



GP referrals into Community Pharmacist Consultation Service

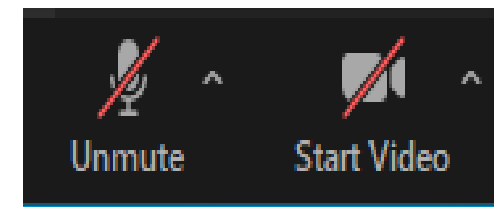
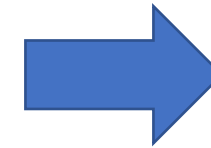
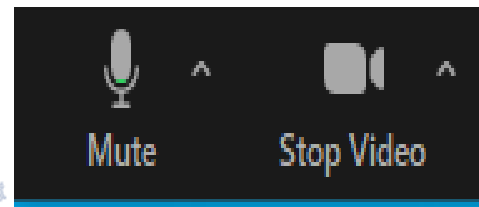


Ian Dean



GP referrals into Community Pharmacist Consultation Service

Training Attendees
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Kerry Withington
Business Development Manager
+44 7423781217 (direct)
KYMD@novonordisk.com

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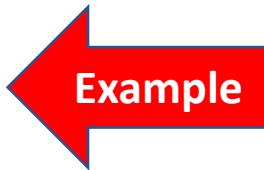
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GP referrals into Community Pharmacist Consultation Service

GP-CPCS

Learning Objectives



Learning Objectives

At the end of this training, you will...

- Know what GP CPCS is
- Be updated on the rollout of GP CPCS in North Yorkshire
- Know how to claim the “Annex F” payment
- Have information on the resources available to support both your set up fee and service roll out.





How much do you know already about GP-CPCS?

 Start presenting to display the poll results on this slide.

Introduction

GP-CPCS



The Community Pharmacy Contractual Framework for 2019/20 to 2023/24: supporting delivery for the NHS Long Term Plan

Published 22 July 2019

The 5-year CPCF sets out a clear vision for community pharmacy services, in line with proposals in the Community Pharmacy Forward View

The CPCS is the most important service development within the 5-year agreement

Implementing this service well has high importance/ strategic importance to:

- Patients
- NHSE&I, DHSC and HMT
- Other healthcare professionals
- Community pharmacy

GP-CPCS

- From 1st November 2020, the CPCS was extended across England to include referrals from general practices as well as from NHS 111
- GPs can refer patients to community pharmacies to receive a CPCS consultation for minor illness
- Unlike NHS 111, GPs cannot refer patients for an urgent supply of a medicine or appliance

Benefits to pharmacies

<https://vimeo.com/507031842>

GP CPCS = improving primary care access

GP-CPCS

National Guidelines

- Reading the updated [NHS CPCS Toolkit for pharmacy staff](#), so you understand more about how the pathway will operate;
- Reading the [updated service specification](#);
- Briefing relevant staff on the changes to CPCS;
- Ensuring pharmacists that will provide the service read the updated toolkit and service specification;
- Supporting pharmacists to reflect on continuing professional development activity they could undertake to provide the best possible service to patients, which could include undertaking the NHS-funded CPCS training provided by the [Royal Pharmaceutical Society and the Royal College of General Practitioners](#).

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Local Support for GP Practices

- There are digital solutions available which support the referral route from GP practices into the community pharmacy (although referrals also can be made using nhs mail).
- These digital tools are not part of the Advanced Service funding.
- Regionally we have secured funding to enable a digital solution for practices across North East & Yorkshire.
- Funding is agreed for EMIS Patient Access to be provided to EMIS practices and for Pharm Refer for SystmOne practices.
- Our regional team are in discussions with the providers to agree how this will be rolled out to practices and the associated timescales with the allocated funding.
- The licenses for these tools will be for a fixed period, 12 months in the first instance.

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Agree local protocols

Agree your local protocols – this is a key step as pharmacies can't write their SOPs unless they understand what this looks like for example

- Referral method e.g. PharmOutcomes, NHS mail etc.
- How is contact going to happen – pharmacist phones patient or patient turns up
- Timescales e.g. pharmacist must contact patient within 4 hours
- Use of professional line, or 'back door number'
- Even if you have not got any practices signed up you can still have your local protocols agreed as the practice in my experience is quite happy to go with what you suggest

These discussions should be practice to pharmacy and vice versa and will not be held by NHSE&I support

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- £300 “engagement and set up payment” can be claimed up to 30th June 2021
- Claims need to be made via the NHSBSA’s Manage Your Service (MYS) portal by 5th July 2021
- The requirements are detailed in Annex F of the [updated service specification](#)

GP-CPCS

a)The contractor has *participated in discussions with a delivery partner/LPC lead* to explore how they might promote uptake of CPCS locally. This could include early exploration of options, through to discussing the planning process for rollout of the referral pathway.

