

# The Pharmacy First service

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# Presentation overview

- Strategic context for the service
- Summary of the service requirements
- The clinical pathways and PGDs
- Learning and development requirements
- Preparing to provide the service
- Q&A

# Delivery plan for recovering access to primary care

- On May 9<sup>th</sup>, 2023, NHSE & DHSC published the [Delivery plan for recovering access to primary care](#)
- The plan includes a commitment to:
  - [Pledge £645m investment in community pharmacies](#) over the next two years
  - This included a commitment to commission a Pharmacy First service, allowing the treatment of seven conditions
  - The **start date** is **31st January 2024** (subject to IT support being available)
  - Increase the provision of community pharmacy NHS Pharmacy Contraception Service and the Blood Pressure Checks Service
  - Invest to significantly improve the digital infrastructure between community pharmacy and general practice



# The Pharmacy First service

- New national Advanced service (therefore optional) that will include **seven new clinical pathways**
- Builds on the existing Community Pharmacist Consultation Service (CPCS), which most pharmacies provide (>90% LLR CPs) – expectation is that most pharmacies will choose to provide the extended Pharmacy First service
- Over 91% of CPs in LLR have already registered to provide PF.
- The service will consist of **three elements**:
- All 3 elements must be delivered as part of PF.

**Referrals for minor illness consultations with a pharmacist**

Previously part of CPCS

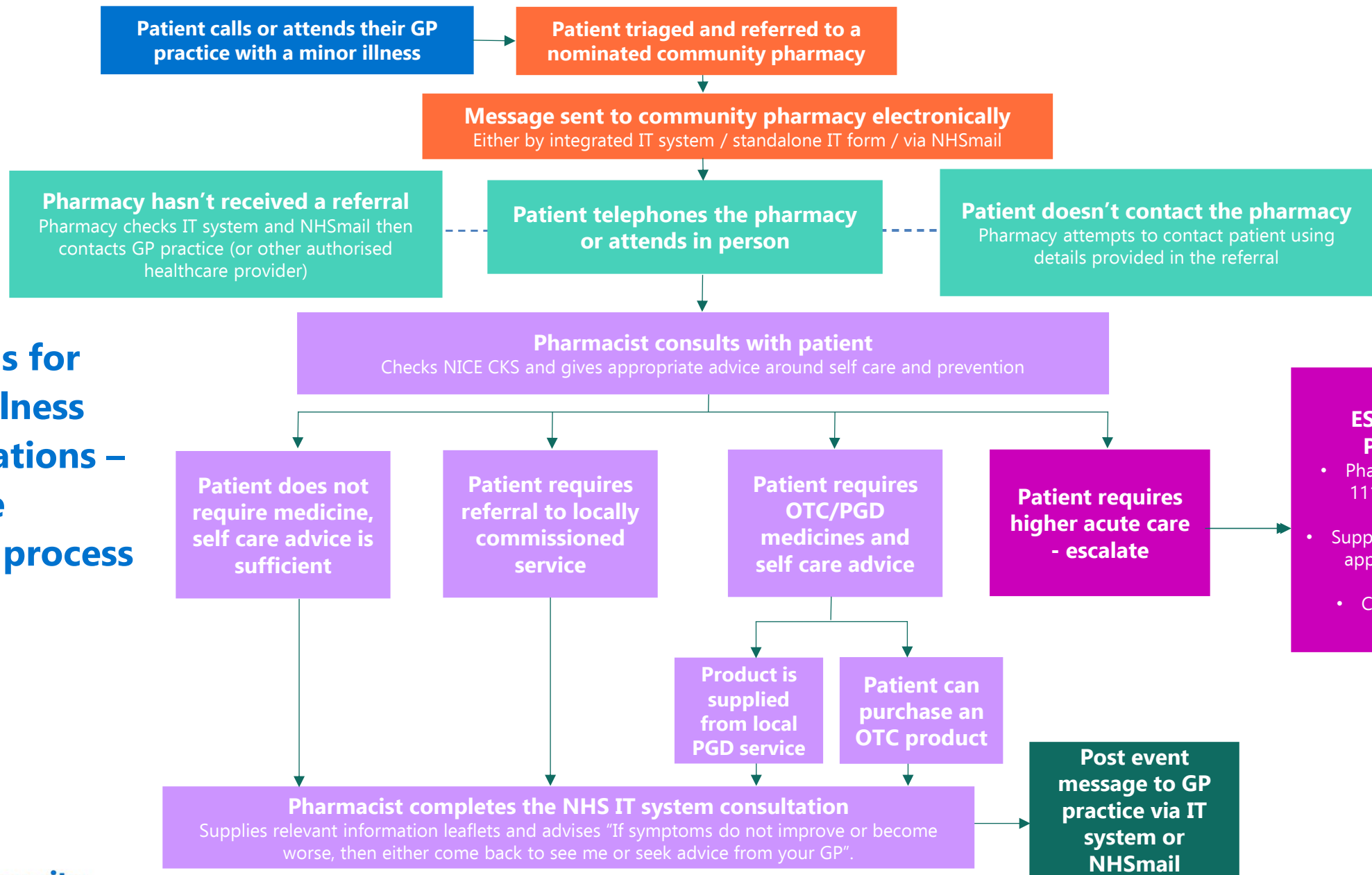
**Urgent supply of repeat meds and appliances**

