



Community Pharmacy Clinical Services

A year in summary ...



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Thank you...

For all your efforts and willingness...

For the excellent service you provide ...

For the care you provide to our patients..



A Year in Summary

Successes and challenges

NEW

- Pharmacy First
- DPP Placements

EXPANSION

- Hypertension Case Find Service
- Pharmacy Contraception Service

IMPROVENT

- Discharge Medicine Service
- COVID
 Vaccinations

FUTURE

- Pathfinder
- Expansion of services.

Integration







Successes & Performance



Community
Pharmacy
Clinical
Services
Dashboard







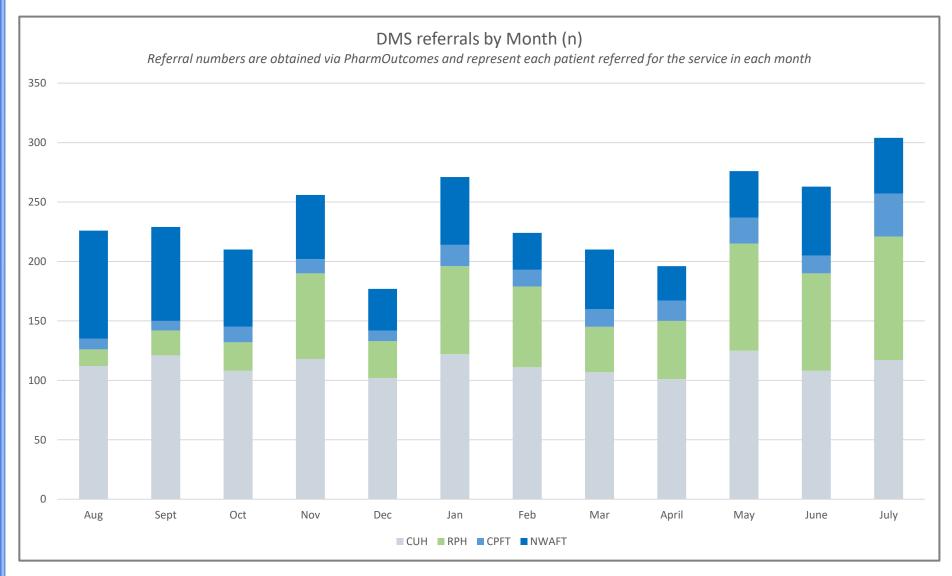
Discharge Medicine Service



Overall performance:

- A 20% referral rate target by March '25 has been agreed with all four trusts within our system.
- ➤ The ICB average referral rate for July is 2.15%, up 0.32% on June'24.
- ➤ The highest performing trust in July was CPFT with an estimated referral rate of 18.27%
- Average ICB completion rate by community pharmacies for FY23/24 was 84%; this is above the National average of 70.5%.
- System plans are in place to work with trusts to improve performance.

Discharge Medicine Service (DMS)



There are large discrepancies in the National and local data – both of which are shown in the DMS referrals rates table – these discrepancies are being investigated; however, it is believed that local data is an accurate reflection of the number of patients referred for the service. Please note that the National data has only been released up to Mar'24.





PCARP Services



PCARP Services

Key achievements include (totals for all three services):

- 11,407 consultations conducted in the latest month (July 2024).
- This equates to 1,901 hours GP appointments released (based on 10-minute appointment).
- 61,935 consultations conducted since launch (December 2023 to July 2024).

Percentage of Pharmacies Opted-In to Services by ICB within East of England Region 98% 98% 98% 95% 97% 93% 95% 92% 92% 93% 89% 89% 100% **ERCENTAGE OF PHARMACIES** 69% 80% 60% 40% 20% 0% **CAMBRIDGESHIRE** BEDFORDSHIRE, **HERTFORDSHIRE &** MID AND SOUTH **NORFOLK & SUFFOLK & NORTH LUTON & MILTON WEST ESSEX ESSEX** & PETERBOROUGH **WAVENEY H&C EAST ESSEX KEYNES PARTNERSHIP** Pharmacy First Opt-In % ■ Contraception Opt-In % ■ Blood Pressure Opt-In %



