

In this issue:

- The New Community Pharmacy Contract and the National PCMS Pharmacy Support Team
- The Right Medicine - Resource Allocation 2004-05
- Premises Survey Update
- Cardiovascular Risk Clinics for Diabetes – Community Pharmacists Wanted!
- Update on The Right Medicine – West Lothian Healthcare Division
- Useful Website Contacts for Pharmacists in Lothian

## An Update on the New Community Pharmacy Contract and the Creation of a National Primary Care Model Schemes (PCMS) Pharmacy Support Team

### *The new community pharmacy contract*

The **Acute Medication Service** will not differ too much from what we currently provide.

The **Minor Ailment Service** or 'Direct Supply' will allow a patient who is exempt from prescription charges, and who chooses to register for this service with the pharmacy, to have a consultation with the pharmacist and if appropriate to be supplied with a suitable remedy chosen from a defined list.

The **Public Health Service** may take the form of reinforcing national priorities, which will vary but may include smoking cessation and emergency hormonal contraception.

The **Chronic Medication Service** or 'repeat dispensing', which generally will be the major part of any community pharmacy's business will be where the greatest change in practise is likely. At the discretion of the prescriber and with the agreement of the patient it is proposed to have a facility to issue a prescription, that will be valid for six months, to be presented to the pharmacy of the patient's choice. This prescription may take the form of a 'master with six slave prescriptions'. This will allow the submission of a slave to enable payment to be made on a regular basis. This is currently being piloted in areas of Fife.

The introduction of such a system will allow pharmacists to better plan their workload and allow more time to be devoted to patient care. Ultimately, by a process of evolution and certainly not by revolution, the 'pharmaceutical care plan' can be built up. Pharmacists will be more confident that they are seeing the complete picture of patients' medication and thus be in a better position to make a judgement on concordance and thus acceptability and have the ability to plan a time to discuss issues with the patient.

The existing Pharmaceutical Care Model Schemes (PCMS) are the forerunners for the new contract and will form the clinical and practice components of this new **Chronic Medication Service**.

### *A national PCMS Pharmacy Support Team*

Annamarie McGregor, Director of the PCMS Initiative, based at the Scottish Executive, has enlisted the help of pharmacy contractors across Scotland to visit Independent Community Pharmacists to listen to their anxieties, fears and concerns and to encourage them to engage with the Model Schemes or Pharmaceutical Care Schemes. For West Lothian the contact is Steven Ward and for the rest of Lothian, Alan Glauch and Jill Hutchings. Engagement with these schemes will allow pharmacists to become aware of what will be required to conduct a formalised systematic medicines review. There is now a national focus on the Frail Elderly Scheme.

*Find out about the Lothian Model Schemes from Katy Kelly, Community Pharmacy Development Pharmacist, NHS Lothian Primary Care Division, ☎ 0131 537 6679, email: [Catherine.Kelly@jpc.scot.nhs.uk](mailto:Catherine.Kelly@jpc.scot.nhs.uk)*

The Scottish Executive has already engaged with the major suppliers of community pharmacy software with a view to these suppliers developing a template based on the current Model Schemes data set. This will allow the recording of a Pharmaceutical Care Plan within the current PMR system, reducing the need for additional paperwork.

Finally, pharmacy has historically been an insular profession, with pharmacists practising in isolation and thus thinking that they are unique in their fears and concerns. I can assure you that there is a great commonality in the concerns that I have recorded to date. The time has come to collaborate with colleagues, to share ideas and good practice as the major threats to the pharmacy profession are from outside and not from within. Come along to your PLG Group and make your views known; this is the way to influence pharmacy services in your neighbourhood.

*Thanks to Alan Glauch, Community Pharmacist, Edinburgh, for contributing this article.*

## The Right Medicine NHS Lothian Resource Allocation 2004-05

Lothian NHS Board has submitted the 2004-05 spending plan for the £575,000 allocated to implementation of HDL(2002)8 'The Right Medicine' to the Scottish Executive. The table below provides a summary of the resource allocation, based on the actions of *The Right Medicine* and priorities in the *NHS Lothian Local Health Plan 2004*.

