




# General Practice referral to CPCS

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**Advanced Service  
Specification - NHS  
Community Pharmacist  
Consultation Service**

NHS England and NHS Improvement





# GP referral into CPCS – what we will cover

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What is GP referral into CPCS & what is the difference between this and the NHS111 CPCS?

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How does the referral process work?

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What you need to do to claim your £300 set up fee for GP CPCS?

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Training available

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Funding

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Keys to success – hints & tips

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Support & help!

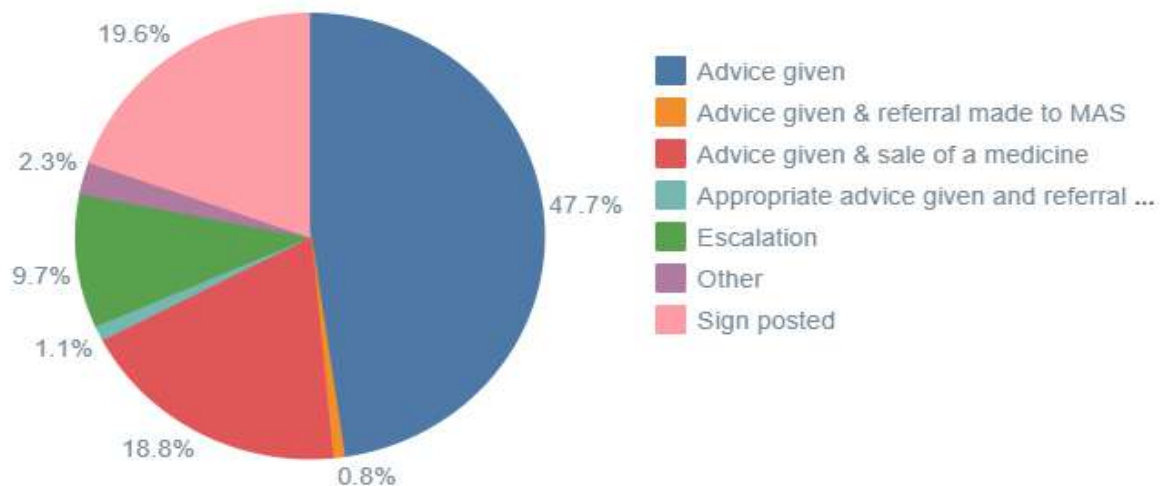
# What is GP referral into CPCS?

- <https://psnc.org.uk/our-news/psnc-launches-gp-cpcs-animation/>
- CPCS launched in October 2019 and is now well established for managing referrals for minor illnesses for NHS 111
- A number of pilots across the country involving referrals from General Practice have been in operation over last 12+ months
- GP referral into CPCS became part of the national service on 1<sup>st</sup> November 2020
- In principle GP referral to CPCS is no different to CPCS
- 'Soft launch' & phased implementation supported by NHSE&I
- No sign up required if already delivering CPCS

