

Pharmacy Best

Thomas Bisset



Barnsley Clinical Commissioning Group



BARNSLEY LPC
Represent Support Lead

Pharmacy BEST
30 January 2019

Agenda

- 6:30pm: Registration and Buffet
- 7:00pm: Welcome and introductions
- 7:10pm: **Suicide Prevention**
Phil Ainsworth, Public Health Senior Practitioner BMBC
- 7:30pm: **Stock Shortages**
- 7:45pm: **Changes to The Medication Management Service**
- 8:25pm: **Quality Payment Scheme 2018/19**
- 8:30pm: **Commissioning Update**
- 8:45pm: Finish

BEST

- Barnsley Education Support & Training
 - Best.barnsleyccg.nhs.uk

Pharmacy BEST: Aims & Objectives

- Barnsley Education Support & Training
 - Best.barnsleyccg.nhs.uk
 - Help Pharmacies deliver quality services
 - Align with CCG plans
 - Help Barnsley patients access healthcare in the appropriate place, at the appropriate time from the appropriate person

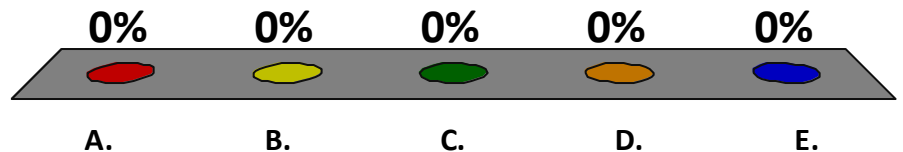
[Contact numbers](#)[Diagnostic tools](#)[Prescribing guidelines](#)[Patient information sheets](#)[Investigation/referrals](#)[Useful websites](#)[Home](#)[BEST talks](#)[Events and education](#)[Relaxation](#)[Medicines](#)[Working and appraisal](#)[Home](#)

Clinical support by body system

[Brain and mental health](#)[Ophthalmology and ENT](#)[Respiratory and Smoking](#)[Cardiovascular and Lipids](#)[Endocrine and Diabetes](#)[Gastroenterology](#)[Renal, Urology and Mens Health](#)[Women's and Sexual Health](#)[Paediatrics](#)[Dermatology, MSK and Rheumatology](#)[Cancer, Palliative Care, Pain and Older People](#)[Laboratory investigations and Infections](#)

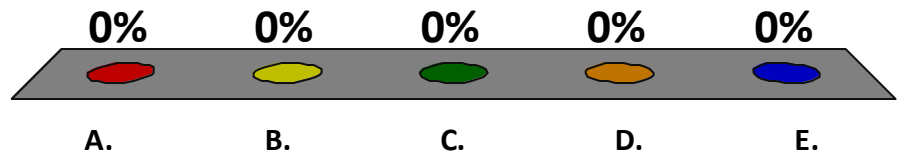
Who do you work for ?

- A. A large multiple pharmacy chain
- B. A medium sized independent pharmacy chain
- C. An independent pharmacy
- D. The CCG
- E. Other



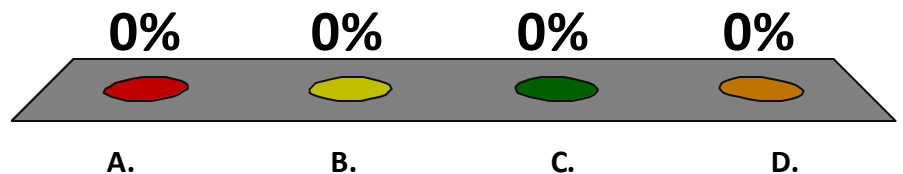
Are you a?

- A. Pharmacist
- B. Technician
- C. Dispenser
- D. Counter Staff
- E. Other



How did you hear about tonight?

