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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	22 February 2022	Agenda Item	7.3
Report Title	Community Pharmacy Development		
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Report Sponsor	Sharon Miller, Associate Director PCTSG		
Presented by	Brian Owens Service Group Director PCTSG		
Freedom of Information	Open		
Purpose of the Report	This report provides an update, following the publication of the SBUHB Pharmaceutical Needs Assessment, on the current position of community pharmacy national requirements for contract reform and the actions being taken to consider future locally determined developments aligned to the new national contractual framework.		
Key Issues	<p>A New Prescription December 2021 sets out the future of community pharmacy in Wales. The Minister for Health and Social Services setting out that “the new contract provides for a collaborative, innovative, and progressive approach to the delivery of pharmaceutical care”.</p> <p>Pharmacies are recognised as community assets that provide timely access to advice and a range of urgent care, protecting health, facilitating safe discharge. The contract reforms will support pharmacists to play a greater role in clinical service delivery and improving health and well-being.</p> <p>A national pharmacy contract reform implementation group has been established and the Associate Director and Primary Care Manager will participate in these arrangements. Implementation locally will be led by the PCTSG.</p> <p>Following presentation and discussion at Management Board on 15th December 2021, a Task and Finish Group has been established between the Primary Care Service Group and the Medicines Management Team to consider future development within community pharmacy aligned to the new national contractual framework, and to develop any required business cases.</p>		

	<p>When implementing these changes the group which includes the Associate Director, Head of Primary Care, the Clinical Director for Pharmacy and the Service Group Medical Director will ensure that governance is robust for any new arrangements.</p> <p>There is opportunity to make the most of the existing clinical services that community pharmacy can provide. This will require national action through the national contractual framework but also provides opportunities for action at local level.</p>			
Specific Action Required <i>(please choose one only)</i>	Information	Discussion	Assurance	Approval
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendations	<p>Members are asked to:</p> <p>1.1 Note the current position on Community Pharmacy Contract Reform in Wales</p> <p>1.2 Note the establishment of a Task and Finish Group to consider future development within community pharmacy aligned to the new national contractual framework.</p> <p>1.3 Receive future update reports on service change</p>			

Community Pharmacy Development

2. INTRODUCTION

The Pharmaceutical Needs Assessment concluded that across Swansea Bay University Health Board the provision of pharmacy services was the second highest in Wales, this coverage of community pharmacies presents a good opportunity to develop additional services to benefit the local population, and potentially take pressure off other parts of the healthcare system. This is very much in line with the national strategy contained within 'A New Prescription for Wales' issued in December 2021.

The Minister for Health and Social Services has set out that “the new contract provides for a collaborative, innovative, and progressive approach to the delivery of pharmaceutical care”.

Pharmacies are recognised as community assets that provide timely access to advice and a range of urgent care, protecting health, facilitating safe discharge. The contract reforms will support pharmacists to play a greater role in clinical service delivery and improving health and well-being.

Whilst this provides a good opportunity for increasing the number of services delivered by community pharmacy in local settings, it is recognised that national and local contract changes need to be implemented in a way that takes account of the pressure on the provision of current community pharmacy services, ensures changes are implemented within a robust clinical governance framework, ensures there are no adverse effects on other parts of the healthcare system and ensures that the changes are communicated to the local population.

3. BACKGROUND

In Swansea Bay University Health Board (SBUHB) there are 93 Community Pharmacies delivering services in line with the community pharmacy contractual framework (CPCF) which was implemented in 2005 across Wales and is split into three distinct services:

Essential Services: Disposal of medicines, Controlled Drug Management, Health Promotion, Dispensing of prescriptions.

Advanced Services: Nationally commissioned services that are available to all pharmacies providing they meet the national training requirements, currently within SBUHB we have two advanced services: Medicines Usage Reviews (currently suspended), Discharge Medicines Reviews.