• Pharmacy First: **136 of 140**

Contraception: 102 of 140

• Blood Pressure: 132 of 140







Pharmacy First Service



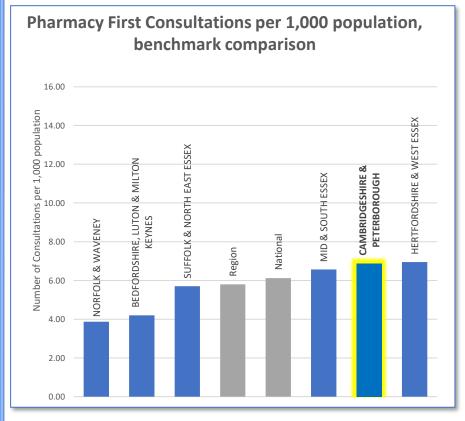
Overall performance:

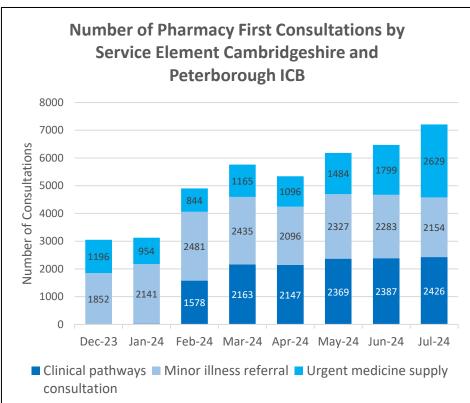
- Total consultations since start, 35, 863 (six-month period, February – July 2024).
- Overall increase of 11.4% on last month.
- C&P rank 5th/6 regionally and 30th/42 nationally (higher rank the better) for the total number of PFS consultations per 1,000 population (weighted).
- Overall month on month increases, except for one month.

Pharmacy First Service (PFS)

The Pharmacy First Service (PFS) consists of three elements:

- Clinical Pathways: Pharmacists can manage seven common infections, providing advice and supplying over-the-counter or prescription-only medicines as appropriate.
- ➤ NHS Referrals for Minor Illness: GPs and 111 can refer patients with minor illnesses to pharmacies for consultation and treatment.
- > Urgent Repeat Medicine Supply: Patients can obtain repeat prescriptions from pharmacies in urgent situations.





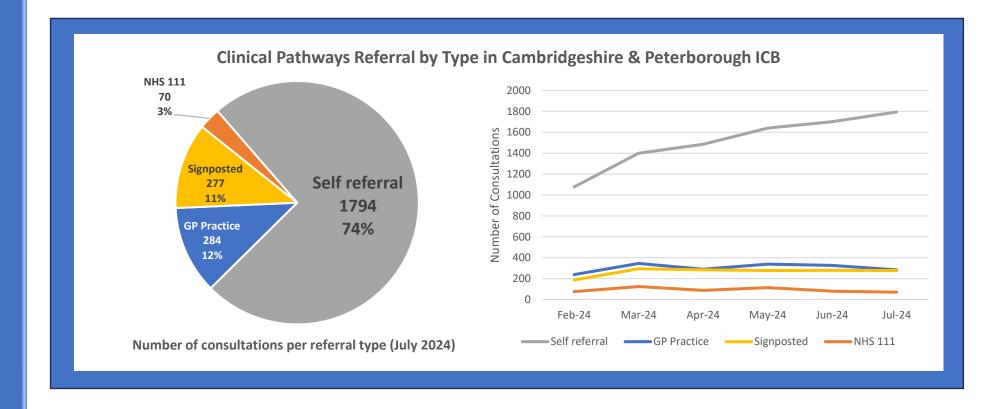
- The majority of PFS consultations were self-referrals into the service (74% in July 2024). This referral route remains constantly the largest proportion of referrals into the service for this element.
- General practice referral in July 2024 was 11.7% of all referrals into the service for this element. This is a decline on the previous month of just over 2%.

PFS – Clinical Pathways

Referral

A patient can access **the clinical pathway element** of the service via various routes, which include a GP referral, self-referral (walk-in), or 111.

