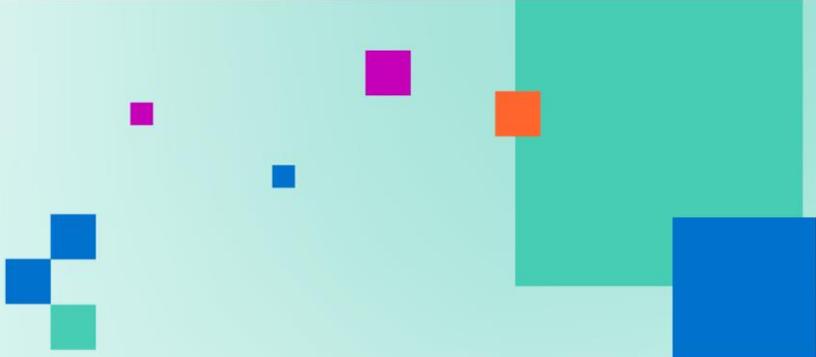


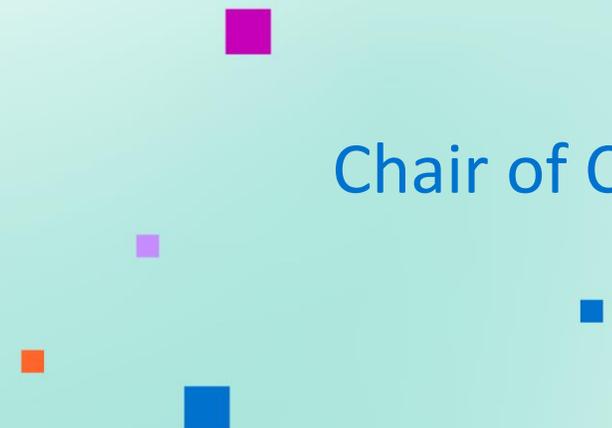
Annual General Meeting 2023 - 2024

Celebrating Success



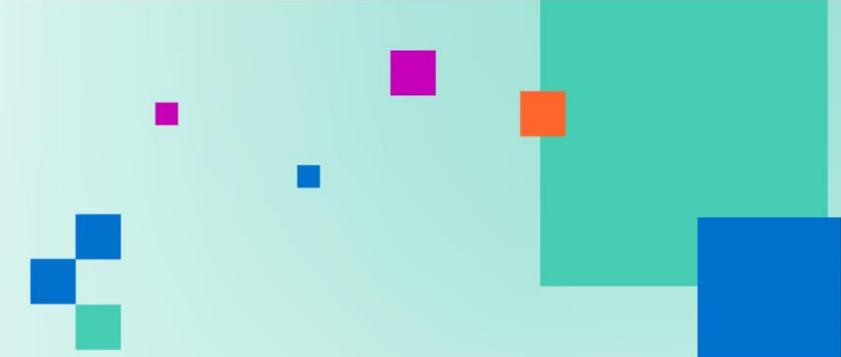
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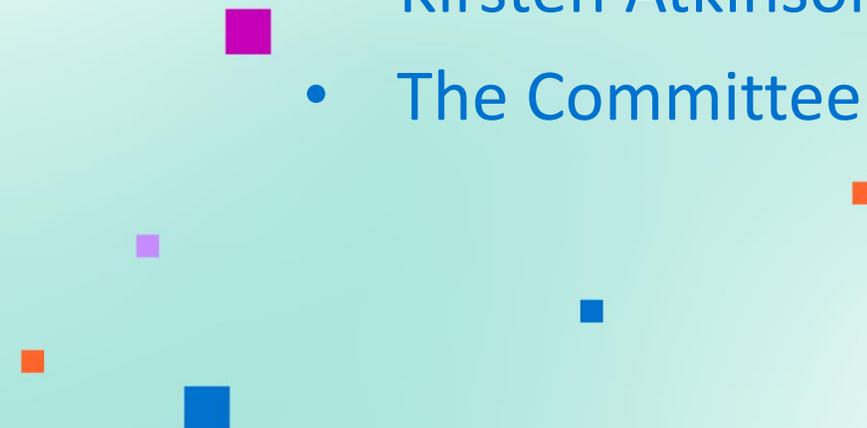
Welcome

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Robert Severn,
Chair of Community Pharmacy Nottinghamshire

