

GP Community Pharmacy Consultation Service (CPCS)

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Webinar Housekeeping: Using Zoom

If you have a question, click on the chat icon in the tool bar and a window opens on the screen. Type in your message and the presenter will either respond during the webinar or your question will be answered during the Q&A at the end.



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Agenda

- What is GP CPCS?
- Update on the rollout of GP CPCS in West Yorkshire.
- How to claim the "Annex F" payment
- Information on the resources available to support both your set up fee and service roll out.



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Introduction

The 5-year CPCS sets out a clear vision for community pharmacy services, in line with proposals in the Community Pharmacy Forward View

The CPCS is the most important service development within the 5-year agreement

Implementing this service well has high importance /strategic importance to:

- Patients
- NHSE&I, DHSC and HMT
- Other healthcare professionals
- Community pharmacy



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CPCS Overview

The NHS Community Pharmacist Consultation Service launched on 29th October 2019 as an Advanced Service. Since 1st November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS, once a local referral pathway has been agreed.

The service, which replaced the NUMSAS and DMIRS pilots, connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy.

As well as referrals from general practices, the service takes referrals to community pharmacy from NHS 111 (and NHS 111 online for requests for urgent supply)

COVID - Patients being referred to the CPCS are now being told to phone the pharmacy and to speak to the pharmacist. Unless there is a clinical need for the patient to be seen in the pharmacy, the pharmacist can provide a consultation by telephone, as is provided for in the service specification. If the consultation is conducted in this manner, the pharmacy is eligible to claim the fee for provision of the service.



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Overview and NEY Regional Perspective



- Pilot areas in NEY, including West Yorkshire
- 2 evaluations undertaken focusing on patient experience, gp practice staff/pharmacy feedback with 84 feedback interviews and over 250 surveys
- 97% of patients cited that they would use the service again
- NEY referrals from November 2020
- Estimated 20 Million GP practice appointments annually could be referred
- An average of around 55 appointment per week- additional capacity
- NEY region has funded a digital referral system
- Other referral pathways being considered - UTCs and possibly A&E as well as NHS 111 online minor illness referral. All under the banner of CPCS, but GP referral is the biggest opportunity



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CPCS – GP referral pathway

- From 1st November 2020, the CPCS was extended across England to include **referrals from general practices** as well as from NHS 111
- GPs can refer patients to community pharmacies to receive a CPCS consultation for minor illness
- Unlike NHS 111, GPs cannot refer patients for an urgent supply of a medicine or appliance

Benefits to pharmacies

<https://vimeo.com/507031842>

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The benefits

Patients

- Accessible and professional advice from the pharmacist of their choice
- Minor ailments can be dealt with in a more timely manner
- Re-educate patients to use the most appropriate healthcare professional for their needs
- Formal referral/appointment rather than signposting. Patient feels **valued**

General Practice

- Create capacity
- Patients seen by the most appropriate healthcare professional at the right time
- Build and enhance local working partnerships
- Unlike a signpost service, GP CPCS allows GP to see the outcome

Pharmacy

- Allows community pharmacy to demonstrate its place within the NHS to help manage patients with minor illnesses/low acuity conditions
- Build and enhance local working partnerships

NHS

- Cost-effective use of NHS resources

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National Guidelines

- Read the updated **NHS CPCS Toolkit for pharmacy staff**, so you understand more about how the pathway will operate;
- Read the **updated service specification**;
- Brief relevant staff on the changes to CPCS;
- Ensure pharmacists that will provide the service read the updated toolkit and service specification;
- Support pharmacists to reflect on continuing professional development activity they could undertake to provide the best possible service to patients, which could include undertaking the NHS-funded CPCS training provided by the **Royal Pharmaceutical Society and the Royal College of General Practitioners**.

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Local Digital Support for GP Practices

There are digital solutions available that support the referral route from GP practices to a community pharmacist (although referrals can be made using NHS mail)

Digital solutions:

- Provides a lists of pharmacies signed up to provide CPCS closest to the postcode inserted (e.g. pts home, work, location preference)
- Pull in PDS data to streamline the process
- Provides a tracker of the patient journey and outcome
- Provides a full audit trail
- Can provide system reports on referral activity

Regionally, NHSE&I have secured funding to enable an integrated solution for practices across North East and Yorkshire

- EMISweb system users will have access to Patient Access (integrated)
- SystmOne (TPP) and other users will have access to PharmRefer (web-based)

The licenses for these tools will be for a fixed period of 12 months in the first instance (starting from when the practice goes live)

Once NHSE&I are assured that the practice and/or PCN are ready to 'go live' they will send a URL to sign up for the licence.

