



# Gloucestershire

## Newsletter April 2022



### WINTER WALK –IN A SUCCESS

#### OVER 1000 CONSULTATIONS COMPLETED

The Winter Walk-in service, commissioned by the CCG to help patients access the Community Pharmacy Consultation Service without an electronic referral, has provided a structured consultation to over 1000 patients during the 3 months it was commissioned. Continued page 2.....

As many of you will be aware, Teresa Middleton retired at the end of 2020 and has been replaced as Chief Pharmacist within the CCG by Adele Jones. Adele joins the Pharmacy Team with many years of experience working in pharmacy locally and within Gloucestershire

CCG in other roles. Also retiring at the end of 2022 were Liz Ponting and Elaine Johnson. Elaine has been replaced by Liz Dazeley, who can be contacted on [elizabeth.dazeley@nhs.net](mailto:elizabeth.dazeley@nhs.net) for any CCG contract or payment queries.

#### RSG process concludes

The Pharmacy Representation Review Steering Group (RSG) was tasked with exploring the recommendations in the independent review by Professor David Wright. The RSG has now concluded its work, and proposals will shortly be coming out to contractors for how Community Pharmacy should be represented both locally and nationally in the future. The proposals include:- changes to governance processes both locally and nationally to introduce external governance and make good practice changes to better define roles and increase visibility against KPIs; looking at the way national contracting functions are undertaken & funded and making changes to increase central development and support capacity for local commissioning; developing and delivering a strong vision and strategy for the sector; improving the way that contractor voices are heard and giving the sector more opportunity to engage and become part of the future of pharmacy.

Proposal documents should be sent out to all contractors week commencing 25th April with contractors having 4 weeks to read the documents and ask questions and then a voting period is planned for the end of May. There will be a regional session so that contractors can ask questions before the vote– details will be shared for this at a later date.

#### Included with this newsletter:

The NPA have kindly agreed to let us reproduce their Minor Ailments Red Flag guidance resource for pharmacists to support CPCS consultations. This has been printed and laminated for your convenience.

## Winter Walk-in service, Continued from page 1...

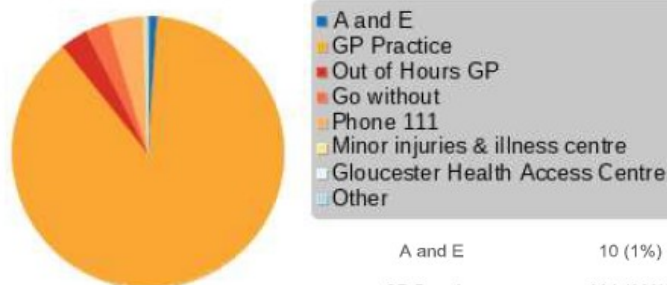
The service was commissioned to run from January to April 2022 to complement the roll out and engagement process of the national GP CPCS, to improve access to structured consultations with community pharmacists for patients and led to increased engagement with general practice.

During the 3 month period that the service ran, pharmacists in Gloucestershire recorded 1001 consultations on the service – with 30% of Gloucestershire pharmacies participating.

Additional advice and support was given to pharmacists to strengthen recording of consultations using an SBAR template to provide robust consultation notes, and information about how patients were referred into the service and where they would have gone if the service had not been available were also captured.

Whilst the bulk of consultations completed were patients self-referring into the service or pharmacy staff referring to the pharmacist where they felt a more in-depth consultation was required,- 110 patients (11%) were referred verbally by a member of the surgery reception team.

Several potentially serious conditions were picked up by the pharmacists undertaking consultations– including three patients with symptoms of sepsis, two patients with symptoms of blood clots, several with worsening infection symptoms and many more who would have ignored possible cancer symptoms. It is clear from the feedback given by patients that the service avail-



Patients were asked where they would have gone if the service had not been available in community pharmacy

A and E	10 (1%)
GP Practice	881 (88%)
Out of Hours GP	31 (3.1%)
Go without	26 (2.6%)
Phone 111	40 (4%)
Minor injuries & illness centre	5 (0.5%)
Gloucester Health Access Centre	2 (0.2%)
Other	6 (0.6%)

able in community pharmacy prevents patients from visiting other primary or secondary care settings– with nearly 900 GP contacts prevented, and other patients reporting that they would have visited A&E or Out of Hours if the service had not been available.

