

Strategic overview: NHS system

Dr Keith Ridge, Chief Pharmaceutical Officer
1 November 2016

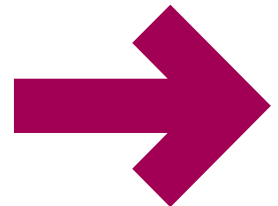


A collaborative approach

- *Five Year Forward View* – Oct 2014
- NHS planning guidance, Dec 2015: Every health and care system in England to create a local plan for implementing the *Five Year Forward View* and to close three gaps: health and wellbeing, care quality and financial sustainability
- CCG Planning Guidance 17/2019 including 2016/21 NHS Shared Planning Guidance
- Local leaders to think beyond organisational boundaries to find innovative solutions for local needs
- 44 areas ('footprints') covering England and working across health and social care
- Developing proposals with tangible benefits for patients: sustainability and transformation plans



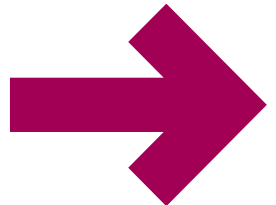
Published October 2014



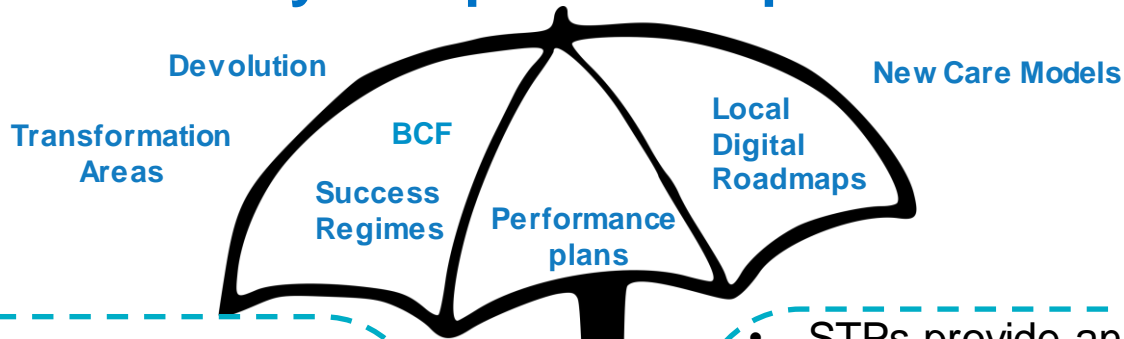
New Care Models / Vanguard



- Jan 2015: NHS invited organisations and partnerships to apply to become ‘vanguard’ sites for the New Care Models Programme, to help deliver the *Five Year Forward View*
- There are now 50 vanguard sites focusing on:
 - Integrated primary and acute care systems
 - Enhanced health in care homes
 - Multi-speciality community providers
 - Urgent and emergency care
 - Acute care collaborations
- Footprints are now looking at new ways of delivering care in the vanguards

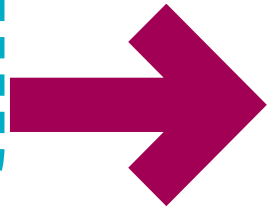


STPs provide an umbrella for the local system to inform the two year operational plans



- Statutory responsibilities for individual health and care organisations remain
- ALB Regional Directors retain accountability for delivery in their regions
- Existing accountabilities for Chief Executives of provider organisations and Accountable Officers of CCGs are unchanged

- STPs provide an opportunity to align the multiple aspects of system architecture
- In some cases existing elements may be replaced by STPs
- Existing plans and frameworks may also continue in their own right but referenced and aligned through the STP



Pharmacy's involvement

Where we are:

- Individual LPN chairs and CCG lead pharmacists have been involved in the local planning process in some footprints
- Community pharmacy is involved in several Vanguard sites

Pharmacy's strength:

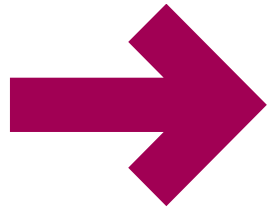
- The solutions are about preventative care; finding new ways to meet people's needs; and identifying ways to do things more efficiently
- Pharmacy is uniquely placed

Size of the challenge:

- This is significant change for the system - the transition process will not be straightforward
- A 'one size fits all' approach from the centre will not work. We need a tailored approach

Engaging with footprints:

