



SERVICES UPDATE

DECEMBER 2022

How to maximise your pharmacy income and ensure your patients are being supported through delivery of nationally and locally commissioned services



Updates

Hypertension case finding service

Early data reports suggest that very few ABPMs are being carried out where a patients' clinic BP results indicate they should be having one – please be aware that the service comprises both clinic BP and ABPM screening (where indicated). You cannot chose to do only the first part!

GP CPCS

GP CPCS is up and running in most areas in Devon. Please make sure you are checking your NHS email at least 3 times a day, and actioining referrals promptly (ideally within 4 hours). Locums absolutely can and should be providing the service - it is a minor illness consultation. Most can be carried out over the phone but the patient can also be invited in if a face to face consultation is necessary. Make sure you are recording the consultation on PharmOutcomes and claiming payment by submitting the MYS claim!

Discharge Medicines Service (DMS)

A reminder that DMS is an essential service - you cannot opt out of providing it. Referrals are sent via PharmOutcomes to your pharmacy from the hospital trust with important discharge information you are required to follow up on. There are three stages to the service - Stage 1) referral is received by the pharmacy, stage 2) The first prescription is received by the pharmacy following discharge, and stage 3) Check of the patients understanding of their medicines regimen. Full service information can be found here:
<https://psnc.org.uk/national-pharmacy-services/essential-services/discharge-medicines-service/>

SERVICE INFORMATION SUMMARY TABLE

LIST OF PHARMACIES
SIGNED UP CAN BE FOUND HERE:
[HTTPS://TINYURL.COM/MRXBgCX4](https://tinyurl.com/MRXBgCX4)

HYPERTENSION CASE FINDING SERVICE

SERVICE INFORMATION

CLICK HERE FOR FULL HCFS
INFORMATION
[HTTPS://TINYURL.COM/MR2NCYM2](https://tinyurl.com/MR2NCYM2)

CLICK HERE FOR
SERVICE SPECIFICATION
[HTTPS://TINYURL.COM/2NYZN28N](https://tinyurl.com/2NYZN28N)

TRAINING REQUIREMENTS

- BE FAMILIAR WITH THE NICE GUIDELINE HYPERTENSION IN ADULTS: DIAGNOSIS AND MANAGEMENT [NG136];
- HAVE READ AND UNDERSTOOD THE OPERATIONAL PROCESSES TO PROVIDE THE SERVICE AS DESCRIBED IN THE SERVICE SPECIFICATION; AND
- HAVE COMPLETED THE RECOMMENDED TRAINING ON HOW TO USE THE BLOOD PRESSURE MONITORING EQUIPMENT WHICH SHOULD BE PROVIDED BY THE EQUIPMENT MANUFACTURER/SUPPLIER.

EQUIPMENT REQUIREMENTS

CONTRACTORS WILL NEED TO PURCHASE OR RENT EQUIPMENT FOR EACH OF THE TWO STAGES OF THE SERVICE - CLINIC BLOOD PRESSURE CHECK AND 24-HOUR ABPM - UNLESS THEY ALREADY HAVE EQUIPMENT WHICH MEETS THE REQUIRED STANDARDS. EQUIPMENT THAT IS TO BE USED IN THE SERVICE MUST BE VALIDATED BY THE BRITISH AND IRISH HYPERTENSION SOCIETY (BIHS), SO CONTRACTORS MUST USE A 'NORMAL' BP METER AND AN ABPM WHICH ARE INCLUDED ON ONE OF THE TWO FOLLOWING BIHS LISTS:

VALIDATED BP MONITORS
FOR HOME USE
[HTTPS://TINYURL.COM/PK77FCT8](https://tinyurl.com/PK77FCT8)

OR

VALIDATED BP MONITORS FOR
SPECIALIST USE
[HTTPS://TINYURL.COM/MR3NB5T9](https://tinyurl.com/MR3NB5T9)

HYPERTENSION CASE FINDING SERVICE

The service has 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

Contractors opting to provide the service must undertake both stages of it, where clinically required, i.e. it is not possible to just undertake clinic BP readings and not ABPM.

The service aims to:

Identify people with high blood pressure aged 40 years or older (who have previously not had a confirmed diagnosis of hypertension), and to refer them to general practice to confirm diagnosis and for appropriate management;

At the request of a general practice, undertake ad hoc clinic and ambulatory blood pressure measurements;
and

Provide another opportunity to promote healthy behaviours to patients.

The following fees have been agreed for the service:

A set-up fee of £440;
A fee for each clinic check of £15; and
A fee for each ambulatory monitoring of £45.