PharmOutcomes®





Service overview and sign-up

The Pharmacy First service will commence on 31st January 2024. From this date the existing Community Pharmacist Consultation Service (CPCS) will come to an end to be replaced by the new Pharmacy First service. Contractors should be aware that to qualify for the £2000 initial fixed payment there is a need to complete the MYS portal declaration . to declare that you agree to the terms and scope of the three elements of the pharmacy First service (NHS Referrals for Minor Illness, Urgent Medicine Supply and the Clinical Pathway Consultations). The deadline for making this declaration is 11.59pm on 30th January 2024.

PharmOutcomes Support for Pharmacy First

The PharmOutcomes team have created templates to support all elements of the service. There are three key parts to the Pharmacy First service:

- 1. Minor Illness consultation with the pharmacist.
- 2. Urgent medicines supply.
- 3. Clinical pathways consultations supporting the treatment of seven common conditions under a Patient Group Direction (PGD) or protocol.

As parts 1 and 2 are referral services only, pharmacy teams will see many similarities with the existing CPCS templates as far as template design is concerned. This will help to make this service transition as seamless as possible for our users.

Key features of the PharmOutcomes Pharmacy First solution

- 1. Direct links to referral centres supporting Pharmacy First referrals to pharmacies from all NHS 111 call centres, more than 4500 GP practices, plus many Urgent Treatment Centres.
- 2. Intuitive templates to support record keeping for each aspect of the service.
- Personal Demographic Service (PDS) verification of patient details including GP practice. All post event
 messages sent to patient's GP practice via GP Connect on saving consultation information. This means all
 required recorded outcomes are sent directly into the GP practice system supporting more accurate record
 keeping.
- 4. Practitioner view of GP held patient record via GP Connect available in the PharmOutcomes Services page at the click of a button. This will help to support clinical decision making. (Go live post service launch.)
- 5. All service claims sent directly into the MYS portal for the pharmacy as records are saved.
- 6. Pharmacy notification of all referral receipts via email and PharmAlarm (if the pharmacy has one of these devices installed, more information here).
- 7. Service templates available to support patients presenting at the pharmacy for treatment under one of the seven clinical pathways.
- 8. Provides a solution to managing onward referral of patients to and from other pharmacies for either urgent medicines supply or support under one of the seven clinical pathways.



How does the service work?

For patients referred by NHS 111, GP practice and other organisations.

As with CPCS, all ITK or BaRS referrals for Pharmacy First sent by external organisations will appear at the top of the PharmOutcomes "Services" page. The pharmacy may still receive some referrals via NHSmail so it is still important to check the pharmacy secure email inbox regularly. Referrals for urgent medicines supply are clearly annotated and easily distinguishable from referral sent for minor illness/clinical pathways support.



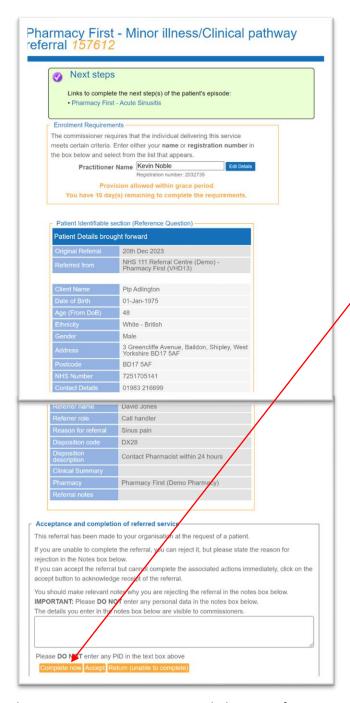
The pharmacy follow-up template is linked to the referral received.

To open the referral simply click it to reveal the information sent. Clicking the referral takes the provider to the enrolment screen. The first time the practitioner name is entered they will be required to fill in details of their name and GPhC registration number. Once enrolled, the practitioner's name will appear for selection when entered as shown below.





Confirming the enrolled practitioner details will display the referral information sent by the referring organisation.

