



DERBYSHIRE LPC - COMMUNITY PHARMACY UPDATE 29.03.22

Hi all, this is my final newsletter as your Chief Officer as I move into a new role on Friday. Thank you to all of you for your help and support over the last 4 years. I will be working in the Midlands Region as Pharmacy Integration Lead so still supporting community pharmacies!

This update is intended to highlight and add helpful and local information to the key areas that affect community pharmacies this week. This summary is accurate on Tuesday 29.03.2022.

1. WELCOME TO TANIA CORK, NEW DERBYSHIRE LPC CHIEF OFFICER

I am delighted that Dr Tania Cork has been appointed as your new Chief Officer from Friday 1 April 2022. Tania has been the Chief Officer for North Staffs and Stoke LPC for many years and brings a wealth of experience to the role. She has visited some Derbyshire pharmacies already and is looking forward to meeting many of you over the coming weeks and months. Her email is taniacork@derbyshirelpc.co.uk



'I have had a career in pharmacy spanning over 25 years and held positions as community pharmacist manager, Superintendent, GP practice pharmacist, PCT clinical governance lead and head of pharmacy technician training.

I have a passion for supporting and promoting community pharmacy to stakeholders which has led to the development of many services within pharmacy. I have also dedicated my career in educating and supporting upcoming pharmacists and pharmacy technicians.

My specialist interests lay in Health Literacy and how pharmacy can use health literacy intervention to improve patient's adherence.'

2. GP REFERRAL TO CPCS – PROGRESS UPDATE

Chris Kerry and Sibby Buckle (GP CPCS Implementation and Support Managers) have been working with pharmacies and practices across Derbyshire to implement GP referrals to CPCS. The number of practices who have started referring patients requesting appointments for minor

illnesses to community pharmacies has increased with 33 practices now sending referrals and so far, community pharmacies in Derbyshire have successfully completed and claimed for over 1500 CPCS consultations from general practices.

The referrals may come into your pharmacy by:

- your pharmacy NHS mail. As a minimum, please check your NHS mail between 10:00-11:00 and phone any patients and carry out the consultation by early afternoon and check your NHS mail again at 16:00 and phone any further patients and carry out the consultation that same day before closing
- integrated EMIS option (so straight into your PharmOutcomes system). This works for practices who use EMIS for their clinical system
- we are working with the CCG so that PharmRefer may be used to send referrals by SystemOne practices. This is currently undergoing IG checks by the CCG

In addition to Chris and Sibby's support, the company 'PCC' have been appointed nationally to help practices get started making referrals. Please make sure you know how CPCS works and action promptly referrals that you receive so that we support patient care and grow confidence in the service.

3. COMMUNITY PHARMACY COVID VACCINATION SITES

The vaccine programme continues with booster doses for over 75s, those living in care homes and those with weakened immune systems. The next stage is healthy children in the 5 – 11 year age group. In addition, the 'evergreen' offer remains where any eligible person who hasn't yet taken up the offer of 1st dose, 2nd dose and booster can do so. Thank you to all our community pharmacy vaccination sites – you all continue to do a great job (in constantly changing circumstances) and are recognised across Derbyshire for the huge contribution you make.

4. LOCAL PHARMACY INCENTIVE SCHEME - £300 AVAILABLE FOR EVERY PHARMACY CONTRACT IN DERBYSHIRE

You received details of this scheme early in March to your pharmacy @nhs.net email. All the information is also at the foot of this newsletter. Please note declarations and invoices must be received by Katherine by close of play on **Friday 8 April 2022**.

We have received several declarations/invoices already – thank you to those contractors!

5. PHARMACY INTEGRATION PILOT STARTING IN CHESTERFIELD ROYAL HOSPITAL

The Pharmacy Integration Team are piloting additional entry routes into CPCS and this includes referrals from Emergency Departments/A&Es and Urgent Treatment Centres (UTCs). Chesterfield Royal Hospital have 'streaming tools' or 'kiosks' at the entrance of their Emergency Department which patients are asked to complete when they arrive. These kiosks ask patients

similar questions to those asked by Healthcare Advisors when you call NHS 111 – patient details, eliminate red flags and advise the patient what to do next. Where a minor illness is identified then the kiosk (with the patient's agreement) will send an electronic referral to a local community pharmacy. Further development work is being completed on the kiosks at the moment as they cannot yet offer the patient a choice of pharmacy so this is a pilot that will start small and we hope will expand.