We are now mid way through year 3, which is being seen as a time for consolidation of the work developed to date but also a time to step back and identify and plan how the resource is to be best utilised for 2005-06 and beyond. Local implementation of the new community pharmacy contract will be central to these future plans. Over the summer members of the HDL Advisory Group attended Locality Meetings to present progress and receive feedback on priorities for the future.

The plan for 2004-05 continues to build on **two broad areas of work**.

**Access in primary care** to enable patients to make the pharmacy their first port of call for common illnesses and health services. Investment will continue to develop Model Schemes for pharmaceutical care (older people, people with

severe and enduring mental illness and palliative care), engage pharmacists in the evolving Community Health Partnerships and planning of local services and to support pan Lothian initiatives including repeat prescribing services and diabetes services in community pharmacy and community pharmacy premises development.

### **Redesign of medicines supply and administration systems in hospitals and across the interface.**

Investment will continue to develop systems across all three Divisions where it is appropriate to do so. This is augmented in the +Primary and Community Division by the integrated care posts in Care of the Elderly and Mental Health to support the development of community based services to maintain people in their homes and speed up discharge from hospital including effective use of medication compliance aids.

A full year 2 progress report and 2004-05 plans were submitted to the Lothian NHS Board in September. A copy is available from members of the HDL Advisory Group or through the Lothian NHS Board website under Board meetings ([www.nhslothian.scot.nhs.uk](http://www.nhslothian.scot.nhs.uk)).

Area of Work	Funding 2004/05
<b>Model Schemes for Pharmaceutical Care</b>	£45,000
<b>Pharmacy Locality Groups (PLGs) per LHCC – Access to services in Primary Care</b> Strengthen and develop PLG infrastructure	£96,000
<b>Initiatives (pump priming monies)</b>	
<b>Pan Lothian Initiatives</b>	
Repeat Prescribing Services	£40,000
Supplementary Prescribing	£20,000
Diabetes Services in Community Pharmacy	£36,000
Out of Hours Pharmaceutical Services	£5,000
Community Pharmacy Premises Development	£30,000
<b>Division Specific Initiatives</b>	
Pharmaceutical Care for patients in Care Homes	£15,000
<b>Communication Strategy (Pan Lothian)</b> Pharmacy News Bulletin	£5,000
<b>Redesign of Medicines Supply and Administration Systems in hospitals and across the interface</b>	
LUHD – one stop dispensing / patients' own medicines	£33,000
LPCCD – admission / discharge redesign	£55,000
WLHD – one stop dispensing / patients' own medicines	£35,000
<b>Other initiatives – Partnership Working</b>	
West Lothian Partnership Centre	£45,000
Integrated care posts in Care of the Elderly and Mental Health	£115,000
<b>TOTAL</b>	<b>£575,000</b>

Thanks to Marion Bennie, Consultant in Pharmaceutical Public Health & Chair, NHS Lothian HDL(2002)8 Implementation Advisory Group, for contributing this article.

## Premises Survey Update

The premises group wish to say a *big thank you* to all pharmacy contractors in Lothian. We had a fantastic 100% response to our survey, the first part of which was completed by the beginning of 2003. The majority of funding available for 2002/2003 and all the funding for 2003/2004 has been allocated. Successful bids were made by 51 pharmacies to enable upgrading of premises.

The funding, provided by the Scottish Executive Community Pharmacy Development programme, was substantially augmented through the Lothian Right Medicine Strategy Implementation group and a total of £306,681 was spent in these two years. The total spend on premises improvement since 2000/2001 is £406,147 showing the major impact the Right Medicine Strategy funding has had on community pharmacy premises across Lothian. These improvements range from the provision of small consultation areas to large purpose built consultation suites, and include the provision of ramps to allow wheelchair access to some premises where this has been possible and security measures.