The evidence collected by the pharmacies delivering this service will be used to support the further roll out of the national GP CPCS service. Pharmacies are reminded to please promote CPCS when talking to surgery staff, refer to the LPC for practice staff training and coaching, and keep checking NHS mail regularly to ensure that referrals are actioned promptly.

## Useful numbers- Cut out and keep this useful list of contact numbers.

Sam Bradshaw- LPC Support Officer	Email: supportglos@lpcoffice.org.uk Tel: 07895 731973
LPC web site: For information about services, useful resources, LPC meetings and much more.	<a href="https://gloucestershire.communitypharmacy.org.uk/">https://gloucestershire.communitypharmacy.org.uk/</a>
NHSE Pharmacy, Dental and Optom (Primary Care)	Email: england.pharmacysouthwest@nhs.net
Out of Hours Professional Line	Tel: 0330 053 6359
Change, Grow, Live (CGL) for queries about substance misuse and needle exchange	Email: Rae.Davies@cgl.org.uk
Smartcard Office	Email: scwcsu.smartcards@nhs.net Tel: 0300 5610429

## HYPERTENSION CASE FINDING SERVICE

In March the LPC organised a very well attended training and engagement evening to support community pharmacists with delivering the newly commissioned Hypertension Case Finding service. We were fortunate enough to have Dr. Jim Moore- President of the Primary Care Cardiovascular Society , GP & GPSI Cardiology Gloucestershire and Clinical lead with the National Cardiac Pathways improvement Programme attend and talk to pharmacy colleagues about the importance of the pharmacy service in supporting national targets for hypertension.

Early diagnosis of hypertension is one of the key 10 year cardiovascular disease ambitions for England– with a target of over 80% of the expected number of patients with hypertension to be diagnosed by 2029.

Given that current estimates put the actual figure at less than 50% diagnosis– with 23 million LESS blood pressure checks being completed in primary care, and controlled hypertension cases dropping by 2 million over the 18 months of April 20-October 21– this is a challenge that will require Community Pharmacy to work with other providers in the Primary Care Networks so that avoidable deaths from CVD are prevented.

Especially important will be Pharmacy participation in

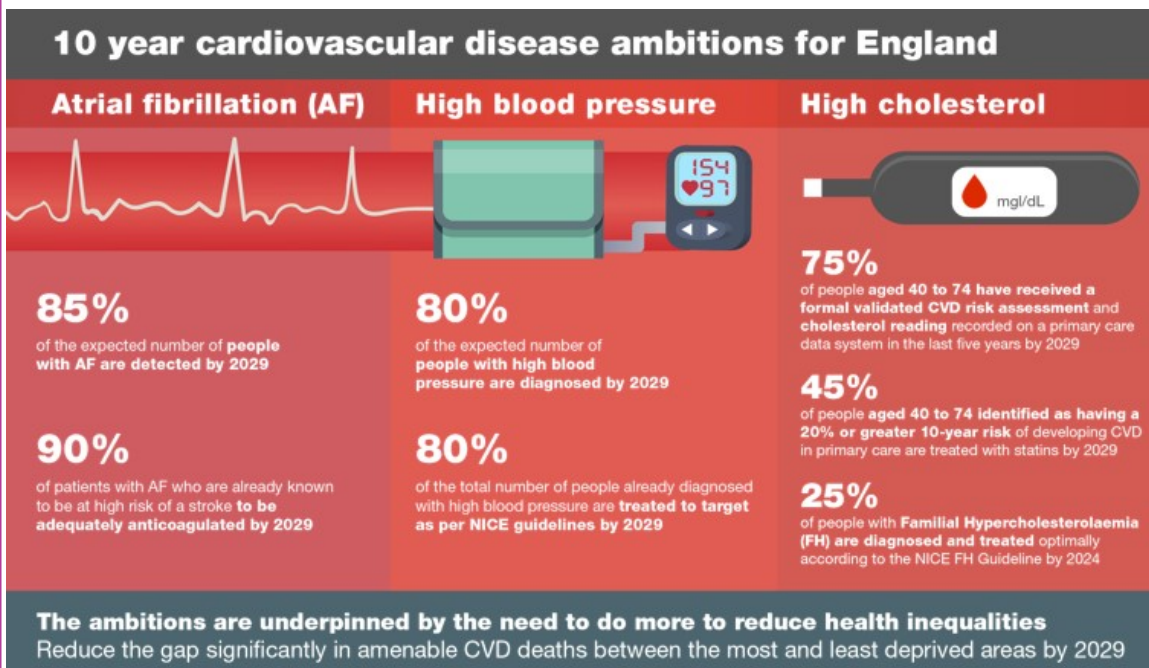
areas of high deprivation and where access to GP services is still under significant pressure.

