NHS Community Pharmacy Services

a summary
NHS Community Pharmacy Services

The NHS Community Pharmacy Contractual Framework (contract) consists of three levels of services:

- Essential services
- Advanced services
- Enhanced services

Pharmacy owners (contractors) must provide Essential services, but they can choose whether they wish to provide Advanced and Enhanced services.

**Essential Services**

**Dispensing** – the safe supply of medicines or appliances. Advice is given to the patient about the medicines being dispensed and how to use them. Records are kept of all medicines dispensed and significant advice provided, referrals and interventions made.

**Repeat dispensing** – the management of repeat medication for up to one year, in partnership with the patient and prescriber. The patient will return to the pharmacy for repeat supplies, without first having to visit the GP surgery. Before each supply the pharmacy will ascertain the patient’s need for a repeat supply of a particular medicine.

**Disposal of unwanted medicines** – pharmacies accept unwanted medicines from individuals. The medicines are then safely disposed of.

**Promotion of Healthy Lifestyles (Public health)** - opportunistic one to one advice is given on healthy lifestyle topics, such as stopping smoking, to certain patient groups who present prescriptions for dispensing. Pharmacies will also get involved in six local campaigns a year, organised by PCTs. Campaign examples may include promotion of flu vaccination uptake or advice on increasing physical activity.

**Signposting patients to other healthcare providers** - pharmacists and staff will refer patients to other healthcare professionals or care providers when appropriate. The service also includes referral on to other sources of help such as local or national patient support groups.

**Support for self-care** – the provision of advice and support by pharmacy staff to enable people to derive maximum benefit from caring for themselves or their families. The main focus is on self-limiting illness, but support for people with long-term conditions is also a feature of the service.

**Clinical governance** – pharmacies must have a system of clinical governance to support the provision of excellent care; requirements include:

- provision of a practice leaflet for patients
- use of standard operating procedures
- patient safety incident reporting to the National Reporting and Learning Service
- conducting clinical audits and patient satisfaction surveys
- having complaints and whistle-blowing policies
- acting upon drug alerts and product recalls to minimise patient harm
- having cleanliness and infection control measures in place
Medicines Use Review (MUR) & Prescription Intervention Service

The pharmacist conducts an adherence focussed medicines review with the patient. The review assesses the patient’s use of their medicines and attempts to identify and address any problems they may be experiencing. Where necessary, a referral is made to the patient’s GP.

The service aims to increase the patient’s knowledge of their medication and improve their adherence to the regimen. The MUR can be conducted on a regular basis, e.g. every 12 months, or on an ad hoc basis, when a significant problem with a patient’s medication is highlighted during the dispensing process.

At least half of the MURs provided each year must be for patients who fall within one of the national target groups:

- patients with respiratory disease (e.g. asthma and COPD)
- patients recently discharged from hospital
- patient taking a ‘high risk’ medicine (NSAIDs, anticoagulants, antiplatelets and diuretics)

MURs are conducted in a private consultation area which ensures patient confidentiality. The pharmacy provides a quarterly summary report to the PCT of MUR consultations conducted. This supports monitoring of the service to determine its effectiveness and value to the NHS.

New Medicine Service (NMS)

This service is designed to improve patients’ understanding of a newly prescribed medicine for a long term condition, and help them get the most from the medicine.

Research has shown that after 10 days, two thirds of patients prescribed a new medicine reported problems including side effects, difficulties taking the medicine and a need for further information.

The NMS has been designed to fill this identified gap in patient need.

The pharmacist will provide the patient with information on their new medicine and how to use it when it is first dispensed. The pharmacist and patient will then agree to meet or speak by telephone in around a fortnight.

At this second stage of the service the pharmacist will discuss with the patient how they are getting on with their new medicine. Further information and advice on the use of the medicine will be provided and where the patient is experiencing a problem the pharmacist shall seek to agree a solution with the patient.

A final consultation (typically 21-28 days after starting the medicine) will be held to discuss the medicine and whether any issues or concerns identified during the previous consultation have been resolved. If the patient is having a significant problem with their new medicine the pharmacist may need to refer the patient to their GP.

The NMS is conducted in a private consultation area which ensures patient confidentiality.

The pharmacy provides a quarterly summary report to the PCT of MUR consultations conducted. This supports monitoring of the service to determine its effectiveness and value to the NHS.

Appliance Use Review Service

This service is similar to the MUR service, but it aims to help patients better understand and use their prescribed appliances (e.g. stoma appliances) rather than their medicines by:

- establishing the way the patient uses the appliance and the patient’s experience of such use
- identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient
**Medicines Use Review (MUR) & Prescription Intervention Service**

- advising the patient on the safe and appropriate storage of the appliance and proper disposal of the appliances that are used or unwanted

The service is conducted in a private consultation area or in the patient’s home.

**Stoma Appliance Customisation Service**

This service involves the customisation of a quantity of more than one stoma appliance, based on the patient’s measurements or a template.

The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste.

**Enhanced services**

This group of services is commissioned locally by PCTs in order to meet the needs of their population. A wide range of Enhanced services are commissioned across England including:

- minor ailments management
- palliative care services
- care home services
- head lice management services
- gluten free food supply services
- services to schools
- out of hours services
- supplementary and independent prescribing by pharmacists
- medicines assessment and compliance support

The largest group of Enhanced services fall under the heading of public health; examples are listed in the box.

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<tr>
<th>Public Health</th>
<th>Examples of community pharmacy services</th>
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<tr>
<td><strong>Substance misuse services:</strong> needle and syringe services; supervised consumption of medicines to treat addiction, e.g. methadone; Hepatitis testing and Hepatitis B and C vaccination; HIV testing; provision of naloxone to drug users for use in emergency overdose situations</td>
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<td><strong>Sexual health services:</strong> emergency hormonal contraception services; condom distribution; pregnancy testing and advice; Chlamydia screening and treatment; other sexual health screening, including syphilis, HIV and gonorrhoea; contraception advice and supply (including oral and long acting reversible contraception)</td>
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<td><strong>Stop smoking services:</strong> proactive promotion of smoking cessation through to provision of full NHS stop smoking programmes</td>
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<td><strong>NHS Health Checks for people aged 40-74 years:</strong> carrying out a full vascular risk assessment and providing advice and support to help reduce the risk of heart disease, strokes, diabetes and obesity</td>
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<td><strong>Weight management services:</strong> promoting healthy eating and physical activity through to provision of weight management services for adults who are overweight or obese</td>
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<td><strong>Alcohol misuse services:</strong> providing proactive brief interventions and advice on alcohol with referral to specialist services for problem drinkers</td>
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<td><strong>Pandemic and Seasonal ‘Flu services:</strong> providing continuity of dispensing of essential medicines, provision of antiviral medicines; ‘flu vaccination services</td>
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Examples of local community pharmacy services can be found at: www.psnc.org.uk/database

Links with community pharmacists leading the development of services can be made via the Local Pharmaceutical Comittee (LPC).

Visit www.psnc.org.uk/contract for more information on community pharmacy services.

This information is compiled from content adapted and taken from:

Pharmaceutical Services Negotiating Committee
www.psnc.org.uk
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