Pharmacy First

Streamlining referrals from General Practice to Community Pharmacy

Information for ICBs, General Practice and Community Pharmacy teams

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1. Pharmacy First: transforming pathways

NHS England is significantly improving the digital infrastructure between general practice and community pharmacy to support the implementation of Pharmacy First and the expansion of the Blood Pressure Check Service and Pharmacy Contraception service.

Improve **referrals** to community pharmacy services

(DoS, Profile Manager, nhs.uk, NHS111 online and 111 telephony pathways)

Streamline referrals from general practice to community pharmacy

(Booking and Referral Standard)

Provide registered community pharmacy professionals with appropriate **access to the GP patient record**

(GP Connect Access Record)

Following a community pharmacy consultation, send structured information more **easily and update the GP patient record**

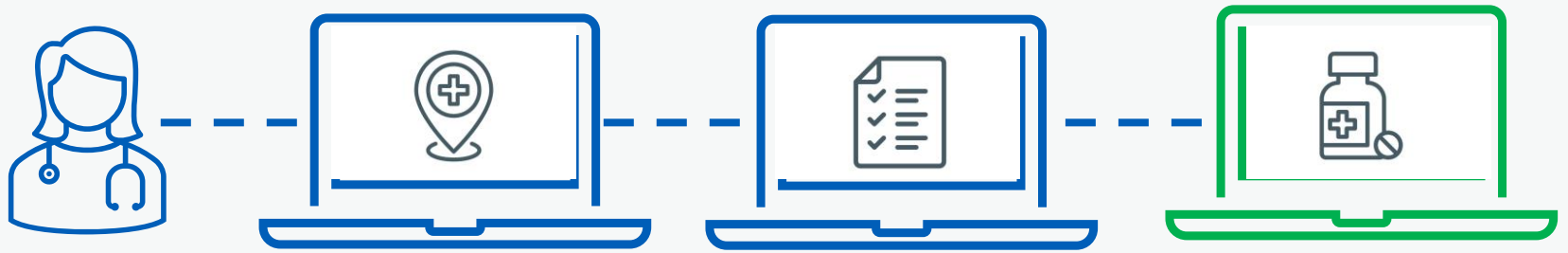
(GP Connect Update Record)

2. Streamlining referrals from general practice to community pharmacy

NHS England is introducing a new standard for interoperability called the Booking and Referral Standard (BaRS). The standard sets out the required information and rules for digitally transferring a referral for a patient between healthcare services.

How will BaRS be used for Pharmacy First?

- Supports general practice referrals to Pharmacy First (minor illness and clinical pathway).
- Standardises and streamlines the way referrals are sent by general practice team and received by community pharmacy.
- Enables joined up digital patient journeys.
- The direction of travel is to expand BaRS to all community pharmacy referrals in the future.



General practice triages patient to Pharmacy First

General practice use Directory of Services to offer the patient a choice of a local pharmacy

General practice refers patient to their chosen community pharmacy

Patient contacts the community pharmacy and is provided with appropriate care

More information: Booking and Referral Standard - NHS England and NHS England's standards roadmap and interoperability priorities

3. Conditions general practice can refer to community pharmacy

Pharmacy First: clinical pathways*	
Condition	**Age range**
Sinusitis	12 years and over
Sore throat	5 years and over
Acute otitis media	1 to 17 years
Infected insect bite	1 year and over
Impetigo	1 year and over
Shingles	18 years and over
Uncomplicated UTI	Women 16 to 64 years

Pharmacy First: minor illness consultations

This is not an exhaustive list, Community pharmacies can receive referrals for anything considered a minor illness.

Acne, spots, and pimples	Allergic reaction	Ankle or foot pain or swelling	Athlete's foot	Bites or stings, insect, or spider	Blisters
Constipation	Cough	Cold and flu	Diarrhoea	Ear discharge or ear wax	Earache
Eye, red or irritable	Eye, sticky or watery	Eyelid problems	Hair loss	Headache	Hearing problems or blocked ear
Hip, thigh, or buttock pain or swelling itch	Knee or lower leg pain	Lower back pain	Lower limb pain or swelling	Mouth ulcers	Nasal congestion
Pain and/or Frequency passing urine	Rectal pain	Scabies	Scratches and grazes	Shoulder pain	Skin, blisters or rash
Sleep difficulties	Sore throat	Teething	Tiredness	Toe pain or swelling	Vaginal discharge
Vaginal itch or soreness	Vomiting	Wound problems – management of dressings	Wrist, hand, or finger pain or swelling		

*** Each Pharmacy First clinical pathway has inclusion & exclusion criteria**

4. Information sent in Referral Standard to community pharmacy

The Referral Standard enables GP IT systems to provide structured referrals into community pharmacy IT systems, using a consistent common dataset to ensure that community pharmacy professionals have information they need.

