

# Community Pharmacy Big Challenges and Transformation



North East and  
North Cumbria

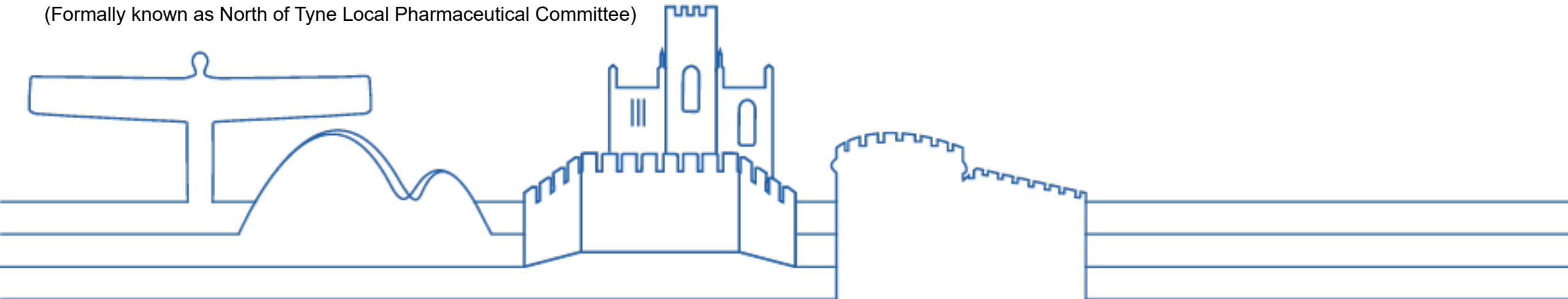
**Kenneth Youngman**

Senior Primary Care Commissioning Manager (Pharmacy and Optometry)

**Geraint Morris MRPharmS.**

Chief Officer Community Pharmacy North East –North

(Formally known as North of Tyne Local Pharmaceutical Committee)



# Community Pharmacy Funding.

- Community pharmacies are funded according to a contractual framework agreed by Community Pharmacy England, the NHS and Government. This framework accounts for around 90% of pharmacies' income. The remaining 10% can come from locally commissioned services – such as from local public health teams – and from retail income. In 2019, a five-year deal was agreed for pharmacies following 3 previous years of cuts.
1. **Global Sum.** A 5-year fixed funding package was put in place from 2019/20 – 2023/24, which kept contractual funding at £2,592m per year.
  2. '£800m **Retained margin**' is the buying profit community pharmacies are allowed to retain through the cost effective purchasing of prescription items.
  3. NHS services funded outside Global sum, such as, flu vaccinations.

# Your Local Pharmacy



Gateshead & South Tyneside  
Local Pharmaceutical Committee

*Passionate* about pharmacy

- 96% of the population are able to access a pharmacy within a 20min walk
- Patients are able to be seen without appointments (Walk-in)
- The average patient visits a pharmacy 14 times a year
- Many pharmacies are open extended hours above and beyond their contracted 40 core hours
- Most pharmacies offer a delivery service (many free of charge)
- 99% of prescriptions are now sent electronically to pharmacies
- Offer a wide range of clinical services to support the community

# Pharmacist



Gateshead & South Tyneside  
Local Pharmaceutical Committee

*Passionate* about pharmacy

- 3rd largest group of healthcare professionals
- 2nd Most trusted Profession (1st = Firefighters!)
- 4 year Masters degree + 1 year foundation training.
- Additional ongoing qualifications and training undertaken
- Within the next 4 years all pharmacists will be Independent Prescribers
- Experts on medication
- Supported by highly trained multidisciplinary team

# Community Pharmacy Roles



Gateshead & South Tyneside  
Local Pharmaceutical Committee

*Passionate* about pharmacy

- Dispensing Medications
- Counselling & Advice (Free)
- Vaccinations: Flu & Covid + More
- Blood Pressure Checks
- Minor Ailments
- Emergency Contraception
- Supervised Consumption
- Pharmacy First referrals from GP
- Stop Smoking Advice
- Emergency Supply of Medication
- Returned Waste Medication
- Inhaler Recycling
- Health Promotion/ Early Intervention
- Deliver medication (Often Free)
- New Medicine Service
- Discharge Medicine Service
- Alcohol Intervention
- Urine Infection Service
- DV Safe spaces (Free)
- Compliance Aids (Free)
- Patient Queries & Problems (Free)
- NHS Health Checks
- Pharmacy First 7 common conditions.
- Prescribing (Coming Soon)
- Watch this space.....