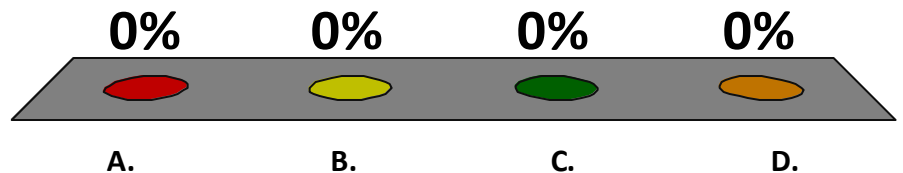
- A. Email from CCG
- B. LPC Newsletter
- C. Pharmoutcomes
- D. Colleague



Medicine Shortages

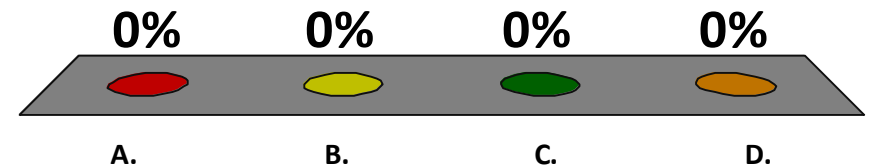
How do medication shortages impact on your pharmacy?

- A. Not a problem, stock readily available
- B. A minor inconvenience on a few lines
- C. Inconvenient, but not a major impact on daily routines
- D. A major problem, consuming large amounts of time on a daily basis



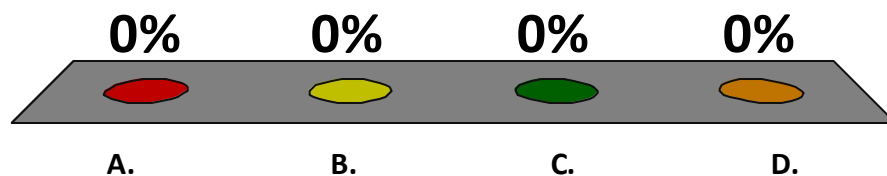
If you are unable to supply a medication because of shortages do you?

- A. Give the patient prescription back and suggest they try elsewhere
- B. Give the patient the prescription back and send them back to the GP for an alternative
- C. Phone another pharmacy to check availability
- D. Contact the surgery and suggest an alternative medication



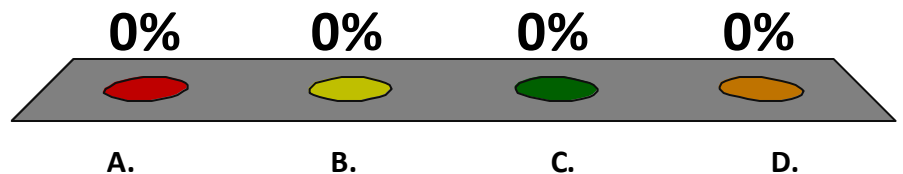
If you are unable to supply a medication because of unavailability and you contact a surgery?

- A. Phone and leave a message
- B. Fax the patient details and drug details
- C. Hand a letter into the reception desk
- D. Email, using NHS mail, the surgery with patient details, reason for the shortage and an alternative



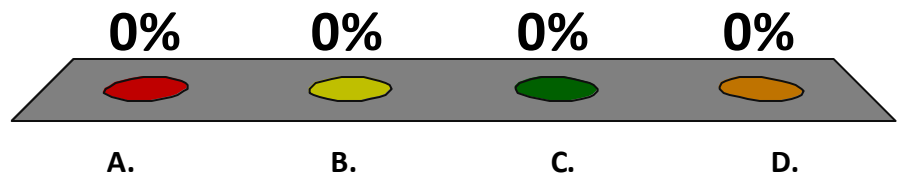
With regard to medication subject to price concessions, are they?

- A. Not a problem, I can obtain all stock at Drug Tariff prices
- B. A minor inconvenience on a few lines costing a little more than the Drug Tariff
- C. Inconvenient and a worry on a number of lines
- D. A major problem with large losses



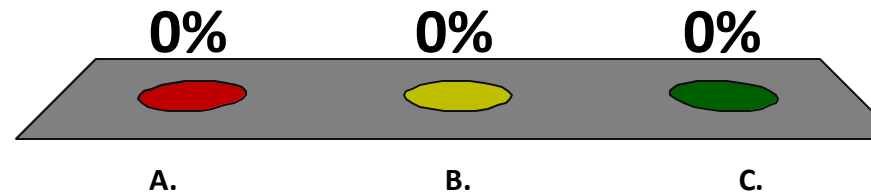
With regard to medication subject to price concessions do you think they are?

- A. Fair and accurate
- B. A bit less than the price I pay
- C. Nowhere near the price I pay
- D. Deliberately low to force pharmacies to close



With regard to medication subject to price concessions have you considered not supplying an item

- A. No, no matter how much I loose on an item
- B. Yes , but still made the supply
- C. Yes





• PSNC Briefing for GP's

Medicine Shortages: A Briefing for CCGs, GPs and other NHS prescribers

Prescribers may be aware of recent media reports about medicines supply issues. This briefing explains some of the issues and the impact they are having.