Previously part of CPCS

**Clinical pathway consultations**

New element

# Referrals for minor illness consultations – how the referral process works



**ESCALATION PATHWAY**

- Pharmacist calls NHS 111 (or out of hours provider)
- Support patient to make appointment with GP practice
- Call 999 if urgent

# Urgent supply of repeat medicines and appliances

- Allows pharmacists to make supplies of medicines and appliances that patients have been prescribed (repeat medicines)
- The pharmacist will interview the patient requesting the item and satisfy themselves that there is an **immediate need for it to be supplied** and **impracticable in the circumstances for the patient to obtain a prescription** without undue delay
- Will assess suitability and legality of making a supply and confirm they have the product in stock

# Urgent supply of repeat medicines and appliances

- If the medicine/appliance is not in stock, with the agreement from the patient, they will identify another pharmacy that provides the service (and has the item in stock) and refer the patient to this pharmacy
- If it is not appropriate to make a supply, the pharmacist will ensure the patient is able to speak to another healthcare professional by either:
  - Referring the patient to their own general practice; or
  - By contacting a local out of hours provider

# What does this mean for CPCS?

- CPCS will end on 30th January 2024 and the Urgent supply of repeat meds and Referrals for minor illness consultations with a pharmacist elements of CPCS will become part of the Pharmacy First service from 31st January 2024
  - Authorised referring organisations (NHS 111, 999 service, GP practices, primary care out of hours service or an UEC setting) **can still formally refer patients** for these two elements (although GP practices cannot make referrals for the Urgent supply of repeat meds element (as is the case with CPCS) – **must be sent via a secure digital route; verbal/telephone referrals are not allowed**
  - **Patients will not be able to walk-in to a pharmacy and access these parts of the service (self-refer); needs to be a referral from an authorised referring organisation**





