HWE Pharmacy First Tool Kit

Hertfordshire and West Essex Integrated Care System

NHS Hertfordshire and West Essex Integrated Care Board

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Background

Background

NHS Pharmacy First Service Overview

The NHS Pharmacy First Service builds upon the existing Community Pharmacist Consultation Service (CPCS), which has been operational since October 2019 effectively ended on the official launch of the Pharmacy First Service. The service was first announced as an essential part of the Primary Care Access and Recovery Plan in May 2023, and included a commitment to community pharmacies and one of the key elements of this commitment was strengthening the role of pharmacies in primary Care.

The NHS Pharmacy First Service which is a new community pharmacy advanced service launched on the 31st of January 2024 empowering pharmacists to assess and treat seven common conditions previously requiring GP visits in addition to the minor ailment referral, and urgent repeat medicines supply previously known as Community pharmacy consultation service (CPCS). This service aims to free up GP time, provide faster patient care closer to home, and reduce the pressure on the NHS by effectively managing minor illnesses in community pharmacies.

Enhanced Access:

The primary objective is to provide patients with quicker and more convenient access to healthcare services directly from their local pharmacy. By offering advice and NHS-funded treatment for common health conditions, these minor health issues are addressed promptly and prevented from worsening. The full Pharmacy First service is made of three elements below:

1. Pharmacy First- Clinical Pathways:

The Pharmacy First service includes seven new clinical pathways that enable pharmacists to manage specific health conditions. These pathways cover common issues such as sore throat, earache, sinusitis, and urinary tract infections. Please see the seven clinical pathways below in a separate section.

2. Pharmacy First- Urgent Repeat Medicine Supply:

Community pharmacies will continue to provide urgent repeat medicine supply to patients, through Urgent Care Centres and NHS 111 settings and other emergency care settings where patients are referred to community pharmacies for a supply of urgent repeat medicine. Note that general practices cannot refer into this element of pharmacy First.

3. Pharmacy First- NHS Referrals for Minor ailments:

Patients can be referred from various settings (general practice, urgent and emergency care, NHS 111) to community pharmacies for minor ailments consultations. Pharmacists will assess the patient, offer self-care advice, recommend appropriate treatments following robust clinical pathways, or refer to another setting or service if needed.

The New Clinical Pathways

The New Clinical Pathways

The seven common conditions on the clinical pathways' element of pharmacy First service are:

Sore Throat

Sinusitis

Earache

Infected Insect Bites

Impetigo

Uncomplicated UTIs in women

Shingles

Information on the clinical pathways, including who can access, the inclusion/exclusion criteria have all been clearly set out in **patient group directions (PGDs)** to support the decision making for community pharmacists.

Patients can only self-refer into pharmacy service through the seven clinical pathways and general practices can also refer patients to pharmacies for conditions on the clinical pathways in addition to the minor ailment referral process of the pharmacy first service.

Referral Process and Patient Journey through Pharmacy First Service

Referral Process and Patient Journey through Pharmacy First Service

A detailed patient journey and referral process has been written and included in the NHS Pharmacy First Service specification. **See an outline**.

General practices should refer patients to pharmacies using either an integrated GP electronic referral system or NHS mail. Community Pharmacies will send the outcome of the consultation via the referral routes according to locally agreed communication feedback processes.

Resource List for General Practice

Resource List for General Practice

Below you will find resources that can be used to support the implementation of Pharmacy First in general practice:

Downloadable copy can be found here

Annex 1

Seven Clinical Pathways poster

Seven Clinical Pathways poster

Practice staff poster detailing the 7 clinical conditions that can be treated under Pharmacy First, including appropriate age ranges.

Downloadable poster can be found here

Annex 2

Pharmacy First Decision Aid

Pharmacy First Decision Aid

Simplified printable poster for GP reception teams detailing inclusion and exclusion criteria for Pharmacy First clinical pathways.