1. Medicines supply: current situation for pharmacies and patients

- Community pharmacies are increasingly reporting that they are struggling to source certain medicines. In some cases availability is an issue; in others, medicines are available but only at significantly inflated prices.
- Pharmacy teams are having to spend a lot of time sourcing medicines, sometimes having to contact up to seven or eight wholesalers to find a medicine. This can lead to delays for patients needing the affected medicines.
- Community pharmacists use a range of measures to ensure patients can access medicines in short supply, including:
 - “Staged” dispensing – this is where pharmacies only give patients some of their medicines and ask them to come back to collect the rest of the prescription later.
 - Liaising with GPs to find alternative medicines that may be suitable for patients.
 - Making many phone calls to different suppliers to try to find the medicines that their patients need.
 - Seeing if stock may be available in other local pharmacies.

2. Medicines supply and pricing

- Supply issues are not a new phenomenon, but there has been a recent surge in the number of generics affected.
- ~~Medicines shortages can be caused by a range of factors, including manufacturing problems.~~ Generics prices in England are also incredibly low compared to most parts of the world, which may make the market less attractive. Uncertainty around ~~Brexit~~ and contingency planning may be another factor currently exacerbating the issues.
- Pharmacies work hard to purchase medicines cost effectively, but shortages often lead to price increases. Where a shortage leads to a significant price increase, the Department of Health and Social Care (DHSC) can grant a ‘price concessions’ recognising this. Price concessions are examined monthly, and in November and December last year we saw an increase in the number of concessions being granted, indicating an increase in supply problems.
- In November 2018, DHSC granted 69 price concessions, and in December this figure rose to 85. You can read more about the concessions system at: psnc.org.uk/concessionsbriefing
- Medicine supply is a national issue, but there can be regional variation and supply and pricing issues can affect individual pharmacies much more than others. This adds to the ~~ongoing~~ financial pressures on pharmacies.

3. Impact on prescribers

- GPs may increasingly be contacted by pharmacies and asked to consider ~~alternatives if stock is~~ unobtainable.
- Prescriptions for alternative medicines may need to be issued so that patients can receive treatment more quickly.
- Medicine price increases can impact on local prescribing budgets, and CCGs should be aware of this risk.
- Patients should be encouraged to order repeat prescriptions in good time (but no more than seven days before it is due) and only to reorder medicines that they need.
- Prescribers should resist writing prescriptions for longer periods of time as this could exacerbate supply issues.

4. Contingency planning and improvements

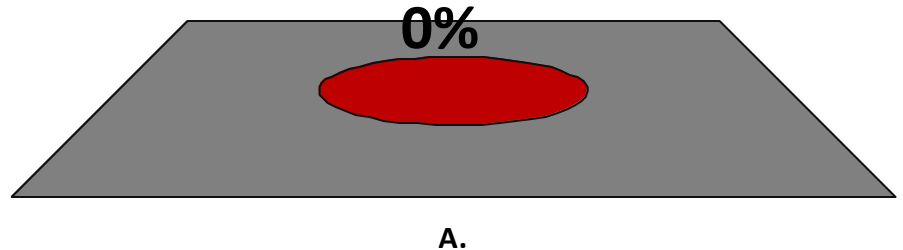
- PSNC, the national community pharmacy negotiating body, has asked the Government to help protect pharmacies from the impact of any supply issues, both financially and in terms of the additional workload.
- We would also like to see improvements to the price concessions system so that pharmacies can have clarity about medicines prices and availability, earlier in the month.
- DHSC are working on contingency plans to ensure continuity of the supply of medicines after the UK's exit from the EU with the support of stakeholders.

