



# Pharmacy First – Community Pharmacy

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# Pharmacy First

Service launch 31<sup>st</sup> January 2024

Pharmacy First will be a new advanced service that will include 7 new clinical pathways and will replace the Community Pharmacist Consultation Service (CPCS).

This means the full service will consist of three elements:

## Pharmacy First (clinical pathways)

- new element

## Pharmacy First (urgent repeat medicine supply)

- previously commissioned as the CPCS

## Pharmacy First (NHS referrals for minor illness)

- previously commissioned as the CPCS

- Contractors will need to be able to provide all 3 elements (only exception is Distance Selling Pharmacies (DSP's) 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.

# Service Description

## The Pharmacy First Service pathway has three elements:

- Urgent medicine supply ( referral only)
- Minor illness referral ( referral only)
- Clinical pathways consultation ( referral and suitable patients identified by the contractor)

## Referral to the community pharmacy

Patients may be referred to Pharmacy First by one of the following routes:

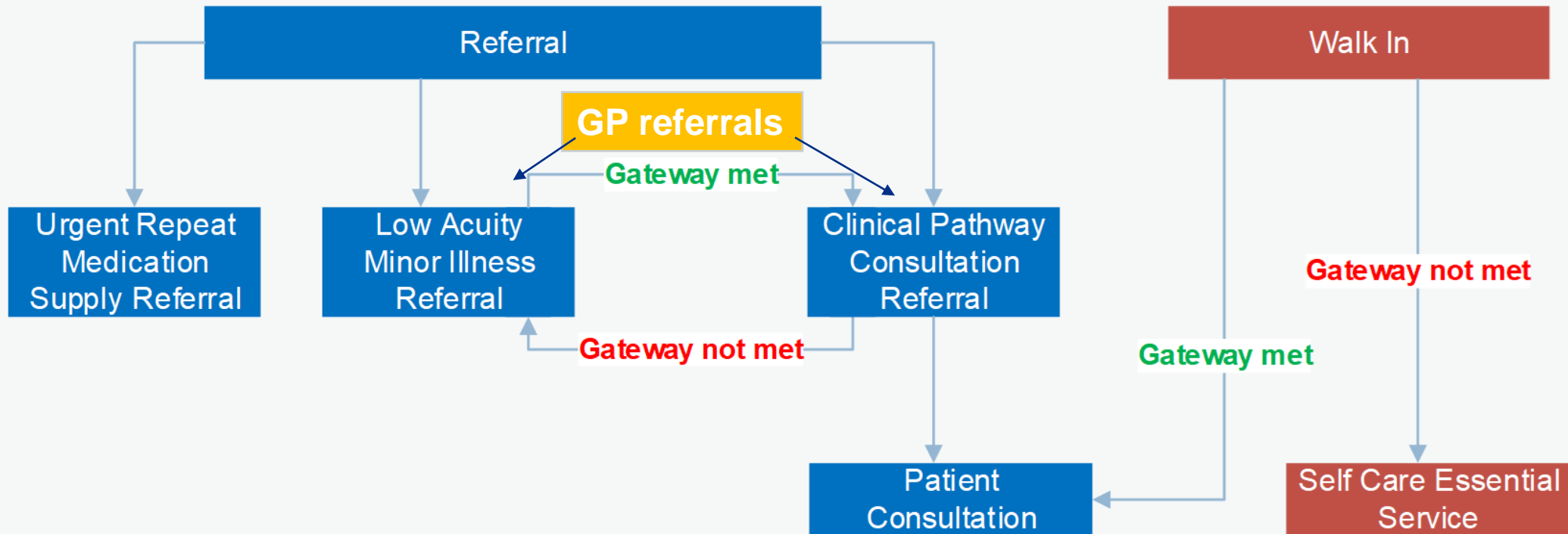
- Referred by NHS 111 telephony.
- Referred by NHS 111 on-line.
- Referred by an integrated urgent care clinical assessment service (IUC CAS).
- Referred by 999 services.
- Referred by general practice (low acuity minor illness conditions and the seven clinical pathways).
- Referred by other urgent and emergency care provider (e.g., UTC, ED, UCC)