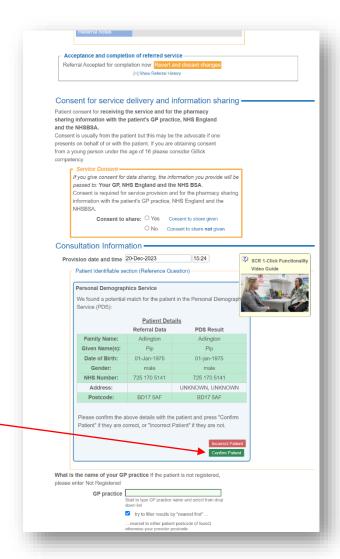


The practitioner now captures verbal consent for service and confirms the patient details by clicking the green "Confirm Patient" button.

Clicking the green button confirms the match and activates access to the patient Summary Care Record from the service page. The GP field will also populate if the patient is registered at a GP practice.

The referral table will show all required information including referrer details and contact, patient information and the reason for the referral.

When the patient attends the pharmacy, to complete the follow up click the orange "Complete Now" button to reveal the follow up template.



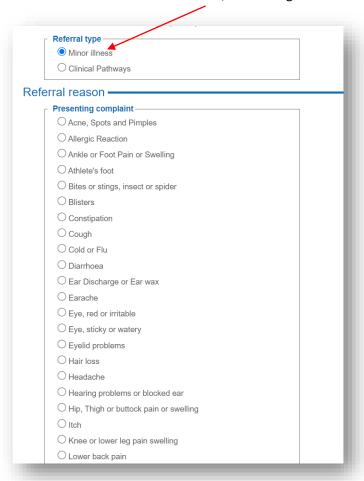


Pharmacy First Get ready for Pharmacy First

The follow up record is split into three parts, referral information, patient history and triage, consultation outcome and advice to patient.

1. Referral information

If the referral is for a minor illness, confirming this will reveal a list of conditions as defined in the service specification.



There is an option for "Other" to use when the referred condition does not appear in the list. A free text entry field appears on selecting "Other" to support entry of information defining the reason.

If the referral is for one of the seven clinical pathways then a list of the pathway options is presented for the user as below.

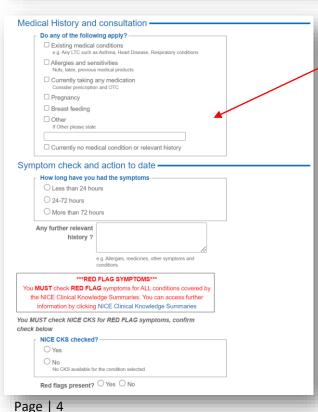
otherwise your provider postcode			
Referra type ————			
O Minor illness			
O Clinical Pathways			
Clinical Pathway			
O Acute Otitis Media			
O Acute Sore Throat			
O Infected Insect Bites			
○ ITG Impetigo			
○ Shingles			
O Sinusitis			
O Uncomplicated UTI			

2. Medical history and triage

This section of the template supports entry of any current conditions, symptom information and any relevant history.

If any red flags are identified, onward referral information displayed, and details can be recorded in dedicated field.

atlent for an urgent in-hours appointment 0-18:30). Agree course of action with patient tient's general practice to secure them an ring patients to a GP, pharmacists should not ns of any specific treatment or outcome. Direct
be available by searching the DoS, using the used in the area. A copy of the basic service can be printed after saving data to give to the patient
111 service when the patient's own general A. After agreeing this course of action with the tabould call NHS 111 using the healthcare it access to a clinician, if this is required. The advice which may result in onward referral of solve the issue so that the episcode of care can be Annex C information provided locally ent to A&E or call 999. If the patient presents adicating the need for an immediate medical madist should tell the patient to attend A&E mbulance. The pharmacist must report any it NHS England team on the same day the ras soon as possible after the pharmacy working day using the incident reporting tooldalow.
s n





3. Consultation outcome

The final part of the template records the consultation outcome. After taking the patient history, it's here that the practitioner can decide if the presenting condition is in fact a minor illness or something that might require treatment

