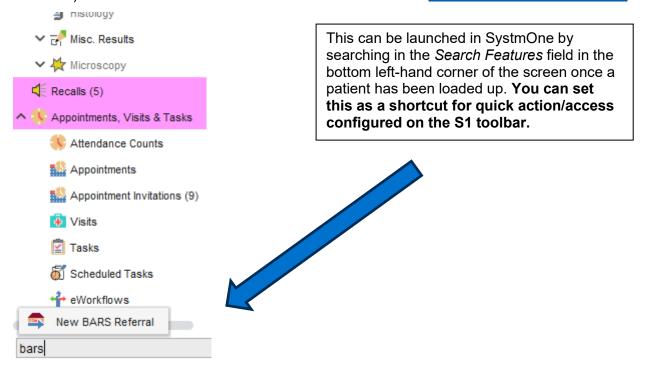




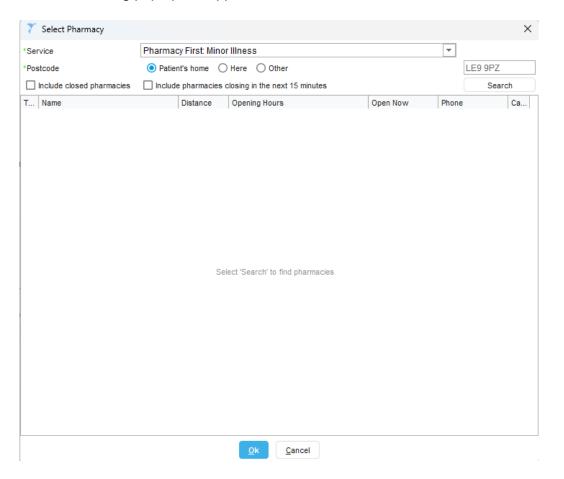
#### September 2025

### **SystmOne Integrated Referrals to Pharmacy First**

TPP recently launched a new integrated referral solution that allows GP practice teams to refer patients to Pharmacy First directly from SystmOne without using either email or an external platform such as PharmRefer. This is called: **New BARS Referral**. (BARS stands for Booking and Referral Standard). A video demonstration from TPP can be found here: <u>BaRs - Referral to Pharmacies</u>



Once launched the following pop up will appear:



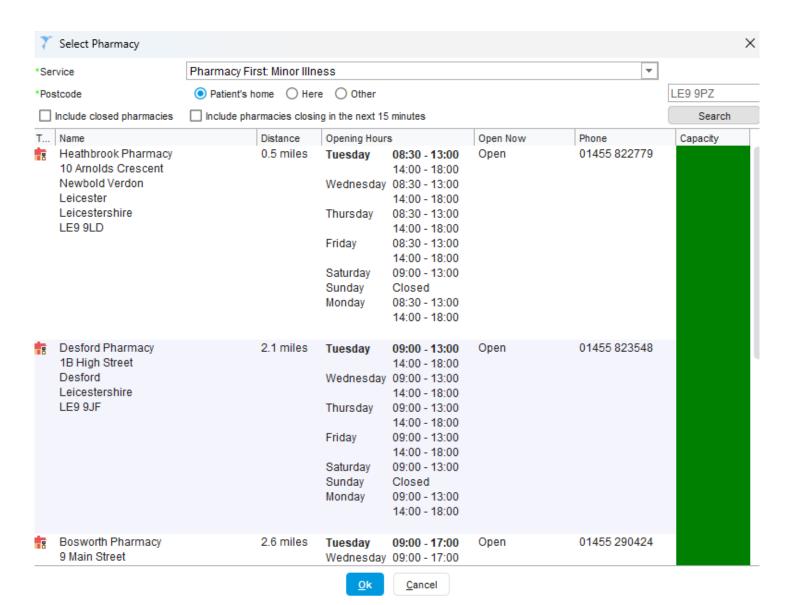




Currently no other service can be selected other than *Pharmacy First: Minor Illness*. However this referral route can be **used for both Pharmacy First minor illness and clinical pathways** - those conditions that a pharmacist can supply NHS funded treatments for under a patient group direction (PGD). See appendix 1 for a list of conditions suitable for Pharmacy First.

From the above screen a pharmacy can be searched by either the patient's home postcode, their GP practice postcode or another postcode. A patient can be referred to any pharmacy in England that has signed up to this service. Once the relevant postcode has been entered, a list of pharmacies that have signed up to the service will be shown.