The second part of the survey to provide an independent assessment has now been completed. A personal visit



has been made to every pharmacy by a premises consultant. A premises register will be produced which will be used in future to target and prioritise any funding which becomes available.

In December 2003, NHS HDL(2003)64 'Disability Discrimination Act (1995): Allocation of funds to promote good practice in primary care with regard to the needs of disabled patients' identified funding, which for pharmacy in Lothian amounts to £42,000. If you are considering improving your pharmacy, *think ahead!* Have plans drawn up *now* for consultation areas, security measures or any improvements that will help you to comply with the Disability Discrimination Act, so that you will be ready when funding is released.

Discussions are currently ongoing as to how this money will be allocated to provide the greatest benefit across Lothian. Attitudes and behaviours towards disabled people are seen as very important by all disabled groups and their representatives, and the pros, cons and practicalities of the provision of training for pharmacists and their staff in dealing with people with disabilities is currently under investigation.

*Thanks to Fiona McCready, Community Pharmacist, Edinburgh, for contributing this article.*

## Cardiovascular Risk Clinics for Diabetes - Community Pharmacists Wanted!

The Scottish Diabetes Framework<sup>1</sup> highlighted the crucial importance of reducing cardiovascular risk and re-iterated the need for aggressive management of hypertension, hyperlipidaemia and hyperglycaemia along with anti-smoking strategies. In April 2003 a pharmacist-run clinic was established within the Metabolic Unit at the Western General Hospital to treat patients with diabetes not meeting the cardiovascular risk targets specified in SIGN Guideline 55<sup>2</sup>. An audit of the clinic workload showed that significant reductions in blood pressure had been achieved, an average reduction of 24% systolic and 20% diastolic BP. In addition, improvements in the prescribing of statins and anti-platelet medicines were demonstrated.

Funding has been secured from the Scottish Diabetes Group to expand this service into the community. It is proposed that cardiovascular risk clinics are established within the North West Edinburgh area, at two or more practices but rotating between several practices, and will be run by suitably trained community pharmacists based

in North West Edinburgh. A lead pharmacist (the pharmacist running the WGH clinic) will co-ordinate the community-based clinics, provide training for the pharmacists and be responsible for monitoring the clinic outcomes and performance.

Referral criteria will comprise patients with diabetes who have uncontrolled hypertension with or without established macrovascular disease. The pharmacists will review patients on a weekly basis undertaking the following actions relating to individual patients: blood pressure measurement (including use of ambulatory BP monitors); review of cardiovascular drug therapy and recommendations for changes made to GPs according to a treatment protocol based on SIGN Guidelines; blood and urine samples taken to monitor the effects of any medication; patient medication compliance check; assessment of weight, smoking status and exercise level; advice on healthy lifestyle. Patients will attend the clinics at 6 weekly intervals until risk factor targets are attained.

### References:

1. NHS Scotland 'Scottish Diabetes Framework'. Scottish Executive, April 2002. <http://www.scotland.gov.uk/library5/health/sdf.pdf>
2. 'Management of diabetes'. Scottish Intercollegiate Guidelines Network, November 2001. <http://www.sign.ac.uk/pdf/sign55.pdf>

*Thanks to Alison Cockburn, Diabetic Cardiovascular Risk Clinic Pharmacist, Metabolic Unit, Western General Hospital, Edinburgh, for contributing this article.*

## Update on The Right Medicine - West Lothian Healthcare Division

### Pharmaceutical Care Model Schemes (PCMS)

As part of the Model Schemes development team Steven Ward will be visiting community pharmacies in West Lothian to:

- ❑ Determine the current level of involvement in Model Schemes
- ❑ Assist pharmacists to overcome the barriers in getting involved in PCMS

### Community Pharmacy Palliative Care Network

Lynn Bennett was appointed in March 2004 to the post of Palliative Care Pharmacist. Based in St John's pharmacy department Lynn will co-ordinate the Palliative Care Network and liaise between primary and secondary care.