# Service Objectives

## The objectives of the Pharmacy First advanced service are:

- To offer patients who contact either,
  - NHS 111 (by telephone or on-line), or
  - 999 service, or
  - their own GP practice, or a primary care out-of-hours service, or an UEC setting (e.g.an ED, UTC, UCC), the opportunity to access appropriate urgent care services in a convenient and easily accessible community pharmacy setting.
- To free up clinician capacity in the above settings, for the treatment of patients with higher acuity conditions.
- To identify ways that individual patients can self-manage their health more effectively with the support of community pharmacists and to recommend solutions that could prevent inappropriate use of UEC services in the future.
- To provide urgent access to patients who are not registered with a GP for treatment of low acuity minor illnesses, and to ensure equity of access to the emergency supply provision, regardless of the patient's ability to pay for the cost of the medicine requested.
- To further utilise the clinical skills of community pharmacy teams to complete episodes of care for patients and improve access, displacing activity from general practice and urgent care settings

# Pharmacy First Service Overview



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).

# NHS Pharmacy First Service Overview

**REFERRAL**  
Patient contacts the referring organisation with a request for an urgent repeat medicine supply or a minor illness including symptoms potentially associated with the seven clinical pathways

Digital transfer of the referral information to community pharmacy. Referral will be available in the pharmacy via the NHS assured Pharmacy First IT system or NHSmail

**WALK IN**  
Patient presents at the community pharmacy with symptoms potentially consistent with one of the seven common conditions

Gateway criteria met      Gateway criteria not met

**Urgent repeat medication supply referral**

**Patient Assessment**  
Pharmacist checks GP Connect Access Record or National Care Record

Consultation Outcome  
**NO SUPPLY MADE**  
Qualifies for a consultation fee payment

Consultation Outcome  
Request complies with The Humans Medicines Regulations and **SUPPLY MADE**  
Qualifies for a consultation fee payment

- EPS Rx
- OTC Supply
- Not clinically or legally appropriate
- Onward referral to prescriber

Print token and capture prescription charge status

Dispense

**Low acuity, minor illness referral**

**Patient Consultation**  
Pharmacist checks GP Connect Access Record or National Care Record and NICE CKS (as necessary)

Consultation Outcomes  
All qualify for consultation fee payment

Safety netting and self care advice only

Safety netting, self care advice and sale of OTC meds

Onward referral

Gateway criteria not met

Gateway criteria met

Gateway criteria not met

Gateway criteria met

**Clinical Pathways Consultation referral**

**Clinical Pathways Consultation**  
Pharmacist checks GP Connect Access Record or National Care Record, clinical pathways, clinical protocols and PGDs

Consultation Outcomes  
All qualify for consultation fee payment and contribute to minimum activity for the block payment

Advice + clinical pathway followed  
Supply & safety netting

Print token and capture prescription charge status

Dispense

Advice + clinical pathway followed  
No supply & safety netting

Onward referral

Onward referral

Record the outcome of the referral on the approved IT system. Appropriate post event messaging shared with the patient's general practice and patient record updated with the details of the consultation.  
If an action is required by a GP following this consultation an NHSmail or telephone call will also be required.

Pharmacy Pathway

# Infections to be managed via Clinical Pathways

Clinical Pathway	Age range
Uncomplicated UTI	Women 16-64 years
Shingles	18 years and over
Impetigo	1 year and over
Infected Insect Bites	1 year and over
Sinusitis	12 years and over
Sore Throat	5 years and over
Acute Otitis Media	1 to 17 years

Pharmacy First Clinical pathways – medicines included in the PGDs and medicines protocol

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



# List of minor illness symptoms groups identified for referral into Pharmacy First

This list is not exhaustive.