- Local contractors and LPCs to engage with local networks: LPNs, HWBs, Health Watch and diverse local communities
- Pharmacy Integration Fund a catalyst for change to inform local decisions / transformation

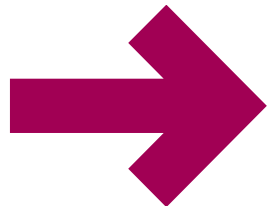


Pharmacy Integration Fund



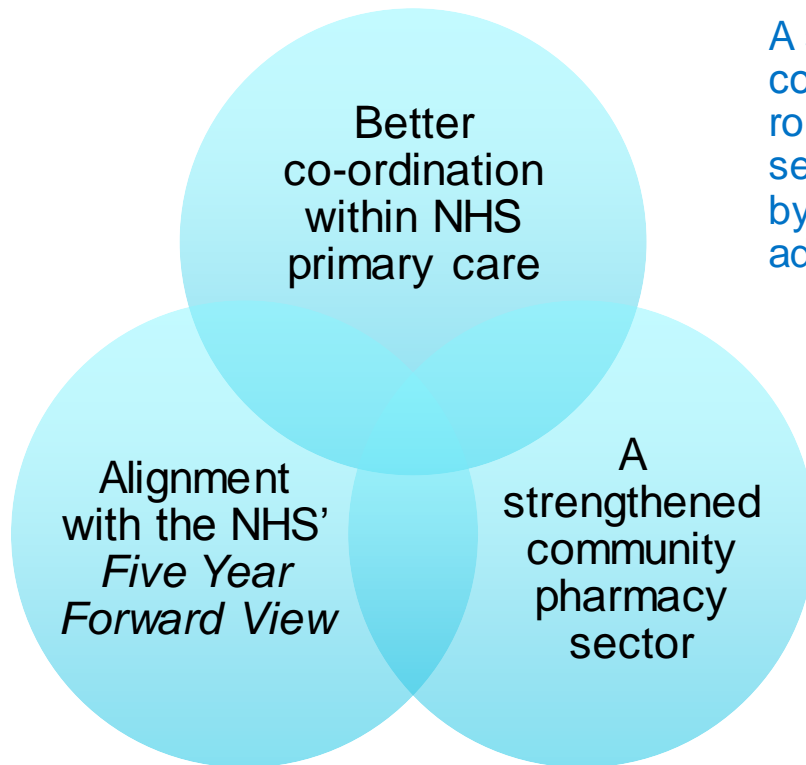
Why set up a fund?

- To enable **a greater role for community pharmacists and technicians** within the local NHS in new, integrated local care models
- To integrate and support **the development of clinical pharmacy practice** in a wider range of primary care settings... resulting in a more effective NHS primary care patient pathway
- To **develop the commissioning landscape** through embedding evidence-based, high quality clinical pharmacy practice to support better outcomes for patients and reduce health inequalities



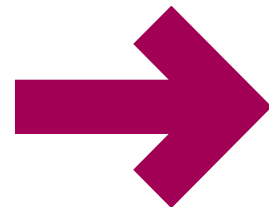
Integration is...

Integration of services will work to reduce health inequalities in access to services and health outcomes and improve patient experience. This helps us meet our duties to pay regard to reduction of health inequalities as defined in the health and Social Care Act 2012.