The network is currently being extended from 5 community pharmacies to 12. The participating pharmacies offer an excellent geographical spread over the relatively large area of West Lothian. A further two pharmacies will act as a source of information and advice, but will not routinely stock the palliative care drugs.

A palliative care network meeting was held in October. This was an informal meeting to allow the network pharmacists to meet and exchange details. The main educational focus of the evening was the use of syringe drivers and drugs used in these devices. Quarterly peer review sessions are to take place.

Launch meetings for the revised Lothian Palliative Care Guidelines, October 2004 (see [www.scan.scot.nhs.uk](http://www.scan.scot.nhs.uk))

were held in November, to which the network pharmacists were invited. The Lothian Palliative Care Guidelines support the management of patients with palliative care needs in non-specialist settings and should be referred to for detailed information on drug choice, doses and routes of administration.

### Falls Audit

A falls prevention training evening was held in January 2004 to assist community pharmacists to become involved in PCMS. The aim of the falls audit is to identify and reduce the risk of falls and hip fracture in older people. The audit was originally set to run until the end of March 2004 but has been extended to the end of March 2005.

### Frail Elderly Medication Review Training Day

An NHS Education for Scotland (NES) Medication Review Training day for community pharmacists willing to develop a Frail Elderly Medication Review PCMS was held in October at Livingston football stadium. In line with the Chronic Medication Service (CMS), the reviews will take place in the pharmacy using information available from patient interview and computerised pharmacy records. Access to medical case notes is not required. Reviews are planned to commence in early 2005.

*Thanks to Andrea Smith, Primary Care & Community Pharmacy Support Pharmacist, West Lothian Healthcare Division, for contributing this article.*

## Useful Website Contacts for Pharmacists in Lothian

<a href="http://www.rpsgb.org/scotland">www.rpsgb.org/scotland</a>	Royal Pharmaceutical Society of Great Britain (RPSGB) Scottish Department
<a href="http://www.show.scot.nhs.uk/ssipp">www.show.scot.nhs.uk/ssipp</a>	Scottish Specialists in Pharmaceutical Public Health (SSiPPHs)
<a href="http://www.dh.gov.uk">www.dh.gov.uk</a>	Department of Health (England)
<a href="http://www.ljf.scot.nhs.uk">www.ljf.scot.nhs.uk</a>	Lothian Joint Formulary (LJF)
<a href="http://www.medicines.org.uk">www.medicines.org.uk</a>	Datapharm Communications; includes electronic Medicines Compendium (eMC)
<a href="http://www.nhslothian.scot.nhs.uk/primarycarelibrary">www.nhslothian.scot.nhs.uk/primarycarelibrary</a>	NHS Lothian Primary and Community Care Division electronic library
<a href="http://www.druginfozone.nhs.uk">www.druginfozone.nhs.uk</a>	DrugInfoZone - medicines information
<a href="http://www.pharmj.com">www.pharmj.com</a>	Pharmaceutical Journal
<a href="http://www.show.scot.nhs.uk">www.show.scot.nhs.uk</a>	Scottish Health On the Web (SHOW)
<a href="http://www.scottishmedicines.org">www.scottishmedicines.org</a>	Scottish Medicines Consortium (SMC)
<a href="http://www.mhra.gov.uk">www.mhra.gov.uk</a>	Medicines and Healthcare products Regulatory Agency (MHRA); includes Committee on Safety of Medicines (CSM)
<a href="http://www.nhshealthquality.org">www.nhshealthquality.org</a>	NHS Quality Improvement Scotland (QIS)
<a href="http://www.sign.ac.uk">www.sign.ac.uk</a>	Scottish Intercollegiate Guidelines Network (SIGN)

**If you have any comments on Pharmacy News, or wish to contribute to a future issue, please email:**

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**Deadline for submitting articles for next issue: end January 2005.**