# Referrals from NHS111 – Minor Illnesses

## CPCS Dashboard Minor Illnesses

### Referrals by Outcome



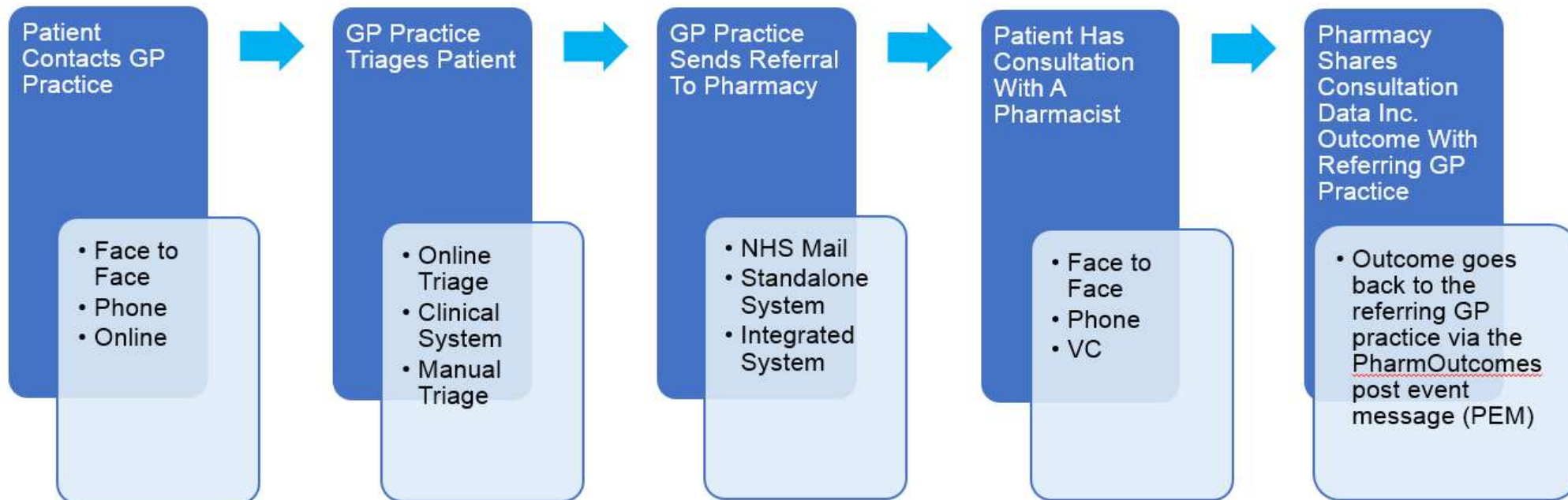
### Top 10 Symptom Groups



# How does the referral process work?



## General Practice Referral to Community Pharmacist Consultation Service (CPCS) Referral Journey





# Minor illnesses – NHS Conditions sheet

NHS Community Pharmacist Consultation Service (CPCS)

Service suitability

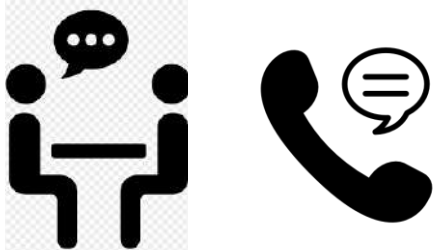
The service is only for patients aged over 1 year.



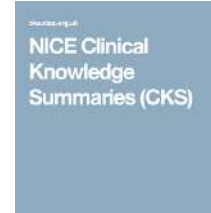
CONDITIONS	What conditions are SUITABLE for referral to pharmacists?			Do NOT refer in these circumstances	
BITES / STINGS	•Bee sting •Wasp sting	•Stings with minor redness	•Stings with minor swelling	•Drowsy / fever •Fast heart rate	•Severe swellings or cramps
COLDS	•Cold sores •Coughs	•Flu-like symptoms	•Sore throat	•Lasted +3 weeks •Shortness of breath	•Chest pain •Unable to swallow
CONGESTION	•Blocked or runny nose	•Constant need to clear their throat	•Excess mucus •Hay fever	•Lasted +3 weeks •Shortness of breath	•1 side obstruction •Facial swelling
EAR	•Earache	•Ear wax •Blocked ear	•Hearing problems	•Something may be in the ear canal •Discharge	•Severe pain. •Deafness •Vertigo
EYE	•Conjunctivitis •Dry/sore tired eyes •Eye, red or irritable	•Eye, sticky •Eyelid problems	•Watery / runny eyes	•Severe pain •Pain 1 side only	•Light sensitivity •Reduced vision
GASTRIC / BOWEL	•Constipation •Diarrhoea •Infant colic	•Heartburn •Indigestion	•Haemorrhoids •Rectal pain, •Vomiting or nausea	•Severe / on-going •Lasted +6 weeks	•Patient +55 years •Blood / Weight loss
GENERAL	•Hay fever	•Sleep difficulties	•Tiredness	•Severe / on-going	
GYNAE / THRUSH	•Cystitis •Vaginal discharge	•Vaginal itch or soreness		•Diabetic / Pregnant •Under 16 / over 60 •Unexplained bleeding	•Pharmacy treatment not worked •Had thrush 2x in last 6 months
PAIN	•Acute pain •Ankle or foot pain •Headache •Hip pain or swelling •Knee or leg pain	•Lower back pain •Lower limb pain •Migraine •Shoulder pain	•Sprains and strains •Thigh or buttock pain •Wrist, hand or finger pain	•Condition described as severe or urgent •Conditions have been on-going for +3 weeks	•Chest pain / pain radiating into the shoulder •Pharmacy treatment not worked •Sudden onset
SKIN	•Acne, spots and pimples •Athlete's foot •Blisters on foot •Dermatitis / dry skin •Hair loss	•Hay fever •Nappy rash •Oral thrush •Rash - allergy •Ringworm/threadworm	•Scabies •Skin dressings •Skin rash •Warts/verrucae •Wound problems	•Condition described as severe or urgent •Conditions have been on-going for +3 weeks	•Pharmacy treatment not worked •Skin lesions / blisters with discharge •Diabetes related?
MOUTH / THROAT	•Cold sore blisters •Flu-like symptoms •Hoarseness	•Mouth ulcers •Sore mouth •Sore throat	•Oral thrush •Teething •Toothache	•Lasted +10 days •Swollen painful gums •Sores inside mouth	•Unable to swallow •Patient has poor immune system •Voice change
SWELLING	•Ankle or foot swelling •Lower limb swelling	•Thigh or buttock swelling •Toe pain or swelling	•Wrist, hand or finger swelling	•Condition described as severe or urgent •Condition ongoing for +3 weeks	•Discolouration to skin •Pharmacy treatment not worked •Recent travel abroad

