate two-way communication between pharmacies, PCNs/INTs, LPC and ICB
- Share best practices and escalate barriers where needed
- Work in a supportive, non-enforcement capacity



Named CPLO for:

- Royal Wolverhampton Trust PCN
- Unity East Network PCN
- Unity West Network PCN
- Wolverhampton North Network PCN
- Wolverhampton South East Collaborative PCN
- Wolverhampton Total Health PCN



Ruquaya Ahmad
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Professional Background

I am a clinical pharmacist with experience across community pharmacy and general practice, currently working in a general practice. I have a strong understanding of how community pharmacy operates within the wider NHS system, including its role within PCNs and ICB priorities. My background gives me a practical appreciation of the opportunities and challenges facing community pharmacy, as well as the importance of joined up working across organisations.

Experience Supporting Service Delivery, Engagement, and Quality Improvement

I have been closely involved in the delivery and development of clinical services that rely on effective collaboration between community pharmacy, general practices, and wider system partners. This includes supporting service implementation, improving referral pathways, and aligning service delivery with local and national priorities. I actively engage with stakeholders to improve communication, increase service uptake, and ensure services are clinically safe, sustainable, and patient-centred.

Leadership, Collaboration, and System Working

I am particularly passionate about collaboration and partnership working. I have experience bringing together professionals across community pharmacy, general practice, and PCNs to support integrated service delivery and reduce fragmentation of care. I work proactively to build relationships, encourage shared ownership of services, and support practical solutions that work across organisational boundaries. I am motivated by transformation that strengthens trust, clarity of roles, and consistency across the system.



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Areas of Interest and Expertise

- Community pharmacy integration within PCNs and ICBs
- Collaborative service development and implementation
- System-wide approaches to service optimisation
- Independent prescribing in community pharmacy
- Hypertension and cardiovascular risk management
- Quality improvement and clinical governance
- Improving communication and pathways between community pharmacy and general practice

Approach as a CPLO

I would approach the CPLO role as a supportive, collaborative partner, working closely with community pharmacy teams, general practice, PCNs, and system colleagues to enable effective and sustainable service delivery. My focus would be on building strong relationships, listening to local challenges, and co-designing practical solutions with general practice that align community pharmacy services with primary care and ICB priorities. I am committed to partnership working that improves communication between pharmacies and surgeries, reduces fragmentation, and strengthens community pharmacy's role as an integral part of the wider primary care system.

What Pharmacies, PCNs & INTs Can Expect

As a CPLO, I will

- Act as a named point of contact for community pharmacy within the PCN/INT
- Support uptake and quality of commissioned pharmacy services
- Facilitate two-way communication between pharmacies, PCNs/INTs, LPC and ICB
- Share best practices and escalate barriers where needed
- Work in a supportive, non-enforcement capacity



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Named CPLO for:

- Oldbury & Smethwick PCN
- Together4Healthcare PCN
- Your Health Partnership PCN



Sandeep Pahal
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Professional Background

I am a Senior Principal Pharmacist specialising in community and primary care, with a proven track record of leading system wide medicines optimisation across PCNs, the Black Country ICB and furthermore within the West Midlands Region, to improve patient and practice outcomes. Ideal qualities for a CPLO, having worked within Community Pharmacy for over 7 years and now working strategically and statutorily for Black Country ICB. Moreover, further experience includes Hospital, Clinical Trials, Academia, General Practice and Innovation Networks.

My leadership approach is collaborative, data driven and delivery focused. I have built and managed multidisciplinary teams of clinical pharmacists and technicians, overseeing recruitment, capability development and performance management. I can standardise and scale best practice across PCNs, INTs and community pharmacy, using communication and analytics to target variation and deliver measurable efficiency and quality gains. An example includes: Pharmacy-led Information Technology Intervention for the Reduction of Clinical Important Errors in Medicines Management (PINCER) 2021 – I had regionally and nationally fastest and greatest uptake of PINCER to improve patient safety and lower hospital admissions. This was recognised by NHSE.

Strategically, I align NHS priorities for medicines optimisation — governance, data enabled risk stratification, digital innovation and Public Health focus. I hold a Masters in Public Health & Research with a scholarship award from Pharmacy Research UK and I am a member of The Royal Society for Public Health. Additionally, I am an active member of the National Centre for Creative Health (NCCH) GP and Pharmacy Specialist Interest Groups who advocate integrating creative activities into healthcare via practice, education, research and policy development.

Being a multi-award-winning Pharmacist, I can set direction, build partnerships with clinicians,



commissioners, community pharmacy and patients to improve population health, reduce inequalities and optimise prevention. I have previously won awards aligned to the role of a CPLO as General Practice Team of the Year, Pharmacy Management Best Co-Operative Project. Nominated as highly commended for Health Services Journal and a finalist for the Royal Pharmaceutical Society - Leadership in Pharmacy Award. I recognise that improving time / demand management and patient safety are important as a CPLO.