- Acne, spots, and pimples
- Allergic reaction
- Ankle or foot pain or swelling
- Athlete's foot
- Bites or stings, insect, or spider
- Blisters
- Constipation
- Cough
- Cold and 'flu
- Diarrhoea
- Ear discharge or ear wax
- Earache
- Eye, red or irritable
- Eye, sticky or watery
- Eyelid problems
- Hair loss
- Headache
- Hearing problems or blocked ear
- Hip, thigh, or buttock pain or swelling  
itch
- Knee or lower leg pain
- Lower back pain
- Knee or lower leg pain
- Lower back pain
- Lower limb pain or swelling
- Mouth ulcers
- Nasal congestion
- Pain and/or frequency passing urine.
- Rectal pain
- Scabies
- Scratches and grazes
- Sinusitis
- Shoulder pain
- Skin, blisters or rash
- Sleep difficulties
- Sore throat
- Teething
- Tiredness
- Toe pain or swelling
- Vaginal discharge
- Vaginal itch or soreness
- Vomiting
- Wound problems – management of dressings.
- Wrist, hand, or finger pain or swelling

- **Are you seeing lots of patients for appointments at GP practices with minor ailments ?**
- **Is your OTC prescribing high as GP practice?**

**Consider the patients that can be referred into Pharmacy first Minor illness pathway.**

# Development of Clinical Pathways

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



- Adherence to NICE guidelines
- National template for Patient Group Directions developed by SPS
- AMR Programme Board Oversight
  - National Medical Director and Chief Medical Officer for England