# Long term challenge - transformation

Over the course of the next decade, community pharmacy will undergo significant transformation, becoming central to the delivery of joined-up, responsive and person-centred community-based health and care services, with increased investment from commissioners reflecting the increased significance of community pharmacy in the health care ecosystem.

Community pharmacy will make a significant and valued contribution to the goals of the wider health and care system, including the ambitions of their local integrated care board (ICB). It will have a key role to play in addressing inequalities, both in health status and in access to health care.

The future role of community pharmacy:

1. Preventing ill health and promoting wellbeing
2. Providing clinical care
3. Living well with medicines
4. Be part of an integrated primary care offer for neighbourhoods

Research report September 2023

## A vision for community pharmacy

Beccy Baird, Helen Buckingham, Anna Charles,  
Nigel Edwards and Richard Murray

TheKingsFund>

nuffieldtrust

# Short term challenges: sustainability and resilience

## 24 pharmacies closed in NENC so far in 23/24.

*Deprived communities, where the need is greatest, have seen the biggest decline. More than one in ten pharmacies have been lost in the poorest 20% of areas in the last six years.*

**Over 50 pharmacies have reduced their opening hours from 100 hours/week to 72 hours in 23/24**

### Action being taken:

- Engagement with Health and Wellbeing Boards, clarifying roles/responsibilities
- Developing of provider collaborative
- Regular data updates (closures and CP operating, incl advanced services) to HWB/PNA leads, Place Leads
- Risk based approach to access issues, including vision for short term 'fixes' and longer term solutions
- Reviewing closure process, including engagement and communications
- Need to develop local engagement and/or quality schemes

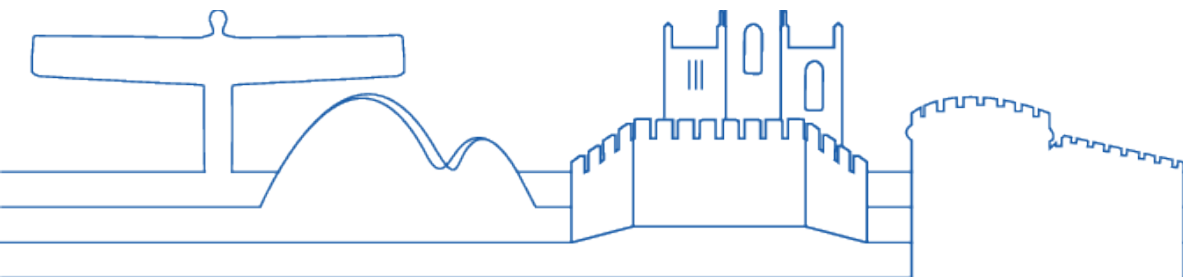
**Community pharmacy funding short by £67,000 per pharmacy each year, says CCA**

By Joanna Robertson

9th January 2023

# Closures and Change of Ownerships since Jan2023

Place	Current Number of Pharmacies	Since Jan 2023 Number of Closures	From Jan 2023 Number of COOs
County Durham	118	5	17
Gateshead	42	4	5
Newcastle upon Tyne	58	6	8
North Tyneside	46	3	2
Northumberland	67	4	8
South Tyneside	33	1	2
Sunderland	59	4	12
<b>Grand Total</b>	<b>423</b>	<b>27</b>	<b>54</b>





# Transformation: new community pharmacy services

## ICB commissioned services

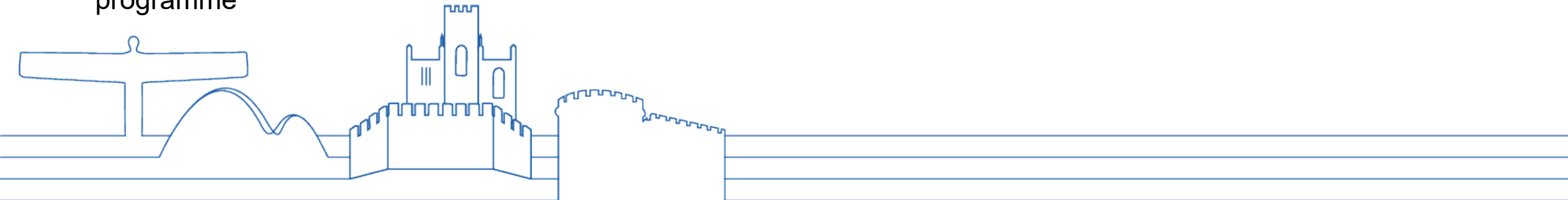
- Think Pharmacy First minor ailments / common conditions service
- UTI service

