

## **Top Tips Pharmacy First Special**

### **Remember!**

The nationally commissioned Pharmacy First services covers **Urgent repeats** (referral from 111); **Minor illness** (referral from 111 or general practice); seven **Clinical pathways** treatable under PGDs (referral or walk-in) and

### **Which minor illness is included in the service?**

While the service specification does include a list of minor illnesses, identified for referral to a community pharmacist for the Minor illness strand of the service; it is important to note that this list is not exhaustive.

Therefore, if a referral is received for a minor illness that is not included in the list, for example, a verruca, hay fever or chickenpox, this is not a reason to reject the referral and these patients can be seen under the Minor illness strand of the service.

**Patients who are referred for the Clinical pathway strand of the service but do not meet the eligibility criteria should not be rejected; they can instead be seen under the Minor illness strand of the service.**

**Patients with symptoms indicative of a more serious illness and red flags identified should not be rejected.**

If having spoken to the patient, you suspect the patient does not have a minor illness, but instead has a more serious condition/red flags are identified, this is still classed as a Minor illness consultation and should be treated as such, instead of being rejected.

Appropriate action should be agreed with the patient such as the pharmacist arranging an urgent appointment with the patient's GP, GP out of hours provider or a referral to the emergency department/999.

**Patients who are not contactable should not be rejected.**

If a patient is not contactable, then you are not able to claim for a consultation. However, the referral should be closed on the Pharmacy First IT system, noting the reason for this, rather than the referral being rejected.

**There are implications of rejecting appropriate referrals.**

There will be times when it is appropriate to reject a referral, for example, if a GP practice has referred a patient for a medication review, which is not part of the service. However, there are implications of rejecting appropriate referrals, for example:

- GP practices may not review rejection messages on the same day. Therefore, there is a risk that a patient with a serious condition may be missed or even those with minor illnesses are left not being able to see another healthcare professional.
- If you are rejecting referrals which are appropriate for the Pharmacy First service, this may affect the GP practice team's willingness/confidence in future to make referrals for the service.
- You will not be paid for the consultation.

Therefore, it is important to carefully consider whether rejection is the appropriate action to take when you receive a referral.

### **Market service outside of the pharmacy –**

People coming into the pharmacy already know you are there. Target those who don't know who you are and what you can offer.

- Speak to schools.
  - Schools are targeted on their attendance
- Café/playgroups
  - People that are normally fit and well who may not visit their pharmacy regularly
- Opticians
  - One of the four pillars of primary care
- Holiday parks
  - In Devon we have millions of visitors that have no connection to a local GP. If they fall ill, do they know where to do? Please note that Community Pharmacy Devon has delivered flyers and small cards to a number of larger holiday camps in Devon highlighting the availability of the Pharmacy First service.

### **Clinical pathways**

When looking at the UTI and sore throat clinical pathways for example, you don't have to give antibiotics to claim the clinical pathway. Anyone who makes it through the gateway is claimable even if you don't supply antibiotics.

### **Joined up thinking – the golden pathway!**

If you have a patient sat in front of you who fits the specification and has not had their blood pressure checked recently – have the conversation and **take their blood pressure if eligible**.

Still not sure? Have a look at the Community Pharmacy England [resource](#) on when you can claim for Pharmacy First.