Referral Standard dataset*

- Person demographics; name, DOB, gender, ethnicity, NHS number, address, preferred contact method, telephone number, email address.
- Legal information, including consent for information sharing
- Presenting complaints or issues, clinical summary – clinical narrative
- Patient's Registered GP details; GP name, practice address and identifier (ODS)
- Date of referral, clinical service referring into, Referrer Organisation Details, contact details of referrer, person referral reference, journey ID, ODS code of where the referral is to be sent.

*Not all data items are mandatory as part of patient referral and therefore referral data received may vary.

Implementation information for general practice teams

5. Pharmacy First referral process

PharmRefer will retire the 'cancel referral' feature that currently exists.

Process unchanged for PharmRefer users – referrals will be received directly into community pharmacy IT systems.

PharmRefer supplier information

Process unchanged for EMIS Web Local Services users – referrals will be received directly into community pharmacy IT systems.

EMIS Web users who do not have the Local Services add-on will continue to use NHSmail to make referrals.

Process unchanged for GP practices using TPP SystmOne to send an NHSmail referral. Practices can continue to use PharmRefer if they have a local licence.

TPP is developing their system to comply with the Referral Standard.

- General practice teams should continue to follow their locally agreed processes: including triage, checking pharmacy opening hours and providing safety-netting advice to patients.

6. Benefits for general practice

Improves patient choice

- General practice use the Directory of Services to offer the patient a choice of a local pharmacy to refer them to.

Improves patient safety

- Improved patient safety – general practice are confident standardised information about patients is sent from GP IT workflows into the chosen community pharmacy IT system.

Improves usability

- Provides consistent, structured information from general practice teams to support community pharmacy to see patients in the Pharmacy First (clinical pathways and minor illness) service.

7. Guidance for general practice

General Practice teams

✓ Compliant IT system suppliers will notify their customers and issue guidance ahead of the Referral Standard being deployed. The suppliers will automatically upgrade their IT systems.

Financial considerations

ICB or general practice commissioners
NHS England is working with EMIS to review the licencing model for EMIS Local Services. If practices use:

- EMIS Local Services to send referrals to community pharmacy, ICB commissioners will need to continue to purchase licences until any changes will come into effect when the new Foundation Solution Framework is launched.
- EMIS PharmRefer to send referrals to community pharmacies, ICB commissioners need to continue to purchase these licences.

Implementation information for community pharmacy teams

8. Managing referrals in community pharmacy

- Referrals sent from general practice via PharmRefer and EMIS Web Local Services will go directly into the same community pharmacy IT systems as NHS111 referrals.
- Community pharmacists will receive structured information to support the patient consultation, reducing the need for the patient to repeat information.
- Community pharmacies will need to continue to check their NHSmail as other referrals will continue to arrive via NHSmail.
- NHSmail is the business continuity solution if there is an IT system issue with BaRS.

POSITIVE SOLUTIONS

Hx Consult

NEW

General practice referrals from PharmRefer and EMIS Web Local Services will arrive into your clinical community pharmacy IT system

cegedim Healthcare Solutions

NEW

General practice referrals from PharmRefer and EMIS Web Local Services will arrive into your clinical community pharmacy IT system

PharmOutcomes®

General practice referrals from PharmRefer and EMIS Web Local Services already arrive in the community pharmacy IT system

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IT Solutions for Health Professionals

NEW

General practice referrals from PharmRefer and EMIS Web Local Services will arrive into your clinical community pharmacy IT system

9. Benefits for community pharmacy

Community pharmacy teams will receive Pharmacy First clinical pathways and minor illness referrals from general practice directly into assured Pharmacy First IT systems.

Community pharmacy referrals for Pharmacy First, NHS 111, Urgent Repeat Medications and GP referrals will all arrive in the same IT system.