Downloadable version can be found here

Annex 3

Escalation process for Pharmacy First issues

Escalation process for Pharmacy First issues

There are likely to be issues in setting up new services. We suggest that the first two steps in the escalation process be followed to assist if there are any issues with Pharmacy First referrals. Should the first two steps recommended fail to resolve the issue please use the Microsoft form included in the report repeated issues to the ICB (Integrated Care Board).

Downloadable version can be found here

To access feedback form to provide a comment or escalate and issue here

Pharmacy First Summary for GP Teams

Pharmacy First Summary for GP Teams

HWE ICB Community Pharmacy Integration team have produced a **Pharmacy First Summary** aimed at GP reception teams and care navigators. This can be used to support training.

Downloadable version can be found here

Campaign Resource Centre (dhsc.gov.uk)

Campaign Resource Centre

Patient Facing Promotional Materials – Produced by Department of Health and Social Care-NHS England. The Department of Health and Social Care (DHSC) are planning a significant communications campaign for Pharmacy First. Media assets will be available via the DHSC Campaigns resources website. You may need to register to access the resource.

Read more

Pharmacy First Service Specification

Pharmacy First Service Specification

Links to service specification, clinical pathways and patient group directions that support this service.

Downloadable version here

Annex Documents

Annex: 1 Pharmacy First Best Practice Checklist – Primary Care

Pharmacy First Best Practice Checklist – Primary Care

Best Practice Checklist for Community Pharmacy Teams	
Investing time in building relationships with the local practices – regular review meetings	
Spending time with general practice teams to support training of reception teams on appropriate referrals	
Understanding the priorities of your practices and aligning community-based pharmacy services e.g. Pharmacy First will support GP access	
Discussing the expected number of daily referrals from your practice	
Agreeing a timeframe in which patients should expect contact from the Pharmacist/will the patient walk in, what is the cut off for same day consultations?	
Agreeing escalation pathway to GP for patients that require higher acuity care – Urgent and non-urgent	
Regular checking NHS Mail or PharmOutcomes for referrals	
Ensuring locums are able to deliver the service	
Using the wider pharmacy team to support the process and locums	
Regular communication with practices to discuss service provision and opportunities to improve from both sides	
Sufficient information is provided to the practice relating to referrals back e.g. a referral back form	
Resolving issues directly with practices	
Pharmacy First is part of the pharmacy's Model Day processes	
Undertaking CPD in areas of less confidence	
Developing Pharmacy First Business Continuity Plan – notification of DoS and local practices	
Linking Pharmacy First to other local services where appropriate	

Annex: 2 The 7 new clinical pathways that can be referred to Pharmacy First?

What are the 7 new clinical pathways that can be referred to as Pharmacy First?

Clinical Pathway	Age range
Uncomplicated UTI	Women 16-64 years
Shingles	18 years and over
Impetigo	1 year and over
Infected Insect Bites	1 year and over
Sinusitis	12 years and over
Sore Throat	5 years and over
Acute Otitis Media	1 to 17 years

Annex: 3 Pharmacy First Decision Aid

Decision aid for Pharmacy First Referrals. DISCLAIMER: This document is for GP Practice and Community Pharmacy use only.

***Those conditions identified in bold are part of the seven clinical pathway consultations where pharmacists can use Patient Group Directions to offer treatment to patients that meet the inclusion criteria.**

NEVER SUITABLE FOR PHARMACY REFERRAL	Age under 1 year	Pregnant and also aged under 16	Severe symptoms /illness	Shortness of breath AND/OR chest pain	Severely immunosuppressed