Approach as a CPLO

In approaching the CPLO role, I will prioritise a supportive, collaborative, and partnership-driven mindset to foster systemic improvements in pharmacy services and patient outcomes. I will focus on empowering multidisciplinary teams by ensuring trust and shared ownership. This supportive approach extends to quality improvement, where I will use insights to identify barriers and co-create solutions that enhance service delivery without adding burden.

Collaboration is key to integrating pharmacy across the system. I will actively seek input from diverse groups, including ICB colleagues, general practice, PCNs, INTs, Local Authority, VSCEs and community providers, to align efforts with broader NHS goals. By facilitating regular cross-functional forums and joint working groups, ensures pharmacy isn't isolated but embedded as a vital partner in multidisciplinary teams. Finally, partnerships drive sustainable transformation. External stakeholders leverage collective expertise. In leadership roles, I've partnered on projects where collaborative input from all parties led to scalable innovations that improved access for underserved populations

Overall, my approach is relational and inclusive, viewing the CPLO role as a facilitator of collective success rather than a solo endeavour, ultimately aiming to elevate community pharmacy's impact on health equity and system resilience.

What Pharmacies, PCNs & INTs Can Expect

As a CPLO, I will

- Commit to strengthening community pharmacy's role in integrated care / INT's
- Enhance current PCARP services.
- Build on current expertise in medicines optimisation and leadership.
- Improve patient access, outcomes, and reduce health inequalities.
- Align with NHS priorities and commit to delivering high-quality care.
- Enhanced integration, resource support, and collaborative frameworks
- Improve patient outcomes service efficiency.
- Reduce pressure on GPs by efficient time / demand management.
- Streamline communication
- Advocacy for community pharmacies in system-wide collaborations and joint planning to embed pharmacy expertise.
- Contribute to population health management
- Provide equitable service
- Facilitate cross-sector collaboration within Community Pharmacy / PCNs / INTs
- Provide resources for MDTs



Named CPLO for:

- Walsall North PCN
- Walsall East Two PCN
- Walsall South One PCN
- Walsall South Two PCN

Satnaam Singh Nandra

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Professional Background

As a senior clinical pharmacist with a 25 year multi-sector pharmacy career working in the community, primary (PCT/CCG/ICB/STP), secondary, academic and PCN sectors of pharmacy, I have developed and implemented systems, processes, clinical audits, formularies and guidelines & developed knowledge, skills and expertise which I have adapted and applied to patient care.

As a senior primary care pharmacist, I have worked with and in general practices, in patient facing, strategic and lead roles supporting GPs, practice teams and patients with all aspects of Medicines and Pharmacy. As a PCN lead pharmacist I developed & supported the team and supported the PCN CD and PCN board as the Medicines and Pharmacy lead.

As part of my PCT/CCG/ICB/STP roles I have been the clinical pharmacy and medicines lead for Diabetes, Respiratory, Mental Health, Nutrition, Wound Care, Antimicrobials and Formulary & Interface and medicines & pharmacy contractual, governance, quality assurance lead pharmacist for various Trust governance committees and Drugs and Therapeutic committees.

Throughout my career I have had several opportunities to develop, collaborate, educate, train and up skill members of the healthcare team and patients.

I have maintained a role in community pharmacy as a locum, supporting the community pharmacy team and delivering patient care & services. I have provided consulting advice and guidance to support community pharmacies to set up COVID clinics, the former CPCS services, New Medicines Services (NMS) and Pharmacy First. As a locum, I deliver the Pharmacy First services.

I have a passion, vested interest to enhance and promote the potential of clinical service delivery in community pharmacy at a local, system (neighbourhood), ICB and national level to support patients, GPs and Trusts to improve the PCARP delivery.

Approach as a CPLO

- Work collaboratively with the key leads (PCN/INT/Practice/Community Pharmacy/LPC/ICB/Trusts) to understand barriers and look for collaborative solutions.
- Work collaboratively with the key leads (PCN/INT/Practice/Community Pharmacy/ICB/Trusts) to offer community pharmacy to plug gaps where possible.
- Promote community pharmacy as a key partner.
- Provided up-skilling and training to all teams.
- Proactive data analysis
- Actively promote Pharmacy First services, BP services, and Contraception service at all given opportunities.



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What Pharmacies, PCNs & INTs Can Expect

As a CPLO, I will

- Take a collaborative approach with PCN/INT/Practice/Community Pharmacy/LPC/ICB/Trusts
- Share learning with and from PCN/INT/Practice/Community Pharmacy/LPC/ICB/Trusts
- Provide expert knowledge to support discussions.
- Act as a named point of contact for community pharmacy within the PCN/INT
- Support uptake and quality of commissioned pharmacy services.
- Facilitate two-way communication between pharmacies, PCNs/INTs, LPC and ICB
- Share best practices and escalate barriers where needed.
- Work in a supportive, non-enforcement capacity



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Community Pharmacy Lead Officer (CPLO) Biographies and PCN Allocations

Named CPLO for:

- Caritas PCN
- Citrus PCN
- Health Vision Partnership PCN



Sukhjit Singh Gill
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Professional Background:

Originally trained and qualified as a solicitor, I began my career at a highly reputable London law firm consistently ranked among the top global firms for its expertise. My legal background provided a strong foundation in regulation, governance, risk management, and complex stakeholder environments — experience I now apply to the healthcare sector.