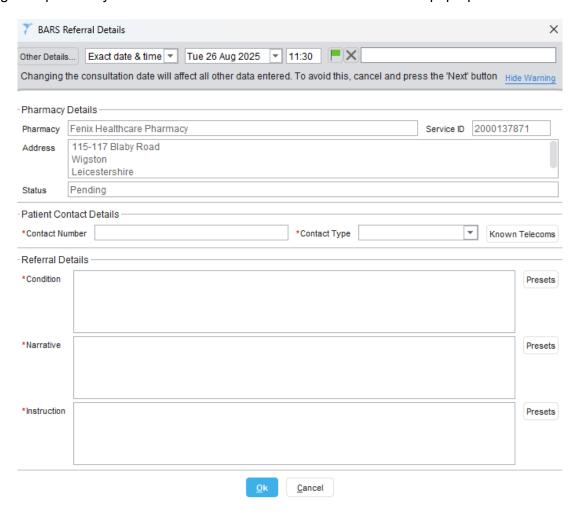
- Opening hours extracted from those held in the Directory of Services.
- Pharmacies will be listed in their distance from the postcode entered.
- Pharmacies closed or closing within the next 15 minutes will be excluded from the list unless
  the options Include closed pharmacies or Include pharmacies closing in the next 15 minutes
  are ticked.
- The information that the capacity status indicates is currently unknown.



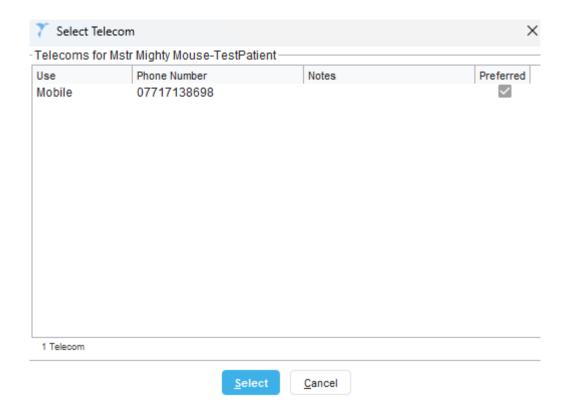




Clicking on a pharmacy to select it to send a referral will launch a further pop-up



Patient contact details can either be manually entered or selected by clicking the *Known Telecoms* button. The *Condition*, *Narrative* and *Instructions* fields on the BARS Referral Details window must be completed; pre-sets can be set up but are not included by default. It is suggested that condition presets are created by practices using the conditions listed in appendix 1 & appendix 2.







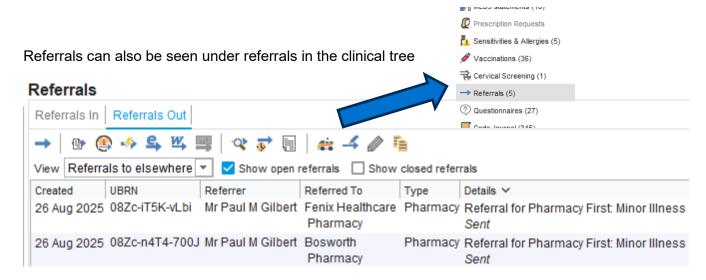
If needed, additional information can be sent to the pharmacy using the *Narrative* field. If no additional information is required, then uses will need to enter *N/A or* similar.

Once all the fields are completed, clicking OK will close the window and the referral will be sent when the record is saved. Referral will appear in the new journal as:

Tue 26 Aug 2025 11:30 - Surgery: Mr Paul Gilbert (Pharmacist)

P GILBERT → Pharmacy Referral for Pharmacy First: Minor Illness

They will not be coded unless a code is manually added before the record is saved, but the following code can be used: Referral to Community Pharmacy Pharmacy First Service (9833410000000102 or Ycj9z). Records will not be marked as clinically relevant so may not automatically show in the new journal until all entries are selected to be viewed.