# The Patient / Pharmacist Consultation

## The Consultation



Structured consultation  
Information recorded on  
PharmOutcomes



Clinical assessment  
using SCR (with patient  
consent) & NICE CKS

## The Outcome



ESCALATION

Red flags &/or urgent will  
require escalation, usually  
back to GP practice or  
NHS111 / A&E (10% of  
cases in pilot)



Advice Only (verbal,  
printed, links or  
websites, self care,  
homely remedies) (40%  
of consultations in pilot)



Advice & OTC  
product  
purchase  
recommended



Community Pharmacy  
Extended Care Service (Tier1)  
(Midlands Region)

Advice & Referral  
to Extended Care  
Service



Advice & signpost to  
another healthcare  
professional



**Advice if  
symptoms get  
worse or no better  
after X days**

# Local Protocols



- The local implementation team will agree a number of local arrangements before a GP practice 'goes live'
  - The referral method used by the GP practice
  - Once the referral is received by the pharmacy, how the pharmacy & patient conduct the initial intervention & response time
  - Method of escalating patients back to GP practice
  - Delivering patient messages re OTC purchase resistance
  - Incident reporting
- Local protocols will be communicated to you before your GP practice goes live

***Success of the service relies on robust & timely patient-pharmacy-GP practice communication***



# Claiming £300 set up fee

- Claims can be made from 1 November 2020 until 31 March 2021 through the MYS portal.
- Requires completion of engagement activity as listed in Annex F of the NHS CPCS service specification
  - Participate in discussion with a delivery partner / LPC to explore how to promote local uptake
  - Participate in a pharmacy briefing meeting on the referral process
  - Pharmacy team have read local briefing materials
  - Develop an action plan for implementation & update SOP
  - Pharmacy team have read & understood the updated service spec & toolkit



## Advanced Service Specification - NHS Community Pharmacist Consultation Service

NHS England and NHS Improvement

### Annex F – GP referral pathway engagement activity

The initial engagement of Primary Care Networks (PCNs) and general practices on the rollout of GP referrals to the CPCS will often be facilitated by a range of 'delivery partners', including 'Time for Care' in some PCNs and regionally identified implementation leads in other areas, eg. CCG medicines optimisation teams, NHSE&I project leads and LPCs.

For contractors<sup>6</sup> to be able to claim the engagement and setup payment, the following activity will need to be completed by 31st March 2021 and documented so it can be evidenced at a later date:

- The contractor has participated in discussions with a delivery partner/LPC lead to explore how they might promote uptake of CPCS locally. This could include early exploration of options, through to discussing the planning process for rollout of the referral pathway.
- The contractor has participated in meetings, which may be web-based and organised by others, to brief pharmacies and potentially general practices on the referral process which will be implemented, including how pharmacies will be involved in the pathway. Where a contractor has no representative available to attend a meeting at the time set, they should instead seek a briefing from the delivery partner/LPC lead on the matters discussed to ensure that they remain fully engaged with local plans.
- The contractor must ensure that relevant members of the pharmacy team have read and understood any briefing materials prepared locally by the PCN or delivery partners on the referral pathway and any rollout plans, to ensure the relevant details are understood.
- The contractor should create an action plan for implementing the new referral pathway in the pharmacy, including ensuring their NHS CPCS standard operating procedure is updated to include the GP referral pathway and the associated record keeping and data capture requirements.
- The contractor must ensure that relevant members of the pharmacy team are fully briefed and have read and understood information within the updated NHS CPCS service specification and associated toolkit which is pertinent to their role.