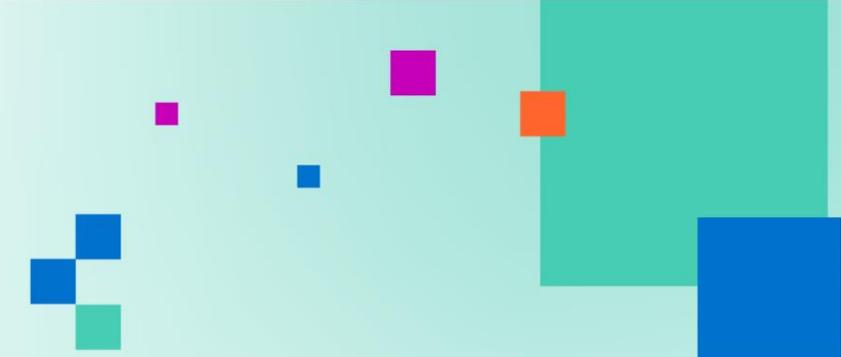
Meet the Team



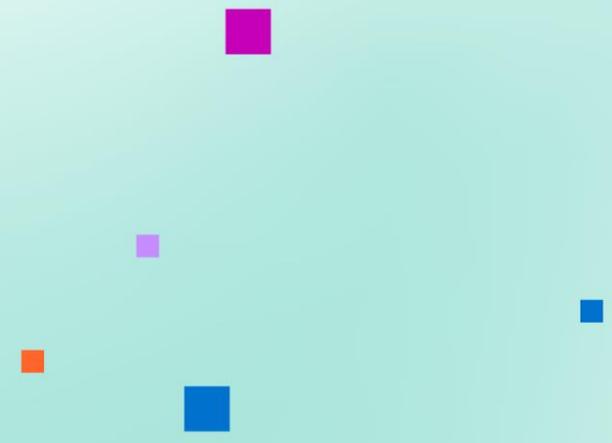
- Nick Hunter – Chief officer
 - Mike Jones – Services Implementation Lead
 - Alison Ellis – Office Manager
 - Kirsten Atkinson – Communications Support
 - The Committee Members
- 

Agenda

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A cluster of decorative squares in the top right corner, including a large teal square, a blue square, a pink square, an orange square, and several smaller squares in blue, green, and pink.

Flu & travel vaccinations for 2025

A cluster of decorative squares in the bottom left corner, including a pink square, a purple square, an orange square, a blue square, and a small blue square.

Nick Arnold,
Business Development Manager, Sanofi UK



Joanne Holdcroft,
Business Manager, Cambrian Alliance Group

Annual General Meeting

Gordon Heeley,
Treasurer, Community Pharmacy
Nottinghamshire



Annual Accounts 2023 - 2024



Start of April 2023



LPC received £177,112 mainly from Levy and NHS granted a further £30,000



First major expenditure PSNC Levy £64,303



Next major expenditure Staff costs £126k split across the LPC Fund and the NHS fund



Next Members attendance at meetings



Next office, general admin and professional costs



Finally, NHS fund support for Pharmacy First and LPC costs



Summary

At year end LPC fund was £146,498 down £2,342 from 2023 approximately 6 months reserve.

NHS fund has £144,142 to support ICB/LPC projects during 2024/25

For 2024/25 the aim is balance the need to reduce our reserve to about 4 months and manage costs so Contractors continue to derive value from the LPC



A video message from
Community Pharmacy
England



Celebrating Community Pharmacy Success

Robert Severn,
Chair of Community Pharmacy
Nottinghamshire





A video message from
David Webb,
Chief Pharmaceutical Officer
for England

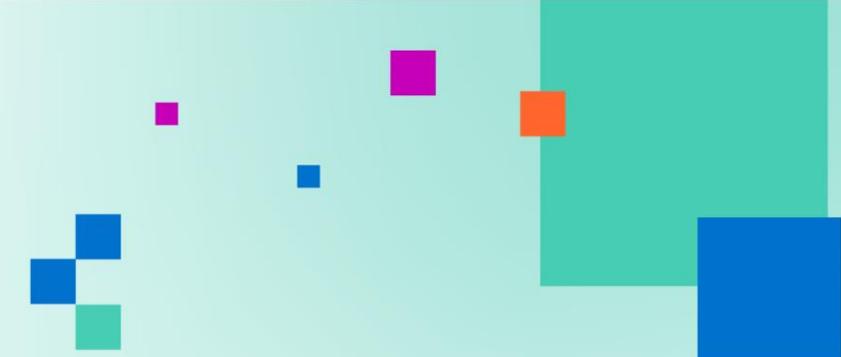
WEBB, David (NHS ENGLAND - X24)



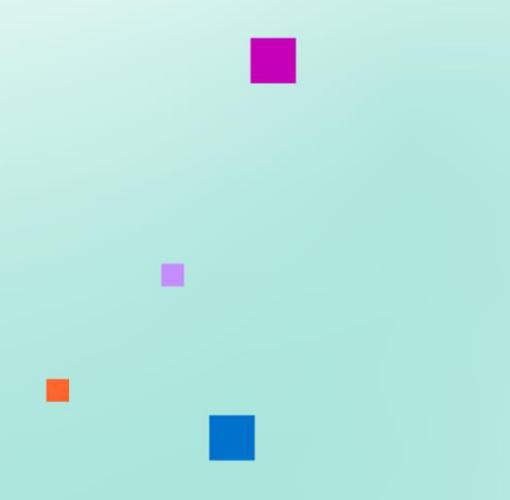


A video message from
Jackie Buxton,
Regional Senior Pharmacy Integration
Lead from NHS England Midlands team





