

South Yorkshire and Bassetlaw Local Professional Network for Pharmacy

Annual Report: 2014/15

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1. The South Yorkshire and Bassetlaw Local Professional Network (LPN)

The Local Professional Network (LPN) for Pharmacy for South Yorkshire and Bassetlaw is one of 27 formed across the country, each hosted within one of the Area Teams of NHS England.

The role of the LPN is clearly defined within an operating framework drawn up and published by NHS England, it includes:

- Providing clinical leadership and facilitating engagement.
- Supporting NHS England and other commissioners in commissioning primary care with robust clinical input.
- Supporting patient involvement.
- Driving improvements in outcomes in line with national and local priorities.

2. The Strategy/Steering Group

The Strategy/Steering Group was formed following a call for expressions of interest from individuals with the range of skills and competencies to take forward the agenda outlined above. The Group is made up of the following membership:

Chair:

- *Peter Magirr;* Head of Medicines Management, NHS Sheffield CCG

Members:

- *Matt Auckland;* Pharmacy Adviser, NHS England
- *Tom Bisset;* Community Pharmacist, Secretary Barnsley Local Pharmaceutical Committee
- *Louise Brewins;* Head of Public Health Intelligence, Sheffield City Council
- *Damian Child;* Chief Pharmacist; Sheffield Teaching Hospitals NHS Foundation Trust
- *Richard Harris;* Professional Development Pharmacist, H.I. Weldrick Ltd
- *Nick Hunter;* Chief Officer, Doncaster, Rotherham and Nottingham LPC's
- *Gary Kent;* Healthwatch Representative
- *Victoria Lindon;* Primary Care Contracts Manager, NHS England
- *Richard Oliver;* GP and Chair of Sheffield Area Prescribing Group
- *James Wood;* Community Pharmacist; Secretary Sheffield Local Pharmaceutical Committee

3. The Work of the LPN in Year

At the outset of the year the clear priority for the LPN was to build upon the success of the community pharmacy *Call to Action* consultation, where possible by supporting the implementation of initiatives locally.

The clear messages from the consultation were that pharmacists wanted to work in a more *clinical capacity*, as a recognised part of the primary care team and with access to the *patient information* necessary to provide a safe and professional service.

To this end, work was taken forward to develop a pilot project to assess the impact of a small number of community pharmacists working part-time in the surgery of their local GPs. (Further details of this work are set out in the Joint Working section of this document).

In addition a bid was submitted for the area to host one of the national pilot sites for testing community pharmacy access to the *Summary Care Record*. This bid was successful and more than 20 community pharmacies took part in the pilot and submitted audit information to inform a decision on allowing wider use of this technology in pharmacy.

Work on these, and other initiatives was shared with stakeholders at an event, organised by the LPN, and supported by the Royal Pharmaceutical Society. This successful evening event, held in Barnsley attracted more than 70 pharmacists from across the region, as well as GPs, other primary health care professionals and NHS commissioners.

4. Supporting Research

The LPN has established links with the NIHR Clinical Research Network and has facilitated the production of a research proposal looking at improving inhaler

technique in children. The local LPCs have agreed to fund a member of staff to participate, should a bid be successful. The project was instigated as a result of a prior project, run by the LPN looking at inhaler technique in adults. The LPN continues to co-ordinate research in the area by introducing researchers to potential providers

This followed on from an inhaler technique intervention project established by a previous incarnation of the Pharmacy LPN which was run between August 2012 and March 2013. The write-up for this research project was presented to the Health Services Research and Pharmacy Practice Conference in April 2014

5. NHS England

LPNs are hosted and supported by NHS England in each area. As well as Pharmacy, LPNs for dentistry and eye health are also supported.

Together they form part of a team of networks across the commissioning and provider services that are working with NHS England as a catalyst to positive change in the NHS.

In South Yorkshire and Bassetlaw the Pharmacy LPN is supported by the Pharmacy Adviser, a commissioning Manager and admin support.

Recently the LPN acknowledged the need to robustly assess the Community based medication management service commissioned by Barnsley CCG. To this end, the LPN convinced the Medical Director to match the funding provided by local LPCs to commission a report on the service by a leading pharmacy research academic.

6. Joint Working

One of the key challenges for community pharmacy is to build bridges with general practitioners. The message from the pharmacy call to action was to find ways to enable pharmacists to use their clinical skills and knowledge to work with GPs. The pilot mentioned above is exploring how pharmacists can deliver minor ailment schemes, medicines related advice to patients, tying in medication reviews and medicine monitoring, exploring ways in which pharmacists can become a valued part of a multi-disciplinary team and working alongside general practices to develop care plans for patients at risk of hospital admission.

As well as building bridges with other healthcare professionals, the fact that the LPN works with and for all sectors of pharmacy is providing channels to further improve communication and joint working between Hospital, Primary care and community pharmacy colleagues.