6. **NHS MAIL**

Just a reminder that you **must** check your NHS mail regularly as it is part of the Terms of Service. Referrals, alerts and comms all come to your pharmacy by this route. Thank you!

7. **BLOOD PRESSURE CHECKS SERVICE**

147 community pharmacies in Derbyshire are now registered for the NHS Community Pharmacy Blood Pressure Checks Service. Not all of you have had chance to get started yet and on Wednesday 13 April there is a national webinar to help community pharmacists get going with this service:

[Register here](#) for a webinar on Wednesday 13th April from 7-7.55pm to hear updates on how this service is working and making a difference for patients, why it is so important to the NHS's plans to prevent CVD and to share best practice and top tips for running the service successfully.

Contributors include: Dr Shahed Ahmad, National Clinical Director for CVD prevention, Helen Williams, pharmacist and National Speciality Advisor for CVD prevention, David Webb, Chief Pharmaceutical Officer for England and a community pharmacist Jignesh Patel who is successfully offering the service.

My very best wishes for the future to all Derbyshire community pharmacists, technicians and pharmacy teams,

Jackie

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DERBYSHIRE COMMUNITY PHARMACY LOCAL INCENTIVE SCHEME

01.03.2022 – 31.03.2022

This scheme, supported by funding from the CCG and the regional team, is to support community pharmacy contractors in Derbyshire to deliver some of the newer, integrated pharmacy services. During March 2022 community pharmacy contractors in Derbyshire who achieve the five criteria listed below will be able to claim one-off funding of £300 per contract.

The purpose of this incentive scheme is to support community pharmacy contractors to assist patients and help the system deliver care and recover from the pandemic. The three services this scheme includes are:

- GP referrals to Community Pharmacy Consultation Service (CPCS)
- Discharge Medicines Service (DMS)
- NHS Blood Pressure Checks Service (where you have registered to provide this service)

To be eligible to claim the £300 the criteria are:

1. A pharmacist or technician from the community pharmacies within a PCN must meet (face to-face, by phone or virtual meeting by MS Teams/Zoom) a representative from local practice (this could be a GP, practice manager, business manager or GP/PCN clinical pharmacist or technician) and discuss GP referral to CPCS and the Blood Pressure Checks service.
Please liaise with your PCN Lead Community Pharmacist to coordinate these visits (to prevent some practices being contacted multiple times and others being missed). A summary of what you may wish to include in the discussions is in Appendix 1.
2. The pharmacy contractor must have a robust system in place in the pharmacy to check NHS mail and other pharmacy systems (such as PharmOutcomes) so no referrals are missed and all referrals are actioned in a timely manner. Please note that if complaints are received from practices during April 2022 to June 2022 demonstrating that referrals are being missed by a pharmacy then we may seek to recover this incentive payment from that contractor.
3. The pharmacy contractor must ensure GP referral to CPCS, DMS and the NHS Blood Pressure Checks service (where provided) are consistently provided from the pharmacy by ensuring all regular pharmacists are appropriately trained and able to deliver the services.
4. The pharmacy contractor must have SOPs in place for DMS, GP referral to CPCS and the NHS Blood Pressure Checks service (where provided) signed by all the pharmacy team so that everyone can support the services. This information should be accessible and proactively shared with locum pharmacists.
5. The pharmacy contractor must ensure the pharmacy team are aware of the GP referral to CPCS Implementation and Support Managers (Chris Kerry and Sibby Buckle) and know how to contact them (Appendix 2). Chris and Sibby support both practices and pharmacies with GP referral to CPCS. They help practices start to make referrals, let pharmacies know when practices are getting ready to 'go live', answer questions from pharmacies and practices, resolve issues and welcome feedback so they can share and spread good practice.