Dr Dave Briggs,
Medical Director for
NHS Nottingham &
Nottinghamshire ICB





Pharmacy First

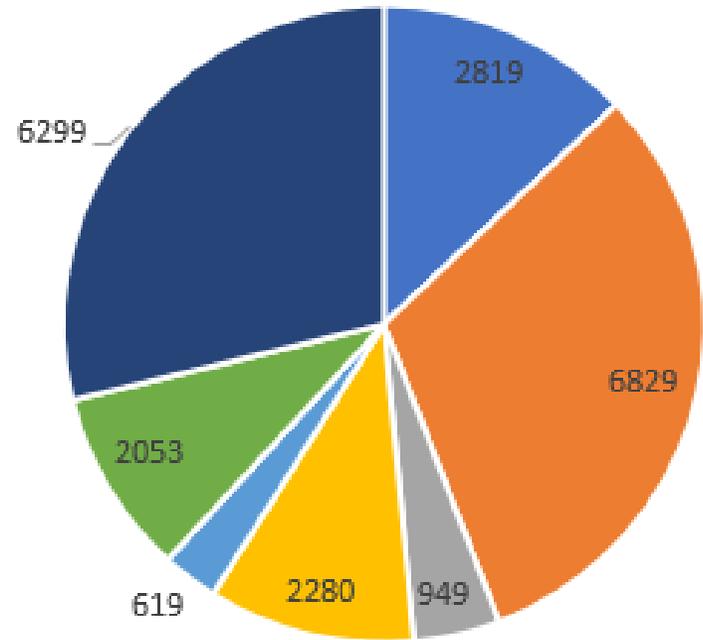
The Future of Pharmacy

Pharmacy First: overview

- Objective: increase access to healthcare for patients by facilitating consultations for 7 minor conditions in pharmacy
- Estimated 1,000 GP surgery hours are being opened up every month*
- 43,900 consultations between February and July 2024
- Top 25% performing community pharmacies delivering an average of 40 consultations per month

* (this figure is based on number of consultations *10 to give a GP appointment, then divided by 60 to give hours and use 90% to take into account 1 in 10 referral back due to more serious condition).

January to July 2024



■ Acute Otitis Media ■ Acute Sore Throat ■ Impetigo ■ Infected Insect Bites ■ Shingles ■ Sinusitis ■ Uncomplicated UTI

“This is an **amazing achievement**, especially as final details and training for Pharmacy First were short notice.

As a system, a **huge thank you** to every pharmacy team that makes this possible.”

Rebecca Dickenson, Community Pharmacy Clinical Lead for Nottingham & Nottinghamshire ICB

This summer just think pharmacy first



The first six months of Pharmacy First have been amazing at Orchard Pharmacy.

I'm delighted patient feedback is positive, they appreciate the privacy of our consultation room, the same day access to care and being seen by a pharmacist straight away.

The role of community pharmacists is evolving hugely, public confidence is building and it's great we can showcase our skill set and be pioneers in service provision for our communities'.

Imran Mohammed, Superintendent Pharmacist at Orchard Pharmacy,
Nottinghamshire



This summer just think pharmacy first

The Pharmacy First Service- What it means for you and your practice



**Integrated
Care System**
Nottingham & Nottinghamshire

Pharmacist and patient feedback

Our pharmacists are enjoying providing on the day NHS care for people with conditions that come under Pharmacy First. We're six months in and the service is popular with those who use our pharmacy.

Local GPs who are referring two or three people for clinical pathway consultations a day. We are pleased that this is improving access to care and freeing up GP appointments.

We hope that going forward a wider range of conditions and prescribing can be included in this scheme so that we can support more people going forward.

Emma Anderson, Pharmacist at Evans Pharmacy
Nottinghamshire / Leicestershire

The NHS logo, consisting of the letters 'NHS' in white on a blue rectangular background.



This summer just think pharmacy first

Deepak Bilakhia, owner and pharmacist at Carrington Pharmacy has worked with [NHS England](#) (a few celebrities!) to help produce resources for their '**No Clues Blood Pressure**' campaign.

Great work Deepak - thanks for representing Nottinghamshire contractors so well on this latest public healthcare project!



Pharmacy First: what have we learnt so far?

- Pharmacists and their teams must take ownership to market the service to their patients rather than relying on referrals from GPs
- Be clear on the Gateway criteria to avoid patients being referred back to their GP
- To improve consistent delivery employ locums that can deliver the service
- As soon as Gateway is achieved a claim can be made even if a medicine supply is not made
- The majority of patients receiving a consultation walk into the pharmacy
- Using an appointment diary really does help manage the consultation room capacity
- Update profile manager so that patients are no disappointed when they arrive at the pharmacy
- The service tends to be used more when GP surgeries are closed eg weekends
- Marketing the service to your existing patients develop repeat visits for the service and increase loyalty
- Types of consultations do change seasonally so are we preparing for that?

Pharmacy First: top tips for success

- Involving your team is crucial to success
- Talk to patients about the seven pathways during any consultation eg during flu and COVID vaccinations and link services
- Continue to develop relationships with your local GP surgery to improve the quality of the referrals or signposting
- Use the collateral available from CPE eg the 7 conditions card and social media materials
- Consider setting daily targets so that you know you are on track to achieve the monthly incentive payment
- Engage in proactive outreach efforts with schools, local businesses etc. to raise awareness and promote the availability of Pharmacy First services within your local community
- Consider investing in a pulse oximeter to check for potential infection during a consultation
- Check the 'good ear' first to make a comparison with the affected ear!
- Joined up thinking



Pharmacy First: resources available

- CPE website and LPC website
- Contact us at the LPC we are there to help
- Webinars coming up
- Follow us on LinkedIn to be kept up to date

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Success stories and positive feedback



A video message from
Victoria McGregor Riley,
Commissioning Delivery Director,
Nottingham & Nottinghamshire ICB

Community Pharmacy video

2024-09-15 11:50 UTC

Recorded by

MCGREGOR RILEY,
Victoria (NHS
NOTTINGHAM AND
NOTTINGHAMSHIRE I...

