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Welcome to the December edition of the LPC Golden Pages!

I'd like to start by saying thank you to all our pharmacy teams across Devon for the hard work you are doing in supporting your patients and local communities, in particular your fabulous contribution to the seasonal flu vaccination programme. To date, Devon pharmacies have delivered 25% of the total flu vaccines in the NHSEI South West region, which amounts to 116,364. In the context of the existing pressures in the system particularly around workforce this is impressive.

As we are now halfway through the flu season and as part of your PQS PCN domain, it continues to be important that you engage with your local surgeries and your PCN pharmacy leads. We do have some new PCN pharmacy leads so please support them when they ask for your own pharmacy flu plans and ensure that you attend any local meetings arranged.

We are also seeing an increased number of referrals through the GP Community Pharmacist Consultation Service and by mid November had reached the 1,000 referrals milestone in Devon. As more practices are getting their staff trained in the service and seeing the benefits in terms of increasing capacity, we very much hope to see the levels of referrals increasing further. We have also trained over 90% of our pharmacy teams in the service which demonstrates great engagement from you all. Thank you once again.

Keeping on the CPCS theme: CPCS – When is it Complete?

A common query from contractors relates to when a CPCS referral can be considered as complete and therefore eligible to be claimed at the end of the month. PSNC has produced a helpful guide which sets out the range of scenarios associated with the CPCS and clarifies when a consultation within the service is complete (and hence can be included in the total number of completed CPCS claimed at the end of the month on the FP34C). Please refer to the guidance [here](#).

GP Referrals into the CPCS

Several local practices are now referring into the CPCS.

Following the announcement on the [Winter Access Fund](#), it is anticipated that many more practices will be planning to roll out GP CPCS before we hit the winter period. If you are contacted by one of your local surgeries, PLEASE engage with them and tell them that you are ready and waiting to start receiving CPCS referrals from them. We have heard anecdotally of some practices being told by CPCS pharmacies that they are not yet ready to receive referrals from them. Pharmacies that provide CPCS cannot be selective of who they receive referrals from and must be ready to receive referrals from **both** NHS 111 and general practices.

We would like to ask that the local pharmacies update their surgeries of availability as far in advance as they can and certainly before the session (morning, afternoon, or day) to ensure that the patients are not waiting for calls or are not responded to at all. The damage to the relationships between patient & pharmacy and pharmacy & practice is far greater in the absence of shared information than if the pharmacy notified and

reduced their available hours for the service in light of any closures. Please ensure you are advising practices if you do have to close at short notice, as well as your mandatory reporting to NHSE&I.

As part of GP CPCS consultations, it is routine to check for red flag or warning symptoms when assessing patients that may need to be escalated into higher acuities of care. Our very own Tom Kallis has produced a short [video](#) where he works through some potential resources you may wish to consider when assessing patients for over the counter or CPCS consultations

New Primary Care Staff Respect Materials

In recognition of the increasing abuse and violence that primary care teams now regularly face, the NHS has published a suite of downloadable materials and guidance for use by primary care staff to encourage patients to treat NHS staff with respect.

The materials include posters, social media graphics and display screen graphics that feature NHS staff working across England and carry the message 'We are here to help you. Thank you for treating us with respect.' A poster template is also available which allows community pharmacy teams to feature photographs of their own staff with the same messages.

These resources are part of several measures designed to support primary care colleagues, which includes [wellbeing resources](#) for managing patients, available via FutureNHS. Note, you will need to register for a FutureNHS account to use this link.

[Download the NHS Primary Care Staff Respect Materials](#)

Supporting you through winter

Please see attached details of the [Supporting You Through Winter](#) package of offers from the [South West Leadership Academy](#) who provide a variety of development offers throughout the year for **all** Primary Care colleagues which does include Community Pharmacy of course.

If you have any queries, questions and would like to get in touch please contact the Leadership Academy directly on leadership.SW@leadershipacademy.nhs.uk

Devon Wellbeing Hub

The Devon Wellbeing Hub is one of 40 NHS mental health and wellbeing hubs that are being set up across the country in response to the impact of COVID-19. The Hub is operated by staff from Devon Partnership NHS Trust, who are working on behalf of the Devon Integrated Care System, in collaboration with [Livewell Southwest](#) and [Devon CCG](#).

The hub is open to anyone working in healthcare, social care or the Police in Devon and Plymouth; no matter what your role. This includes people working for the NHS, in social care settings and primary care health services, as well as people working in care homes, for domiciliary care organisations, for the police or for any non-clinical role.

The Hub is designed to be a single place where someone concerned about their wellbeing can come, unpick their needs, and be supported to get to the right services quickly. The service is completely confidential and can help with a range of issues, whether they are related to the pandemic or not. There is also support with managing stress and mental wellbeing, financial worries, domestic violence and relationship issues or any other issues you are facing with your wellbeing.

The team is made up of trained NHS staff, including Clinical Psychologists, Psychological Wellbeing Practitioners and Chaplains who are here to support you with empathy and understanding and help you find the tools and services to help you with any issues you are facing.

<https://www.devonwellbeinghub.nhs.uk/>

Updating DoS profiles

We would like to remind pharmacy teams they must update their DoS profile where the pharmacy's opening hours change, either temporarily or permanently. This is to avoid patients being inappropriately referred to the pharmacy while it is closed.