Consultation outcome —	
Consultation Outcome	
O Advice given only (no medicine supply)	
O Sale of an Over the Counter (OTC) medicine	
Referral into a pharmacy local minor ailments service (MAS)	
Referral into an appropriate locally commissioned NHS service, such as a patient group direction	
Onward referral to another pharmacy	
O Non-urgent signposting to another service	
O Urgent escalation to another service	
O Clinical Pathways Consultation	
Other	
Professional role	
O Pharmacist	
O Independent Prescriber	
Use the box below to record any other clinical notes	
Consultation notes	
Incident Reporting	
Pharmacist: Would you like to report an incident or send a message to service commissioners	
Incident/message ○ Yes ○ No	
Pharmacist Feedback —	
Please use the box below to give us any valuable feedback so that we can improve our service	
Pharmacist feedback	
L	
A system generated claim will be sent to the NHSBSA once your record has been saved. Claims will be populated into the Manage Your	
Service (MYS) Portal and will appear for confirmation and submission when you make your monthly return	
	Save

supports entry of up to four different medicines. Some new fields appear in the service as these are required to populate the information required for MYS to ensure the service claim is processed e.g. Number of days treatment—supplied.

If an outcome recording the supply of a medicine, signposting or an escalation is made at this stage, the intervention will be complete. A post event message will send via GP Connect on saving the record and a claim will be sent to MYS on behalf of the pharmacy.

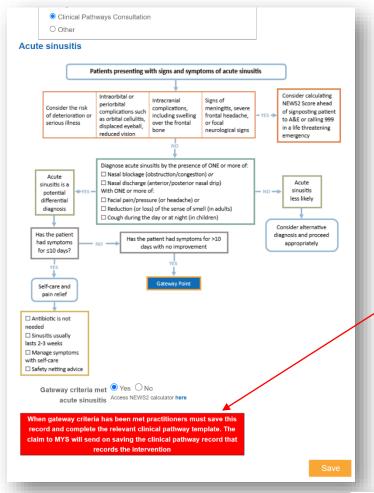
under one of the seven clinical pathways. The outcome options are very similar to those listed in the CPCS service with the ability to record that advice only has been given, or advice and the supply of a medicine has been made through sale, locally commissioned minor ailments service or under a locally commissioned PGD.

Selecting an outcome will reveal relevant fields to complete the record. The medicine supplied option can be seen below. The Pharmacy First template

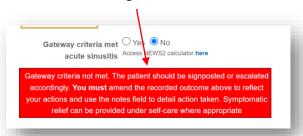
O Advic	ce given only (no medicine supply)	
Sale	of an Over the Counter (OTC) medicine	
○ Refer	rral into a pharmacy local minor ailments service (MAS)	
	rral into an appropriate locally commissioned NHS service a patient group direction	,
O Onwa	ard referral to another pharmacy	
O Non-	urgent signposting to another service	
O Urger	nt escalation to another service	
O Clinic	cal Pathways Consultation	
O Other	r	
include cost of m	Note on medicine supply al payments for any minor illness consultation does not nedicines supplied. If local arrangements permit you can cines supply via locally commissioned MAS, otherwise to pay for any medicine supplied as part of this service.	
re you suppiyin epresentative?	ng a medicine to the patient or patient's	
Medicine supp	oly via sale Yes No or or MAS	
MAS scheme. The number of unit dos	ils of medicines purchased or supplied via local e quantity entered is based on dm+d and must be the ses, NOT packs. This is the number of tablets or , number of g or mls for creams or liquids and number ars or sprays.	
Medicine	e supplied DO NOT enter number of packs see note above	How to search for medicines
		Start to type the name of the
	Quantity	
Dose reco		medicine you are supplying into the
	mmended	medicine field and select from dro
Days	mmended supplied? Enter number of days medicine supplied	medicine field and select from drop down list. The more information
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Days 2nd Medic n Use the field belo	mmended supplied? Enter number of days medicine supplied line supply Yes No eccessary? ow to detail any medicine supplies made under a	medicine field and select from dro down list. The more information entered the narrower the search
Days 2nd Medic n Use the field beloocally commissi	mmended supplied? Enter number of days medicine supplied sine supply Yes No eccessary? ow to detail any medicine supplies made under a oned PGD or as an independent prescriber	entered the narrower the search
Days 2nd Medic n Jse the field belo	mmended supplied? Enter number of days medicine supplied sine supply Yes No eccessary? ow to detail any medicine supplies made under a oned PGD or as an independent prescriber	medicine field and select from drop down list. The more information entered the narrower the search



If an outcome is recorded of "Clinical Pathways Consultation", the relevant gateway flow chart will be displayed with an option to record whether the gateway criteria have been met.