Organized by

MCGREGOR RILEY,
Victoria (NHS
NOTTINGHAM AND
NOTTINGHAMSHIRE I...

“I would like to praise **Lowdham Pharmacy**. It is so friendly and professional. All the staff are kind considerate and very helpful. All knowledgeable. They offer such a great service to Lowdham and the surrounding areas. As a community we are very lucky, I feel, to have such a wonderful caring vital part of the NHS on our doorstep physically but lucky the staff team are so approachable.”

Mandy Meyer, customer

**Working with local practices –
Nishant Patel, Vantage Pharmacy, Melbourne Place**

A patient receiving palliative care for a fungating tumour needed a special-order pain relief medicine. The PCN pharmacist contacted the pharmacy who went above and beyond to obtain the product at the best value to the NHS and delivered to the patient free of charge as the family did not drive.

This made a huge difference to the patient and family as the medicines helped to reduce the patient's pain at the end of life.

This made a difference to the PCN pharmacist as they were able to work with the pharmacy to facilitate this in an easy manner.

"It has been an absolute pleasure and privilege to work with so many amazing community pharmacy colleagues from right across the system! I started my career almost 40 years ago in community pharmacy and have always believed in the massive positive contribution that community pharmacy can make to the health and wellbeing of our population and patients.

We have worked together over the years to develop many new services, including being the first area in the country to issue headlice treatments without a prescription (25 years ago!), one of the earliest areas to implement a needle syringe exchange scheme and continued to develop new services until at one time we had a range of 17 locally commissioned services from our community pharmacists!

One of our most successful initiatives was the Pharmacy First Scheme which at its peak was delivering 33,000 consultations per year! The learning has informed the development of the new national scheme that is currently being rolled out across all systems. It's all credit to our community pharmacy colleagues for rising to the challenge, being open to new ways of working and their continued commitment to the patients and communities they serve. I feel we are now on the brink of an exciting new phase which recognises the wider role and benefits that community pharmacy can deliver and look forward to community pharmacy going from strength to strength!

Mindi Bassi, Chief Pharmacist, Nottingham & Nottinghamshire ICB

“I’d love to give a special shout out to Rebecca Dickenson, the ICB Community Pharmacy Clinical Lead. Rebecca is incredibly enthusiastic, passionate and always ensures that community pharmacies have a voice and are represented across various stakeholder meetings. Rebecca continues to put her expertise to great use during Nottingham and Nottinghamshire sexual health and contraception workshops.”

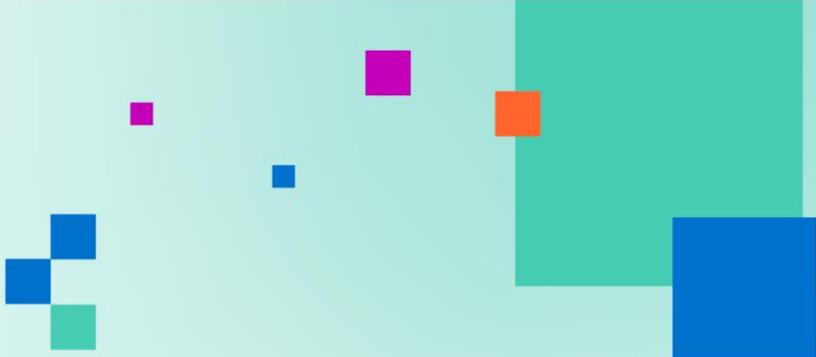
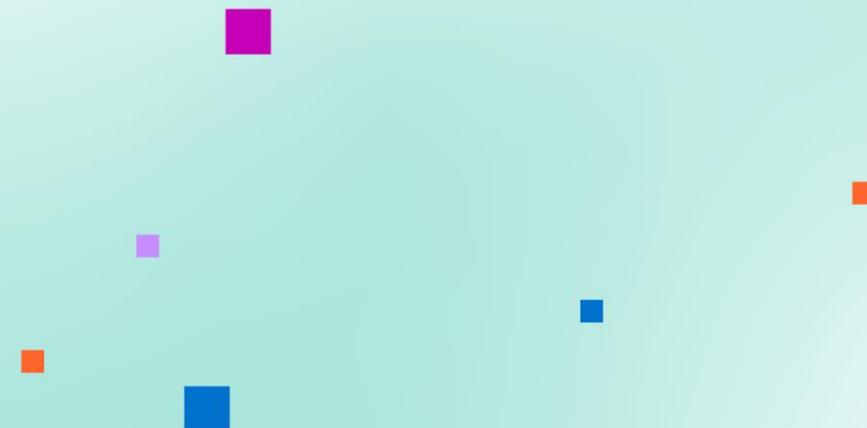
Vicky Lewis, Public Health Commissioning Officer, Nottingham City Council