Pharmacists are advised to notify their local General Practices when they start offering the services– and to work with the newly appointed Hypertension leads in each PCN to identify patients groups to be targeted and referral pathways for accepting patients passed to the pharmacy for ongoing monitoring.

Pharmacies must be able to provide both clinic BP monitoring and ambulatory BP monitoring in order to offer the service, and currently due to VAT rules only pharmacists are able to provide the monitoring. Other pharmacy staff can assist with collecting patient information, recording and reporting results or other admin tasks, cleaning equipment, consenting patients (if trained) and delivering opportunistic healthcare advice on healthy eating, weight management, exercise and smoking cessation to patients.

A recording module for the Hypertension Case Finding service is now live on PharmOutcomes for pharmacies to use. Although claims still need to be made on MYS each month, we are encouraging you to use the recording module to facilitate reporting to General Practices (the system will send a notification automatically to the GP

as it does in CPCS and flu reporting so that you don't have to send separate emails to GPs) and so that the CCG and LPC have some visibility on local uptake and can support practices who may need help delivering the service.



### Flu service 2021/22

The 21/22 flu season saw Gloucestershire Community Pharmacies successfully administering record numbers of flu vaccines across the county, whilst also delivering GCC occupational health and private flu vaccination services. Pharmacies in Gloucestershire administered 62,672 NHS flu vaccines— a more than 100% increase on the previous year's 31,000— and supported PCN level vaccination rates for over 65's with only 1 PCN reporting failing to reach the 80% target to qualify for PQS and IIF points.

The 22/23 season may be a bit more challenging— with negligible flu infection rates over the last few years and 50-64 year olds no longer qualifying for free vaccination on the NHS. The LPC will again be working with GCC to negotiate an occupational health flu service and with the CCG/ICS to see where we can support health and social care worker access to vaccines.

### Funding for Independent prescribing qualification

A new pot of money to support Community Pharmacists to gain their Independent Prescribing qualification will shortly be released by Health Education England. The money will allow pharmacists working in Community Pharmacy settings to access funded places on IP courses at universities across the UK, starting this September. Pharmacists are encouraged to talk to their line managers, as the money will cover the training course but pharmacists will still need time to attend and complete training, as well as undertake supervised practice with an experienced clinician.

The LPC is working with the CCG to identify potential clinicians who would be willing to supervise candidates undertaking their prescribing qualification— as these supervisors have been hard to find unless you are actually working for a general practice or the CCG. We would encourage people thinking about applying for this course to speak to their local surgery initially, and get in touch if the surgery is unable to help to see if we can assist.

Watch out for communication from Health Education England in coming weeks.

### Locums!!!!

Are you a locum pharmacist looking for occasional or regular work? Do you work in Gloucestershire and want to be added to our mailing list? Contact Sam Bradshaw on [supportglos@lpcoffice.org.uk](mailto:supportglos@lpcoffice.org.uk) to receive regular updates from the LPC.



## YOUR LPC

Chair: Andrew Lane	Pete Badham (AIM)
Vice Chair: Neetan Jain (Independent)	Steve Ireland (AIM)
Treasurer: Will Pearce (CCA)	Rebecca Myers (Partnerships Manager and AIM)
Sam Bradshaw (Support Officer)	Wayne Ryan (CCA)
Gary Barber (Independent)	Vasileios Alafadimos (CCA)
Ethisham Kiani (Independent)	Mohammed Rahmen (CCA)