<sup>6</sup> Contractors who participated in the GP CPCS referrals pilot will also be eligible to claim the engagement and setup payment. Some of the activity may already have been undertaken for the purposes of the pilot and so there will be no requirement to repeat this.

# Training

## CPCS training from RPS & RCGP

### CPCS is coming

GPs will soon be referring patients to you for diagnosis and treatment recommendations as part of the Community Pharmacist Consultation Service (CPCS).

It's a big step up in responsibility for pharmacists and pharmacy.

### Are you ready?

Don't worry, because from October 2020 we're running free CPCS workshops for community pharmacists across England.

[Find a session to suit you](#)

Run with the Royal College of General Practitioners, you'll be shown exactly how to manage those new referrals, practicing real-life situations with GPs and other healthcare professionals.

Sorry, to all those in Pre-Reg - these sessions are only open to fully qualified pharmacists, but we'll be running sessions until October 2021, so come and join us once you qualify!

### Convenient times

Choose to attend during the day or in the evening. Our best sessions go further than any other provider.

You'll be:

- taught the skills you need
- practicing new skills during the session
- getting instant feedback from GPs and other professionals.

[Find a session to suit you](#)

PLEASE REMEMBER: We're using pharmacists' contact details for our CPCS sessions only.



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## NHS Community Pharmacist Consultation Service

### Introduction



Introduction to the NHS Community Pharmacist Consultation Service

### Self-assessment framework



NHS CPCS self-assessment framework

### Book a workshop



Consultation skills: introducing a person-centred approach - online

NHS Community Pharmacist Consultation Service essential skills online workshops

### Core and foundation learning



Urgent care: the role of the community pharmacy and the NHS CPCS scheme

This resource is not currently available to you, click for more information.



Consultation skills: what good practice looks like



Common clinical conditions and minor ailments



Patient-centred consultations: video

Core and foundation learning - continued

Live chat



## GP - Community Pharmacist Consultation Service

## Pharmacy Team Training

LIVE EVENT  
TECH SUPPORT



# Funding

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£300 set up fee

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£14 per intervention

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Claimed via MYS automatically at month end via PharmOutcomes

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Opportunity to earn additional income from PGD services if appropriate

## From the Service Spec ...

*For low acuity/minor illness, a referral is completed when the pharmacist has a consultation with the patient (remotely or face-to-face) and the patient is given selfcare advice, the patient purchases an OTC item, the patient is referred to a Minor Ailments Scheme locally (where one exists), is referred to an appropriate prescriber, or the pharmacist makes the decision that the presenting condition is not minor in nature and the patient is referred in to higher acuity services*

# Hints & Tips for a successful service

## Preparation



Build relationships with your local practices NOW



Develop your team action plan in readiness of your GP practices going live



Complete any personal development & team training, **remember Locums!**



Complete Annex F actions (incl developing your action plan & updating your SOP)& claim your £300 set up fee

## Go Live

### Protocol

**Read & understand your local protocols & discuss with your team**

### KEY CONTACTS

Know who your key contacts are – GP practice, LPC, PCN etc & ensure Annex C up to date



Regularly check NHS mail / PharmOutcomes for referrals



Contact the patient within the timeframe agreed in the local protocol & ensure patient is clear on next steps



Refer any incidents promptly & work with stakeholders to resolve quickly

**Ensure the service can be delivered consistently across 100% of your opening hours**

# Support & help!

- LPC Office
  - [ahwlpc@gmail.com](mailto:ahwlpc@gmail.com)
  - [fionalowe@nhs.net](mailto:fionalowe@nhs.net)
  - Mobile 07792970382
  - LPC websites (see slide 2)
- PCN Pharmacists & PCN Leads
- NHSEi
  - [Midlands.pctransformation@nhs.net](mailto:Midlands.pctransformation@nhs.net)
- Websites
  - PSNC
  - RPS
  - LPC
  - NHS Futures
  - NHSBSA
  - PharmOutcomes
  - CPPE