✓This webinar provides this

Q: Could/should Pharmacies be discussing GP-CPCS with their practices?

A: Not mandated, but by all means if an opportunity arises. However, please:

- Bear in mind current pressures/priorities
- Avoid multiple approaches to same practice
- LPC/System team must be informed to ensure adequate support
- Cannot just be an “arrangement” between a practice and a pharmacy that excludes others - patient free choice must prevail

GP-CPCS

b) The contractor has *participated in meetings*, which may be web-based and organised by others, to brief pharmacies and potentially general practices on the referral process which will be implemented, including how pharmacies will be involved in the pathway. Where a contractor has no representative available to attend a meeting at the time set, they should instead *seek a briefing from the delivery partner/LPC lead* on the matters discussed to ensure that they remain fully engaged with local plans.

➤ **Tonight covers this for now**

➤ Current local pathways:

We have discussed the agreed pathways: **PharmOutcomes** for referrals
Please ensure you discuss other local pathways with the GP/PCN ie: patient to ring first, surgery “back office” number for escalation pathway back for urgent appointment. These may change by the time your area goes live, but this initial agreement is enough for Annex F.

Monitor LPC website for developments as local rollout progresses.

GP-CPCS



GP referral pathway to the CPCS - Action Plan template for pharmacy teams

The implementation of the general practice referral pathway into the Community Pharmacist Consultation Service (CPCS) will be managed locally by the NHS (or their delivery partners), with support from LPCs. The aim is that rollout happens across a Primary Care Network (PCN) or larger area, and because general practices can choose whether they wish to make referrals to the CPCS, the service will be activated at different times across the country.

Community pharmacy contractors will therefore need to ensure they keep in contact with their LPC to find out how implementation is progressing in their area, but there are some tasks to support implementation of the referral pathway into the contractor's processes which can be undertaken ahead of the local rollout. Contractors can use this action plan template to guide their teams through the tasks necessary to implement the pathway in the pharmacy. Additional actions should be added, as necessary, to meet the needs of the pharmacy team and the local situation.

Topic	Action to be completed	Lead	Timescale	Completed
Guidance	Read the updated NHS CPCS Toolkit for pharmacy staff , so you understand more about how the pathway will operate.			<input type="checkbox"/>
	Read the updated service specification .			<input type="checkbox"/>
	Read any locally prepared briefing materials (these may be provided by NHS England and NHS Improvement (NHSE&I)), the local delivery partner, the Primary Care Network (PCN) or the LPC).			<input type="checkbox"/>
Standard Operating Procedure (SOP)	Put an SOP in place or review any existing SOP for the service, to include the GP referral pathway.			<input type="checkbox"/>
Engagement	Brief relevant staff on the changes to CPCS and provide them with the one-page overview on how the service will work.			<input type="checkbox"/>
Training	Ensure pharmacists that will provide the service read the updated service specification and toolkit .			<input type="checkbox"/>
	Support pharmacists to reflect on continuing professional development activity they could undertake to provide the best possible service to patients, which could include undertaking the NHS-funded CPCS training provided by the Royal Pharmaceutical Society and the Royal College of General Practitioners and reviewing their competence to provide care for patients presenting with the conditions listed in Annex D of the service specification.			<input type="checkbox"/>
	Train all pharmacy staff involved in the provision of the service on its operation, including relevant sections of the SOP.			<input type="checkbox"/>
Pharmacy set up	If you have <u>not</u> already registered to provide CPCS, do so via the NHSBSA Manage Your Service (MYS) portal . Note: Pharmacies which are already registered to provide CPCS do not need to re-register to receive referrals from GPs, as this is an extension to the existing Advanced service.			<input type="checkbox"/>

1

c) The contractor must ensure that *relevant members of the pharmacy team have read and understood any briefing materials* prepared locally by the PCN or delivery partners on the referral pathway and any rollout plans, to ensure the relevant details are understood;

- Record of staff briefing based on tonight's update ([Action Plan Template for Pharmacy Teams](#) on PSNC or CPNY website)

d) The contractor should *create an action plan for implementing the new referral pathway* in the pharmacy, including ensuring their NHS CPCS *standard operating procedure is updated* to include the GP referral pathway and the associated record keeping and data capture requirements.

