



PSNC response to Health and Social Care Select Committee- The future of General Practice

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Introduction

There are around 11,200 community pharmacies in England. Community pharmacies earn around 90% of their income from the NHS and they work constructively with all other primary care professions: we all have the same aim to improve patient outcomes by offering high-quality healthcare in a way that is convenient to patients.

Pharmacies now offer a range of clinical services alongside the dispensing of medicines and provision of healthcare advice. Many of these services, once the preserve of General Practice, are available on a walk-in basis. Not only does the commissioning of a wide range of services through pharmacies improve patient choice and access to healthcare, but it also alleviates pressure on General Practice, allowing GPs to further support secondary care and to concentrate on more specialised areas of healthcare and patients with complex needs.

Pharmacies and COVID-19

Community pharmacies have remained open throughout the COVID-19 pandemic, often finding themselves as the only primary care centres available to give face-to-face advice to local communities. As well as continuing to ensure the safe supply of medicines to patients, pharmacies have been offering an increasing amount of healthcare advice to their local communities, preventing a significant number of people having to contact General Practice.

Pharmacies have also played a part in the COVID vaccination programme, delivering almost 15 million¹ vaccinations to date, from just 1,500 sites. In addition to this, 97% of pharmacies signed up to distribute Lateral Flow Devices in the spring, distributing almost 12 million testing kits to the public in just 6 months. Pharmacies also provided a medicines delivery service to ensure those vulnerable or self-isolating patients could receive the prescribed medicines they required at home. And the sector stands ready to assist with the distribution of antivirals should that be required following clinical trials.

The pharmacy pandemic-related services have all been funded from outside of pharmacy's core funding, at appropriate rates, and the sector's willingness to embrace them and success in delivering them shows just how much the sector can achieve when it has the right support and incentives to do so. The sector's speed at stepping up to providing all these services, and the contribution they have made, shows once again the value of this 11,200-strong network of high-street healthcare locations.

Pharmacies: Supporting General Practice

In order to assess the extent to which patients and the public have been relying on pharmacies, we carried out a Pharmacy Advice Audit² in January 2021. During the audit, pharmacies logged the number of healthcare consultations they were providing. Extrapolating from results contributed by over 5,000 pharmacies, we calculate that pharmacies save an average of 24 million GP appointments every year.

¹ NHS- [List of vaccination sites- 17 November 2021](#)

² PSNC- [Pharmacy Advice Audit](#)

Almost half of people seeking advice said that if the pharmacy had not been there, they would have turned to General Practice, and 8.6% said they had been unable to access another part of the healthcare system. A further 9% and 2.5% of consultations were the product of informal referrals from General Practice and NHS 111. From these results, we estimate that an additional 70,000 people would go to A&E or an NHS walk-in centre every week if they could not get advice from their pharmacy, which equates to 3.3 million people per year. As all these healthcare consultations are informal, pharmacies receive no specific funding for them.

A survey by the PAGB³ in 2021 found that 47% of respondents turned to their local pharmacist for initial advice or medication for a self-treatable condition. This is up from 37% in 2020. This is yet further evidence for the role that community pharmacy plays in supporting and alleviating pressure on General Practice.

Alongside the provision of healthcare advice, pharmacies offer a range of commissioned services that support General Practice:

The Community Pharmacist Consultation Service (CPCS)⁴ : The CPCS was announced in 2019 as part of the five-year NHS Community Pharmacy Contractual Framework (CPCF) deal. This service allows GPs, NHS 111 online and NHS 111 to refer patients presenting with certain minor ailments to pharmacies for a healthcare consultation. Although the CPCS can directly relieve pressure on General Practice, uptake of referrals from GPs has been patchy and in some areas very slow: this is because making referrals to this service is seen as bureaucratic and it requires administrative resource from General Practice.

Vaccinations: In addition to playing a significant role in the national COVID vaccination effort, pharmacies are becoming increasingly important to the annual flu vaccination programme. This year, pharmacies have already administered a record number of flu jabs – over 4.6 million to date⁵, since the service began in September. This is a significant rise on last year when pharmacies administered 2.8 million jabs in the entire season.

Discharge Medicines Service (DMS)⁶: The DMS⁶ was recently made an Essential pharmacy service meaning all pharmacies must provide it. Under the service, NHS trusts can refer patients being discharged from hospital to a local community pharmacy for extra guidance on any newly prescribed medicines. The service has been identified by NHS England and NHS Improvement's (NHSE&I) Medicines Safety Improvement Programme as a significant contributor to the safety of patients at transitions of care, and ultimately it could help to reduce both pressure on General Practice and readmissions to hospital.