If referred by general practice, a digital referral is the preferred and safer option.



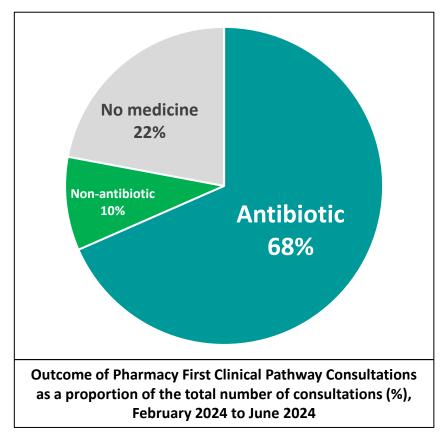
- Within C& P of all clinical pathway consultations,
 77.9% of consultations resulted with a supply of medicine.
- This strongly supports AMS, and it is excellent that C&P is one of the best performing regionally.
- better than the national and regional averages for the percentage of clinical pathway consultations supplying medication.

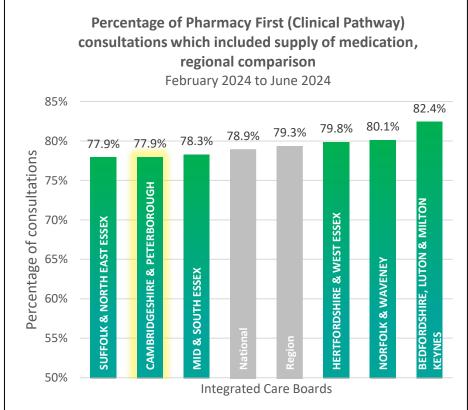
PFS – Clinical Pathways



Tracking outcomes for Pharmacy First clinical pathways is essential for promoting antimicrobial stewardship (AMS), ensuring patient safety, improving cost-effectiveness, and evaluating the overall quality of care.

Supply of medication within this service is governed by robust and very strict patient group directions.



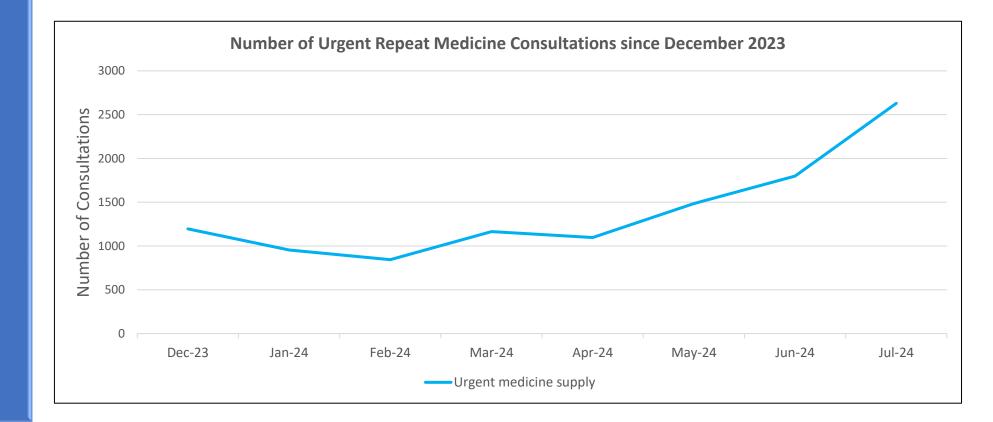


- We are currently
 investigating the increase
 of the Urgent Repeat
 Medicine Supply element.
- This increase in need to access the service could be related to challenges with stock shortages.

PFS – Urgent repeat medicine supply

For this element of the service, referrals via 111 to community pharmacy are made to **supply urgently required repeat medicines** (some exclusions) when the patient has completely run out and cannot obtain a prescription from their GP.

Ideally, we would want a lower number of referrals into this service. If processes and access to medicines are efficient and well embedded, then a patient would not require this service.