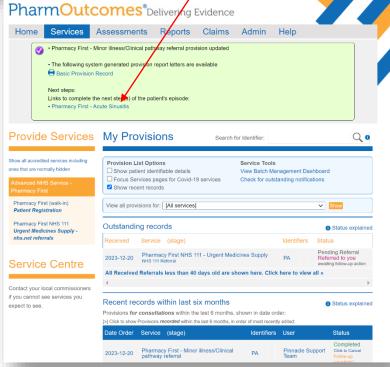


If the gateway criteria are not met, a prompt appears to inform that patient support can still be provided or signposting/escalation recorded as an outcome at this stage.



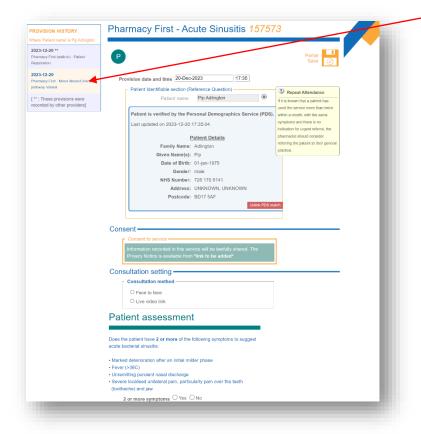
Confirming the Gateway criteria are met prompts the practitioner to save the record and record the clinical pathway intervention as a next stage.

N.B. For PharmOutcomes to send a claim to MYS for any clinical pathway intervention, the relevant pathway template must be completed. Practitioners can access any of the clinical pathway templates on saving this initial record via a clickable link in the main service page.



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Clicking the link opens the relevant pathway template for completion and recording medicine supply /non supply as appropriate. The patient information is transferred, and the provision history is displayed in the top left of the service



page. This history provides clickable links to previous service stages that will display all saved records if required for reference.

The clinical pathway templates have been carefully built to support the practitioner through the medicines supply/non-supply in line with the relevant PGD.

Saving the record will prompt a post event message to be sent via GP Connect detailing the outcome that again could be a medicines supply/non-supply, signposting, or an escalation.

Saving the record will prompt a service claim to MYS on behalf of the pharmacy.

Each of the seven conditions has its own dedicated template.

For patients presenting at the pharmacy

Patients can self-present at the pharmacy for several reasons that include:

- 1. Referrals sent to the pharmacy by NHSmail.
- 2. Patients that present because of an onward referral by another "Pharmacy First" pharmacy.
- 3. Patients that self-present at the pharmacy that are treatable under any of the clinical pathways.



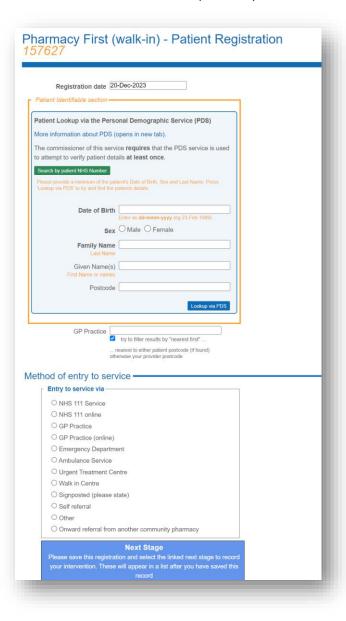
All of the above patients can be registered at the pharmacy using the "Pharmacy First (walk in) — Patient Registration" template that can be found in the left-hand service side bar of the PharmOutcomes "Services" Page.

N.B. the clinical pathways templates are not visible from the Services page as they are linked to the "Registration" template and are accessed once the registration is complete via links as described above.

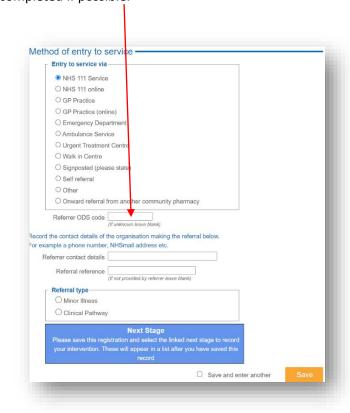


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Opening the registration template will allow the practitioner to enter all relevant information including the patient demographics (validated via PDS) and details of how the patient has accessed the service (e.g. NHS 111 referral, onward referral from another pharmacy or whether the patient has self-presented etc.).