APPENDIX 1 – DISCUSSION WITH PRACTICES

Key points to include about GP referral to CPCS and how it helps practices:

- Supports practices with their capacity by referring patients with minor illnesses to community pharmacies, thereby leaving those appointments for patients with higher acuity illness
- Longer term, this service encourages patients to access the right healthcare professional first time and promotes self-care.
- The referral must be electronic. For EMIS practices the CCG have funded an integrated option that makes this easy. For SystmOne practices the CCG are seeking to support with PharmRefer. The option available to all practices is using the embedded template to the pharmacies NHS mail.
- In the situation where the patient is more serious than expected or has deteriorated since contacting the practice, the pharmacist will contact the practice and refer the patient back
- GP referral to CPCS is included in the IIF (PCN incentive scheme)

Key points to include about the NHS Community Pharmacy Blood Pressure Checks Service and how it helps practices:

- Approximately half of Derbyshire pharmacies are registered to provide this service
- General Practices can refer patients to community pharmacies and ask them for either clinic readings or ambulatory readings
- This may be helpful for patients with hypertension where the practice don't have a current BP reading and for patients who have a high initial clinic reading that has not been followed up with home BP monitoring or ambulatory measurements (both of these are in QOF)
- All readings taken in the pharmacy will be sent to the practice
- In addition to measuring BP at the request of a practice, pharmacists opportunistically offer a BP check to patients over 40 who are not diagnosed with hypertension. Where a high BP is obtained then the pharmacist continues with ambulatory monitoring so only referring to the practice when the high reading is confirmed.

APPENDIX 2 - IMPLEMENTATION AND SUPPORT MANAGERS

Chris Kerry chris.kerry@derbyshirelpc.org

Working days: Tuesdays and Wednesdays

Covers: Chesterfield & Dronfield PCN, Derbyshire Dales PCN, Buxton & High Peak PCN, Belper PCN, ARCH PCN, South Hardwick PCN, North East Derbyshire PCN, North Hardwick & Bolsover PCN

Sibby Buckle sibby.buckle@derbyshirelpc.org

Working days: Wednesdays and alternate Thursdays/Fridays

Covers: All 5 Derby City PCNs, Erewash PCN, Swadlincote PCN

CLAIM FORM

NAME OF PERSON COMPLETING THE FORM:

(claims for a pharmacy company may be made on one form – please include all the ODS codes of the pharmacies you are claiming for)

ODS CODE(S) OF PHARMACIES BEING CLAIMED:

I confirm that:

For each pharmacy I am claiming for, a pharmacist or technician liaised with the PCN Lead Community Pharmacist and held a meeting about GP referral to CPCS and the Blood Pressure Checks service with a practice if requested. Records of the meeting are kept in the pharmacy and feedback has been provided to the PCN Lead Community Pharmacist.

AND

There is a robust system in place in the pharmacy(ies) to check NHS mail and other pharmacy systems (such as PharmOutcomes) so no referrals are missed and all referrals are actioned in a timely manner.

AND

All pharmacists who regularly work in this pharmacy(ies) are appropriately trained to provide GP referral to CPCS and the NHS Blood Pressure Checks service (where provided) and deliver the services.

AND

SOPs are in place for DMS, GP referral to CPCS and the NHS Blood Pressure Checks Service (where provided) signed by all the pharmacy team so that everyone can support the services. This information is accessible and proactively shared with locum pharmacists.

AND

The pharmacy team(s) are aware of the GP referral to CPCS Implementation and Support Managers (Chris Kerry and Sibby Buckle) and know how to contact them.

SIGNED:

DATE:

Please email this completed declaration and an invoice for £300 per contract you are claiming for to Katherine Newman, LPC Support Officer at katherine.newman@derbyshirelpc.org Payments will be made by BACS transfer so please ensure your invoice contains payment details. A template invoice is included below – you may use this or your own invoice.

INVOICE

To: Derbyshire LPC
4 The Goldings
Haxey
Doncaster
DN92QA

Company Name:
Company Address:

Invoice No: xxxxxxxx
Invoice date: xx March 2022

Requisitioner	Description	Amount
Name and contact details of person completing invoice	Derbyshire Community Pharmacy Local Incentive Scheme	Number of pharmacies claimed for: xx (Amount per pharmacy £300) £xxxxxxx
	VAT	N/A
	TOTAL	£xxxxxxx

Payment will be made by BACS:

BACS

Bank Name: xxxxxxxx
Bank Address: xxxxxxxx
Name on Account: xxxxxxxx
Bank Sort Code: xxxxxxxx
Bank Account Number: xxxxxxxx

All claim forms and invoices must be received by Katherine by close of play on Friday 8 April 2022

Please email to Katherine.newman@derbyshirelpc.org together with the claim form by close of play on Friday 8 April 2022.