# Clinical pathway consultations (new element)

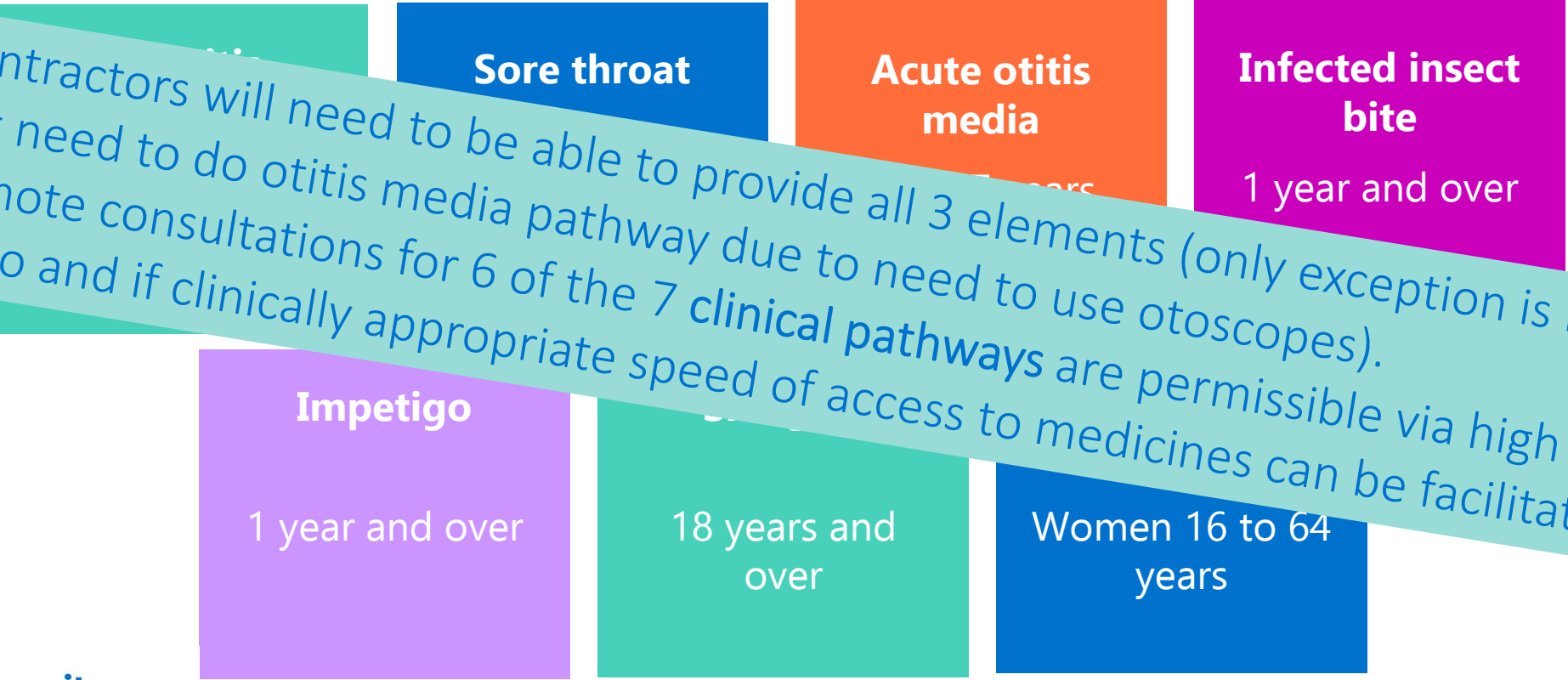
# Clinical pathway consultations

- Involves pharmacists providing advice and NHS-funded treatment, where clinically appropriate for seven common conditions:



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• Contractors will need to be able to provide all 3 elements (only exception is DSPs will not need to do otitis media pathway due to need to use otoscopes).

• Remote consultations for 6 of the 7 clinical pathways are permissible via high quality video and if clinically appropriate speed of access to medicines can be facilitated.

# Clinical pathway consultations

Authorised referring organisations can formally refer patients for this part of the service

Clinical pathways consultations can be provided **remotely**, except for the acute otitis media pathway (otoscope required)