CONDITIONS	Conditions SUITABLE for referral to pharmacists		DO NOT REFER in these circumstances (for a full list of exclusions see Pharmacy first patient group directions)	
BITES/STINGS	Insect bites and stings *e.g. Bee sting and Wasp sting* **Infected insect bites (Pharmacy First clinical pathway)***		- Severe pain or significant fluid or pus in wound - Signs of allergic reaction or anaphylaxis	- Stings in mouth/throat where there is risk of airway obstruction or near eye - Bites or stings caused by animals, humans, ticks, unusual or exotic insects or bite or sting from outside of the UK - Fever or drowsiness
COLDS	Cold sores Coughs	Flu-like symptoms Sore throat (see MOUTH section)	- Lasted more 3+ weeks	- Unable to swallow
CONGESTION	Blocked or runny nose Hayfever	Constant need to clear throat Excess mucus **Acute Sinusitis (12 years and over) (Pharmacy First clinical pathway)***	- Hayfever with wheeze Facial swelling	- Chronic **sinusitis** (causes symptoms that last more than 12 weeks)
EAR	Earache Ear Wax Blocked Ear **Acute Otitis Media (AOM) (aged 1 to 17 years) (Pharmacy First clinical pathway)***		- Requests for ear syringing - Recurrent **AOM** (3 or more episodes in 6 months or 4 or more episodes in 12 months) - Patients with a temperature >39 °C	-Deafness - Vertigo - Something in the ear canal
EYE	Conjunctivitis Dry/sore tired eyes Irritable/itchy eye	Sticky eye Eyelid problems Watery/runny eyes	- Severe pain - Pain 1 side only - Uneven pupils	- Light sensitivity - Reduced vision - Trauma/chemical injury - Has long-term eye condition
GASTRIC/ BOWEL	Constipation Diarrhoea (adults only, less than 72 hours) Heartburn Vomiting or nausea	Indigestion Haemorrhoids Rectal pain	- Severe/on-going - Lasted +2 weeks - Recent hospital treatment	- Patient over 55 years - Blood - Unintentional weight loss
GYNAE	Cystitis (mild; females only; less than 3 days) Thrush (females only) **Urinary Tract Infection (UTI) (females aged 16 – 64 years) (Pharmacy First clinical pathway)***	Vaginal itch or soreness Vaginal discharge	- Male - Diabetic - Pregnant - Thrush: Under 16 / over 60 - Unexplained bleeding/blood in urine - Pain in the side - Recurrent thrush (2 episodes in last 6 months) - Fever, nausea/vomiting, kidney pain or immunosuppressed.	**UTI** - Recurrent **UTI** (2 episodes in last 6 months, or 3 episodes in last 12 months) - Urinary catheter - Antibiotics for UTI in the last 3 months - Under 16/ 65 or over
PAIN	Acute pain Ankle or foot pain Headache Hip pain Knee or leg pain Lower back or limb pain	Migraine (infrequent) Shoulder pain Sprains and strains Thigh or buttock pain Wrist, hand or finger pain	- Pain radiating into the shoulder - Conditions described as severe or urgent - Multiple joint pain	- Sudden onset - Headache with stiff neck/light sensitivity/scalp is sensitive - Condition ongoing for 3+weeks
SKIN	Acne, spots and pimples Athletes foot Blisters on foot Dermatitis Dry skin Hair loss Nappy rash **Shingles (18 years and over) (Pharmacy First clinical pathway)*** **Impetigo (Pharmacy First clinical pathway)***	Oral thrush Rash-allergy Ringworm Threadworm Scabies Skin dressing advice Skin rash Warts/Verrucae Wound problems	- Conditions described as severe or urgent - Conditions that have been ongoing for 3+ weeks - Diabetes unless suspected impetigo/shingles - **Shingles** – Rash affecting eye and patients that are pregnant	- Bullous **impetigo** (boils), recurrent impetigo (defined as 2 or more episodes in the same year) - **Impetigo** – Patients who are immunosuppressed - Meningitis symptoms: Neck stiffness/light sensitivity/mottled skin
MOUTH / THROAT	Cold sore blisters Flu-like symptoms Mouth ulcers **Acute Sore Throat (5 years and over) (Pharmacy First clinical pathway)***	Sore mouth / throat Oral thrush Teething Toothache	- Lasted + 10 days - Swollen painful gums - Sores inside mouth - **Acute sore throat** –Those who are immunosuppressed.	- Unable to swallow - Voice change

Annex 3 continued…

NHS Pharmacy First – 7 Clinical Pathways

Please note these are the main exclusions. Each pathway has additional specific clinical exclusions here which will be considered by the Community Pharmacist during consultation.