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Where are we now in West Yorkshire? CPCS 111 Referrals

111 - CPCS Referrals (West Yorkshire) 29 Oct 19 to 31 May 2021			
No of CPCS Pharmacies	No of Urgent Meds Referrals	No of Minor Ailment Referrals	Total No of CPCS Referrals
493	32,685	12,129	44,814



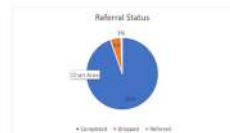
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GP CPCS Referrals

GP CPCS Referrals (West Yorkshire) 01-11-2020 to 31-May-2021			
No of Practices Referred	No of Practices Referred	No of Practices Referred	No of Referrals
25	2	17	352

OF THE 352 REFERRALS RECEIVED 333 COMPLETED



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Consultation Outcomes in WY



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Agree local protocols

Agree your local protocols – this is a key step as pharmacies can't write their SOPs unless they understand what this looks like for example

- Referral method e.g. PharmOutcomes, NHS mail etc.
- How is contact going to happen – pharmacist phones patient or patient turns up
- Timescales e.g. pharmacist must contact patient within 4 hours
- Use of professional line, or 'back door number'
- Even if you have not got any practices signed up you can still have your local protocols agreed as the practice in my experience is quite happy to go with what you suggest

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Claiming "Annex F" payment

- £300 "engagement and set up payment" can be claimed up to 30th June 2021
- Claims need to be made via the NHSBSA's Manage Your Service (MYS) portal by 5th July 2021
- The requirements are detailed in Annex F of the [updated service specification](#)

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Annex F – part a)

a) The contractor has **participated in discussions with a delivery partner/LPC lead** to explore how they might promote uptake of CPCS locally. This could include early exploration of options, through to discussing the planning process for rollout of the referral pathway.

✓ This webinar provides this

Q: **Could/should Pharmacies be discussing GP-CPCS with their practices?**

A: **Not mandated, but by all means if an opportunity arises. However, please:**

- Bear in mind current pressures/priorities
- Avoid multiple approaches to same practice
- LPC/System team must be informed to ensure adequate support
- Cannot just be an "arrangement" between a practice and a pharmacy that excludes others - patient free choice must prevail

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Annex F – part b)

b) The contractor has **participated in meetings**, which may be web-based and organised by others, to brief pharmacies and potentially general practices on the referral process which will be implemented, including how pharmacies will be involved in the pathway. Where a contractor has no representative available to attend a meeting at the time set, they should instead **seek a briefing from the delivery partner/LPC lead** on the matters discussed to ensure that they remain fully engaged with local plans.

➤ Tonight covers this for now

Current local pathways:

We have discussed the agreed pathways: **PharmOutcomes for referrals**

Please ensure you discuss other local pathways with the GP/PCN ie: patient to ring first, surgery "back office" number for escalation pathway back for urgent appointment. These may change by the time your area goes live, but this initial agreement is enough for Annex F.

Monitor LPC website for developments as local roll out progresses.

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Annex F – part c & d)



c) The contractor must ensure that **relevant members of the pharmacy team have read and understood any briefing materials** prepared locally by the PCN or delivery partners on the referral pathway and any rollout plans, to ensure the relevant details are understood;

- Record of staff briefing based on tonight's update ([Action Plan Template for Pharmacy Teams](#) on PSNC or CPWY website)

d) The contractor should **create an action plan for implementing the new referral pathway** in the pharmacy, including ensuring their NHS CPCS **standard operating procedure is updated** to include the GP referral pathway and the associated record keeping and data capture requirements.

- Create a pharmacy specific **brief** action plan based on tonight's update which includes the need to update your SOP before implementation.


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Annex F – part e)

e) The contractor must **ensure that relevant members of the pharmacy team are fully briefed** and have read and understood information within the updated NHS CPCS service specification and associated toolkit which is pertinent to their role.

- Record of staff briefing ([Action Plan Template for Pharmacy Teams](#) on PSNC or CPWY website)
- Service Specification & Toolkit** (see links at the bottom of the NHSBSA website)




The NHS CPCS self-assessment framework...
The CPCS self-assessment framework (CPCS ASRF) supports a practice in reflecting on their knowledge and skills to provide the service.
It highlights the key competencies needed to provide a high quality patient-centred service to people referred to your pharmacy from GPs (11).
Supporting documents
Download CPCS toolkit for pharmacy (PDF, 30KB)
Download CPCS specification (PDF, 47KB)

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How to claim - MYS Platform



GP CPCS Referral Pathway Declaration
Register for this service

I am entering a payment of £300 for the GP Referral Pathway Declaration (CPCS engagement activity, as set out below) for the NHS CPCS service.
I confirm that these engagement activities are required to register the pharmacy and that I have read and understood the terms and conditions of the CPCS self-assessment.
I confirm that the pharmacy is a community pharmacy and is not a contracted or contracted-out further category pharmacy.
I confirm that the pharmacy is a community pharmacy and is not a contracted or contracted-out further category pharmacy.