SSP

- Serious Shortage Protocols
 - Early February 2019
 - Needs Minister to approve
 - Exceptional circumstances
 - Most likely for alternative quantity, strength or form
 - Less likely generic or therapeutic substitution
 - Not dependent on a no deal exit from the EU

Additional question from Tom

A. Enter Answer Text



Medicines Management Service

Medication Management Service

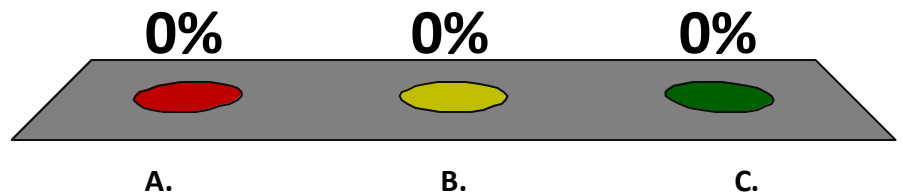
- ❖ The aim of the Medication Management Service is to implement a controlled safe environment where Home Care Services and their managers are able to carry out the controlled administration of medication that meets the specific needs of each service user.
- ❖ The medication policy governs all home care service provision throughout Barnsley and has been developed in conjunction with service providers, care management, health care workers and pharmacists.

Does your pharmacy provide the current medication management service?

A. Yes

B. No

C. Don't Know

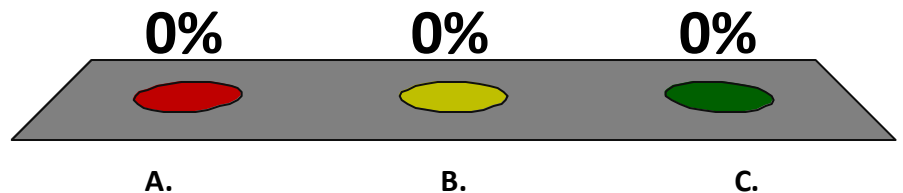


Did your pharmacy claim the annual fee of £500 last year for the medication management service?

A. Yes

B. No

C. Don't Know

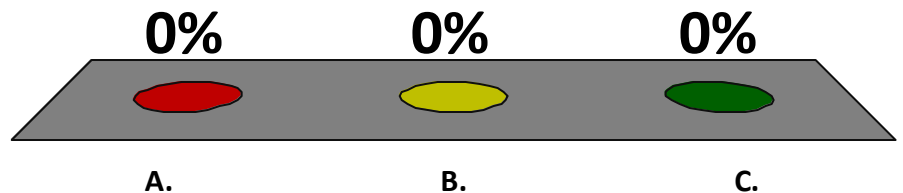


Does your pharmacy claim the monthly fee for all patients each month?

A. Yes

B. No

C. Don't Know



2017-18 Claims

annual claim	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Grand Total	Old	New	Difference
500	71	69	60	75	74	64	63	67	69	51	51	54	768	8448.8	9344	895.2
500	68	69	70	69	50		56	55	111	56	56	54	714	7889.9	8814	924.1
500	49	49	49	58	48	55	56	57	57	59	57	58	652	7248.2	7300	51.8
0	42	42	44	43	39	43	42	41	38	39	36	33	482	4988.7	6070	1081.3
0	42	42	42	40	43	38	38	35	35		62	30	447	4626.45	5557	930.55
500	36	38	38	38	37	35	35	34	31	28	28	27	405	4691.75	4519	-172.75
500	21	21	16	25	25	26	23	23	19	21	21	21	262	3211.7	2946	-265.7
500	24	23	21	21	21	20	24	23	20	20	19	19	255	3139.25	2805	-334.25
500	23	22	20	22	22	22	21	19	18	19	21	19	248	3066.8	3176	109.2
500		22	25		49	28	24		29	13	12	11	213	2704.55	2663	-41.55
0	23	21	18	20	18	18	20		21	18	18	17	212	2194.2	3420	1225.8
500	14	14	15	16	19	19	18	19	19	19	19	18	209	2663.15	2619	-44.15
500	26	15	15	16	16	14	14	15	14	17	17	15	194	2507.9	3286	778.1
0		24	26	27		24			22	43	20		186	1925.1	2366	440.9
0	13	13	17	11	12	13	11	13	16	17	15	15	166	1718.1	2082	363.9
0	14	15	14	15	13		14		26	14	14	13	152	1573.2	2120	546.8
500	11	11	11	12	12	12	12	13	12	15	12	12	145	2000.75	2491	490.25
500	25	27	27	26	25								130	1845.5	1622	-223.5
500	10	12	9	10	9	9	9	9	9	9	9	19	123	1773.05	1545	-228.05
500	6	5	6	7	7	7	7	9	10	10	11	11	96	1493.6	1120	-373.6
500	13	12	12	22				7	7	7	8		88	1410.8	1608	197.2
500	4	8	7	7	6	5	8	8	9	9	8	6	85	1379.75	1255	-124.75
0	16	8		16		7	12	5	5	6			81	838.35	1403	564.65
500	7	6	6	12	6	9	9				10	10	75	1276.25	825	-451.25
500	8	7		9	10	1	14			12	6		67	1193.45	737	-456.45
500	6	6	6	7	7	6	5	5	5	4	5	5	67	1193.45	801	-392.45
500		3	3	3	4	4	4	6	4		5	4	40	914	760	-154
500	3	3	4	4	4	3	2	2	2	2	2	2	33	841.55	491	-350.55
500			10					10				10	30	810.5	1994	1183.5
500			10	9	10								29	800.15	447	-353.15
500	2	2	2	2	2	2		3	1	2	2	2	22	727.7	562	-165.7
500	4		2	2	4		2	2		2	2	2	22	727.7	434	-293.7
500	2		4							1	1	1	9	593.15	227	-366.15
500	1			1				1	1	2		1	7	572.45	461	-111.45
500			1										1	510.35	395	-115.35
													83500.25	88265	4764.75	