Ensuring the DoS is updated by the contractor, especially at weekends and during the evening for unplanned closures, is vital.

Permanent changes/bank holiday hours can be reported through the DoS Profile Updater. Please note that making changes to DoS does not automatically adjust the opening hours of your NHS website pharmacy profile; this needs to be separately amended on the NHS website.

For temporary/unplanned closures the DoS profile for each service can be amended to 'RED' in the capacity status tool (<https://www.directoryofservices.nhs.uk/>) - Red Amber Green (RAG). NHSE/I must also be informed of any unplanned closures by emailing england.pharmacysouthwest@nhs.net.

Local DoS leads will be able to advise on login credentials for the DoS Capacity Status Tool and facilitate creation of a RAG account where this has not been set up previously. Please email devon.dos@nhs.net if you need help with setting up a RAG account. (There are a number of pharmacies in Devon where a RAG account has NOT been set up and we would recommend doing this asap).

The Pharmacy team should understand that by turning the DoS to RED, means that their services will not show as an option for the patient during that time, including EPS transfers if Pharm+ is set to RED. The DoS supplies data to 111, 111 on-line and NHS.uk

The functionality will close the services for the set hours recorded. The system will revert automatically back to GREEN after this timescale.

Other useful contacts relating to the Directory of Services

Directory of Services provides support between 9:00 and 17:00 Monday to Friday.

For service providers who need to request an emergency profiling change on live DoS, please contact the DoS team (Mon-Fri 9-5) on [0300 0200 363](tel:03000200363) to be routed to your appropriate area.

To report a potential major technical fault for DoS, 111 and 111 On-line, please contact the National Helpdesk on [0300 3034 034](tel:03003034034) (in hours) or [0300 3035 035](tel:03003035035) (out of hours) or email exeter.helpdesk@nhs.net.

If you have feedback relating to Devon 111, please click on this link <https://devonccg.nhs.uk/contact-us/pitch-yellow-card> and report your case here. (PITCH is the new name for Yellow Card in Devon and Cornwall for use by health and social care staff, voluntary sector, and allied health professionals in Devon.

Note: PITCH is designed for generic themes and trends of both good practice and challenges faced within the health and care system.

All submissions are individually reviewed on receipt and appropriate action taken.

PQS 2021-22 THREE Gateway criteria

Just a reminder to qualify for a PQS payment, contractors will have to meet the following **THREE** Gateway criteria on the day of their declaration; detailed information can be found on <https://psnc.org.uk/services-commissioning/pharmacy-quality-scheme/>

New Medicine Service (NMS)

Completion of a minimum of 20 NMS between 1st April 2021 and 5th January 2022. Based on data received from NHSBSA, a considerable proportion of pharmacies are still to achieve this. Claims for NMS submitted after 5th January 2022 will not be considered for PQS gateway **NB this includes catch up NMS.**

Safety report and demonstrable learnings from the CPPE LASA e-learning

There are **TWO** parts for this gateway criterion:

1. a) CPPE LASA e-learning and assessment
2. b) New safety report

Risk review

There are **TWO** parts for this gateway criterion:

1. a) CPPE risk management e-learning and assessment
2. b) risk review

Update - NMS PQS spreadsheet published by PSNC

The NHS Business Services Authority (NHSBSA) has published a spreadsheet showing which community pharmacy contractors have currently met the Pharmacy Quality Scheme (PQS) 2021/22 Advanced Services gateway criterion.

To meet the Advanced Services gateway criterion, contractors are required to have claimed payments for the completion of a minimum of 20 New Medicine Services (NMSs) between 1st April 2021 and 5th January 2022.

NHSBSA has used FP34C month end claims between the period of 1st April 2021 and 5th September 2021 to calculate which contractors have already met the gateway criterion; this spreadsheet will be updated monthly in the lead up to the PQS declaration period.

If contractors are showing as having claimed for 20 or more NMSs (highlighted in green on the spreadsheet) no further action is required to meet the Advanced Services gateway criterion

Further information on the PQS 2021/22 can be found on the [PSNC PQS hub page](#).

[Check the NHSBSA NMS spreadsheet \(scroll down to the 'New Medicine Service \(NMS\) gateway criterion' section to view the spreadsheet\)](#)

Feedback from a PCN pharmacist, for information. Historical prescriptions being downloaded and dispensed accidentally when transferring to a different pharmacy

This is an issue that has been encountered on some occasions where patients have been issued prescriptions several months later when a patient has changed pharmacy. It has led to patients being dispensed medications that they are no longer prescribed.

It is imperative when a new patient changes pharmacy and the first download is completed that prescriptions dated months ago are checked for continuing suitability and have not been downloaded randomly. This is particularly important for high-risk medications.

Three examples where accidental dispensing has occurred.

1. A patient receiving mental health medication given a prescription months later
2. A patient receiving a prescription for diuretic that had been prescribed 4 months ago but had been stopped in hospital due to concerns about dehydration.
3. A prescription dispensed that had been stopped months ago and then interacted with the new medication.

Last but not least!

The December deadline tracker is attached with this newsletter and on the LPC website. This includes details of the Winter Vaccine Campaign that runs until the end of December 2021. You should have received your materials by now, we'd love to see any photos of your in-pharmacy campaigns – you can post these on the [Devon LPC Facebook](#) page. We might even find a box of Christmas chocolates for the best display.

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If you would like us to remove your email address from our database, please email admin@devonlpc.org

