



NHS Pharmacy First Scotland Service

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Overview

- ❖ **The Scottish Community Pharmacy Network**
- ❖ **A Brief History of Pharmacy in Scotland**
- ❖ **NHS Pharmacy First Scotland (PFS) Service**
- ❖ **NHS Pharmacy First Plus Service**
- ❖ **What Does The Future Look Like?**
- ❖ **Questions & Close**





The Scottish Community Pharmacy Network



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Scottish Community Pharmacy Network



- 1244 Independently owned or CCA (Large chains)
 - Size, business mix and hours of premises vary widely
 - Distribution aligned to population density and need for services
 - Control of Entry is regulated
- We are exactly where we need to be in communities



Key Objectives for Community Pharmacy Network to Meet

- **Deliver quality, person centred services for patients and carers**
- **Provide better access/equality of access to care**
- **Improve the public's health**
- **Funding linked to services**



Pharmacy Teams

- **No two teams the same**
- **Must have a Pharmacist**
 - **Qualified and registered**
 - **Can be an independent prescriber**
 - **Each business has a superintendent**
- **Pharmacy Technician**
 - **With or without accuracy checking**
- **Dispensers**
- **Pharmacy assistants**
- **Delivery drivers**





A Brief History of Pharmacy in Scotland & NHS PFS Service





- We largely filled prescriptions until the early '00s
- Minor ailments service launched 2006
- Allowed us to supply over the counter medications free of charge following consultation (at the time for people who were in receipt of free prescriptions)
- E.g. head lice no longer required GP appointment to get treatments and could be treated in the pharmacy.



Where We Are Now



- **NHS Pharmacy First Scotland launched in July 2020 (height of pandemic!)**
- **Consultation-based service for common conditions, available to all except visitors to Scotland**
- **Everyone who accesses the service will receive advice on self-care**
- **If appropriate, medication from a select list can be supplied**
- **Onward referral can also be recommended**

But That's Not All...



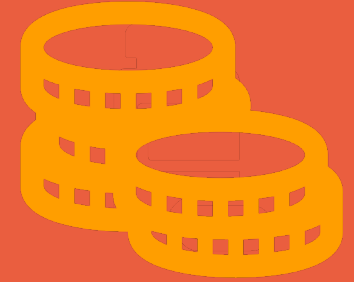
In addition to the over the counter medications, protocols were written to allow pharmacists to prescribe in specific conditions including:

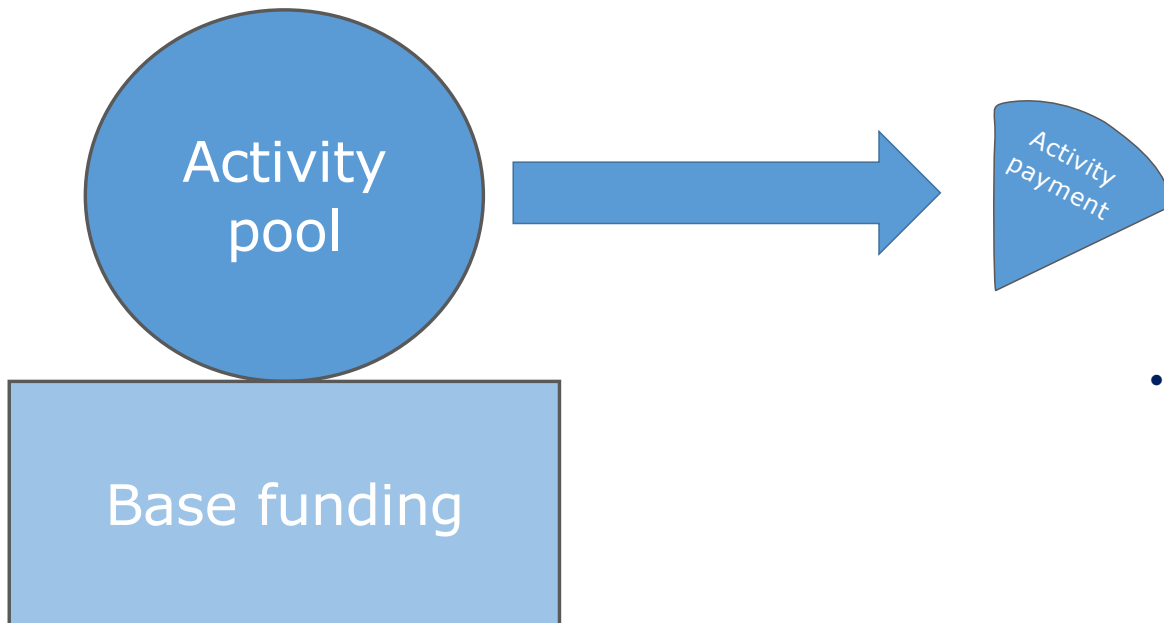
- Urinary tract infections in women
- Shingles
- Skin infections
- Impetigo (Specific skin infection)
- Hayfever

As of January 2023, over 5 million consultations have been carried out.