Mar-18	Grand Total	Old	New	Difference
54	768	8448.8	9344	895.2
54	714	7889.9	8814	924.1
58	652	7248.2	7300	51.8
33	482	4988.7	6070	1081.3
30	447	4626.45	5557	930.55
27	405	4691.75	4519	-172.75
21	262	3211.7	2946	-265.7
19	255	3139.25	2805	-334.25
19	248	3066.8	3176	109.2
11	213	2704.55	2663	-41.55
17	212	2194.2	3420	1225.8
18	209	2663.15	2619	-44.15
15	194	2507.9	3286	778.1
	186	1925.1	2366	440.9
15	166	1718.1	2082	363.9
13	152	1573.2	2120	546.8
12	145	2000.75	2491	490.25
	130	1845.5	1622	-223.5
19	123	1773.05	1545	-228.05
11	96	1493.6	1120	-373.6
	88	1410.8	1608	197.2
6	85	1379.75	1255	-124.75
	81	838.35	1403	564.65
10	75	1276.25	825	-451.25
	67	1193.45	737	-456.45
5	67	1193.45	801	-392.45
4	40	914	760	-154
2	33	841.55	491	-350.55
10	30	810.5	1994	1183.5
	29	800.15	447	-353.15
2	22	727.7	562	-165.7
2	22	727.7	434	-293.7
1	9	593.15	227	-366.15
1	7	572.45	461	-111.45
	1	510.35	395	-115.35
		83500.25	88265	4764.75

Changes to the service

- CCG made changes based on feedback from pharmacies
- Removal of annual fee
- More flexibility in assessment process

Changes to the Fees

Current

- £500 annual retainer
- £10.35 monthly

New

- £75 patient registration
- £25 update to medication plan
- £11 monthly

Can only claim one of the above per month

Date of Review

NB: You can only claim for one activity per month per patient. If you enter more than one intervention you will not be paid if this falls within the same month

Patient Name

If Patient Name is not registered, click here to enter 1. Patient registration *IMPORT 25-10-2018*

Is this the first time you are claiming for this patient on PharmOutcomes this month

Yes No

Check provision history on left hand side

New Patient Yes No

Date of current medication plan

Enter as dd-mmm-yyyy (eg 23-Feb-1989)

Name of responsible pharmacist

Medication plans should be updated annually, even where there have been no changes.

If you are unable to take on any new referrals, even on a temporary basis, please call the Medicines Management Team :01226 433798 or email barnsleyccg.mmsbarnsley@nhs.net

Date of Review

NB: You can only claim for one activity per month per patient. If you enter more than one Intervention you will not be paid if this falls within the same month

Patient Name

If Patient Name is not registered, click here to enter 1. Patient registration *IMPORT 25-10-2018*

Is this the first time you are claiming for this patient on PharmOutcomes this month Yes No
Check provision history on left hand side

Is tl

P

New Patient Yes No

Was the referral appropriate? Yes No

Inappropriate Referral

- Patient had not consented
- Inappropriate Medication
- Patient able to self medicate
- Other

Date of current medication plan
Enter as dd-mmm-yyyy (eg 23-Feb-1989)

Name of responsible pharmacist

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Date of Review

NB: You can only claim for one activity per month per patient. If you enter more than one intervention you will not be paid if this falls within the same month