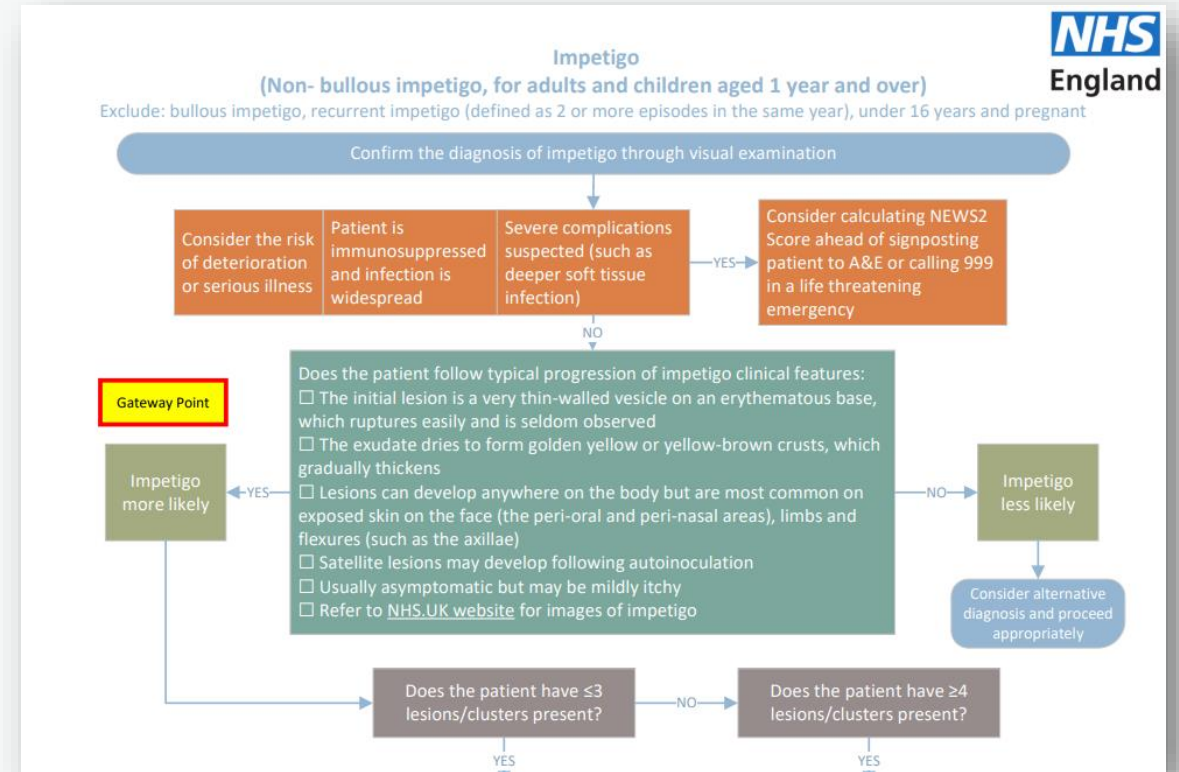
# Gateway Point for Clinical Pathways

Consultations will only be considered as clinical pathway consultations if they successfully pass through a **gateway point** for each respective clinical pathway.

The gateway point ensures that the patient:

- Is suitable for management within one of the seven clinical pathways
- Presents relevant signs and symptoms
- Does not exhibit indications of a more serious medical condition.

**Only consultations that pass the gateway point count for service payments.**





# Digital Service Requirements – Pharmacy First

**Access Record (GP Connect)**  
Access medical history in GP patient record to support the consultation

**Consultation Template**  
Capture details of the consultation (e.g. notes, outcomes, meds issued)

**Update Record (GP Connect)**  
Send post consultation reports back to GP systems to update the record