NHS Pharmacy First Funding Model

- Each pharmacy receives a 'base' payment for service delivery, which is the same for all pharmacies.
- There is an 'activity pool' made available for those whose activity exceeds 100 weighted consultations
- An 'activity' will count as a single consultation, referral or supply, with activities involving PGD use carrying more weight to reflect additional work





- **Pharmacies delivering over 100 activities/interventions will receive an activity pool payment directly proportional to their workload**
- **All pharmacies receive the same base payment for making the service available to their community**



NHS Pharmacy First Plus Service



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Pharmacy First Plus

- In extension of NHS Pharmacy First Scotland
- Makes use of Independent Prescribing qualification and advanced consultation/assessment skills that some pharmacists have undertaken
- IP qualification allows Pharmacists to prescribe in any area that they are competent and confident in
- NHS Pharmacy First Plus provides a world-first opportunity for pharmacist prescribers to see and treat even more acute common conditions than is possible under NHS PFS.
- Come 2026, all newly qualified pharmacists will graduate with IP qualification as part of the Masters Degree.
- With the expectation all community pharmacies in Scotland will provide Pharmacy First Plus by early 2030s.



My Pharmacy Journey

- 8 years community pharmacy experience across Scotland
- The community I served within had both:
 - an aging population
 - a high volume of university students
- Up until recently most of my day looked like this...





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But now...



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My Pharmacy Journey

- Most of my day was spent in consultation
- Made possible by investment in premises, technology and most importantly my team
- Started my Independent Prescribing Course in 2021 after realising I could use my clinical skills to help more patients.
- Set up Pharmacy First Plus two years ago
- It completely changed my practice, making me more part of the local multidisciplinary healthcare team.

Delivering Pharmacy First Plus



Patients love how accessible we are

Typical day – see around 10-15 patients, mix of referred from GP and self-referrals

No set list of conditions, but competent in and see patients for:

- **Ear pain**
- **Possible chest infections**
- **Possible throat infections**
- **Skin conditions**

Clinical skills training helps triage when onward referral is needed





In Summary

- **Consultations when and where the community needs them**
- **Clinical triage for other services e.g. GP, Hospital and Out-of-hours services**
- **Integrates community pharmacy teams into local healthcare team even more than before prescribing**
- **Incredibly rewarding professionally!**



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NHS Pharmacy First Plus

- Part of our IP strategy
- Allows Pharmacists to use their Independent Prescribing qualification and advanced consultation skills to see more people and treat more conditions
- Each IP Pharmacist makes service available for minimum of 25 hours per week
- Helps keep people well as close to home as possible
- £3000 pcm for service delivery
- Needs close working relationship with local healthcare team





What Does The Future Look Like?



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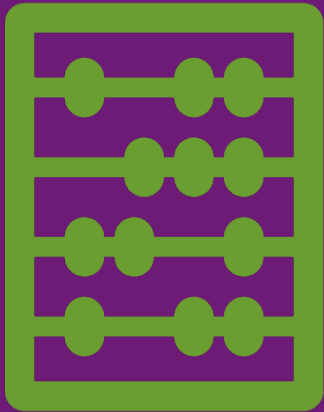


What does the future look like?

- It is Community Pharmacy Scotland's ambition to have a prescriber in every pharmacy in Scotland
- This will give nearly every community access to care provided on their doorstep and opens up huge opportunity for further development in line with Health policy
- Long-term plan and people are at the very centre of it all
- But how to get there? Big question!



The Numbers



- **We have 1,244 community pharmacies across Scotland**
- **Number of employed pharmacists is trickier**
- **Number IP-qualified even more so but estimated to be around 300**
- **No. of CPs currently delivering service: 316, ~25%**
- **Practitioners tell us a 2-pharmacist model is ideal**
- **So....you can see there's a bit of a gap!**



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Bridging the Gap

- Our regulator (GPhC) has recently shaken things up with initial education and training of Pharmacists
- From 2026, all graduates will come out of University with a prescribing qualification
- For the last few years, CPS (on behalf of pharmacy owners) has invested heavily in training existing pharmacists
- Redirecting funding that would ordinarily be shared between all contractors
- This includes covering the significant cost of releasing them from the day job to do so

Community Pharmacists

- **IP in all community pharmacies**
- **Incorporated into the University Degree**
- **Qualified pharmacists need to train to gain the qualification.**



Challenges

- Significant numbers to train
- Support required
- Workforce
- Current legislation – work underway
- Access to patient records





Thank You for Your Time! Any Questions?



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