Patient Name

If Patient Name is not registered, click here to enter 1. Patient registration *IMPORT 25-10-2018*

Is this the first time you are claiming for this patient on PharmOutcomes this month Yes No
Check provision history on left hand side

Is this the first time you are claiming for this patient on PharmOutcomes this month

New Patient Yes No

PharmOutcomes Changes to Medication Plan? Yes No

Reason for changes

- New Medicine from GP
- Medication Stopped by GP
- Dose change by GP
- New Medicine from Hospital
- Medication Stopped by Hospital
- Dose change by Hospital
- Other

Changes

Date of current medication plan Name

Date of current medication plan
Enter as dd-mmm-yyyy (eg 23-Feb-1989)

Name of responsible pharmacist

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Patient Name

If Patient Name is not registered, click here to enter 1. Patient registration *IMPORT 25-10-2018*

Is this the first time you are claiming for this patient on PharmOutcomes this month Yes No
Check provision history on left hand side

New Patient Yes No

Changes to Medication Plan? Yes No

Patient Status

- On going support provided, no changes
- On hold, in hospital
- On hold, in care home
- Other

Date of current medication plan
Enter as dd-mmm-yyyy (eg 23-Feb-1989)

Name of responsible pharmacist

Medication plans should be updated annually, even where there have been no changes.

If you are unable to take on any new referrals, even on a temporary basis, please call the Medicines Management Team :01226 433798 or email barnsleyccg.mmsbarnsley@nhs.net

Referral process

- **Contact the Pharmacy**
- **Ask to make a “Medication Management Service” referral.**
- If for any reason the Pharmacy declines to accept the referral then they should be able to advise you of the Pharmacy nearest to them who may accept a referral.
- Any problems finding a Pharmacy then please contact the Medicines Management Team 01226 433798.
- Arrange with the Pharmacy how a completed referral form will be received by them

- **Complete a referral form send it using a secure method of transmission**
- **Always follow up with the Pharmacy to ensure it has been received**
- **Once the Pharmacy has received the form they will have 10 WORKING days to obtain an up to date record of medicines from the GP surgery and undertake a review and complete paperwork.**
- The Pharmacy will contact the referrer if there are any problems that arise e.g. unable to get a medicines record from the GP surgery OR unable to access patient to undertake the review..
- It is the Pharmacist's discretion which medicines go into a monitored dosage system (MDS) and sometimes even with the scheme in place there may be a need for nursing or other staff to separately administer some medicines.

- The person completing this form will RECEIVE the completed Medication Management Service care plan from the Pharmacy and it is their responsibility to ensure this is passed on to the Care Provider and that a record is kept.
- The person completing this form can nominate for someone else to receive the completed Medication Management Service care plan from the Pharmacy. It will then be their responsibility to ensure they Pharmacy care plan is passed on to the Care Provider and that they hold a record.
- If the details of the Care Provider are known at the point of referral then they should be completed so that they will receive a copy of the completed Medication Management Service care plan from the Pharmacy.

- If there are any **CHANGES** made to medication for any patient using this scheme then the Pharmacy must be contacted by the patient's care coordinator/referrer to inform them.
- The Pharmacy will complete another review and issue the referrer or those nominated with a new Medication Management Service medication plan.
- Whilst this review is ongoing, neighbourhood nursing staff may need to be asked to temporarily administer medicine.
- When an updated care plan is received from the Pharmacy then it must be issued to the Care Provider who should then remove any previous paperwork which exists in the patient's home.

Service Delivery

- The service is usually delivered in the patient's home,
- If it is suitable for the patient the assessment may also be conducted in the pharmacy
- The assessment may also be undertaken by Pharmacy staff qualified to level 2/3 – as accredited and delegated by the superintendent and/or responsible pharmacist.
- The responsible pharmacist will be accountable for the completion of the care plan and recommendations based on the information provided within the review.
- The community pharmacy will be responsible for the quality of the service it delivers.

