PSNC Briefing 027/20: Summary of the findings from PSNC’s Pharmacy Advice Audit

This briefing provides a summary of the findings from the Pharmacy Advice Audit run by PSNC in June and July 2020.

Introduction: Community Pharmacies as the First Port of Call
Community pharmacies have long been promoted by the NHS as the first port of call for patients or members of the public with minor health concerns. Located at the heart of local communities and providing healthcare advice to anyone on a walk-in basis, this is a natural role for the sector.

In 2019, that role was further cemented in primary care with the rollout of the Community Pharmacist Consultation Service (CPCS) – this service meant that anyone phoning NHS 111 needing advice on a minor condition or an urgent supply of their regular prescription medicine would be directed to their local community pharmacies. The CPCS has been a great success – with more than 300,000 consultations since October 2019 – and it may soon be extended to allow patients phoning GP surgeries, as well as NHS 111, to be directed to pharmacies rather than being booked in to see a GP.

But while pharmacies are funded to provide this service, many are also reporting a long-term increase in the number of patients walking into them for advice. Without an NHS 111 referral, these interactions are not individually funded.

In June and July 2020 more than 9,400 pharmacies in England took part in an audit to try to quantify the number of informal patient consultations happening in community pharmacy, as well as looking at the time pharmacies spent on these, the sort of advice being sought, and what alternative healthcare people would have sought if the pharmacy they visited had not been open. This briefing sets out, very briefly, the findings of the audit as well as some considerations for the future.

Results: The Scope of Unrecognised Work in Pharmacies
Pharmacies were asked to choose one day on which to record their patient consultations between 29th June and 10th July 2020, aiming to continue either for the full day or until they had carried out consultations with 20 patients. In total 198,043 patient consultations were recorded by the 9,441 pharmacies, indicating that the average pharmacy carries out around 15 patient consultations per day. The consultations were all of those conducted outside of the formal CPCS route or any other commissioned services.

Consultations were either initiated with a pharmacist or non-pharmacist team member. Some consultations initiated with a non-pharmacist team member were subsequently referred to a pharmacist. Consultations included responding to symptoms and existing medical conditions, healthy living advice or advice following the delivery of a service, excluding dispensing.

Key findings about the pharmacy advice consultations were:

- The average staff time per consultation was just over 5 minutes;
- Around 10% (approx. 20,900) of the consultations were initiated with the non-pharmacist and referred to the pharmacist – this meant for longer total consultation times;
• Consultations initiated with a pharmacist took an average of 5.3 minutes pharmacist time;
• Consultations initiated with a non-pharmacist took an average of 4 minutes, with 19% referred to the community pharmacist where on average a further 4.3 minutes was spent with the patient; and
• Around 75 minutes per day, per pharmacy, is spent providing these consultations.

During the audit, 92% of consultations resulted in advice being given by the pharmacy team. The pharmacy was able to provide appropriate advice along with the sale of a medicine in 49% of consultations, and appropriate advice alone in 43% of consultations.

Fewer than 10% of the consultations recorded in the audit resulted in patients being referred to their GP, yet 49% of patients said that if the pharmacy had not been there, they would have visited their GP. A further 5.7% would have visited A&E / Walk-in centre which would result in an additional 57,000 appointments per week.

**The Future: Protecting a Vital Resource for Patients and Local Communities**

It is clear that patients value the accessible healthcare advice that is available from their local community pharmacies. Extrapolating the results of this national audit, if the proportion of patients seeking advice who said they would have visited their GP practice if the pharmacy had not been there holds, and pharmacy advice were taken away, this would result in approximately 492,000 additional GP appointments each week, or 65 appointments in each GP practice each week in England. This is clearly not manageable.

Other key estimates based on the audit results include that:

- During an average week across all English pharmacies over 600,000 consultations are carried out to respond to patients’ symptoms; and
- During an average week nearly 185,000 consultations are carried out where pharmacies give patients additional support for a known medical condition.

While some funding is provided for pharmacies for supporting people with ‘self-care’ through the community pharmacy contractual framework (CPCF), we believe this is no longer sufficient to cover the considerable costs of this increasingly important part of pharmacies’ work. Furthermore, this funding is distributed on a prescription volume-related basis, while this audit shows there is no correlation between prescription volumes and the number of advice consultations that pharmacies are carrying out.

PSNC is seeking a discussion with the NHS and the Department of Health and Social Care (DHSC) about the appropriateness of funding for pharmacies to provide what we have shown to be significant informal consultation services which are supporting patients and reducing pressure on other local healthcare settings.

If you have queries on this PSNC Briefing or you require more information, please contact [PSNC’s Communications Team](mailto:psnc.org.uk).