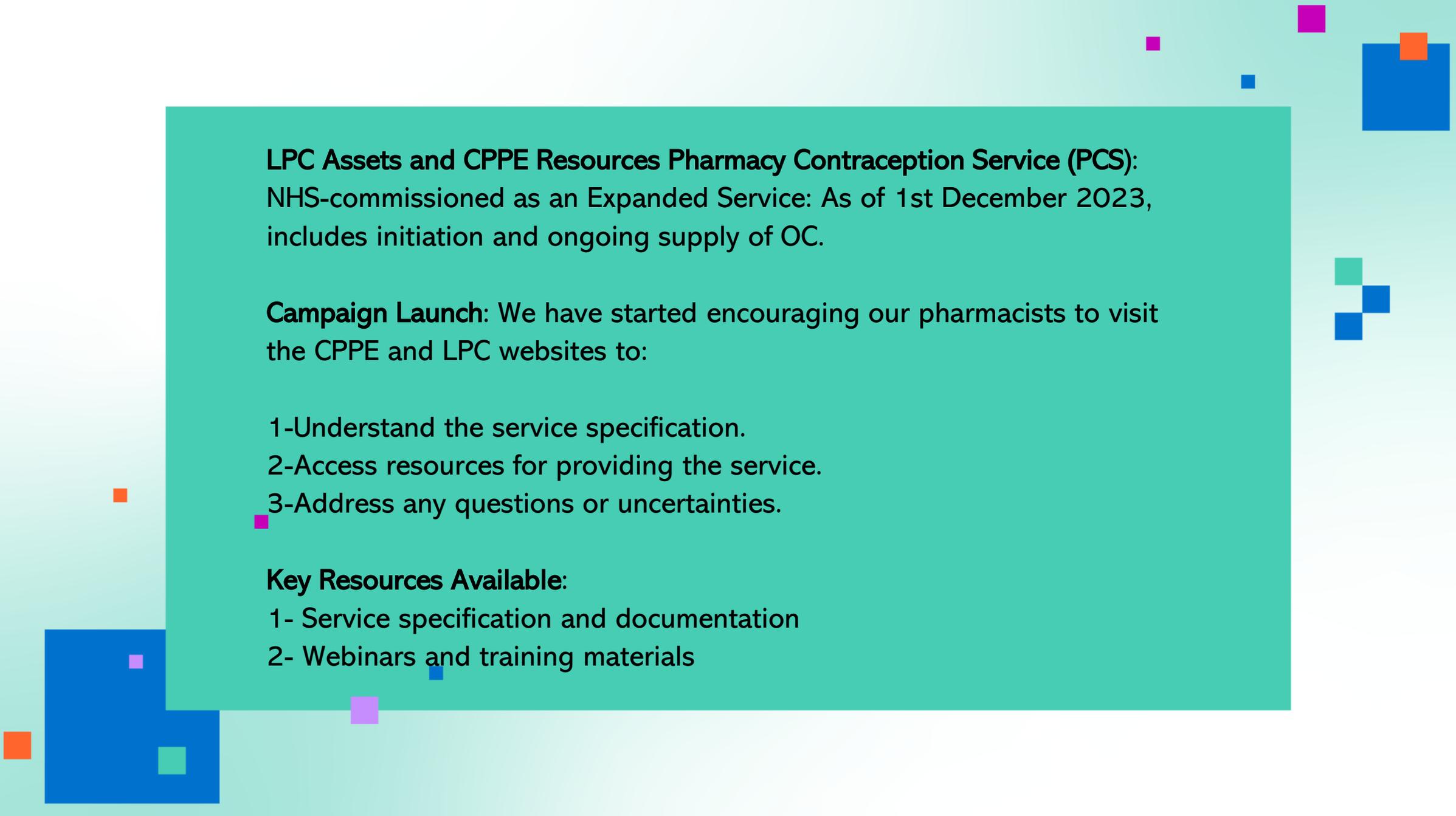
Delivering a patient-focused Contraception Service

Soumar Kaziz

Regional Operations Manager for Well Pharmacy
MPharm/MSc International Business



- 
- **LPC Assets and CPPE Resources Pharmacy Contraception Service**
 - **Training for Pharmacists and Colleagues**
 - **Raising Awareness: Posters and Public Campaigns**
 - **Ongoing Supply and Patient Care Plans**
 - **GP Relationships and Collaboration**
- 



LPC Assets and CPPE Resources Pharmacy Contraception Service (PCS):
NHS-commissioned as an Expanded Service: As of 1st December 2023,
includes initiation and ongoing supply of OC.

Campaign Launch: We have started encouraging our pharmacists to visit
the CPPE and LPC websites to:

- 1-Understand the service specification.
- 2-Access resources for providing the service.
- 3-Address any questions or uncertainties.

Key Resources Available:

- 1- Service specification and documentation
- 2- Webinars and training materials

Training for Pharmacists and Colleagues

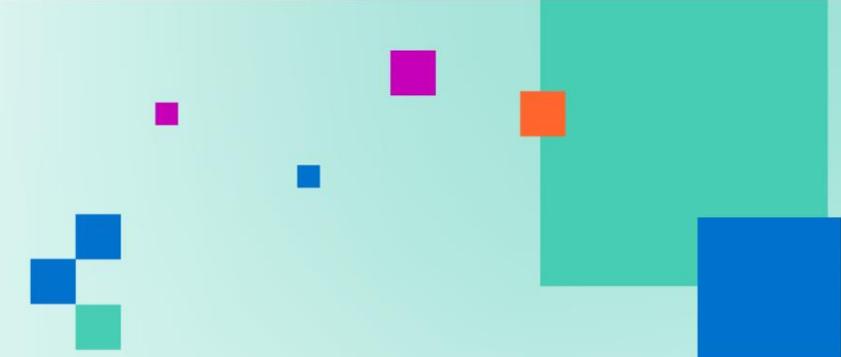
We have encouraged our pharmacists to complete their paid contraception training. Additionally, we emphasise the importance of blood pressure (BP) training for Pharmacist and qualified colleagues. This ensures that our team is well-prepared to deliver contraception services safely and effectively.