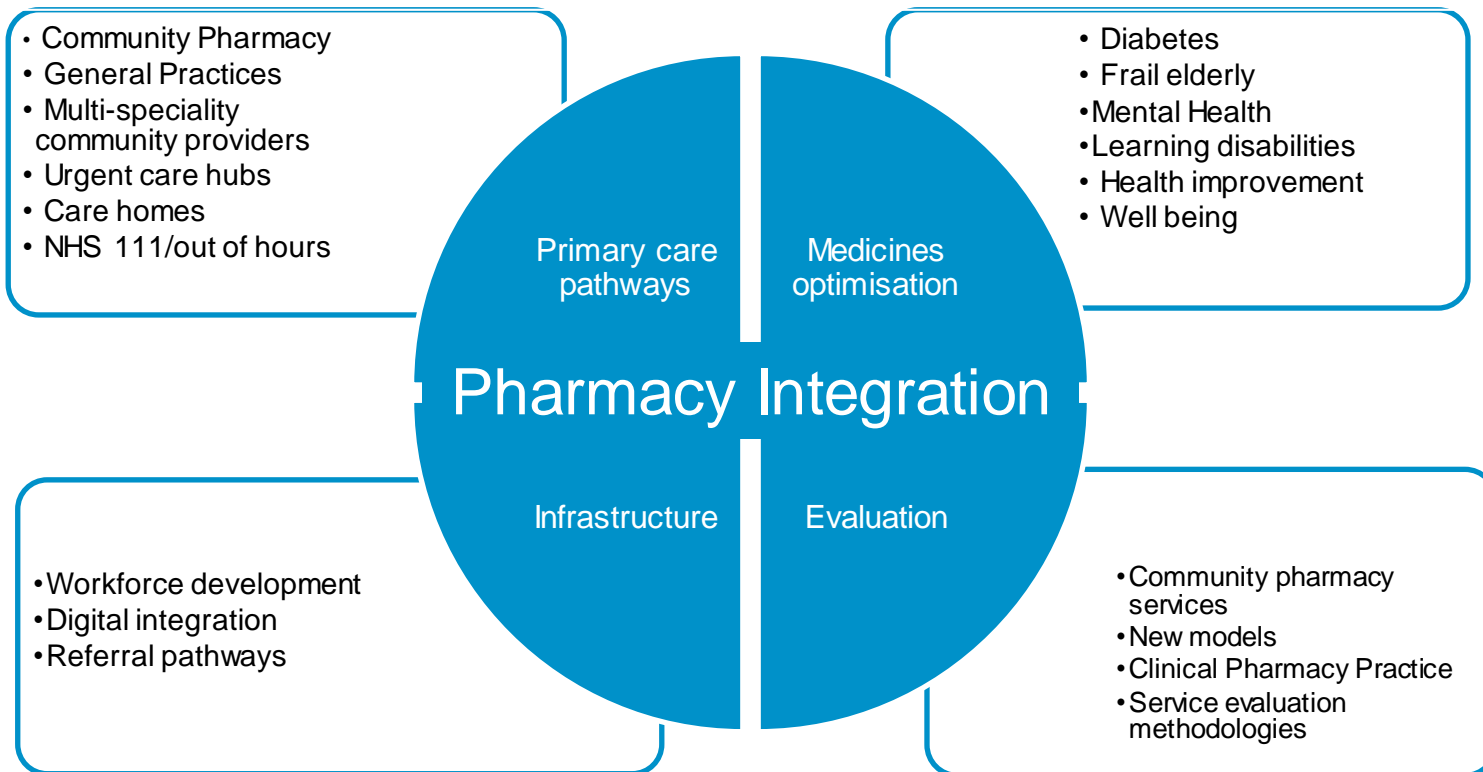


Integration is not...

A scaling back of community's pharmacy's role in the NHS. The sector will be supported by NHS England to adopt new clinical roles.

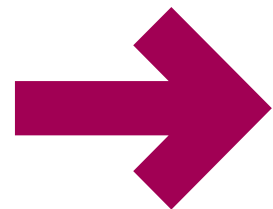


The proposals - £42 million for 2016-18



Work programmes so far

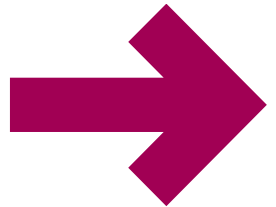
December 2016 to April 2018



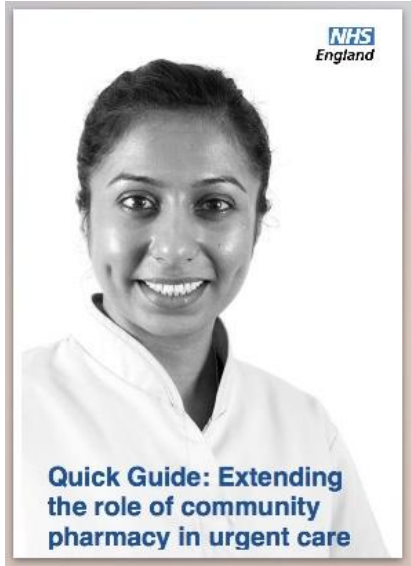
Workforce development

Health Education England commission:

- Funded workforce plan for pharmacy professionals by Spring 2017
- April 2017- March 2018: Educational grants for post-graduate clinical studies up to diploma level for around 1,000 community pharmacy-based pharmacy professionals
- April 2017- March 2018: Pharmacy technician clinical leadership programme
- New clinical pharmacy pathways that can be delivered from any practice base:
 - Community pharmacy
 - Urgent care hubs/NHS 111
 - Care homes/General practice

