

Can't see the wood from the trees?

- *Are you struggling to understand the difference between Primary Care Networks (PCNs) and Pharmacy Quality Scheme (PQS)?*
- *Can't understand what needs to be done for the Community Pharmacist Consultation Service (CPCS)?*
- *Struggling with the pace of change that is happening in community pharmacy?*

Its OK to recognise this and say – Help!

I understand how it is easy to feel completely snowed under with the volume of work required in simply getting started with the new Community Pharmacy Contractual Framework (CPCF). I suggest you do 3 simple things:-

1. Review the essential reading or view the key webinars provided by PSNC. They provide important information and valuable support tools. The PSNC information can be found [here](#).
2. If you are a contractor - block a day out of your business, and use this to make a start. There are some very quick wins that can be done, including registering for the CPCS service which attracts a fee of £900 if done **before the 1st December 2019**. You will immediately feel more in control if you make a start. If you are a manager working for company however big or small, ask for pharmacist cover and time from your manager.
3. Contact Community Pharmacy West Yorkshire and let us know what your issues are – we are here to help. We may be able to put you in touch with other individuals in the same situation where you can collectively share workload. Ensure you read the weekly News Digest and attend the CPWY Connect events to keep up-to-date. <http://www.cpw.org/news/news-digests.shtml>.

At Community Pharmacy West Yorkshire we are here to help, whether its support in understanding some of the direction of travel, guidance on where to get practical support, or simply to help demystify some of the jargon and language. Also, it's important to understand that Community Pharmacy West Yorkshire have 15 committee members who are pharmacists / contractors in exactly the same position as yourself. We are also looking at how we implement all the opportunities, understand the challenges staffing and financial and are offering support to all our pharmacy contractors, working to ensure all pharmacy contractors can implement the opportunities within the CPCF whilst understanding the challenges you face, including financial and staffing pressures.

“Despite the initial disappointment I realised there are still plenty of opportunities”

I personally was disappointed when I discovered that the 5-year CPCF settlement was flat for the next 5 years especially given the challenges of the National Living Wage and pension contributions. However, it does provide an element of certainty in what has been uncertain times. Once I read through the funding settlement in detail it was clear that here are still plenty of opportunities to develop services, and move away from volume based dispensing prescriptions. PSNC, and LPCs will continue to lobby and pressurise the Department of Health and Social Care for more funds, but we have to start showing what we can do, and so CPCS is such an important milestone.

The funding settlement was far from ideal, no-one can deny this, but ignoring the pace of change and challenge that has been set is not going to help. It's clear to me from the 5-year funding settlement that doing what we have always done is not sustainable in the long term, and phrases like "adapt or die" have been bandied about by various pharmacy leaders.

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As contractors, it's essential that we provide the services and claim for those that are already in the system. An average sized pharmacy has the potential to be claiming around £1,000/month for NMS alone. **Are you claiming these?** If not, you are wasting the opportunity to secure money from a nationally commissioned service. On top of the national funding settlement and the clinical opportunities it's so important for community pharmacies to work collectively within their PCNs and to help shape the landscape and grab some of the developmental money allocated to PCNs.

For years we have asked to move away from a model that is prescription volume dependent, and although the direction of travel is not as fast as many would have liked there is opportunity for pharmacies to get involved with more services, now we have to prove what we have been saying that community pharmacy can do more than just dispense, and if we show our true capabilities, more services, and additional funding will follow.

Glass half full or glass half empty? I've decided to look at the positives and see that opportunities exist in the following areas;

- *Maximising NMS – and potential to roll this out to more conditions. Make sure every single new medicine that is within the NMS is signed up and use your team to help with the logistical process.*
- *Flu vaccination – providing the advanced service that is nationally funded.*
- *Community Pharmacist Consultation Service (CPCS) initially from NHS 111 referrals but then if the pilots are successful from GP surgeries to help relieve pressure on primary care practices.*
- *Pharmacy Quality Scheme (PQS) – meeting all the possible requirements to ensure that income is maximised.*
- *PCN commissioning - providing a clear and vibrant community pharmacy voice within each PCN to prove the value of community pharmacy in improving the health and wellbeing for the population within the PCN*

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Committee Member of Community Pharmacy West Yorkshire

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