- Create a pharmacy specific **brief** action plan based on tonight's update which includes the need to update your SOP before implementation.

GP-CPCS



Advanced Service Specification - NHS Community Pharmacist Consultation Service

e) The contractor must *ensure that relevant members of the pharmacy team are fully briefed* and have read and understood information within the updated NHS CPCS service specification and associated toolkit which is pertinent to their role.

- Record of staff briefing ([Action Plan Template for Pharmacy Teams](#) on PSNC or CPNY website)
- **Service Specification & Toolkit** (see links at the bottom of the NHSBSA website)

The NHS CPCS self-assessment framework

The [CPCS self-assessment framework \(PDF: 469KB\)](#) supports pharmacists in reflecting on their knowledge and skills to provide the service.

It highlights the key competencies needed to provide a high quality, person-centred service to people referred to your pharmacy from NHS111.

Supporting documents


You can find further useful information on the NHS England website:

[CPCS toolkit for pharmacy staff](#)

[CPCS specification](#)

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Are you able to sign in to MYS?

 Start presenting to display the poll results on this slide.

How to Claim – MYS Platform

GP-CPCS

Home Delivery Advanced Service

RTEC Registration

Flu Premises and Refrigeration Payments

GP Referral Pathway Declaration

Discharge Medicines Services

Covid-19 Lateral Flow Device Distribution Service Claim

The GP Referral Pathway enables GP practices to refer patients to a community pharmacy to receive a consultation for a minor illness.

It is an extension of the NHS Community Pharmacist Consultation Service (CPCS), so there is no need to register for it if you are already registered for the CPCS.

You can find [details of the services pilot on the NHS England website](#).

You can claim an engagement and setup payment if you complete the activity listed in Annex F of the [NHS CPCS service specification](#).

Do you want to claim this payment?

☐ Yes

☐ No

Next

GP CPCS Referral Pathway Declaration

Register for this service

Declaration

DECLARATION

1. I am claiming a payment of £300 for the GP Referral Pathway to NHS CPCS engagement activity, as set out in Annex F of the NHS CPCS service specification.
2. I confirm that I have completed all activity required to claim this payment and that I may be required to provide evidence of this activity upon request.
3. I declare that the information on this submission is correct and complete and understand that further action may be taken if this is not the case.

First name

Surname

☐ I agree and accept the declaration above.

GP-CPCS – Aide Memoire

NHS Community Pharmacist Consultation Service (CPCS)

Service
suitability

The service is only
for patients aged
over 1 year.