**Payment & Data API (BSA)**  
Dataflows to enable remuneration and national reporting on meds

GP Connect Update Record updates a patient's GP record with details of a consultation held at a community pharmacy.

GP Connect Messaging is used to transfer the data in a structured format, informing the GP of the consultation, such as the patient has been prescribed antibiotics, has had their blood pressure taken or has been prescribed contraceptive medication.

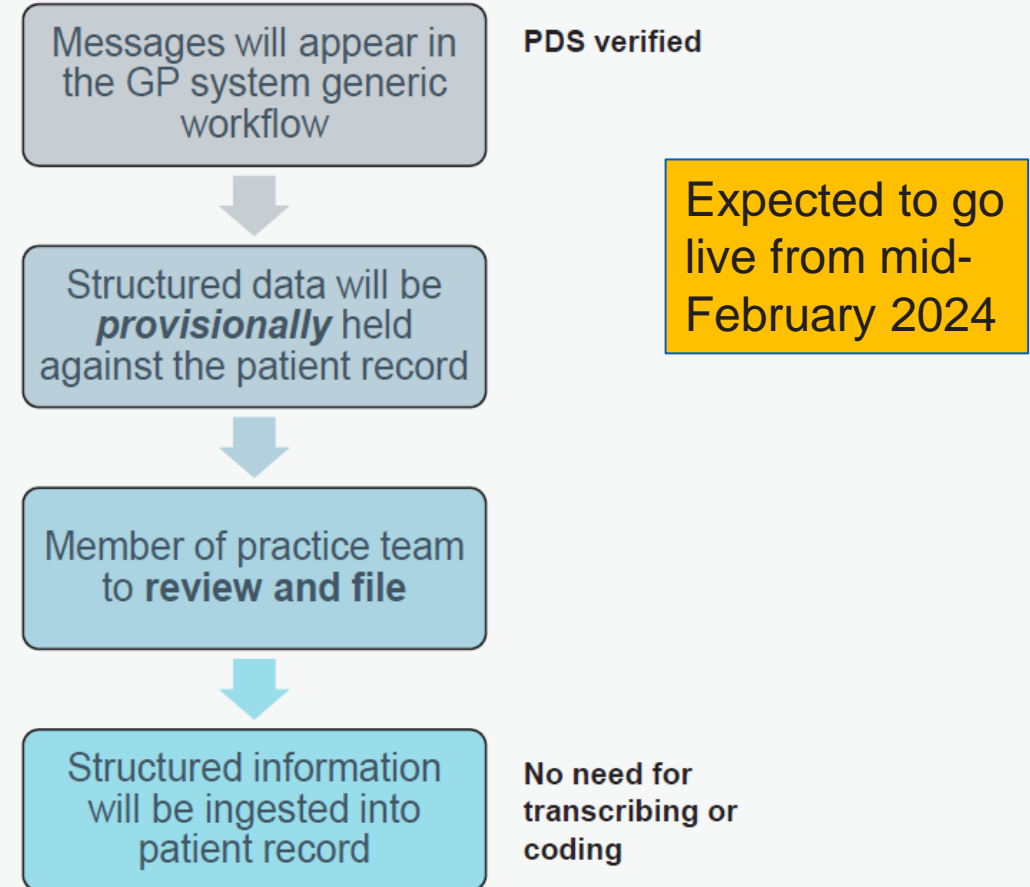
The structured data is filed on the patient's record as a provisional consultation, except for medication issued which is filed automatically, and a workflow task is created under Awaiting Filing to be reviewed and actioned. Once actioned, the pharmacy consultation is fully filed on the patient's record with a document attached detailing the full consultation.