Raising Awareness: Posters and Public Campaigns

We have placed posters on our pharmacy windows and in the waiting areas, and we have distributed leaflets to provide information about contraception service. These materials also inform patients that we are available to assist with the supply of contraception supply.

Public awareness is crucial to the success of any health service. We strongly believe in the importance of posters, leaflets, and other communication strategies in educating people about their contraception options and encouraging informed choices.

We aim to encourage individuals to approach our team if they need any support or have questions about contraception.



Ongoing Supply and Patient Care Plans

Ensuring patients have consistent access to contraception is vital. As you all know, the ongoing supply is the simplest part of the service, as it builds on the doctor's choices by providing the same medication after completing a review and assessment with the patient.

To streamline this process, we have implemented a booking system across our pharmacies. We highlight all prescriptions for contraception pills and schedule patients for their next supply using our system at the point of handing out their prescription. This allows us to provide patients with a specific date for their next appointment.

When the patient comes for their appointment, we provide their supply and schedule their next appointment, ensuring they have the date for their next visit. We maintain these appointments in our records so we can contact patients if necessary. This approach ensures that we are following up with our patients and providing the best care they need. The same process applies to initiation supply after the first prescription. We ensure that patients receive their initial supply and are scheduled for follow-up appointments, maintaining continuity of care from the very start.

GP Relationships and Collaboration

Building strong relationships with GPs is crucial for the success of our contraception service.

GPs play a key role in referring patients to our pharmacies for contraception services. Effective collaboration can significantly enhance patient care and streamline service delivery. Once GPs are aware that we provide this service and receive positive feedback from their patients, it helps to build their trust in our service. This trust can lead to increased referrals and a growing patient base. By managing routine contraception needs effectively, we support GPs in focusing on emergency appointments and other critical care.

By playing our role as professionals, we not only contribute to the smooth running of the healthcare system but also support our communities by ensuring they have access to high-quality contraception services.

Success Story 1

Jane's Journey to Accessible Contraception

Jane, a 28-year-old professional, had always struggled with accessing her contraceptive pills due to her busy schedule and limited availability of appointments with her GP. When she learned about the new contraception service provided by her local pharmacy, she decided to give it a try. The pharmacy's streamlined booking system allowed Jane to easily schedule her appointments around her work hours. During her visits, the pharmacists were knowledgeable and provided clear, compassionate advice on her contraception options. Jane also appreciated the convenience of receiving her prescription refills on-site, which saved her time and reduced the hassle of multiple GP visits. Jane's experience was so positive that she shared her feedback with her GP, who was pleased to hear about the effective service. The pharmacist's approach not only met Jane's needs but also exceeded her expectations, making her feel valued and supported. Jane's successful experience highlights how accessible, patient-centred care can significantly improve the overall patient experience and satisfaction.

Success Story 2

Pharmacy Perspective

Clifton Pharmacy's Excellence in Delivering Contraceptive Services.

Clifton Pharmacy implemented a new contraception service in their community, focusing on both initiation and ongoing supply of contraceptive pills. They utilised a robust booking system to manage appointments and ensured that every patient received timely follow-ups and consistent care. One notable success was when a local GP's practice referred several patients to Clifton Pharmacy due to their efficiency and comprehensive service. The pharmacy's staff was well-trained, providing detailed consultations. The pharmacy's exceptional service led to high patient satisfaction and positive feedback from the GP practice. Patients reported that the streamlined process and professional care made it easier for them to manage their contraception needs. This success not only strengthened Clifton Pharmacy's relationship with the local GP practice but also established the pharmacy as a trusted provider of contraception services in the community.

Delivering a patient-focused Hypertension Service

Emma Anderson
CPPE Tutor and Clinical Services Director
for Evans Pharmacy





NHS community pharmacy Hypertension case-finding advanced service

NHS community pharmacy hypertension case-finding advanced service - session plan

- Why do this
- When to do this
- Where to find information on when to refer, to whom and how quickly to refer
- Training your team

Why provide the NHS community pharmacy hypertension case-finding service?

Patient benefits: very high blood pressure

An 88-year-old woman was referred by her GP for pharmacy blood pressure measurement and booked the following day with dispensing assistant Marie. Her lowest blood pressure reading was 219/128mmHg. This was confirmed by me and the woman was referred for an urgent same day appointment to her GP, who commenced treatment on amlodipine that day. The woman was grateful to be offered the new medicine service.

Why provide the NHS community pharmacy hypertension case-finding service?

Patient benefits: AF detection

74-year-old man came in using the NHS pharmacy first service for the acute sinusitis clinical pathway. He looked and felt unwell, so I measured NEWS and other NICE NG51 sepsis parameters and noticed he had an irregular heartbeat, this was also present on the second reading five minutes later. I recorded this using the NHS community pharmacy hypertension case-finding service. The patient was given an ECG that day and started on Edoxaban for which he was offered the NMS.

Why provide the NHS community pharmacy hypertension case-finding service?