Enhanced Services: Locally commissioned services to meet local need, some enhanced services sit within a national template, for example: Emergency Hormonal Contraception (EHC) and others are written and established locally, for example: Domiciliary Medicines Management. There are 22 enhanced services that SBUHB commissions community pharmacies to provide and the PCTSG monitor and manage in line with the individual specifications.

3.1 Contract Reform

Contract reform will commence in 2022- 2023 and Welsh Government have committed to providing an additional 18.3 million for pharmacies over a three-year period. There is a move to reduce income associated with dispensing prescriptions to increasing funding for clinical service delivery.

The four themes of contract reform have been agreed as

1.Expanding the clinical role of community pharmacists

There will be a new universally delivered clinical service with initially four priority areas: Common ailments, emergency contraception, emergency medicine supply and seasonal influenza vaccination services. This will be implemented from April 2022 and will be known as the Community Pharmacy Clinical Consultation Service. Pharmacies will be able to choose whether to deliver this service but if they do they will need to provide all four elements.

The rollout of independent prescribing will be significantly accelerated. From April 2022 any community pharmacy will be enabled to provide a national independent prescribing service subject to employing a suitable qualified and competent independent prescriber.

The ability to provide routine contraception will be progressed.

2. A workforce with the skills needed to deliver outstanding care

HEIW workforce plans will be aligned with contract reform – this will include independent prescribing and widening access to modern apprenticeships for pharmacy technicians.

Ensuring community pharmacists are eligible for NHS funding for post registration education and protected learning time arrangements will be considered.

There will also be a new incentive scheme for 22/23 and 23/24 to incentivise the recruitment and training of pharmacy technicians

3. A commitment to quality, collaboration and integration within primary care

The pharmacy contract supporting primary care cluster working is understood to be remaining the same for 22/23, however evaluation will take place. This requires a lead to sit on each cluster with collaboration meetings being held three times a year with constituent community pharmacies.

4.Valuing the contribution community pharmacies make to the NHS

From April 2022 Funding for clinical services will increase to £15.0m and from April 2023 to £16m

From April 2022 Funding for independent prescribing will increase to £4.2m and from April 2023 to £12.2 m

From April 2022 Funding for patients shielding and the Medicine Use Review service will cease

£4.3m will be made available to incentivise the recruitment of pharmacy technicians in both 22/23 and 23/24

A national pharmacy contract reform has been established at the end of January and the detail of the contract changes are currently being worked through at pace. Priority is being given at present to the national specifications that will underpin the Community Pharmacy Clinical Consultation Service.

3.2 Community Pharmacy Development Opportunities

The valued contribution that pharmacists and pharmacy staff in local communities have made and continue to make to the Covid pandemic response and recovery is widely recognised through the provision of accessible services for the safe supply and use of medicines, activities to promote good physical and mental health, vaccination services and first point of contact for advice and treatment of common illnesses.

Community pharmacy has the potential to help meet both the short term and long term challenge to provide better outcomes that are efficient and that work for patients. A vision of how that clinical expertise can be put to better use and what the future roles of pharmacists and pharmacy technicians should be will be recognised through the renegotiation of the community pharmacy contract reform framework.

Many accept and support the need for community pharmacy to become more overtly clinical and move away from the reliance on operating primarily as a supply function and prudently ensure that the skills of community pharmacists and their staff are better deployed and utilised.

The way patients interact with the NHS, and in particular with primary care, is changing and pharmacists are well placed to meet those challenges if the conditions are set to allow them to do so.

Following presentation and discussion at Management Board on 15th December 2021, a Task and Finish Group has been established to consider future development of community pharmacy services aligned to the new national contractual framework. This will include reviewing the current provision of the discharge medication review service which is currently under optimised and considering the implementation of a urinary tract infection service, currently delivered in a neighbouring Health Board. This work is at an early stage and is being scoped out further. As stated above assessment will cover the capacity within community pharmacy, robust governance arrangements and the impacts on the wider healthcare system.