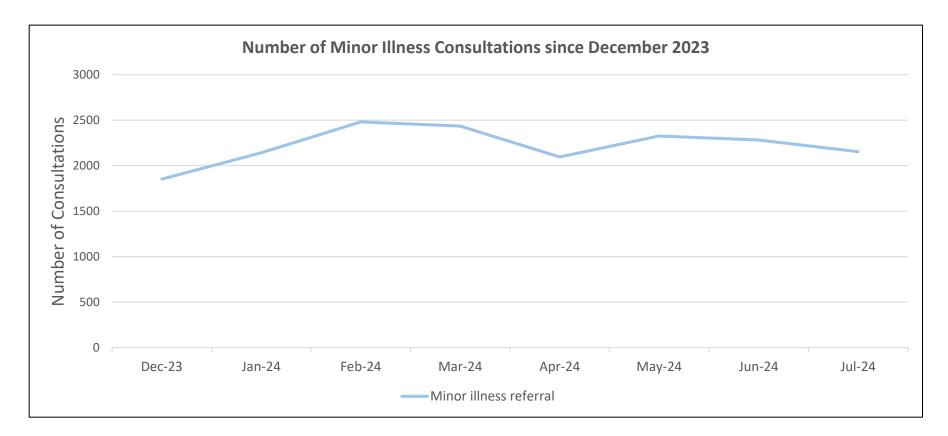
- There has been a slight decrease in the number of consultations for this element of the service over the past three months. We remain higher than December 2023.
- The implementation of this service has always struggled due to:
 - Requirement for digital referral into the service.
 - Patient is required to purchase medication if appropriate.

PFS – Minor Illness

Previously known as GP Community Pharmacy Consultation Service (GPCPCS).

This allows for GP to digitally refer patients with minor illnesses to community pharmacy, for a consultation and advice and where treatment is necessary, the patient will be advised to purchase over the counter medication.

The patient can only access this element of the service when digitally referred by general practice or 111. The patient cannot self-refer (walk-in).







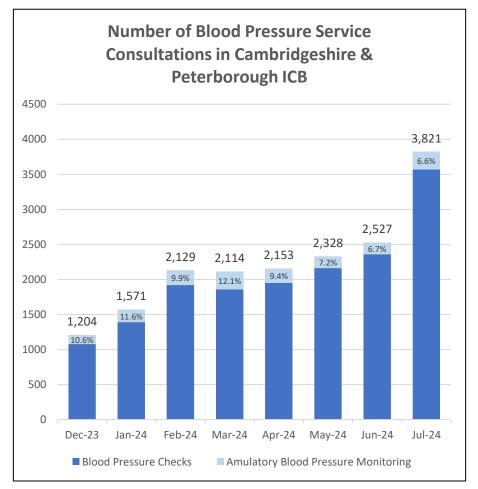
Hypertension Case Finding Service

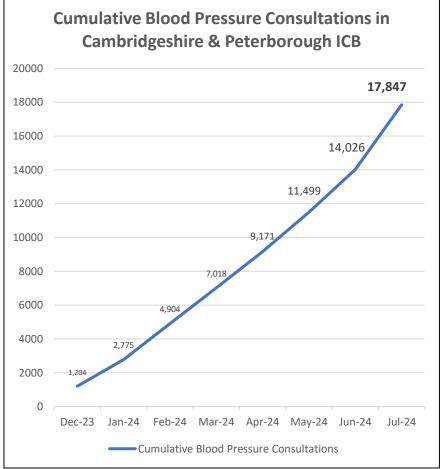


- Our patients within C&P have received a total of 17, 847 consultations, via this service within an 8-month period.
- This service is well embedded, and we have seen consistent growth in the provision of this service.
- The focus is to increase the number of ambulatory checks.
- > System plans to improve overall provision, includes the integration of this service within the Population Health Management at scale programme.

Hypertension Case Finding (BP Check Service)

The Hypertension Case Finding service aims to identify individuals over 40 years old (or younger at the discretion of the pharmacist) with undiagnosed high blood pressure. Clinic and ambulatory blood pressure checks are included in this service.