Remote consultations **must** be **via high-quality video link**

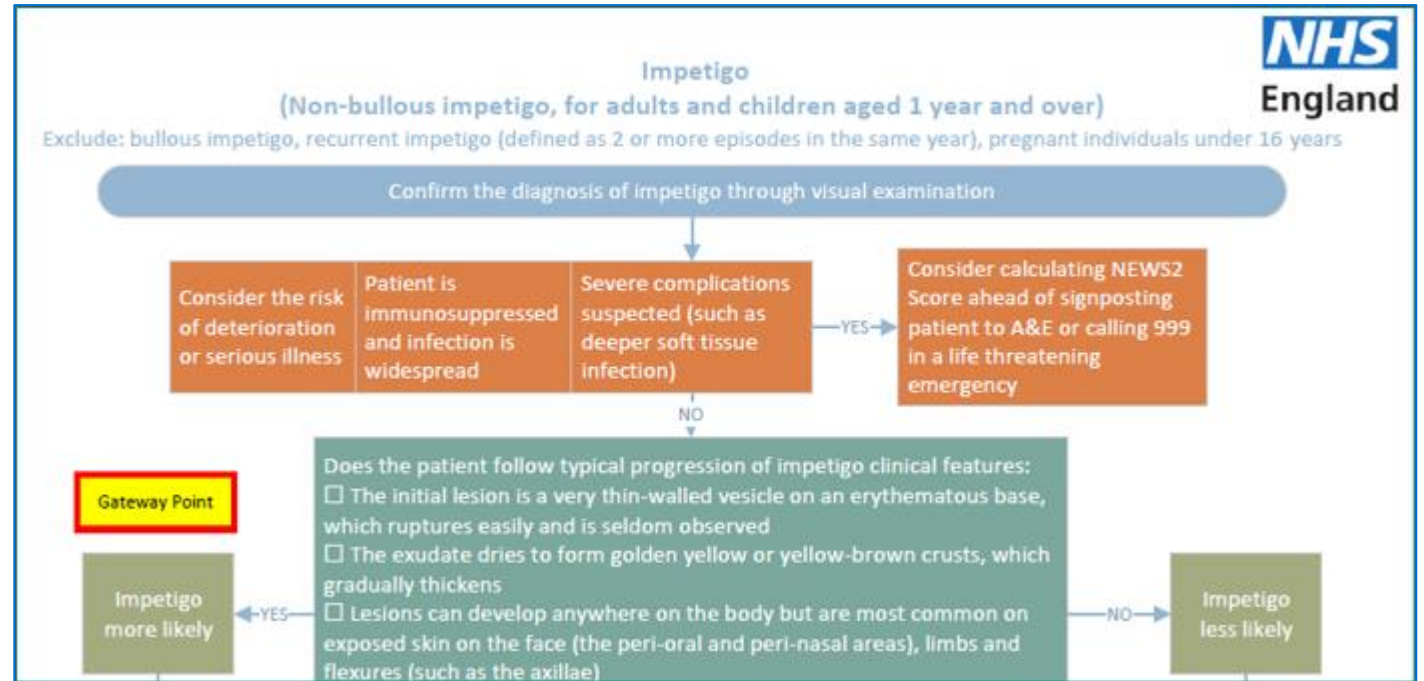
Pharmacies opting-in must provide **all three elements** of the new service

There are no changes to the former CPCS elements of the service, e.g. referrals are still required and telephone consultations are still possible, where clinically appropriate

- The existing referral routes for the CPCS will apply to the new clinical pathway's element, but patients will also be able to self-refer to a pharmacy for the clinical pathways (subject to the patient passing a clinically established gateway point in the relevant clinical pathway).

# Clinical pathways consultations

- Service spec and seven clinical pathways developed
- 23 associated PGDs and one clinical protocol (P med)
- The clinical pathways contain one or more Gateway points
- For a patient to be eligible to receive a clinical pathways consultation, a Gateway point must be passed



# The service requirements

- Pharmacy must have a consultation room, with access to IT equipment for record keeping
- Must have an otoscope (for acute otitis media clinical pathway) – except distance selling pharmacies who cannot provide this pathway
- With consent, the patient's GP record (e.g. via GP Connect Access Record), national care record or an alternative clinical record for the patient, must be checked by the pharmacist unless there is good reason not to do so
- Must have an NHS-assured clinical IT system
- Where supplies of an NHS medicine are made, the normal prescription charge rules apply
- From April 2024, an initial cap of 3,000 consultations per month per pharmacy will be put in place