Saves administrative time – reducing burden

- Improve patient safety – reducing human error when transferring patient information from NHSmail referrals into community pharmacy clinical system.
- Referral information appears in assured Pharmacy First IT system workflow, no need to copy and paste from NHSmail.
- Increase visibility – reduced likelihood of referrals being missed.

Improves patient experience

- Provides consistent, structured information pharmacy teams need to see patients who attend for a Pharmacy First (clinical pathways and minor illness) consultation.
- Reduces the need for patients to repeat information.

10. Guidance for community pharmacy

Community Pharmacy teams

- ✓ Compliant IT system suppliers will notify their customers and issue guidance ahead of the Referral Standard being deployed. The suppliers will automatically upgrade their IT systems.
- ✓ Community Pharmacies have to choose one IT system to receive referrals from NHS111 and general practice and should follow the switching process (see slide 12 for more information).
- ✓ Refer to IT system supplier information and supplier staff to understand how to use the IT system.
- ✓ Update local processes to manage in workflow and NHSmail referrals.
- ✓ Referrer organisation name and ODS will be provided in referral however in some cases this may not be the same as the patient's registered GP. As part of the consultation record, the Pharmacist must complete a PDS check within the pharmacy system to confirm the registered GP details to ensure the post event notification is sent to the right place.
- ✓ Continue to check NHSmail for other referrals.

Financial considerations

Some community pharmacies use more than one clinical system – for example one for referrals and one for walk-ins. The adoption of BaRS supports the direction of travel towards only needing one system in Pharmacy First Community Pharmacies to manage and support clinical services.

If you have any queries, please speak to your IT systems supplier.

11. Directory of Services

Maintaining an up-to-date Directory of Services (DoS) profile is important for community pharmacies use DoS to present the patient with a list of local pharmacies to maximise patient choice.

Community pharmacy teams should check the DoS information on their profile within Profile Manager to ensure all demographic details are correct.

Community pharmacies should follow local SOPs and continue to check their mailboxes regularly for referrals sent via NHSmail from general practice that do not use EMIS Web Local Services or PharmRefer.

NHSmail remains the back-up option for all referrals.

Pharmacies should use Profile Manager to make changes to their full pharmacy service offer such as early closures.

If a pharmacy needs to make an urgent change for Pharmacy First for example, unable to provide the service due to a Smart Card access issue, they should call the DoS helpline on 0300 0200 363 to enable a change to just those referral routes.

SystmOne

TPP SystmOne users currently do not have a referral function in the GPIT system - users send referrals using NHSmail. TPP SystmOne practices will use NHS Service Finder tool to return a list of local Pharmacy First pharmacies and contact details. A list of pharmacies is also available in the SystmOne organisation directory.

12. Supplier switching processes

Community pharmacy referrals for Pharmacy First, NHS 111, Urgent Repeat Medications and GP referrals will all arrive in the same IT system.

If a community pharmacy wants to change which pharmacy IT system they use, they need to contact the system supplier they wish to use. The system supplier will start the onboarding process which includes submitting a change request to the DoS team to amend the Directory of Services - this can take up to 10 working days to action. The switch takes place on an agreed date, the new supplier will advise when the old system is switched off.

1

Community pharmacy notify their IT system supplier they wish to use as their system for NHS 111 and general practice referrals.

Pharmacies will continue to receive referrals through their existing system until the "switch" is complete.

2

System supplier will update the 'Switch List' with the ODS code of the community pharmacy, with a proposed switch date. DoS action the ‘Switch List’ three times a week.

3

DoS and BaRS teams will review the Switch Log and action the switch on the proposed switch date*.

*Switches are subject to all criteria for the pharmacy being met for example NHS Shared email address and registered for Pharmacy First.

13. Process for managing live service issues

Any issues should be reported by the user (general practice or pharmacy contractor) directly to their system supplier. System suppliers will:

1. Support a local resolution
2. Fix the issue themselves in their back office, and if needed
3. Escalate to NHS England Live Service Desk using agreed and well tested protocols

Standard way of reporting live service issues to NHSE via suppliers that:

- Ensures fast, responsive support
- Provides regular updates for high impact issues
- Enables NHS England to triage the issue and provide the right level of expertise
- Suppliers understand and use regularly
- Has 24/7/365 cover

ICBs and regions with their own IT support hub should follow local procedures, with escalations being to system suppliers.

Thank You

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