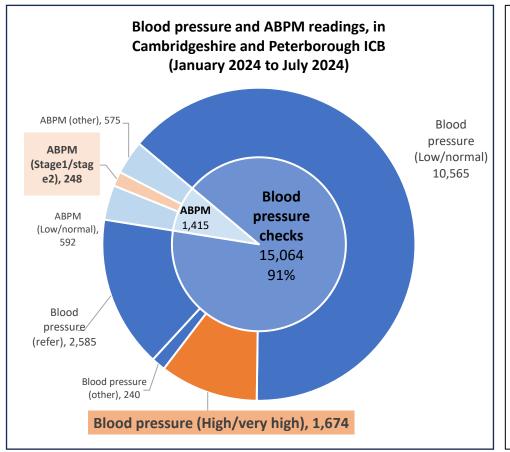


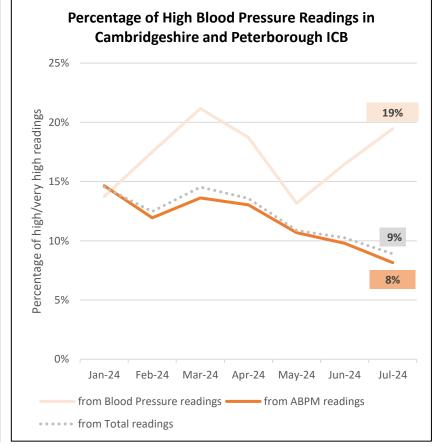


- 11.11% of total number blood pressure checks identified patients with high or very high blood pressure.
- ➤ 1674 patients were undiagnosed as potentially being at high risk of a cardiovascular event.
- Furthermore, 17.16% of total number blood pressure checks has seen patients been referred to their GPs for further investigations.

Hypertension Case Finding

By monitoring the trend in high and very high blood pressure readings, we can assess the effectiveness of our hypertension case-finding service, and address inequalities.









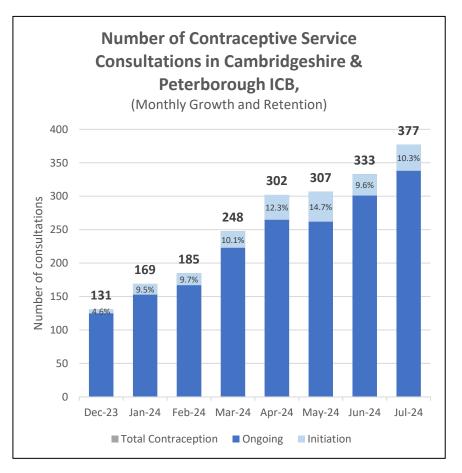
Pharmacy Contraception Service

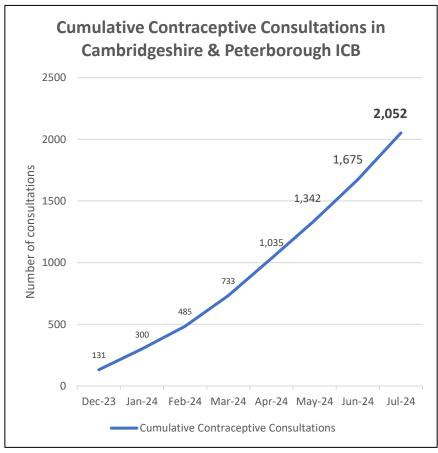


- We have seen a 188% increase in provision of this service since its launch.
- ➤ It is very promising to see the continuous growth of the service since its launch.
- Community pharmacies have prioritised the provision of other advanced clinical over this service (lowest percentage, 71%, opted in to provide the service).
- We have system plans in place to increase the provision of this service.

Pharmacy Contraception

The service allows for the initiation and ongoing supply of oral contraception initiated in general practice or sexual health clinics (or equivalent).





And the future ...

- > There is huge potential for further growth.
- > To enable this growth and further improvement:
 - * Improve integration of community pharmacy into the wider healthcare system.
 - * Improve system collaboration, specifically within primary care networks.
 - Improve digital solutions
 - Effective marketing and comms.
 - Efficient processes and operations.
 - * Development of workforce.







Thank you

