

# NHS Pharmacy Services in Devon

## Stakeholder briefing

December 2024

### Introduction

The Pharmacy First Service is a national service commissioned by NHS England. All community pharmacies in England have the opportunity to sign up and deliver the service however, - it is not mandatory. In Devon, over 95% of community pharmacies are signed up to the scheme.

The service launched on the 31 January 2024 and enables community pharmacists to complete episodes of care for patients without the need for the patient to visit their general practice. This means pharmacists can complete a patient's care for some conditions from start to finish, by having the ability to supply the patient with certain medication, if appropriate, without a prescription from a GP.

This service, alongside expansions to the pharmacy blood pressure checking and contraception services, is estimated by NHS England to save up to 10 million general practice team appointments a year and is designed to help patients access quicker and more convenient care, including the supply of appropriate medicines for minor illness.

The Pharmacy First Service builds on the previous Community Pharmacist Consultation Service (CPCS) by enabling community pharmacies to manage patients for seven common conditions, following specific clinical pathways. For more information, please visit our ICB [webpage](#) or NHS England's [website](#).

The overall service consists of three core elements:

- Clinical pathways for 7 common conditions - this is a new part of the service
- NHS referrals for minor illness consultations (patients can be referred via their GP or 111)
- Urgent repeat medicine supply

Pharmacy workforce issues and national medicine supply issues associated with some medicines are multi-faceted and provision of a national clinical service, such as the Pharmacy First Service, does not seek to resolve these issues. However, the service does signify a shift in the core function of community pharmacy and provides

recognition of the clinical skills and potential of community pharmacists to deliver an increased scope of direct patient care.

## **Update on supply of drugs**

The Department for Health and Social Care (DHSC) is responsible for the continuity of supply of medicines and manufacturers have a legal requirement to inform DHSC of any supply problems. DHSC works closely with NHS England, the Medicines and Healthcare products Regulatory Agency (MHRA), the wider NHS, pharmaceutical companies, wholesalers, and others in the supply chain to ensure consistency of supply of medicines.

### **Supply of ADHD and HRT medications**

Updates on significant supply issues are regularly communicated by NHS England and the DHSC directly to General Practice and pharmacies in the form of Medicines Supply Notifications. These contain information such as any recommended action including possible alternative treatments, the likely length of disruption and any other suggested action to be taken. These have been issued nationally for some treatments for ADHD and HRT medications over the last 12 months

Where a supply issue is thought to have the potential to have a significant patient safety or system wide impact, the DHSC medicines supply team may issue a National Patient Safety Alert or Supply Disruption Alert. These will contain actions for various stakeholders within the system, including ICBs, as well as primary and secondary care providers. For example, NHS Devon ICB was involved in facilitating the production and dissemination of local guidance relating to the shortages of various ADHA medications earlier this year.

The DHSC and NHS England have produced guidance for contractors and commissioners on handling medicines supply issues [here](#)

## **Support for pharmacists' mental health and wellbeing.**

Community Pharmacy Devon (the local representative body for Community Pharmacies) regularly signpost pharmacy teams to the mental health and wellbeing resources that are available both in Devon and nationally. Further information can be found via the link below.

<https://devon.communitypharmacy.org.uk/pharmacy-resources/document-library-n-z/wellbeing-of-pharmacists-and-pharmacy-staff/>

## **Pharmacy support for vulnerable and elderly people taking prescribed medication.**

Where a service provider, such as a pharmacy, is providing a service to the public, the provider must not discriminate against a person requiring the service by not providing the service. They have a duty to make reasonable adjustments or small manageable changes to how the service is delivered in order to ensure all members

of the public are able to access the service; under the Equality Act (2010), patients must receive a reasonable adjustment to their care if there is an established need.

Within the pharmacy, the reasonable adjustment could involve the way medicines are supplied when a patient requires support with their medicines taking, which may include a determination of whether a Monitored Dosage System (MDS) is appropriate for the patient. When patients require support, they should be able to receive that support from their chosen community pharmacy (including online pharmacies). A multidisciplinary approach is more likely to produce the correct outcome for the patient. All practitioners have an important role to play in supporting patients in the optimisation of their medicines. ICB guidance on this can be found here: [Resources for health and social care professionals - One Devon](#))

In addition to reasonable adjustments, the GP contract, Primary Care Network (PCN) Directed Enhanced Service (DES) and the requirements relating to addressing polypharmacy via Structured Medication Reviews (SMRs) state that providers are required to identify patients who would benefit from a Structured Medication Review (SMR) specifically those:

- in care homes;
- with complex and problematic polypharmacy, specifically those on 10 or more medications;
- on medicines commonly associated with [medication errors](#);
- with severe [frailty](#), who are particularly isolated or housebound or who have had recent hospital admissions and/or falls;
- using potentially addictive pain management medication.

These are largely carried out by pharmacists working in general practice.

Both pharmacists and pharmacy technicians in General Practice have a responsibility to provide leadership for medicines optimisation systems across PCNs including ensuring there are safe repeat prescribing systems, and timely monitoring and management of medicines, particularly those that are high risk. The ICB employed medicines optimisation team works with general practice to promote safe, appropriate, and cost-effective prescribing. The [Repeat Prescribing Toolkit](#), jointly produced by the Royal College of General Practitioners and the Royal Pharmaceutical Society was recently shared with all GP practices and offers further support and advice regarding safe repeat prescribing processes.

## Complaints and patient communications

To complain about primary care services in Devon – including pharmacy – contact NHS Devon for advice and signposting.

- Telephone – 0300 123 1672
- Email – [d-icb.patientexperience@nhs.net](mailto:d-icb.patientexperience@nhs.net)
- Post – Patient experience team, NHS Devon, Aperture House, Pynes Hill,

The One Devon website is dedicated to local information about NHS services, which is regularly updated with key information and signposting.

<https://onedevon.org.uk/>

**ENDS**