UTI	Shingles	Impetigo	Insect bite	Sore throat	Sinusitis	Acute otitis media
Nitrofurantoin	Aciclovir	Hydrogen Peroxide Cream			Mometasone nasal spray	Phenazone & Lidocaine ear drops
	Valaciclovir	Fusidic acid cream			Fluticasone nasal spray	
		Flucloxacillin	Flucloxacillin	Pen V	Pen V	Amoxicillin
		Clarithromycin	Clarithromycin	Clarithromycin	Clarithromycin	Clarithromycin
		Erythromycin	Erythromycin	Erythromycin	Erythromycin	Erythromycin
					Doxycycline	

1. Download and read the [service specification and clinical pathways](#)
2. Remember to sign up via [MYS](#). Pharmacy owners providing [CPCS](#) and wanting to provide Pharmacy First must sign-up via MYS; there will be no rollover of the registrations for CPCS to the Pharmacy First service.
3. Place an order for your otoscope- [see annex C](#) for further details
4. Download and start reading the [PGDs and clinical protocol](#)

- Provide an [initial briefing on the service for your staff and pharmacy team](#).
- Create a **training plan with pharmacists** who will provide the service (using the CPPE self-assessment), including ensuring they know how to use an otoscope.
- Start to develop an **SOP** or update your CPCS SOP.
- We have already started to [brief Local Medical Committees and general practices](#) about the service and we will continue to work with ICB to ensure that the remainder of primary care is

# Funding

- Funding for the clinical pathways consultations comes from the additional **£645m** provided to support the recovery plan
- Initial fixed payment of **£2,000**
  - Must sign-up to provide the service on MYS **by 11.59pm on 30th January 2024**
  - The payment will be **reclaimed** if **5** clinical pathways consultations are not provided **by the end of March 2024**
- £15 fee per completed consultation (also applies to CPCS consultations from 1st Jan 2024)





# Funding

- A **monthly** fixed payment of **£1,000** where the pharmacy meets a **minimum number** of clinical pathways consultations:
- From April 2024, an initial cap of 3,000 consultations per month per pharmacy will be put in place
- From October 2024, new caps will be introduced based on actual provision of clinical pathway consultations, designed to deliver 3 million consultations per quarter

Month	Minimum number of clinical pathways consultations
February 2024	1
March 2024	5
April 2024	5
May 2024	10
June 2024	10
July 2024	10
August 2024	20
September 2024	20
October 2024 onwards	30



# The clinical pathways and PGDs

# Clinical pathway consultations

- The clinical pathways element will enable the management of common infections by community pharmacies through offering **self-care, safety netting advice**, and only if appropriate, supplying a **restricted set of medicines** to complete episodes of care for seven common conditions
- NHSE commissioned SPS to develop patient group directions (PGDs) and a protocol for the Pharmacy First service
- The final PGDs and protocol, published on the NHS England website, have received national approval from the National Medical Director, Chief Pharmaceutical Officer and National Clinical Director for IPC & AMR
- Pharmacists cannot deviate from the clinical pathways and PGDs

# Development of clinical pathways

Multi-professional expert working group to develop robust clinical pathways for each of the 7 conditions

Adherence to NICE guidelines

National template for PGDs developed by SPS

Pharmacy Quality Scheme antimicrobial stewardship foundation

AMR Programme Board Oversight National Medical Director and Chief Medical Officer for England

# Monitoring and surveillance

- NHSE will closely monitor the Pharmacy First service post-launch to allow for robust oversight and monitor for any potential impact on antimicrobial resistance so that any needed mitigations can be quickly actioned
- NHSE is working with NHSBSA to enable pharmacy reimbursement and functionality for PGD supply to be recorded via ePACT2 data, or in a parallel dashboard
- NIHR will commission an evaluation of Pharmacy First services considering implications for antimicrobial resistance