Transitioning from legal practice into health and primary care, I currently work as a business development consultant with GP businesses and primary care providers. In this role I design and support the delivery of more efficient, resilient, and patient-focused services, blending regulatory understanding with entrepreneurial thinking to unlock innovation, improve operational performance, and enable sustainable growth.

Approach as a CPLO

Community pharmacy has been a constant thread throughout my career. As a current contractor of a successful independent community pharmacy I am deeply committed to positioning pharmacy as a central pillar of neighborhood health systems. My work focuses on developing best-in-class community pharmacy provision that aligns with the NHS Ten Year Strategy, strengthens integration across primary care, and expands the clinical, preventative, and digital role of pharmacy within local communities. All of this work is bound through a collaborative network and understanding with all stakeholders.



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What Pharmacies, PCNs & INTs Can Expect:

As a CPLO, I will:

- Act as a named point of contact for community pharmacy within the PCN/INT
- Support uptake and quality of commissioned pharmacy services
- Facilitate two-way communication between pharmacies, PCNs/INTs, LPC and ICB
- Share best practices and escalate barriers where needed
- Work in a supportive, non-enforcement capacity
- Form and enhance relationships with all stakeholders in the PCN/INT
- Collaboratively work to create strategies and programmes to ease workflow of all stakeholders.



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Community Pharmacy Lead Officer (CPLO) Biographies and PCN Allocations

Named CPLO for:

- Brierley Hill & Amblecote PCN
- Halesowen PCN
- Sedgley, Coseley and Gornal PCN



Tanya Louise Needle
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Professional Background

I have a diverse professional background that combines hands-on experience in community pharmacy with a strong foundation in education, communication, and supporting service users with complex needs. I have worked in community pharmacy for the past three years, gaining experience across dispensing, patient-facing services, and supporting the delivery of high-quality pharmaceutical care. During this time, I have developed a clear understanding of the pressures and opportunities within community pharmacy and the importance of collaboration across the wider primary care system.

Alongside my pharmacy experience, I spent seven years working as a Teaching Assistant supporting children with special educational needs. This role strengthened my skills in communication, engagement, and adapting approaches to meet individual needs. I regularly worked as part of a multidisciplinary team, contributing to care plans, supporting learning outcomes, and building trusting relationships with children, families, and professionals. These skills are directly transferable to a CPLO role, particularly when engaging with contractors, stakeholders, and diverse communities.

I have recently qualified as an Accuracy Checking Technician (ACT), which has further enhanced my understanding of governance, patient safety, and quality assurance within pharmacy services. This qualification reflects my commitment to professional development and to maintaining high standards of care and service delivery.

I am particularly interested in supporting the growth and development of community pharmacy services, improving engagement between pharmacies and system partners, and helping to embed new and enhanced services effectively. I am motivated to contribute to service improvement, workforce development, and transformation initiatives that strengthen the role of community pharmacy within integrated care systems and improve outcomes for patients and communities.



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Approach as a CPLO

As a CPLO, my approach would be supportive, collaborative, and partnership-focused. I would act as a key link between community pharmacies, PCNs, INTs, the LPC, and the ICB, helping to strengthen relationships and improve communication across the system.

I would work closely with pharmacy teams to understand local challenges and opportunities, supporting them to engage effectively with PCNs and increase service delivery. This would include helping to identify and remove barriers, signposting to appropriate support and resources, and promoting shared learning and best practice.

By working collaboratively with system partners, I would advocate for the role of community pharmacy and support sustainable, patient-focused service delivery as part of integrated care.

What Pharmacies, PCNs & INTs Can Expect

As a CPLO, I will

- Act as a named point of contact for community pharmacy within the PCN/INT
- Support uptake and quality of commissioned pharmacy services
- Facilitate two-way communication between pharmacies, PCNs/INTs, LPC and ICB
- Share best practices and escalate barriers where needed
- Work in a supportive, non-enforcement capacity
- Support relationship-building and collaboration across the PCN/INT footprint
- Help identify local opportunities for service development and integration



AMENDMENT HISTORY

VERSION	DATE	AMENDMENT HISTORY
V1.0	06/01/2026	New
V1.1	10/01/2026	Minor spelling and grammatical changes to some bios

REVIEWERS

This document has been reviewed by:

VERSION	DATE	NAME	TITLE
V1.0	06/01/2026	Inderpreet Kaur	Deputy CPLO Lead
V1.1	16/01/2026	Inderpreet Kaur	Deputy CPLO Lead

APPROVALS

This document has been approved by:

VERSION	DATE	NAME
V1.0	11/01/2026	Sukhy Somal
V1.1	11/01/2026	Sukhy Somal

RELATED DOCUMENTS

These documents will provide additional information:

DOCUMENT TITLE
MOU PCN assurance version 5

REVIEW PERIOD DETAILS

PUBLISHED DATE	TERM OF REVIEW	DATE DUE FOR REVIEW
NA	NA	NA



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