

## Briefing for general practice teams – changes to the NHS community pharmacy contract in 2021/22

This PSNC Briefing provides information for general practice teams on the changes to the community pharmacy contract in 2021/22, including the revised Pharmacy Quality Scheme (PQS).

### New Medicine Service

From 1st September 2021, several changes have been made to the New Medicine Service (NMS) which provides support to patients to maximise the benefits of their newly prescribed medicines. The main changes, which are likely to be of interest to general practice teams are:

- Patients prescribed a new medicine for one of the following conditions are now eligible for an NMS (either through referral by healthcare professionals such as GPs, practice nurses and clinical pharmacists) or by the pharmacy team advising the patient about the service:
 

<ul style="list-style-type: none"> <li>▪ Acute coronary syndromes</li> <li>▪ Asthma and COPD</li> <li>▪ Atrial fibrillation</li> <li>▪ Coronary heart disease</li> <li>▪ Diabetes (Type 2)</li> <li>▪ Epilepsy</li> <li>▪ Glaucoma</li> </ul>	<ul style="list-style-type: none"> <li>▪ Gout</li> <li>▪ Heart failure</li> <li>▪ Hypercholesterolaemia</li> <li>▪ Hypertension</li> <li>▪ Long term risks of venous thromboembolism / embolism</li> </ul>	<ul style="list-style-type: none"> <li>▪ Osteoporosis</li> <li>▪ Parkinson's disease</li> <li>▪ Stroke / transient ischemic attack</li> <li>▪ Urinary incontinence / retention</li> </ul>
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- The service can now be offered to support parents/guardians/carers of children and adults newly prescribed eligible medicines who could benefit from the service, but where the patient is not able to provide informed consent.
- A catch-up NMS will run until 31st March 2022, which provides support to patients who were prescribed a new medicine between 1st April 2020 to 31st August 2021 who didn't get NMS support when the medicine was first prescribed, due to the COVID-19 pandemic. This will also support patients identified through the PQS who have missed inhaler technique checks to optimise use of their inhaler.



Further information on NMS can be found at: [psnc.org.uk/nms](https://psnc.org.uk/nms)

### Hypertension case-finding service

From 1st October 2021, a Hypertension case-finding service will be commissioned in pharmacies. This service is referenced in NHS England and NHS Improvement's recently published [Primary Care Networks – Plans for 2021/22 and 2022/23](#), with PCNs asked to undertake activity to improve coverage of blood pressure checks by working proactively with community pharmacies to improve access to blood pressure checks, in line with this service.

In 2022/23, PCNs are being asked to ensure processes are in place to support the exchange of information with community pharmacies, including a process for accepting and documenting referrals between pharmacies and GP practices, in relation to the Hypertension case finding service.

The service will have two stages – the first is identifying people at risk of hypertension and offering them blood pressure measurement (a 'clinic check').

The second stage, where clinically indicated, is offering 24-hour ambulatory blood pressure monitoring (ABPM). The blood pressure test results will then be shared with the patient's GP to inform a potential diagnosis of hypertension.



Further information on the Hypertension case-finding service can be found at: [psnc.org.uk/hypertension](https://psnc.org.uk/hypertension)

## Pharmacy Quality Scheme

The PQS supports delivery of the NHS Long Term Plan and rewards community pharmacy contractors that achieve quality criteria in the three domains of healthcare quality: clinical effectiveness, patient safety and patient experience.

Detailed information on the PQS can be found at [psnc.org.uk/pqs](https://psnc.org.uk/pqs), but the main requirements which community pharmacy teams will be aiming to meet, which are likely to be of interest to general practice teams, are listed below:

### Anticoagulation audit

Pharmacy teams will be carrying out an anticoagulant audit and where concerns are identified, they will be notifying the patient's GP.



### Respiratory

Patients will be referred to an appropriate healthcare professional if:

- a child aged 5-15 does not have a spacer device when using a 'press and breathe' MDI for asthma; and/or
- a patient aged 5 years or above does not have a personalised asthma action plan.

### Inhaler technique checks

Patients with asthma or COPD, who were prescribed a new inhaler (i.e. for the first time or changed to a new inhaler device) between 1st April 2020 to 31st August 2021 but did not have their inhaler technique checked due to the COVID-19 pandemic, will be offered an inhaler technique check as part of the catch-up NMS arrangements.

### Return of unwanted and unused inhalers

Pharmacy teams will be speaking to patients, their carer or representatives, for whom they have dispensed an inhaler about the environmental benefits of them returning all unwanted and used inhaler devices for safe and environmentally friendly disposal. This supports the NHS Long Term Plan's aim for a more sustainable NHS.

### Flu vaccination

Both GP and community pharmacy teams are being incentivised similarly on the delivery of flu vaccinations to facilitate a collaborative approach in a PCN. The percentage of patients aged 65 years or over who receive a seasonal influenza vaccination between 1st September and 31st March, with a threshold of between 80-86% is a criterion; this is also an Investment and Impact Fund indicator for PCNs.



Pharmacy contractors will be discussing with their Pharmacy PCN Lead how they can collaborate with other pharmacy teams and discuss how they can work with GP teams. The PCN Lead will then engage with the PCN Clinical Director to agree how community pharmacies can collaborate with GP practices on increasing flu vaccinations in the PCN.

### Antibiotic review



Pharmacy teams will be carrying out a review with patients prescribed an antibiotic to help ensure safe and effective use. If there are concerns about the patient's therapy or risk of antibiotic related adverse effects, which cannot be managed through advice, they will be referring patients to their GP.

### Encouraging uptake of COVID-19 vaccinations

Pharmacy teams will be implementing an action plan to actively promote COVID-19 vaccinations, particularly in Black, Asian and minority ethnic and low uptake communities, incorporating myth busting methods as part of their efforts to tackle lower levels of COVID-19 vaccination uptake and to support these patients. This work may be able to support PCN's work on tackling neighbourhood health inequalities.



### Weight management



Pharmacy teams will be proactively discussing weight management with patients, and will be offering to weigh people, calculate their BMI, measure their waist circumference and support those who wish to lose weight through advice and referral to Local Authority funded tier 2 weight management services or the NHS Digital Weight Management Programme (where the individuals meet the criteria for referral).