# Notifications and referrals to general practice

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- A patient's general practice will be notified on the day of provision of the service or on the following working day
- If a patient needs an in-hours appointment with their GP practice, after agreeing this course of action, the pharmacist should contact the patient's GP practice to secure them an appointment
- If known that a patient has used the service more than twice within a month, with the same symptoms and no indication for urgent referral, pharmacists will consider referring the patient to their general practice



# Learning and development for pharmacists



# Learning and development

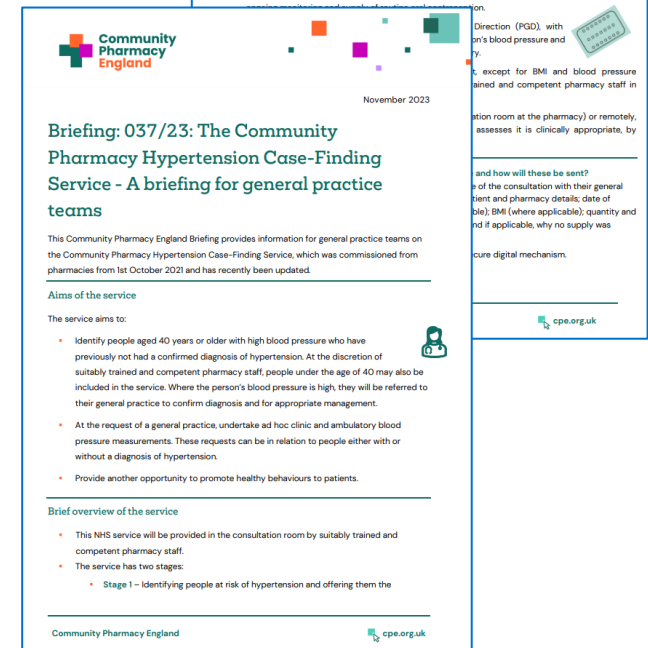
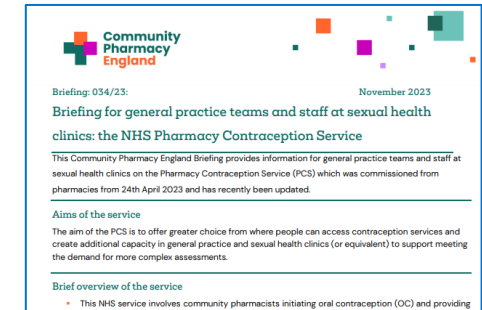
- Pharmacy First self-assessment framework – developed by the Centre for Pharmacy Postgraduate Education and NHSE
  - Additional training options highlighted on CPPE website including ENT clinical assessment skills workshop
- Personal development action plan
- Clinical examination training also available funded by NHSE
- Lots of support to upskill and give pharmacists the confidence to offer this service

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# Expansion of other services

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- From 1st December 2023:
  - The Pharmacy Contraception Service was expanded to allow pharmacists to also initiate oral contraception (OC)
    - Previously they were only able to provide ongoing monitoring and repeat supplies of OC when this had been initiated at a GP practice or sexual health clinic
  - The Hypertension Case-Finding Service was expanded to allow suitably trained and competent pharmacy staff to provide the service
    - Previously only pharmacists and pharmacy technicians could provide the service
- General practice briefings available at [cpe.org.uk/briefings](https://cpe.org.uk/briefings)



# Resources and further reading

- [Pharmacy First – Community Pharmacy Leicestershire and Rutland](#)
- CPE Pharmacy First webinars:
  - **Getting to know the service** recorded version available
  - **Getting ready for launch** –[cpe.org.uk/webinars](https://cpe.org.uk/webinars)
  - [NHS England » Community Pharmacy advanced service specification: NHS Pharmacy First Service](#)
  - [Pharmacy First service - Community Pharmacy England \(cpe.org.uk\)](#)

# Questions