**\*\*All four pharmacy IT suppliers (plus EMIS & TPP) are in the process of developing the functionality required for the above**

Expected to go live from mid-February 2024

# Updating the GP record

- Community Pharmacy IT suppliers have developed the capability to send a summary of the pharmacy consultation (as per NHSE service specification and PRSB standard).
- Initial implementation will cover the following pharmacy services:
  - Pharmacy First (Clinical Pathways and Minor Illness)
  - Blood Pressure
  - Contraception



# Benefits

## Linked to Patient

- No manual matching
- No mismatches
- Minimal delay

## Via Workflow

- Nothing missed
- Approval prior to filing (still visible in notes)

## Not a Document

- No attaching files
- Details directly in patient record

## Structured Content

- No manual coding
- Contributes to QOF
- Clear pathways

## Structured Medication

- Safer prescribing
- Reduce duplication
- Can be re-issued

## Clear Attribution

- Filed as an external consultation
- Clinician details given

# Updating the GP record

## Important Notes

- Update Record **will not** be used to communicate urgent information (eg safeguarding) or actions for the GP
  - Usual channels of communication will be used
- Currently documents cannot be attached to messages
  - ABPM reports will come by email
- You will receive one message per consultation
  - e.g. ABPM – initial consult and then ABPM results

Expected to go live from mid-February 2024



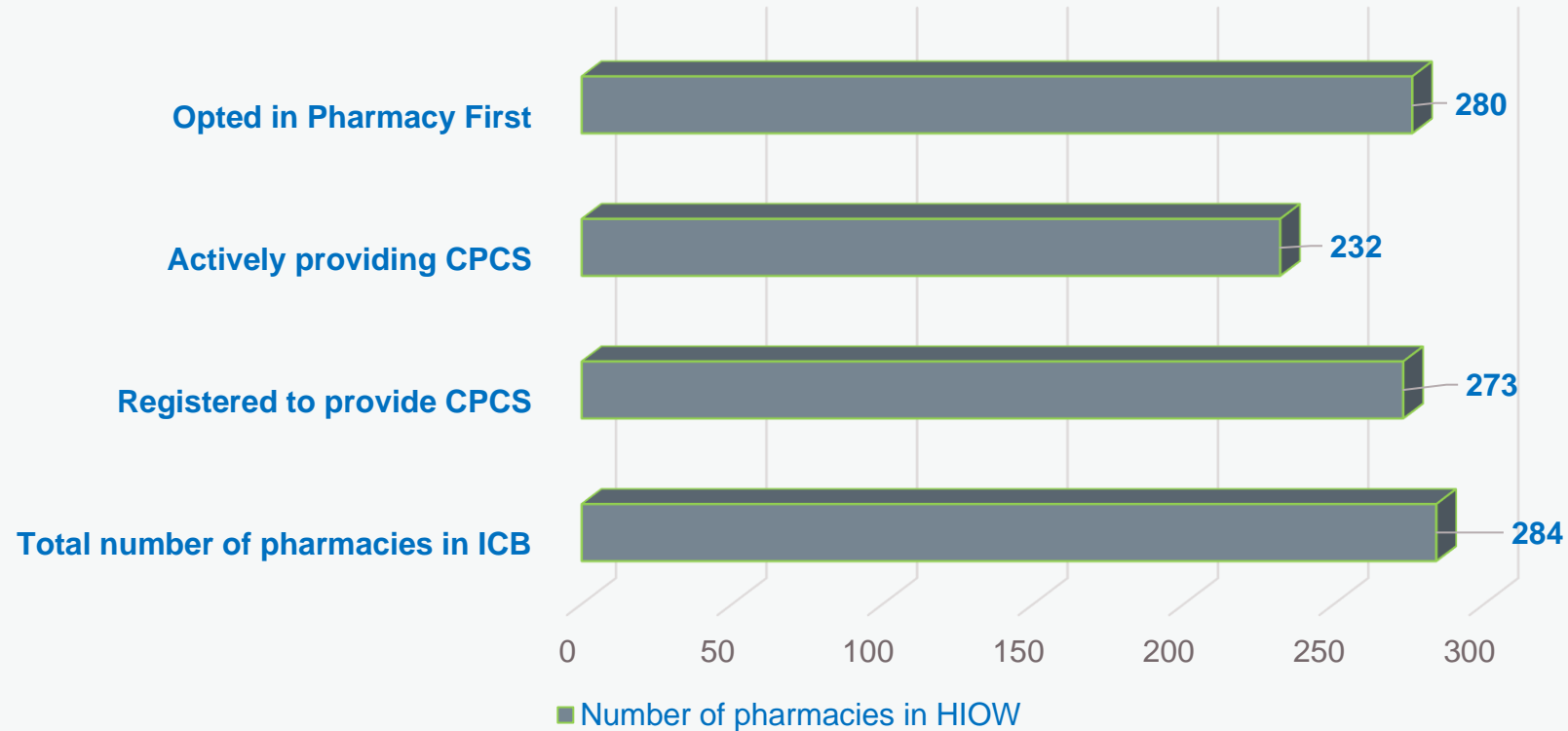
# GP Practice Referral to Pharmacy First

**GP practices should continue to digitally refer patients to Pharmacy First as per the former GPCPCS as opposed to signposting.**

## The patient benefits of referral include:

- Patients will receive a confidential consultation with the pharmacist in the consultation room or remotely. If signposted, may be treated as self-care support and possibly seen by another pharmacy team member.
- Patients are reassured that their concern has been taken seriously and the pharmacist will be expecting them.
- If the patient does not contact the pharmacy, the pharmacist has the ability to follow up based upon clinical need.
- Referrals enable the pharmacy to plan and manage workload, thereby meaning patients are seen in a timely manner.
- **Clinical responsibility for that episode of patient care passes to the pharmacist until it is completed or referred on.**
- There is an audit of referral and clinical treatment, which will support onward patient care.
- Referral data can evidence that patients are actively being supported to access appropriate treatment, **evidencing that GP practices are supporting the PCARP.**

# Service Sign up numbers across HIOW



Total number of pharmacies in ICB	Registered to provide CPCS	Actively providing CPCS in 2023-24	No CPCS Activity in 2023-24	Opted in for Pharmacy First	% of pharmacies in the ICB
284	273	232	41	280 As off 30/01/24	98.59%

# Next Steps and Summary

- Community Pharmacy England have published a Pharmacy First briefing note for LMC's and General Practice :[We're all community pharmacy \(cpe.org.uk\)](https://www.cpe.org.uk)
- There will be national updates and communications via GP bulletin
- Gp practices do not need to opt in from February for the service launch
- Revisit the current referral process into community pharmacy
- EMIS practice bolt on for referral
- SystemOne practice bolt on Pharm Refer consider and will be followed up with practices
- Have a local conversation with your community pharmacy in the area
- Use of Healthcare professional line by the community pharmacies
- Consider the information and who needs to be engaged in the practices to utilise this service