Pharmacy benefits: Fees

- A fee for each clinic check of £15; and
- A fee for each ambulatory monitoring of £45
- All three services, **Pharmacy First, Pharmacy Contraception and Hypertension Case-Finding** in a bundle is due to become a requirement to receive the monthly £1,000 Pharmacy First payment by 31st March 2025.
- New medicine service fee is £20 - £28

NHS community pharmacy hypertension case-finding service obligations

The pharmacy contractor **must ensure they have both a blood pressure monitor and an ABPM device**. The clinic blood pressure monitor and ABPM devices used must be listed on one of the following lists:

- <https://bihsoc.org/bp-monitors/for-home-use/>
- <https://bihsoc.org/bp-monitors/for-specialist-use/>

Provide the NHS community pharmacy hypertension case-finding service when...

Allowed

- Someone is waiting for any service – get a member of support staff to do basic observations
- Sepsis parameters scoring under the NHS pharmacy first service
- Private prescribing

Not allowed

- When doing a pill check for the combined hormonal contraceptive pill

When responding to symptoms

NEWS2 parameters

- **Blood pressure**
- **Pulse rate**
- Temperature
- Respiratory rate
- Oxygen sats

Other NICE NG51 sepsis parameters

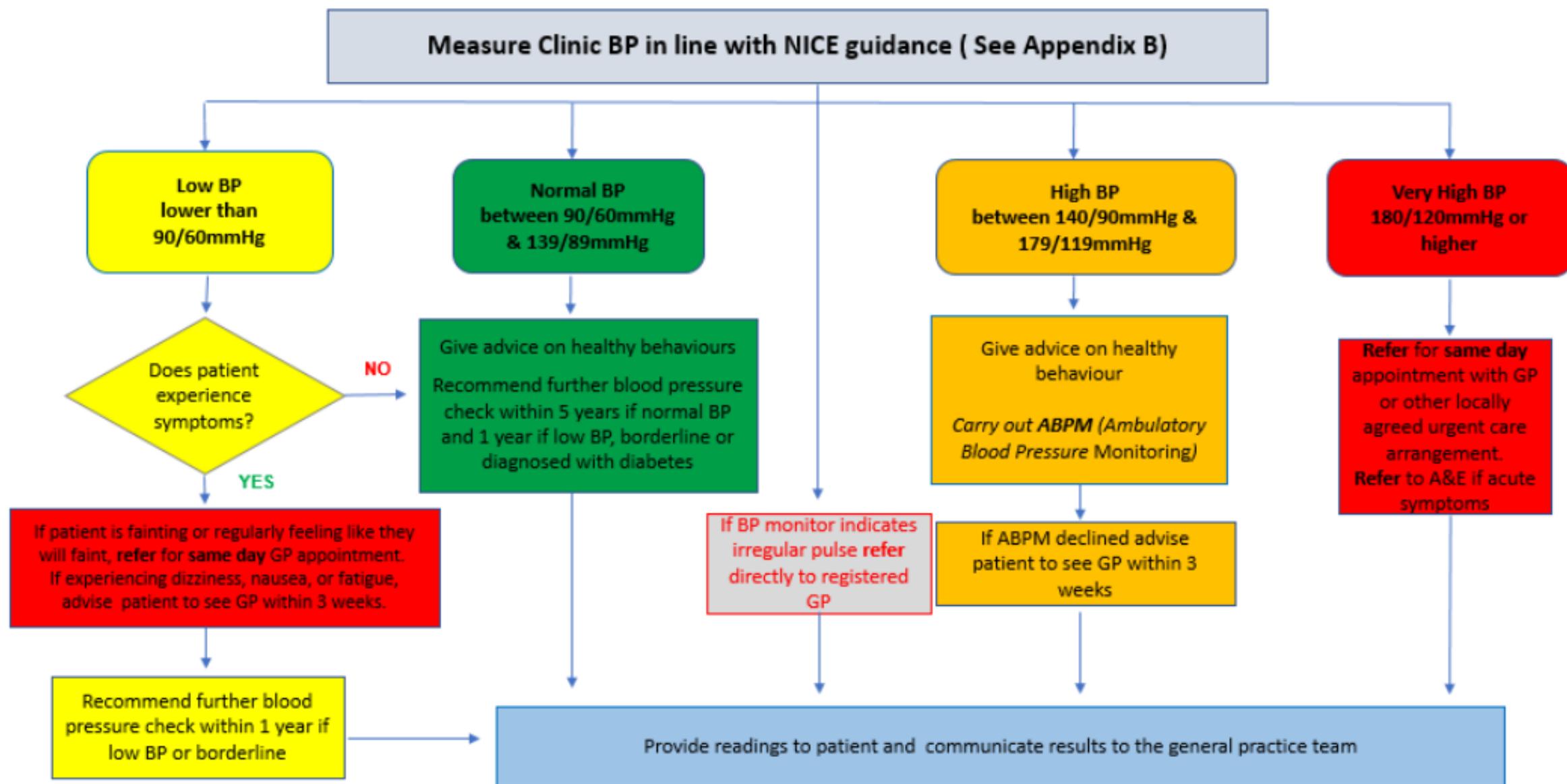
- Normal mental state?
- Not immune compromised?
- No surgery in past 6 weeks?
- Passed water in previous 12 hours?
- Pulse is regular?
- No changes to skin?

What is the cut off above which the person need urgent same day referral for high blood pressure, with NO acute symptoms?

What is the cut off above which the person need urgent same day referral for high blood pressure, with NO acute symptoms?