## National services – launch of 7 new common conditions

- Common conditions service – community pharmacists will be able to treat 7 common conditions (UTI, shingles, impetigo, infected insect bites, sinusitis, sore throat, acute otitis media) using PGDs
- Extended scope of BP check service and contraception service

## Independent Prescribing in community pharmacy – IP Pathfinder Programme

- Funding from NHS England for up to 10 IP Pathfinder sites, ICB led but part of a national IP Pathfinder programme



# Pharmacy First

Pharmacy First will be a new advanced service that will include 7 new clinical pathways and will replace the Community Pharmacist Consultation Service (CPCS).

This means the full service will consist of three elements:

## Pharmacy First (clinical pathways)

- new element

## Pharmacy First (urgent repeat medicine supply)

- previously commissioned as the CPCS

## Pharmacy First (NHS referrals for minor illness)

- previously commissioned as the CPCS

- Contractors will need to be able to provide all 3 elements (only exception is DSPs will not need to do otitis media pathway due to need to use otoscopes).
- Remote consultations for 6 of the 7 **clinical pathways** are permissible via high quality video and if clinically appropriate speed of access to medicines can be facilitated.

# The Seven Conditions- Pharmacy First

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**Sinusitis**  
12 years and over

**Sore throat**  
5 years and over

**Acute otitis media**  
1 to 17 years

**Infected insect bite**  
1 year and over

**Impetigo**  
1 year and over

**Shingles**  
18 years and over

**Uncomplicated UTI**  
Women 16 to 64 years

**Can be access via a practice electronic referral or patients can self present or walk in to their pharmacy FIRST!**

# Expansion of Contraception Service

Introduction of initiation of contraception in community pharmacies, supporting women to have easier access to contraception, through:

- Additional funding
- Greater use of pharmacy team skill mix
- Encouraging contractors to sign up
- Both ongoing supply and initiation of supply will be combined into one service.
- NHS website postcode search tool enable patients to find local pharmacies who deliver the contraception service.



£75 million per year additional funding, outside of the global sum, has been made available to support the expansion of both these services.

# Relaunch of Blood Pressure Service

Blood pressure checks to help identify the 5.5 million people with undiagnosed blood pressure at risk of heart attack and stroke, through:

- Additional funding
- Greater use of pharmacy team skill mix
- Encouraging contractors not signed up to do so
- Encouraging contractors who have signed up to see more patients and completion of more ABPMs

£75 million per year additional funding, outside of the global sum, has been made available to support the expansion of both these services.



# Think pharmacy first – NENC public campaign

- Public communications campaign funded by the ICB as part of the Think Pharmacy First and UTI PGD service business case
- Uses some of the established architecture from the existing 'Here To Help' campaign
- Aims to direct patients to community pharmacy for advice and treatment of common conditions, whilst also raising awareness of the availability of the service
- Aligns with existing work on common health conditions and over the counter (OTC) medicines

# Little problems?



Treat headlice,  
verruucas,  
chicken pox or  
nappy rash fast.

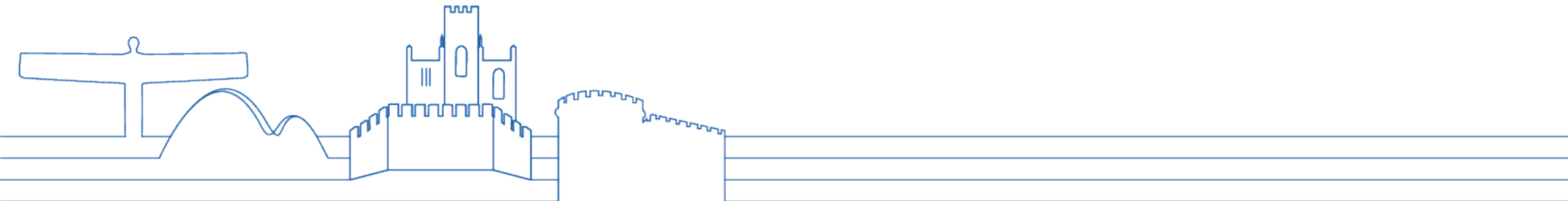


Head to your local  
pharmacy.



# Community Pharmacy: Covid Vaccination

- Autumn Winter23 228 Community Pharmacy sites delivered 703,876 Covid Vaccinations, in pharmacies, care homes and housebound patient homes.
- Autumn Winter 23 vaccination split was CP delivered 44%, PCN 51% and Hospital 4.8%
- Spring 24, 216 Community Pharmacy sites have signed up to deliver the spring covid vaccination programme.