The poster features the NHS logo and the text 'Providing NHS services' in the top right corner. The main headline reads 'Most pharmacies can help you with seven common conditions without needing a GP appointment'. Below this is a photograph of a pharmacist in a black uniform talking to a customer in a pharmacy. To the right of the photo is a list of conditions: Sinusitis, Sore throat, Earache (children), Infected insect bite, Impetigo, Shingles, and Urinary tract infection (women). At the bottom left, there is a speech bubble icon with a question mark and the text 'Ask your pharmacy for more information about this free NHS service'. The bottom of the poster has the text 'Visit your Pharmacy First!' in large, bold letters.

NHS  
Providing NHS services

Most pharmacies can help you with **seven common conditions** without needing a GP appointment

Ask your pharmacy for more information about this free NHS service

Visit your **Pharmacy First!**

- Sinusitis
- Sore throat
- Earache (children)
- Infected insect bite
- Impetigo
- Shingles
- Urinary tract infection (women)

# Next Steps and Summary

## ✓ Pharmacy First GP Surgeries and Urgent care Provider Training : Course Length -16 minutes

### Course Objectives

- To understand what 3 elements, make up Pharmacy First
- To understand which conditions community pharmacists can supply medicines for under Clinical Pathway Consultations
- To understand what safeguards have been put in place to safeguard AMR
- To understand what community pharmacists, include when completing a Clinical Pathway Consultation and what the possible outcomes could be.

## ✓ **Updating of records received from Community Pharmacy from Pharmacy First, Blood pressure service and Pharmacy Contraception Service – GP connect**

- For EMIS Practice : [EMIS Web](#)  
A decision has been made by NHS England that this functionality will be automatically switched on for all GP England organisations, to ensure all pharmacy consultation messages are delivered to the patient's GP record successfully.
- For SystmOne Practice : [SystmOne](#)

## ✓ **Resources for promotion of Pharmacy First for Gp Practices and Community Pharmacy**

- Display poster and social media tiles can be downloaded from [here](#)

## ✓ **NHSE letter to GP practices and Community Pharmacies** [NHS England » Launch of NHS Pharmacy First advanced service](#)

## ✓ **Pharmacy First will form a key feature of the next GP Webinar** scheduled for the 1<sup>st</sup> February at 5pm – further details can be found here: [General Practice Webinar | NHS England Events](#)



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- Urinary tract infection (women)

Ask your pharmacy for more information about this free NHS service

Visit your **Pharmacy First!**

# Key Materials

- [NHS England » Launch of NHS Pharmacy First advanced service](#)
- [NHS England » Community Pharmacy advanced service specification: NHS Pharmacy First Service](#)
- [Pharmacy First: resources to promote the service - Community Pharmacy England \(cpe.org.uk\)](#)
- [Pharmacy First clinical pathways resources - Community Pharmacy England \(cpe.org.uk\)](#)
- [Watch our Pharmacy First: Getting ready for launch webinar - Community Pharmacy England \(cpe.org.uk\)](#)
- [NHS England » Community Pharmacy advanced service specification: NHS Pharmacy First Service](#)
- [NHS England » Launch of NHS Pharmacy First advanced service](#)
- [Pharmacy First start date confirmed as 31st Jan - Community Pharmacy England \(cpe.org.uk\)](#)
- Pharmoutcomes Pharmacy First User Guides - [Help – PharmOutcomes](#)
- EMIS GP Connect Update Record - [EMIS Web - GP Connect Update Record \(emisnow.com\)](#)
- TPP GP Connect Update Record - [TPP SystemOne](#) and [Pharmacy First – TPP \(tpp-uk.com\)](#)