Urinary tract infection	Shingles	Impetigo	Infected insect bites	Acute sore throat	Acute Sinusitis	Acute otitis media
A UTI is an infection in any part of the urinary system.	Shingles is an infection that causes a painful rash.	Impetigo is a common infection of the skin. It is contagious, which means it can be transmitted by touch.	Insect bites and stings can become infected or cause a reaction.	Sore throat is a symptom resulting from inflammation of the upper respiratory tract.	Sinusitis is swelling of the sinuses, usually caused by an infection. The sinuses are small, empty spaces behind your cheekbones and forehead that connect to the inside of the nose.	An infection of the middle ear.
Inclusion: • Female • Aged between 16 – 64. • Suspected lower UTI.	**Inclusion:** • 18 years and over. • Suspected case of shingles. • Rash appeared within the last 72 hours – 7 days.	**Inclusion:** • 1 year and over. • Signs and symptoms of impetigo. • Localised (4 or fewer lesions / clusters present).	**Inclusion:** • 1 year and over. • Infection that is present or worsening at least 48 hours after initial bite(s) or sting(s).	**Inclusion:** • 5 years and over. • Suspected sore throat.	**Inclusion:** • 12 years and over. • Suspected signs and symptoms of sinusitis. • Symptom duration of 10 days or more.	**Inclusion:** • Aged between 1 – 17. • Suspected signs and symptoms of acute otitis media.
Exclusion: • Male • <16 or >64 • Pregnant • Breastfeeding • Recurrent UTI (2 in last 6 months or 3 in last 12 months. • Catheter	**Exclusion:** • <underage of 18 • Pregnant or suspected pregnancy. • Breastfeeding with shingle sores on breasts. • Shingles rash onset over 7 days ago.	**Exclusion:** • <under 1 year of age. • Pregnancy or suspected pregnancy in individuals under 16 years of age. • Breast feeding with impetigo lesion(s) present on breast. • Recurrent impetigo (2 or more episodes in the same year). • Widespread lesions / clusters present. • Systematically unwell.	**Exclusion:** • <under 1 year of age. • Pregnancy or suspected pregnancy in individuals under 16 years of age. • Systematically unwell. • Bite or sting occurred while travelling outside the UK.	**Exclusion:** • Individuals under 5 years of age. • Pregnancy or suspected pregnancy in individuals under 16 years of age. • Recurrent sore throat / tonsilitis (7 or more significant episodes in the preceding 12 months or 5+ in each of the preceding 2 years, or 3+ in the preceding three years). • Previous tonsillectomy.	**Exclusion:** • Individuals under 12 years of age. • Pregnancy or suspected pregnancy in individuals under 16 years of age. • Symptom duration of less than 10 days. • Recurrent sinusitis (4 or more annual episodes of sinusitis).	**Exclusion:** • Individuals under 1 year of age or over 18 years of age. • Pregnancy or suspected pregnancy in individuals under 16 years of age. • Recurrent infection (3+ episodes in preceding 6 months, or 4+ episodes in the preceding 12 months with at least one episode in the past 6 months).

Additional Resources:

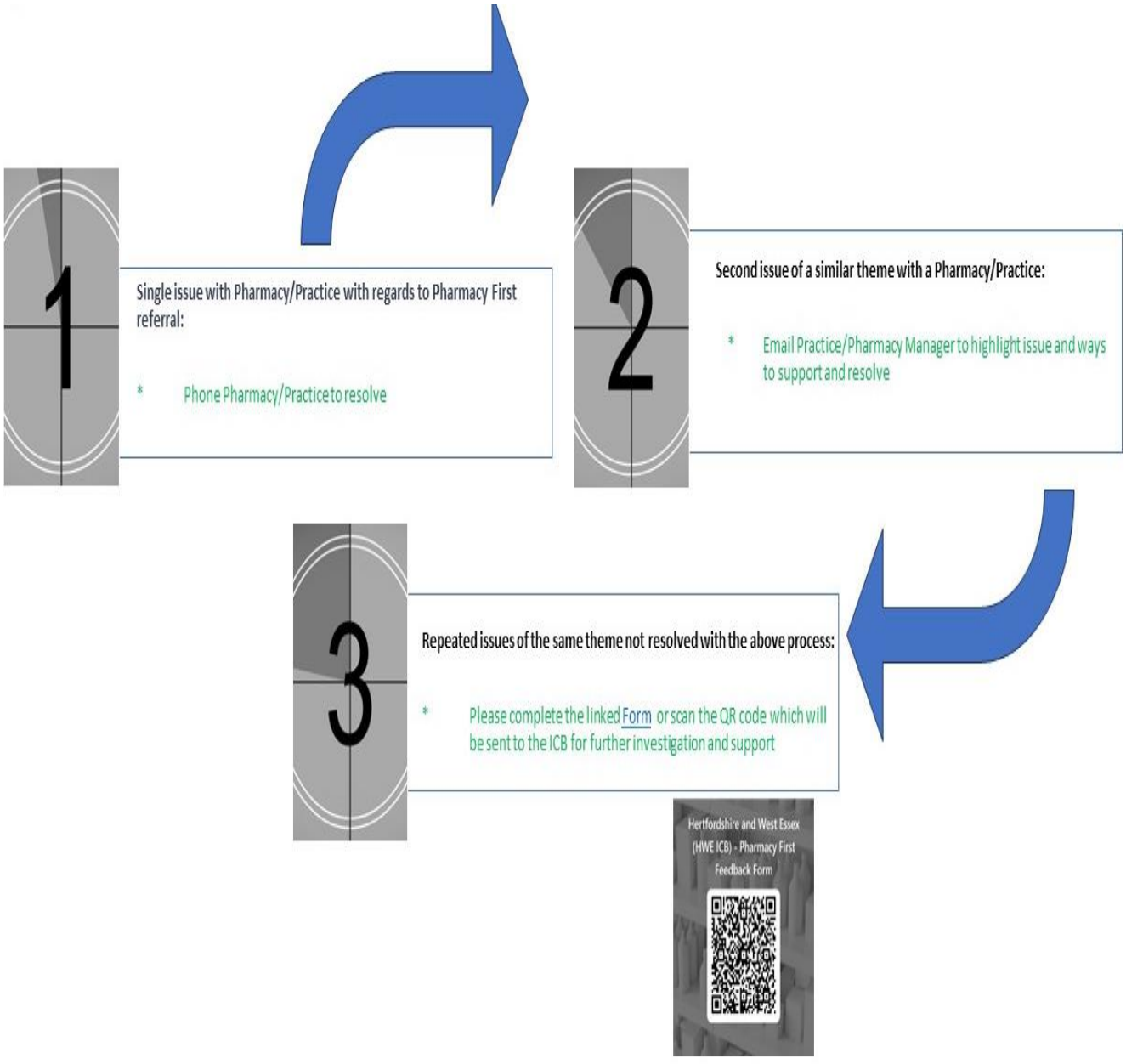
UTI:	Shingles:	Impetigo:	Infected Insect Bites / Stings:	Acute Sore Throat:	Acute Sinusitis:	Acute Otitis Media:
NHS: Urinary tract infections (UTIs)	BAD Org UK: Shingles	NHS: Impetigo	NHS: Insect bites and stings	CKS NICE: Acute sore throat	CKS NICE: Acute sinusitis	CKS NICE: Acute Otitis Media
RCGP e-Learning: UTIs	NHS: Shingles					

NHS England Pharmacy First 7 Clinical Pathways PDF

Resources for the community pharmacy setting: TARGET Antibiotic checklist | RCGP Learning

Frequently Asked Questions About Shingles - Shingles Support Society

Recommended Pathway for HWE Resolving NHS Pharmacy First Service Issues/Incidents



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