If the patient has been referred, relevant fields display to capture referral IDs and referral site ODS codes etc. This information is required by the NHS BSA and is sent on saving the record. It is appreciated that this information may not always be provided as part of an NHSmail referral so they are non-mandatory fields that should be completed if possible.



Recording the registration outcome as a minor illness consultation, if appropriate, prompts the practitioner to complete a minor illness template that reflects the one

previously covered in this guide. This can be accessed via a link in the "Services" page on saving the initial registration.

Selecting a clinical pathway as a required next stage will prompt the display of the relevant gateway flow chart. The practitioner can now record whether the gateway criteria have been met or not. For patients satisfying the gateway criteria, an intervention can be recorded using the dedicated clinical pathway template that is accessed and used as described earlier.

Referrals for Urgent Medicines Supply

These referrals will present in the "Services" page as seen earlier in this guide and the linked follow-up mirrors the CPCS urgent supply service. A dedicated NHS-mail template can be accessed and used from the left-hand side of the "Services" page when referrals are received via NHS-mail for urgent medicines supply. Saving the record will prompt both a GP post event message to send and a claim to be sent to the MYS portal on behalf of the pharmacy.

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Service transition - FAQ

My pharmacy is already signed up with PharmOutcomes for CPCS; what do I need to do to sign up for Pharmacy First?

If your pharmacy has already signed up to use PharmOutcomes as your chosen IT partner for CPCS via PharmOutcomes Direct, you don't need to do anything to sign up for Pharmacy First. The team at PharmOutcomes will automatically configure your Pharmacy to access the new Pharmacy First templates from the 31st of January 2024. On this date CPCS will be switched off and Pharmacy First will be activated for your site. You will need to electronically sign a revised End User Licence Agreement (EULA) that will be made available to all PharmOutcomes users mid-January.

I have a pharmacy chain and I want to sign the amended EULA on behalf of all my branches so that each branch is not required to sign on our behalf, can I do this?

Yes, you can. If you do not want the EULA acceptance to appear in PharmOutcomes for your individual pharmacy sites please let us know. We can accept a block acknowledgement from a head office and prevent the appearance of the EULA acceptance at branch level. This applies to pharmacy chains of any size.

My Pharmacy is not currently signed up with PharmOutcomes for CPCS; what do I do to sign up to use PharmOutcomes for my Pharmacy First service?

You will still be able sign up at PharmOutcomes Direct and accept the EULA when this is made available to you. We will only be able to set your pharmacy end point for Pharmacy First when that service is made available in DoS.

What will happen to CPCS referrals that my pharmacy receives on the 30th January that I have not yet completed?

These referrals will persist in your "Services" page, and you will be able to complete the relevant follow up when the patient presents. From the 31st January your pharmacy will only receive referrals for Pharmacy First.

PharmOutcomes – More than just a solution for Pharmacy First!

PharmOutcomes links to the majority of NHS hospital trusts in England supporting the Discharge Medicines Service (DMS) and Smoking Cessation Service (SCS). The platform also connects many GP practices with community pharmacies via our Local Services and PharmRefer GP referral solutions. Both solutions either already, or will, support direct referrals to pharmacies for Pharmacy First, Hypertension Case Finding and the Pharmacy Contraception Service.

Using PharmOutcomes as your chosen IT solution provider allows your pharmacy team to manage **ALL referrals** to your pharmacy in a consistent manner as the majority will flow directly into the PharmOutcomes workflow. This applies to referrals that are provider pays services (currently CPCS, moving to Pharmacy First in January 2024, Hypertension Case Finding and the Pharmacy Contraception Service from April 2024) and referrals that are commissioned via other routes (DMS, SCS) where there is **no charge to pharmacy**. This means the pharmacy team only have one place to look for all referral types.

PharmOutcomes – A complete referral management solution!

For more information on Pharmacy First watch out for regular updates through January 2024 on the PharmOutcomes Homepage at https://pharmoutcomes.orgW we will be making resources available via the homepage throughout January 2024 to support pharmacies prior to the service launch. This will include further guidance and a video guide.