4. GOVERNANCE AND RISK ISSUES

Most community pharmacy contractors already provide high quality services and the Health Board has supported pharmacy contractors to be compliant with contractual clinical governance requirements. Further changes to the contractual framework and new service development will require increased monitoring and governance arrangements and we must ensure that the PCTSG workforce resource is sustainable to meet these requirements to ensure effective and safe delivery of services.

It should also be noted that concerns have been raised regarding the increasing workforce pressures within community pharmacy due to pharmacist shortages and the impact that is having on service availability. Community pharmacy contractors across Wales are reporting challenges including locally across SBUHB, this may impact on uptake of enhanced service delivery and is included on the risk register of the PCTSG.

5. FINANCIAL IMPLICATIONS

Welsh Government are investing in community pharmacy services in Wales. This totals 18.3 million over the next three years. It is currently understood Welsh Government will fund the contract reform however there may be financial risks linked to system change and the bedding in of new contractual requirements. This will require close monitoring as the contract changes are implemented. Any new or expanded local developments, outside of national reform will need to be funded through core funds.

6. RECOMMENDATION

Members are asked to:

- 6.1 Note the current position on Community Pharmacy Contract Reform in Wales
- 6.2 Note the establishment of a Task and Finish Group to consider future development within community pharmacy aligned to the new national contractual framework.
- 6.3 Receive future update reports on service change

Governance and Assurance		
Link to Enabling Objectives (please choose)	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input checked="" type="checkbox"/>
	Co-Production and Health Literacy	<input checked="" type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input type="checkbox"/>
	Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>
Health and Care Standards		
(please choose)	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input type="checkbox"/>
	Staff and Resources	<input type="checkbox"/>
Quality, Safety and Patient Experience		
<p>Most community pharmacy contractors already provide high quality services and the Health Board has supported pharmacy contractors to be compliant with contractual clinical governance requirements. The contract changes is aimed to provide a new universal clinical consultation service across community pharmacies which will deliver emergency medicine , emergency hormonal contraception, flu immunisation and a common ailments service for initially 27 conditions.</p>		
Financial Implications		
<p>Welsh Government are investing in community pharmacy services in Wales. This totals 18.3 million over the next three years. There will be a need for the Health Board to spend this additional investment to ensure value for money. Community pharmacies are entitled to repatriation of funds if prescribed ring-fenced amounts are not spent. At this stage it is understood that the financial implications will be funded by Welsh Government however there can be financial risks both for the Health Board and primary care contractor linked to system change and the bedding in of new contractual requirements. This will require close monitoring as the contract changes are implemented.</p> <p>In addition, any locally determined developments will need to be funded through core funds.</p>		
Legal Implications (including equality and diversity assessment)		
None		
Staffing Implications		
<p>The contract sets out (highlights above) that there will be change to the community pharmacy workforce, this will be supported through national workforce developments and will support the overall vision of extending the community pharmacy role.</p>		

There is also a need to consider the impact of the pandemic at this time of change and the sustainability and workforce pressures being reported.

In addition further changes to the contractual framework and new service development will require increased monitoring and governance arrangements within the primary care team and we must ensure that the workforce resource is sustainable to meet these requirements to ensure effective and safe delivery of services.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)

Briefly identify how the paper will have an impact of the “The Well-being of Future Generations (Wales) Act 2015, 5 ways of working.

- **Long Term** – Community Pharmacy can play a key role in reducing pressure on the healthcare system and providing an accessible local service to patients.
- **Prevention** – Community Pharmacy plays a key role in supporting the prevention of ill health through programmes such as smoking cessation, flu or COVID immunisation and the common ailments service.
- **Integration** – Community pharmacy can play a key role and contribute to the wider system and impact as stated, on a number of the wellbeing goals.
- **Collaboration** - Community Pharmacy will be required to work collaboratively with other primary care contractors and partners through the accelerated cluster development framework.
- **Involvement** - The Pharmaceutical Needs Assessment requested feedback on the current provision of pharmaceutical services, this work will be built upon with consideration given to a communication campaign. Opportunities for engaging with the public will be explored.

Previous Reports	None
Appendices	None