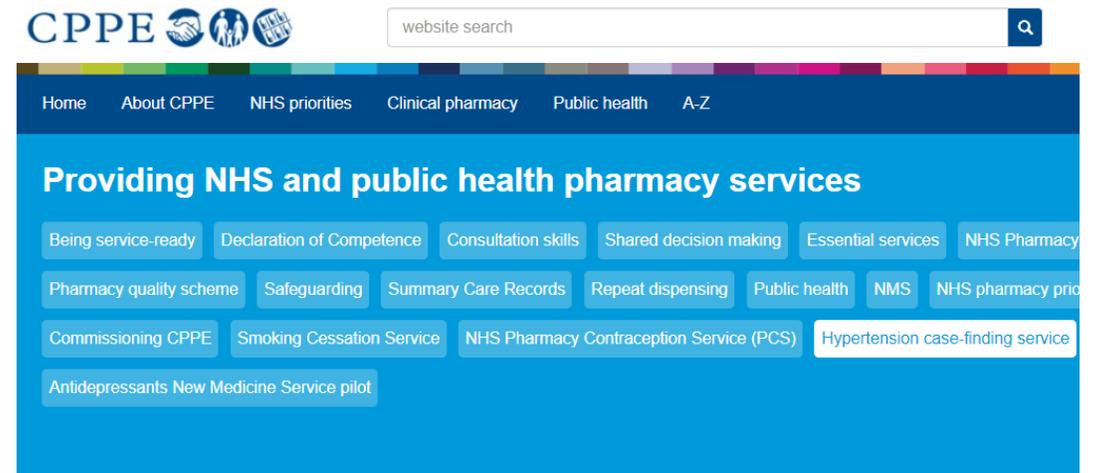
BP \geq 180/120mmHg

Annex C: Clinic BP flowchart



Training

- **To provide the service, pharmacy staff must:**
 - Have read and understood the operational processes to provide the service as described in the service specification.
 - Be familiar with parts of NICE guideline Hypertension in adults: diagnosis and management [NG136] relevant to the role they are undertaking within the service
 - Have completed the recommended training (either e-learning or face-to-face) on how to use the blood pressure monitoring equipment which should be provided by the equipment manufacturer/supplier



Hypertension case-finding service

Staff training

- 1) Read the SOP
- 2) Watch the video
- 3) Face-to-face training on meter
- 4) Read the clinical fact sheet
- 5) Undertake a consultation on a member of staff, friend or family member to get some feedback

Factsheet Hypertension

Contents

<u>Definition</u>	1
<u>Prevalence and incidence</u>	2
<u>Signs and symptoms</u>	2
<u>Causes/risk factors</u>	3
<u>Pathophysiology (mechanism of disease)</u>	4
<u>Prognosis and complications</u>	4
<u>Diagnosis/detection</u>	4
<u>Non-pharmacological treatment</u>	5

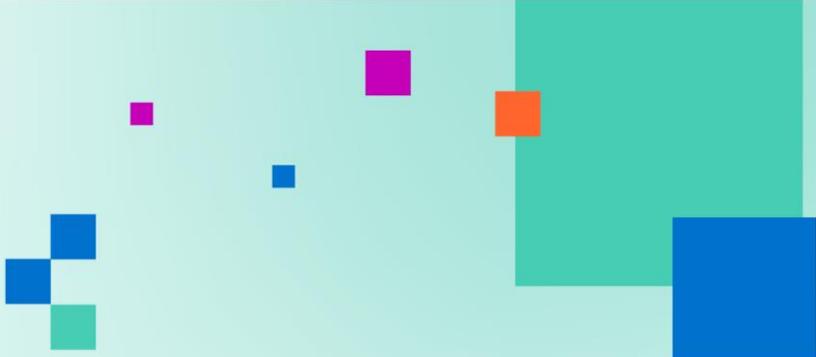
How to take an **AUTOMATED** BLOOD PRESSURE MEASUREMENT

How to take an automated blood
pressure measurement

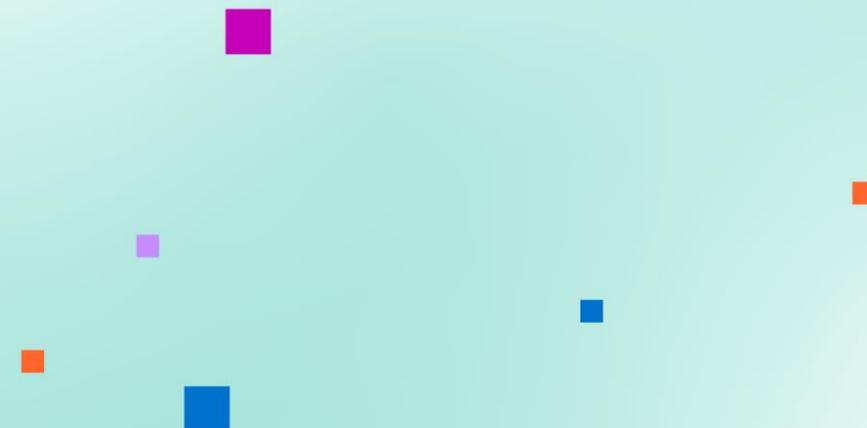
Ask the committee

A chance to ask the Community Pharmacy
Nottinghamshire committee your
questions



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Thank you for joining us!

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