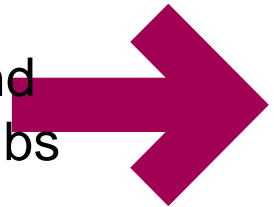


Urgent care integration



Published November 2015

- From December 2016: Referral to community pharmacy from NHS 111 as part of new urgent medicines supply service national pilot
- Early 2017: referral to community pharmacy from NHS 111 for self care advice for minor illness and access to local minor ailment schemes - spreading the learning from West Yorkshire
- April 2017- March 2018: around 60 WTE pharmacists deployed into NHS 111/urgent care hubs
- Workforce development package for around 120 pharmacists working in urgent care hubs including prescribing qualification

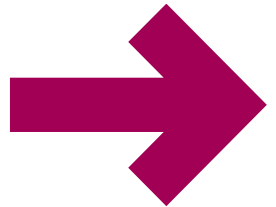


Digital integration

- Medicines Digital Strategy - Domain E: to “integrate community pharmacy across care settings”

NHS Digital commission:

- Activity recording, e.g. sharing data with NHS BSA
- Transfer of care, i.e. IT standards applicable for community pharmacy
- Referral – hospital discharge, GP practice, NHS 111
- Summary care record roll out up to April 2017
- NHS Mail for all community pharmacies by April 2017

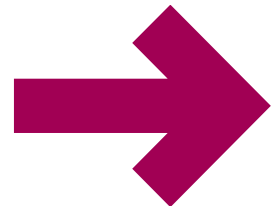


Care homes integration

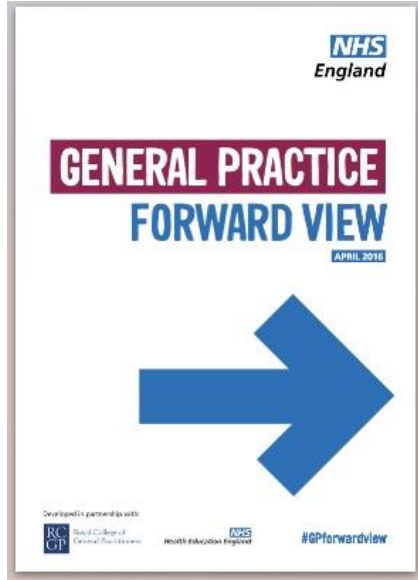
- Evidence review including learning disabilities and mental health and learning from Vanguard
- Mapping community pharmacy models of care to identify range of services delivered
- April 2017- March 2018: 150 pharmacy professionals working in care home settings
- Workforce development package to support the 150 including pharmacist independent prescribing commissioned through Health Education England
- Evaluation
- Care@Home - e.g. supporting end of life and frail elderly care – to be developed



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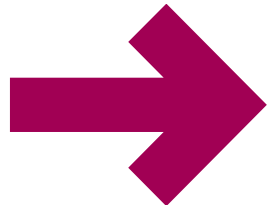


General practice integration

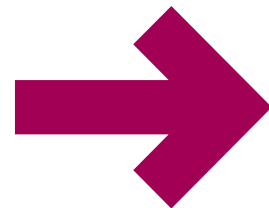


- 500 pharmacists so far with 1,500 more to come
- More work to do:
- Evaluation of long term programme
 - Community pharmacy integration including access to health care records where appropriate
 - Ensure they are working closely with existing community and hospital pharmacists
 - Other models – e.g. pharmacists rotating through hospital and community practice

Published April 2016



Next steps



Independent Review of Community Pharmacy Clinical Services

- Commissioned by the Chief Pharmaceutical Officer in April 2016 following the *Five Year Forward View* in October 2014 and *General Practice Forward View* in April 2016 - both set out proposals for new models of care
- Examining the evidence base of the clinical elements of the Community Pharmacy Contractual Framework and other clinical services
- It will make recommendations for commissioning models and clinical pharmacy services aimed at ensuring community pharmacy is better integrated with primary care and making far greater use of community pharmacy
- Pharmacy Integration Fund will fund initiatives to support changes
- Review recommendations will inform NHS England's commissioning in future. Due to report in December 2016.



Richard Murray,
Director of
Policy, The
King's Fund, is
leading the
review

Involving stakeholders

Patients and public

- Healthwatch
- National Voices

Community Pharmacy Forward View

- Pharmacy Voice
- PSNC
- Royal Pharmaceutical Society

Pharmacy Local Professional Networks