First name:
Surname:
 I agree to enter the declaration online.

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Feedback from Bradford Pilot

- Starting as GP DMIRS
- Sunnybank – PCN
- Implementation group
- Set up Pilot
- Activity during pilot
- Working relationship with GP Practice
- Expect and encourage referrals not on list
- Escalation process
- Clinical Summaries
- Understanding medical terminology
- Hints and tips

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Next Steps...

All relevant members of staff to read the briefing materials on the LPC GP-CPCS website page. Record this **This fulfils Annex F requirement c)**

Create a brief action plan for implementing the new referral pathway in the pharmacy, including plan to update SOP. **This fulfils Annex F requirement d).**

All relevant staff members to read and understand the updated CPCS service specification and pharmacy toolkit. Keep a **record** of completion. **This fulfils Annex F requirement e).**

Claim Annex F engagement and setup payment (£300) via MYS. If you are not currently signed up to CPCS, this can also be done via MYS (ensuring all relevant training is completed as stipulated in service specification). Free CPCS training is available for Pharmacists via RPSGB

For more information please see: <https://psnc.org.uk/services-commissioning/advanced-services/community-pharmacist-consultation-service/>

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NEXT STEPS

- Read and understand the resources available
- PCN Project/Access Leads to liaise with GP practices and community pharmacists within the PCN to seek interest and discuss capacity
 - Ensure all have access to all the resources paying particular attention to the GP CPCS Toolkit before starting to work through the checklist
- PCN Project/Access Leads to ensure there are regular discussions and/or meetings to build a strong relationship and ensure that all interested parties are involved
- Agree locally the method for any referrals back to the GP where a referral cannot complete a referral
- Agree a Go-Live date with NHSE and co-ordinate access to the IT Platform.

NHS

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Resources

NHS Conditions Recommended minor illnesses to be referred to community pharmacists - can be downloaded from the course

NHSE&I Conditions for which over the counter items should not be routinely prescribed in primary care <https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-cpcs.pdf>

CPCS Service Specification - Community Pharmacy https://www.nhsbsa.nhs.uk/sites/default/files/2020-10/CPCS%20spec%20additional%20referral%20routes%202020%20-%20final%20draft_.pdf

CPCS Toolkit for Community Pharmacy <https://www.nhsbsa.nhs.uk/sites/default/files/2020-10/NHS%20CPCS%20TOOLKIT%20%28v1%204%29%20draft%20copy%20%28NHS%20BSA%29.pdf>

CPCS Additional Resources <https://psnc.org.uk/services-commissioning/advanced-services/community-pharmacistconsultation-service/cpcs-resources-for-lpcs/>

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Useful links for GP Staff

This is the web page link: www.wyhpартnership.co.uk/our-priorities/primary-and-community-care-services/programme-news

The full service specification is available here: [Advanced Service Specification](#)

GPCPCS engagement video: <https://youtu.be/opsLXZMeWY>

This training might be helpful for reception staff. To understand the words and phrases that you should use when talking to patients with minor illnesses who should be referred to the community pharmacist <https://www.workcast.com/register?cpak=1067528372077994>

[GP Online Story Case Study](#)

[Example Reception Team Script](#)

[Use on your website](#)

[CPCS GP PCN Toolkit v1.8](#)

[checklist v1.2](#)

[Reception Poster](#)

[PDF](#)

[Patient Access Connect Guide PDF](#)

[Walks in to GP](#)

[Content for websites](#)

[Suggested Q&A for patients for](#)

[NHS CPCS Implementation](#)

[PharmRefer - Surgery Guide](#)

[CPCS Flows - Phase 1 - Citizen](#)

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Virtual Outcomes

[HTTPS://WWW.VIRTUALOUTCOMES.CO.UK/PHARMACY-TRAINING/](https://www.virtualoutcomes.co.uk/pharmacy-training/)

The screenshot displays the Virtual Outcomes website interface. On the left, there is a sidebar with a search bar and a list of categories. The main content area features a large card for 'NHS Community Pharmacist Consultation Service (CP) National Gateway Training'. To the right, there is a vertical list of training modules, each with a blue icon and an orange 'View Details' button. The modules include: 'CP Gateway - Quick Start', 'CP Gateway - Introduction', 'CP Gateway - Training - CP Gateway - Introduction', 'CP Gateway - Training - CP Gateway - Introduction', 'CP Gateway - Training - CP Gateway - Introduction', 'CP Gateway - Training - CP Gateway - Introduction', 'CP Gateway - Training - CP Gateway - Introduction', and 'CP Gateway - Training - CP Gateway - Introduction'.

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Do you have any questions?



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