### Humber and North Yorkshire Integrated Care Board (ICB)

# **Important Points to Note**

- The integrated way to refer will be easier for General Practice to send referrals into Community Pharmacy. Some patients, however, may need urgent escalation/discussion. Ensure Community Pharmacy has a way to do this e.g. back door telephone numbers for HCP-to-HCP conversations. This is the only time this phone number will be used.
- The referral option within S1 is called "Pharmacy First: Minor Illness" but please be assured
  this is for both the minor illness list AND the 7 clinical conditions in Appendix 1 & 2 of this
  document.
- To enable outcomes to be shared seamlessly please ensure GP Connect is switched on.
   Outcomes will still need to be verified by the practice so nothing will drop back into a patient record without needing prior approval:
  - o Information on GP Connect: GP Connect: Update Record NHS England Digital
  - How to enable GP Connect: <u>TPP-SystmOne-GP-Connect-NHS-111-Direct-Booking-Training-Guide-FINAL.pdf</u>
- If any issues or queries need to be raised or anything you are not sure of, speak to the
  Community Pharmacy in the first instance to see if it can be resolved locally. If issues persist or
  you wish to escalate anything, please let the ICB know: <a href="mailto:hnyicb-ny.pharmacycontracts@nhs.net">hnyicb-ny.pharmacycontracts@nhs.net</a>
- The information that the capacity status indicates is currently unknown. Community
  Pharmacies are being asked to communicate with their local practices during times they are at
  capacity or unable to provide services. This will prevent referrals being sent that are unable to
  be actioned.
- Whilst patient "bounce backs" are unlikely when digitally referred, it is estimated that 1 in 10 patients will need to be sent back to the practice. This is not a failed referral, but triage to determine the patient is seen by the correct health care professional.
- The new integrated solution is a new concept and whilst it enables easier referral, please be patient with any teething problems and be mindful of colleagues getting used to a new process.
- If you have found something that works well e.g. pre-sets for conditions, explanatory notes to support system use etc. please do share this with the ICB so we can distribute amongst other practices to help get everyone up and running.





## **Appendix 1**

## NHS Pharmacy First – referrals for minor illnesses

Service suitability

The service is only for patients aged over 1 year.

	,			Service suitability	atients aged over 1 year.
CONDITIONS	What conditions are S	UITABLE for referral to	pharmacists?	Do NOT refer in these cir	cumstances
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 ongoing 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

#### Important:

Please note this slide is intended as a guide and has been adapted from a similar table used to support CPCS minor illness referrals from GP practices which now forms part of Pharmacy First along with the 7 Clinical Pathways.

Following referral for a minor illness the pharmacist will assess the patient and either

- support the patient through what was previously the minor illness pathway for CPCS.
- if necessary they will assess and check if the patient needs and can be supported through the 7 clinical pathways
- or if e.g. symptoms have deteriorated or red flags are identified, promptly escalate them to higher acuity support.





## **Appendix 2**

#### **Aide-Memoire for Pharmacy First**

Community Pharmacists can, if appropriate, supply antibiotics for the following 7 conditions- UTI's, Impetigo, Acute Sore Throat, Shingles, Infected Insect Bite, Acute Sinusitis and Acute Otitis Media in children aged 1-17 years. This aide-memoire is to help you formally refer the correct individuals.

Conditions	What conditions are <b>SU</b> pharmacists	ITABLE for referral to	Do NOT refer in these circumstances		
UTIs	Female	16 to 64	Under 16 or 65 or over	-Immunocompromised	
			Male	- Recurrent UTI's (2 in last 6 months/3 in last 12 months)	
			Pregnant Breastfeeding	- UTI treated with antibiotics in last 3 months	
For UTI's	Has TWO or THREE of th	ne following	Has <b>ONE</b> or <b>NONE</b> of the follow	ing	
Ask individual	Has <b>TWO or THREE</b> of the following  o Dysuria (Painful or difficult urination)		O Dysuria (Painful or difficult urination)		
whether they	New nocturia (New urination at night)		o New nocturia (New urination at night)		
have -	O Urine cloudy to the naked eye		o Urine cloudy to the naked eye		
nave -			o offile cloudy to the flaked eye		
Impetigo	Adults & Children	Children aged 1 and over	Under 1's		
			Pregnant individuals under 16		
Acute Sore	Adults & Children	Children aged 5 and over	Under 5's		
Throat			Pregnant individuals under 16		
Shingles	Adults	18 and over	Under 18's	-Severely immunocompromised	
			Pregnant	-Shingles in the eye	
Infected Insect	Adults & Children	Children aged 1 and over.	Under 1's		
Bites			Pregnant individuals under 16		
<b>Acute Sinusitis</b>	Adults & Children	Children aged 12 and over	Under 12's	-Chronic Sinusitis (had over 12 weeks)	
			Pregnant individuals under 16	- Immunocompromised	
<b>Acute Otitis</b>	Children	Children aged 1 to 17	Adults over 17	-Recurrent Acute Otitis Media (3 or more episodes in 6	
Media			Pregnant individuals under 16	months or 4 or more in 12 months)	