The New Medicine Service (NMS)⁷: The NMS provides support for people with long-term conditions who are newly prescribed a medicine. The aim is to help improve medicines adherence, and the service is focused on specific patient groups and conditions. The service was recently expanded and now includes

³ PAGB- [New survey shows pharmacy use up, with support for wider role](#)

⁴ PSNC- [CPCF Settlement 2019/20- 2023/24](#)

⁵ PSNC- [Daily Flu Vaccination Data](#)

⁶ PSNC- [Discharge Medicines Service](#)

⁷ PSNC- [New Medicines Service](#)

conditions such as asthma, atrial fibrillation, and heart failure. The service enables pharmacists to advise patients on the correct way to use new medication which improves medicines adherence and, ultimately, health outcomes.

Both the NMS and the DMS services reduce the likelihood that patients will have to revisit other health care professionals, including GPs, in the future, because of problems associated with incorrectly taking their medicine. An aim of both services is to support the development of effective team-working across hospital, community and primary care network pharmacy teams and general practice teams.

How pharmacies could do more to support General Practice

There are a number of ways in which community pharmacies, with the right support in place, could do more to support General Practice.

1 'Walk-in' Healthcare Consultations

One action that could bring about immediate relief for General Practice would be to make full use of the CPCS, as the Health Secretary Sajid Javid MP recently called for, when he announced a £250 million funding boost to GPs under the Winter Access Fund⁸. Participation in the CPCS is a condition of a practice being able to benefit from the Winter Access Fund, and wider uptake of the service could enable more GPs to pass more patients on to local community pharmacies for appropriate support and advice.

Though we very much welcome this support for the CPCS, we believe it would be much more effective to have a walk-in option to the CPCS. Allowing patients to receive healthcare consultations from pharmacists without the need for a referral would relieve General Practice of the bureaucratic burden of referring people to the service. Providing appropriate funding for walk-in consultations would support community pharmacies, and such a service would also support NHS aims to make pharmacies the first port of call for the health service.

2 Extension of Minor Ailments Support

Ideally, a pharmacy walk-in healthcare consultation service would also allow pharmacists to supply certain prescription medicines for minor ailments – this could be done in a very controlled way using Patient Group Directions. Currently, some people referred to pharmacies using the CPCS end up returning to General Practice because they require treatment with a prescription only medicine. Other patients return to General Practice where they are unable to afford to purchase an OTC medicine that the pharmacy has advised is needed.

We would very much welcome a streamlining of this service so that patients can self-refer to the pharmacy, self-present and access their appropriate medicines (for minor ailments), at NHS expense, without involving the GP at all. We believe this proposal would have the support of both General Practice and community pharmacy and would save time and resource due to a reduction in unnecessary GP appointments and administration.

⁸ NHSE&I- [Our plan for improving access for patients and supporting general practice](#)

We estimate⁹ that pharmacies could save the NHS up to £460 million per year by assisting more in the treatment of minor ailments. We estimate that if 40 million GP appointments were transferred from GPs to pharmacists via the CPCS, the net cost to the NHS would be £560m. This compares to a cost of £1.2bn under the current system of only using GPs.

3 Vaccinations

The success of the pharmacy flu and COVID vaccination services has shown that pharmacies are well-trusted by the public in providing vaccination services. We believe an expansion in flu and COVID-19 vaccination provision could further help alleviate capacity pressures on GPs. If there is a need for ongoing administration of COVID-19 booster vaccinations, we would like to see all pharmacies given the option to provide these under a nationally commissioned service.

We also think that pharmacies could play a role in the provision of travel and wider adult vaccinations (e.g. for meningitis, shingles and pneumonia), further helping to free up capacity in General Practice. Many pharmacies already offer various travel supplies and private vaccinations (not provided by the NHS), so also offering NHS travel vaccinations would make sense from a patient convenience and choice perspective.

4 Long-term Condition Management

A pharmacy hypertension case finding service launched in October 2021¹⁰. This service aims to identify people aged 40 and above with high blood pressure who have not previously had a confirmed diagnosis. Where blood pressure is high, patients will be referred to a GP to confirm diagnosis and for appropriate management. This service will benefit the health service by diagnosing patients sooner rather than later, and it supports the prevention agenda and the cardiovascular disease ambitions of the NHS Long Term Plan. Ideally, this service could be further expanded in scope to allow highly trained pharmacist prescribers to prescribe associated blood pressure medication. This would save General Practice the time and resource involved in the management of people with newly diagnosed hypertension.

5 Medicines Reviews

Structured medication reviews¹¹ involve an evidence-based and comprehensive review of a patient's medication, taking into consideration all aspects of their health. They are currently offered by clinical pharmacists within Primary Care Networks. Conducting these reviews in community pharmacy would further free up capacity and ease pressure in General Practice.

⁹ PSNC calculations

¹⁰ PSNC- [Hypertension case-finding service](#)

¹¹ NHS- [Structured medication reviews and medicines optimisation](#)