Key points

- All referrals must be complete and use the approved form
- All medication plans must be updated at least every 12 months
- New fees available from February 2019
- New Service specification starts from April 2019
- Existing monthly claim scheme ends May 2019 (for those not ready to transition to new service)

Quality Payment Scheme 2018/19

- **Updated gateway and quality criteria**
- **Review point 15th February 2019**
- **Correction period for contractors not meeting gateway criteria**

QPS 18/19 - Gateway Criteria

1. Must be offering an **advance service** *eg MUR, NMS, NUMSAS*
2. NHS.UK entry must be **up to date** including bank holiday hours.
3. Last completed **CPPQ** publicly available on NHS.UK page
4. Pharmacy staff must be able to **send and receive NHSmail** from their shared premises NHSmail account which must have at least **two live linked accounts**
5. IT operating system **compliance** with the **NHS Digital** Warranted Environmental Specification

QPS 18/19 - Quality Criteria - Summary

Domain	Criteria	Points	Value
Patient Safety	Safety Report	20	£640
Patient Safety	Risk Management	20	£640
Patient Safety	NSAID Audit	20	£640
Public Health	HLP and Children's Oral Health	15	£480
Digital/Urgent Care	NHS 111 DoS	2.5	£80
Clinical effectiveness	Asthma Review	20	£640
Workforce	Dementia Friends	2.5	£80
Total		100	£3200

Each point has a minimum value of £32 and a maximum value of £64

Commissioning update

- EHC
- APC reporting

EHC

- Phased introduction
- PGD – use POM pack
- Aged 14 to 24
- Barnsley residents or registered with Barnsley GP's
- Follow up from Spectrum via referral form

APC Reporting

Clinical Governance

APC Reporting

Medication Management System

APC Reporting

Date Completed

Issue Identified by: _____

Name

Job Title

Organisation

Issue category and who was involved _____

Issue Category

- Dispensing Error
- Prescribing Error
- Medication Supply Issue
- Medicines Administration
- D1 Communication
- Other Hospital Communication
- Formulary Related
- Shared Care Issue
- Summary Care Record
- Other GP Communication
- Care/Nursing Home
- Other

Issue Involving

- Hospital- BHNFT
- Hospital - SWYFT
- Hospital - non Barnsley
- General Practice
- Community Pharmacy
- Care/Nursing Home
- Care Organisation
- Community Nursing
- Other



• APC Reporting provision successfully entered and saved

• The following system generated provision report letters are available

[Basic Provision Record](#)

[Barnsley Interface Issue Report >>](#)

Secure email is queued to send

Issue Details _____

Patient NHS Number

GP Practice

Date Issue Identified
Enter as dd-mmm-yyyy (eg 23-Feb-1989)

Issue Identified

Action taken and outcome

Date Action taken
Enter as dd-mmm-yyyy (eg 23-Feb-1989)

APC Reporting: Examples

- Most commonly reported relate to MDS
- Wrong Strength
- Wrong Medicine
- Missing Medicine
- Wrong Patient

APC Reporting: Examples

- Amended epilepsy meds at request of specialist nurse.
- Upon review of med history noted that levetiracetam was on repeat template and had been issued in May 18 and 3 times in September 2018; **however notes clearly state that this had been stopped in December.**
- I contacted community pharmacy who advised my they had dispensed according to their records and scripts had been claimed for.
- Contacted specialist nurse to inform and for advice Dispensing Error specialist nurse spoke to patient,
- Patient had not taken the levetiracetam.
- The **community pharmacy had ordered for her** and she had **told them on more than one occasion she wasn't taking.** She had given the tablets back to the pharmacy.
- Remove from repeats.



Home

Contact Us

Help

Home

Log in

Registered user? [Log in here](#)

New user? [Register here](#) to start using the NRLS.

Welcome to NRLS Reporting

The National Reporting and Learning System (NRLS) is a central database of patient safety incident reports. Since the NRLS was set up in 2003, the culture of reporting incidents to improve safety in healthcare has developed substantially.

All information submitted is analysed to identify hazards, risks and opportunities to continuously improve the safety of patient care. Please [click here](#) for further information.

The published Organisation Patient Safety Incident Reports are generated by the Explorer Tool and can be found [here](#).

For the published data workbook, please [click here](#).

For the monthly published data reports [click here](#) and for the National Patient Safety Reports [click here](#).

After logging in you can:

- Upload incident reports from your local risk management reporting system
- Review incident reports submitted by your organisation
- View incident reports submitted online to the NRLS for your organisation

- <https://report.nrls.nhs.uk/nrlsreporting/>

LPC Activity

- LPC website <http://psnc.org.uk/barnsley-lpc/>
- LPC newsletter (sign up via website)
- Pharmacy BEST events
- Pharmoutcomes Activity Reports