# What's next.

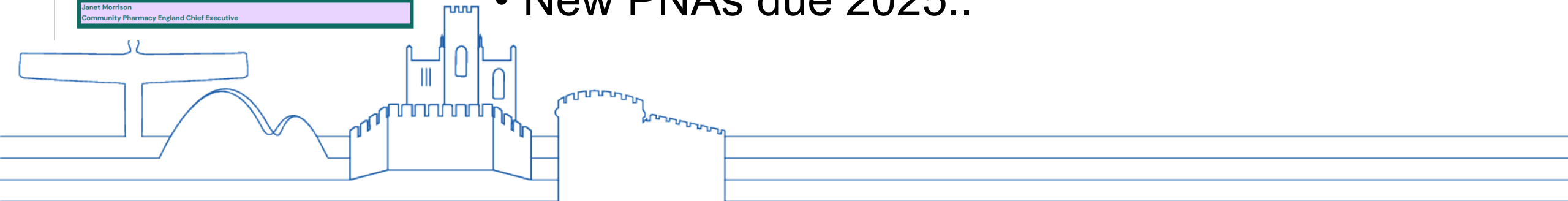
Community Pharmacy England's four-point plan

- 1 A sustainable funding model for community pharmacies:** Pharmacy finances are currently unsustainable, resulting in intolerable pressures and a degradation in services for the public, including temporary closures of pharmacies. To protect patient access to medicines and wider pharmacy services, pharmacy funding needs to be reset at an economically sustainable level, with ongoing increases to reflect cost rises.
- 2 A full review of the medicines supply market, and short-term relief measures:** We must protect access to medicines and address issues such as under-funding and price concessions. Alongside the review, we should take forward immediate measures such as allowing pharmacists to make minor adjustments to prescriptions, to help alleviate some of the issues that patients are facing and reduce the burden on GPs and pharmacy.
- 3 Investment in community pharmacy's clinical future:** Building on the new Pharmacy First service, community pharmacies have much more to offer to support the nation's health and wellbeing. We would particularly like to see them empowered to offer more vaccinations, and wider support for women's health and people with long-term conditions.
- 4 A plan to safeguard the pharmacy workforce:** Like other health and care settings, community pharmacy is in the midst of significant workforce issues. To ensure the public can continue to rely on critical community pharmacy services, Government should work with the NHS on a pharmacy-specific workforce recruitment, retention and return plan.

As long waits for healthcare continue and the health and wellbeing of the nation suffers, we need to protect our vital community pharmacies. A thriving community pharmacy network has so much to offer patients and the public, providing safe access to medicines alongside a range of preventative, public health and clinical services, as well as supporting wider primary care and the NHS. We want to work with Government and NHS to action this four-point plan, unlocking the potential of community pharmacies now and for the future.

Janet Morrison  
Community Pharmacy England Chief Executive

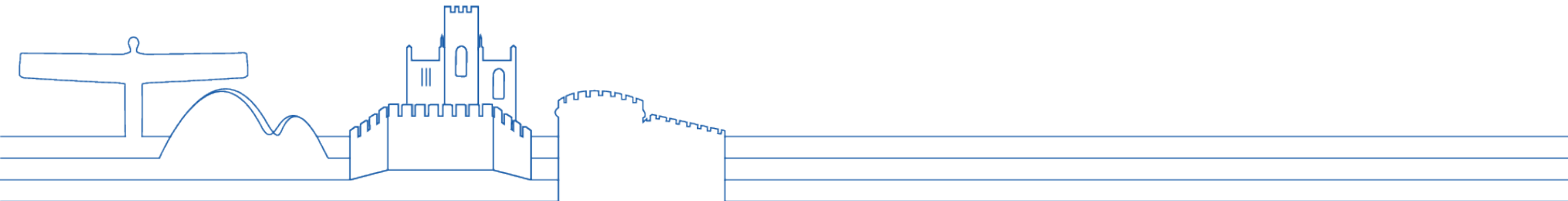
- Community Pharmacy England 4-point plan.
- New contractual framework negotiations.
- Anticipated that there will be more pharmacy consolidations and closures.
- New PNAs due 2025..





# Questions and Answers

- How can local authorities support local pharmacies?
- How should you respond to a pharmacy closure?





**North East and  
North Cumbria**

**Thank you**

