

Pharmacy First Advanced Service

What is it and when is it happening?

The service involves providing consultations to give advice and NHS-funded treatment (via 23 PGDs and 1 supply protocol) and will launch on **31st January 2024** (subject to the required IT systems being in place).

Contractors are able to sign up for the service through MYS declaration.

The **Pharmacy First service will incorporate the existing CPCS service** (CPCS service will cease the day that PFS launches) and there are three service elements:

1. Urgent repeat medicine supply – previously CPCS (referral only)
2. Minor illness referral – previously CPCS (referral only)
3. **Clinical Pathways consultations** – new element (both self-referral and referral)

The onus is on the patient to contact the pharmacy, the pharmacist should consider contacting the patient if they have not made contact within 30 mins.

Payment

An initial fixed payment of **£2,000** is available to claim up to launch date but will be reclaimed from contractors who do not provide **five clinical pathways consultations** by the end of **March 2024**. From February 2024, in addition to the **£15 consultation fee**, a monthly fixed payment of **£1,000** will be paid to pharmacy owners who meet a minimum activity threshold of monthly clinical pathways consultations: Feb:1, Mar:5, April:5, May:10, Jun:10, Jul:10, Aug:20, Sep:20 and from October 2024 onwards:30 per month.

NOTE: provision of Contraception and Hypertension service in a bundle with PFS is due to become a requirement to receive the monthly £1,000 Pharmacy First payment by 31st March 2025

What IT systems need to be in place?

Pharmacies will have access to clinical services IT systems in which to make their clinical records for the service. These systems will also automatically send claim data on service provisions to the NHSBSA's MYS portal via API.

The systems will also allow more parts of the GP record to be seen, via GP Connect: Access Record and they will send automatic updates to the GP record on the consultation and any medicines provided.

All remote Clinical Pathway consultations must be done via video consultation only, Otitis Media must be face to face.

What training will pharmacists need?

There is **no mandatory training, but declarations of competence must be signed. CPPE has a self-assessment framework**

Clinical Pathway Consultations

These consultations can be provided to patients who **self-refer** to the pharmacy (as well as those **referred**).

The **seven conditions** (age restrictions) are:

1. Sinusitis (12 years +)
2. sore throat (5 years +)
3. acute otitis media* (1-17 years)
4. infected insect bite (1 year +)
5. Impetigo (1 year +)
6. shingles (18 years +)
7. uncomplicated UTI in women. (women 16-64).

DSP contractors can provide all but 'acute otitis media' consultations

Contractors (except DSP) must have an otoscope – annex C of spec gives guidance on how to select one.

DSP contractors cannot provide in-person consultations.

More information



CPE



Spec,
Pathways,
PGDs



Pharmacy First Advanced Service

Historically with CPCS, reports showed a high number of 'rejections' of referrals in cases where a consultation has been provided. Often a payment is still applicable if the referral is processed fully and not rejected at the first page. Here we look at the scenarios that trigger the service payment.

More information



Virtual outcomes



CPPE

What triggers the £15 payment

Urgent repeat medicine supply – previously CPCS (referral only)

Minor illness referral – previously CPCS (referral only)

Clinical Pathways consultations) – new element (both self-referral and referral)

YES

Claim made in all circumstances where pharmacist has had a consultation with the patient regarding the supply, this includes:

- Supply made or not
- Referral to third party (including pharmacy)
- OTC product purchased.
- Advice given
- EPS token is available
- Item unavailable.

NO

Claim cannot be made where the patient is non-contactable or when the consultation is not provided.

YES

Claim can be made in all circumstances where pharmacist has had a consultation with the patient, this includes:

- self-care advice given
- OTC product purchased
- referral to local schemes
- Referred to an appropriate prescriber
- patient referred into Clinical Pathway (one claim is generated in total)
- **when the patient is contacted but refuses to undergo a full consultation but receives safety netting advice**

NO

Claim cannot be made where the patient is non-contactable or when the consultation is not provided.

YES

Claim can **always be made for a referred patient** once a consultation has taken place

Claim can be made for a self-referred patient if the gateway point into the Clinical Pathway is reached.

NO

Claim cannot be made for a patient for a self-referred patient if the gateway point into the Clinical Pathway is not reached.

Claim cannot be made where the patient is non-contactable or when the consultation is not provided.