7. Community Pharmacy

Access to Summary Care Records

A key area of the LPN work plan is the use and integration of technology in pharmacy. A bid submitted by the LPN to take part in the NHS Summary Card Record pharmacy proof of concept project was successful, with South Yorkshire and Bassetlaw becoming one of the five areas chosen to have early access to Summary Care Records.

26 pharmacies located in Sheffield took part in the project and accessed the Summary Care Record over 600 times to support patient care. From the early evaluation of access, a number of benefits have been identified:

- *Reduces onward referrals by pharmacists:* 74% of all encounters reported would have been signposted elsewhere without access to the information in the SCR. Of these, most encounters would have been signposted to the patients GP.
- *Improving Efficiency:* For 82% of encounters, access to SCR enabled the pharmacist to meet the patients' needs.
- *Reducing time patients waited for medicines:* SCR saved patient waiting time for 52 encounters, indicating access to information in the SCR can reduce assessment time and support sensible questioning. Only 25% of encounters identified that accessing the SCR added time to the care episode.
- *Reducing harm from medicines:* As a result of accessing SCR, over 50% of the encounters reported that potential harm was avoided (56%, with consequences ranging from negligible to major). For 25 encounters (20%) it was reported that access to SCR prevented a prescribing error.

Locally Commissioned Services

As part of the medicines Optimisation agenda, the LPN has looked at services already commissioned locally through Community Pharmacies with a view to:

- Encourage CCGs/LAs to commission services that are commissioned successfully in other areas. Examples include:
 - The community medication management service commissioned by Barnsley CCG
 - "Not dispensed scheme" commissioned by Sheffield CCG
 - Falls scheme commissioned by Doncaster CCG
 - Inhaler Interventions Scheme commissioned by Doncaster CCG
- Harmonise any training/competencies required to provide locally commissioned services:
 - e.g. Emergency Hormonal Contraception services;
 - the use of a "declaration of competence" rather than "accreditation"

8. Secondary Care

The primary focus of secondary care has been work to support the development of technology and effective systems of communication to overcome the poor infrastructure currently in place. The main barriers identified were the inefficient paper-based systems currently in place with a lack of Electronic Patient Records systems within several of the local hospitals, non-existent or non-standard interfaces between different healthcare provider systems and/or clinical portals with not all community pharmacies having access even to NHS.net email (resulting in difficulties in transferring confidential patient information) and less than 100% adoption of Summary Care Records.

Foundations are still being laid to enable delivery of the medium to longer term vision that:

- Pharmacists working in all healthcare settings have access to (and eventually the ability to input to) patients' single medication record
- Pharmacists are able to communicate effectively across IT networks to assist patients when transferring between health care settings and also for ongoing care
- Hospital discharge summaries are sent automatically to patients' designated community pharmacies, including the ability to refer patients with request for post-discharge MUR and/or NMS review
- Hospital prescriptions (selected OPD and/or discharge prescriptions) can be transmitted to community pharmacy for dispensing

9. Public Health

The South Yorkshire Public Health Network provides specialist public health input to the LPN. During 2014-5, this focussed on production of pharmaceutical needs assessments in the five Health and Wellbeing Board areas covered. During 2014, the LPN convened a learning set for PNA leads to support sharing of good practice and resources. All the Health and Wellbeing Boards within the area published their first PNA by 1st April 2015. Links to the individual reports are shown below.

Barnsley

<https://www.barnsley.gov.uk/services/public-health/joint-strategic-needs-assessment-jsna/pharmaceutical-needs-assessment-2015-2018>

Bassetlaw

<http://www.nottinghamshire.gov.uk/thecouncil/plans/strategydevelopment/joint-strategic-needs-assessment/>

Doncaster

http://www.doncaster.gov.uk/sections/socialcareforadults/ourpoliciesandplans/Doncasters_Health_and_Wellbeing_Board.aspx

Rotherham

<http://www.rotherham.gov.uk/pna/>

Sheffield

<https://www.sheffield.gov.uk/caresupport/health/health-wellbeing-board/what-the-board-does/JSNA.html>

10. Healthwatch

Healthwatch has found attending the LPN (Pharmacy) invaluable in gaining a wider understanding of the services that pharmacists offer the community and how they are able support individuals on a wide range of educational issues relating to medicines. The information will assist Healthwatch to promote and signpost where appropriate thereby strengthening community links with their local pharmacy.

11. Future Programme

The work of LPNs to date has been acknowledged by Dr David Geddes (Head of Primary Care Commissioning at NHS England) as having helped shape the commissioning of new care pathways and delivered improvements in the quality of patient services.

There is also a recognition that LPNs will be crucial to the development and implementation of the 5 Year Forward View, however detail on the ways in which this will happen await the publication of the new Single Operating Model for LPNs which is expected to follow, sometime after the LPN National Assembly on 22nd April.