CONDITIONS	What conditions are SUITABLE for referral to pharmacists?			Do NOT refer in these circumstances	
BITES / STINGS	•Bee sting •Wasp sting	•Stings with minor redness	•Stings with minor swelling	•Drowsy / fever •Fast heart rate	•Severe swellings or cramps
COLDS	•Cold sores •Coughs	•Flu-like symptoms	•Sore throat	•Lasted +3 weeks •Shortness of breath	•Chest pain •Unable to swallow
CONGESTION	•Blocked or runny nose	•Constant need to clear their throat	•Excess mucus •Hay fever	•Lasted +3 weeks •Shortness of breath	•1 side obstruction •Facial swelling
EAR	•Earache	•Ear wax •Blocked ear	•Hearing problems	•Something may be in the ear canal •Discharge	•Severe pain. •Deafness •Vertigo
EYE	•Conjunctivitis •Dry/sore tired eyes •Eye, red or irritable	•Eye, sticky •Eyelid problems	•Watery / runny eyes	•Severe pain •Pain 1 side only	•Light sensitivity •Reduced vision
GASTRIC / BOWEL	•Constipation •Diarrhoea •Infant colic	•Heartburn •Indigestion	•Haemorrhoids •Rectal pain, •Vomiting or nausea	•Severe / on-going •Lasted +6 weeks	•Patient +55 years •Blood / Weight loss
GENERAL	•Hay fever	•Sleep difficulties	•Tiredness	•Severe / on-going	
GYNAE / THRUSH	•Cystitis •Vaginal discharge	•Vaginal itch or soreness		•Diabetic / Pregnant •Under 16 / over 60 •Unexplained bleeding	•Pharmacy treatment not worked •Had thrush 2x in last 6 months
PAIN	•Acute pain •Ankle or foot pain •Headache •Hip pain or swelling •Knee or leg pain	•Lower back pain •Lower limb pain •Migraine •Shoulder pain	•Sprains and strains •Thigh or buttock pain •Wrist, hand or finger pain	•Condition described as severe or urgent •Conditions have been on-going for +3 weeks	•Chest pain / pain radiating into the shoulder •Pharmacy treatment not worked •Sudden onset
SKIN	•Acne, spots and pimples •Athlete's foot •Blisters on foot •Dermatitis / dry skin •Hair loss	•Hay fever •Nappy rash •Oral thrush •Rash - allergy •Ringworm/threadworm	•Scabies •Skin dressings •Skin rash •Warts/verrucae •Wound problems	•Condition described as severe or urgent •Conditions have been on-going for +3 weeks	•Pharmacy treatment not worked •Skin lesions / blisters with discharge •Diabetes related?
MOUTH / THROAT	•Cold sore blisters •Flu-like symptoms •Hoarseness	•Mouth ulcers •Sore mouth •Sore throat	•Oral thrush •Teething •Toothache	•Lasted +10 days •Swollen painful gums •Sores inside mouth	•Unable to swallow •Patient has poor immune system •Voice change
SWELLING	•Ankle or foot swelling •Lower limb swelling	•Thigh or buttock swelling •Toe pain or swelling	•Wrist, hand or finger swelling	•Condition described as severe or urgent •Condition ongoing for +3 weeks	•Discolouration to skin •Pharmacy treatment not worked •Recent travel abroad

GP-CPCS

Next Steps

All relevant members of staff to read the briefing materials on the LPC GP-CPCS website page (<http://cpny.co.uk/nhs-contract/advanced-services/nhs-cpcs/>). Record this **This fulfils Annex F requirement c)**

Create a brief action plan for implementing the new referral pathway in the pharmacy, including plan to update SOP (<https://psnc.org.uk/wp-content/uploads/2021/03/GP-CPCS-Action-Plan-template.pdf>). **This fulfils Annex F requirement d).**

All relevant staff members to read and understand the updated CPCS service specification and pharmacy toolkit. Keep a **record** of completion. **This fulfils Annex F requirement e).**

Claim Annex F engagement and setup payment (£300) via MYS. If you are not currently signed up to CPCS, this can also be done via MYS (ensuring all relevant training is completed as stipulated in service specification). Free CPCS training is available for Pharmacists via RPSGB

For more information please see: <https://psnc.org.uk/services-commissioning/advanced-services/community-pharmacist-consultation-service/>

GP-CPCS



- Service with proven benefits for patients
- Using the clinical skills of the pharmacy team
- Pharmacy funded for the work undertaken
- Increases the integration of community pharmacy within the NHS
- Improve working with GP practices
- Part of the 5-year CPCF developments

GP-CPCS

NHS Conditions Recommended minor illnesses to be referred to community pharmacists - can be downloaded from the course

NHSE&I Conditions for which over the counter items should not be routinely prescribed in primary care
<https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf>

CPCS Service Specification - Community Pharmacy [NHS England » Advanced Service Specification – NHS Community Pharmacist Consultation Service](#)

CPCS Toolkit for Community Pharmacy [NHS England » NHS Community Pharmacist Consultation Service: Toolkit for Pharmacy Staff](#)

CPCS Additional Resources [CPCS – GP referral pathway : PSNC Main site](#)

GP-CPCS

[HTTPS://WWW.VIRTUALOUTCOMES.CO.UK/PHARMACY-](https://www.virtualoutcomes.co.uk/pharmacy-)

 [GP Referrals - Team Training](#)
Web Course

Start Course



 [Online Consultations](#)
Web Course

Start Course



 [GP Surgery Training - This link can be shared with your surgery](#)
Web Course

Start Course



 [Clinical Consultation](#)
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 [Implementation and Training](#)
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 [PharmOutcomes Help Video](#)
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Questions




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How would you rate this training out of 10?

 Start presenting to display the poll results on this slide.

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If you didn't rate it 10, what would have made it a 10?

 Start presenting to display the poll results on this slide.