

Independent Prescribing in Community Pharmacy Pathfinder Programme Northwest Webinar

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Deputy Regional Chief Pharmacist – Pharmacy
Integration



Overview

- 1. Programme Overview
- 2. Northwest Approach
- 3. Timescales
- 4. ICS Proposed Models
- **5. Community Pharmacy EOI Process**
- 6. Q &A Panel

Programme Overview



Objectives

- To establish a Community Pharmacy Independent Prescribing Programme of work that will support this aim within agreed timetable;
- To establish Pathfinder sites to identify and test the delivery of IP across all NHSE regions;
- To identify the optimum processes including governance, reimbursement and IT requirements required to enable independent prescribing in community pharmacy;
- To inform the development of assurance processes for professional and clinical service standards that support IP activities in the context of NHS community pharmacy services;
- To inform the professional development needs of community pharmacists and wider workforce strategy for pharmacy professionals in primary care;
- To inform the post 2019- 2024 community pharmacy contractual framework clinical strategy;
- To inform the ICB delegation responsibilities necessary to support national and local commission
 of community pharmacy clinical services that may include access to independent prescribing;
- To undertake appropriate local and national quantitative and qualitative evaluation / research, including patient experience and the experience of community pharmacy, general practice, community services and secondary care teams with a view to establishing safe and effective community pharmacy clinical services incorporating independent prescribing for patients in primary care.



Community Pharmacy Support to Participate

It must be noted that the clinical session fee and project support costs are to be determined by the NHSE National Pharmacy Team

IP Resource

- Fee to be paid to Community Pharmacies to support clinical session time of IP
- Clinical session time is expected to include participation in peer support and engagement

Set up / Equipment

- Computer equipment
- Consumables and diagnostic equipment not already in the pharmacy (e.g. dip sticks, tongue depressors, placebo inhalers, in-check devices, etc)

Professional Support

- Training support for IPs (Does not include training to become an IP)
- Clinical overview support
- Peer network support across PCNs

Digital

- Clinical system for consultations and EPS generation
- Access to necessary patient records and pathology results

Northwest Approach



- Supported by the Deputy Regional Chief Pharmacist the Northwest ICSs are working in a collaborative approach.
- A Northwest oversight and delivery group has been established, including each ICS Chief Pharmacist.
- A co-ordinated approach has been taken to developing shared core principles for key programme aspects across the NW:
 - Governance / Assurance
 - Service KPIs
 - Standardised Pharmacy EOI process
 - Review of digital systems
 - Ensuring IP Community Pharmacists are supported and treated the same as other NMPs
- The system Pharmacy Local Professional Network Chairs are supporting the programme.
- Each ICS will have a implementation and delivery oversight group that will include LPC and community pharmacy representation.

Timescales



- Each ICS had until 28 February to submit and EOI to participate in the programme
- In the Northwest each ICS EOI was reviewed and approved to move forward for national review.

 National review is being undertaken through April 2023, to confirm budgets and final sign off.

- It is expected that ICSs will be notified of final outcome by May 2023.
- We are now looking for community pharmacies to express interest in participation to ICSs



Cheshire and Merseyside Local Models

Pam Soo Clinical Lead for Community Pharmacy Integration

Cheshire and Merseyside ICB Models



1. Minor Infection Service (core service)

This would be prescribing for minor infections
Indications are still being scoped linking to CPCS conditions
Likely to include UTIs, bacterial conjunctivitis for children and sore throats, for example
Referrals and walk-ins

2. Respiratory Service (additional service)

Focusing on switching to greener inhalers
Including inhaler technique, Medicines Optimisation linked to care plans and disposal
Booked referrals
Sessional basis

3. Step Down of SSRI / Antidepressant Therapy (additional service)

Step down of Anti depressant therapy where appropriate following Stepdown Pathway

Contractors can express an interest in delivering the core – minor ailments service and may additionally express interest in delivering one or both of the additional services

Delivery of all services by an individual pharmacist will be dependent on their areas of clinical prescribing practice and clinical competency



Greater Manchester Local Models

Greater Manchester ICB Models



- Minor Illness (core service)
 - Referrals and walk-in
 - Linked to CPCS
 - Min 15 hours per week dedicated time
- 2. Cardiovascular disease (additional)
 - Referrals and walk-in
 - Linked to Hypertension case-finding service
- 3. Respiratory disease (additional)
 - · Referrals and walk-in
 - Referrals from Acute respiratory Infections hub (ARI) or practices
 - Including inhaler technique, medicines optimisation linked to care plans

Contractors must deliver the core service and can express an interest for either additional service dependent upon prescriber clinical competency



L&SC Local Models

Julie Lonsdale
Clinical Lead for Community Pharmacy Integration

24/04/2023

Lancashire and South Cumbrid Health and Care Partnership



LSC Models

1. Minor infection service

- This would be prescribing for minor infections
- Indications are still being scoped
- Likely to include UTIs, bacterial conjunctivitis, sore throats, and oral thrush, for example
- Referrals and walk-ins

2. Respiratory service

- Focusing on switching to greener inhalers
- Including inhaler technique, Medicines Optimisation linked to care plans and disposal
- Booked referrals
- Most likely sessional basis

Can express an interest for one or both services

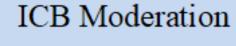
Community Pharmacy EOI Process



Community Pharmacy (CP) EOI

- Webinar
- FAQs
- Each CP to complete an electronic EOI form before the deadline.

April/May 2023



- ICB will access submissions and seek clarity from the CP as and when required.
- ICB will collaborate with regional pharmacy integration lead.
- Submissions will be reviewed against IP pathfinder criteria.

May 2023



Notification

- ICB will consider number of submissions against budget allocation from NHSE.
- ICB will notify each CP of the outcome.
- Collaborative working with successful sites, LPN, LPC and ICB will commence.

May/June 2023

Community Pharmacy EOI Process

ICBs will write out to all Community Pharmacies in their area

EOI window will open on 25 April 2023 for 2 weeks Link to an electronic form with the deadline for completion of Tuesday 09 May

Guidance on completing the EOI

Microsoft Word document of the submission form

One submission per pharmacy or one submission from organisations of multiple pharmacies

Assessed against criteria

- Must be supported by superintendent pharmacist
- Commitment to support the evaluation process

Q&A Panel



- Stephen Riley Deputy Regional Chief Pharmacist, NHSE
- Pam Soo Community Pharmacy Clinical Lead, Cheshire and Mersey ICS
- Alison Scowcroft Community Pharmacy Clinical Lead, Greater Manchester ICS
- Julie Lonsdale Community Pharmacy Clinical Lead, Lancashire and South Cumbria ICS
- Bruce Prentice Regional Senior Pharmacy Professional Advisor, NHSE
- Andrew White ICB Chief Pharmacist, Lancashire and South Cumbria ICS