



New Project Pharmacist at Devon LPC	1	Victims of sexual abuse and violence - Survey	3
Pharmacy First Minor Ailments Service	1	Help patients take their medicines safely	3
Community Pharmacy Masterclasses	1	Devon Medicines Optimisation Scheme	4
NHS Mail & access to shared NHS mailboxes	2	Seasonal Flu Vaccination Service training	4
Independent prescribing – Community Pharmacy Survey	2	Devon LPC Contact details	4

Introducing our new Project Pharmacist who will be working with the Secretariat team for the next six months, to support implementation of GP CPCS and other services

Hi, I am Kelly Holman. I have recently joined Devon LPC part time as a Project Pharmacist. This month I celebrate 25 years of being a pharmacist! It's a role I still love and I'm excited to see what the future holds. I have been fortunate to work in some great places in England such as Cumbria, Derbyshire & Yorkshire but nothing beats Devon. Living here means I get to spend my time on the beautiful river Dart and surrounding area. I am looking forward to meeting and working with you all.

Kelly's contact details are at the end of the newsletter.

Pharmacy First Minor Ailment Services

In the last newsletter we included an article regarding the links between the current minor ailment conditions for which PGDs are commissioned locally; and the GP CPCS service.

The specific ailments currently are:

- Uncomplicated Urinary Tract Infections (UTIs) – PGD for the provision of Nitrofurantoin M/R capsules in women aged 16-65
- Impetigo – clinical protocol for the provision of Hydrogen Peroxide cream
- Mild Inflammatory Skin Conditions (bites and stings, mild dermatitis, and eczema) – PGD for the provision of Hydrocortisone 1% cream in patients >1year old including for use on the face

If your pharmacy is signed up to deliver the service, the GP practice could start referring patients with the above minor ailment conditions to you under GPCPCS, and as part of the CPCS consultation the pharmacist could supply the relevant medicine under the PGD or protocol – and you would be able to claim service fees for both GP CPCS & the Pharmacy First service and your patient is happy that their problem has been resolved.

Please check the list on the below link and see if your pharmacy is signed up. If you do not have a pharmacist who has read and signed the PGDs on the premises at any time, please ensure you are communicating this with your GP practice, so they know to not send referrals for Pharmacy First conditions to you. Communication is key to the success of the services.

You can find all of the documents relating to Pharmacy First services here : <https://devonccg.nhs.uk/healthservices/pharmacy-services/community-pharmacy-minor-ailments-service-pharmacy-first>



Community Pharmacy Masterclasses

Devon LPC are hitting the road after a long stretch of virtual events with our upcoming face to face community pharmacy masterclasses! We have missed seeing everyone in person and are very much looking forward to being together once again. There will be a range of topics including sessions on GP CPCS, the new hypertension case finding service, primary care working and the expanded NMS service. As well as a delicious hot

meal, you will be treated to a smorgasbord of different speakers to pique your clinical and professional interest. This will be a content-packed whistle stop tour of best practice and top tips, in the good company of your peers and colleagues. Don't delay, as places are fast filling up, book your place now via the flyer available at: <https://devonlpc.org/wp-content/uploads/sites/20/2022/06/Flyer-for-September-2022-events.pdf>

NHS Mail & access to shared NHS mailboxes

Under the NHS Terms of Service, contractors **must ensure their staff have access to, and are able to send and receive NHSmail from, the pharmacy shared NHSmail mailbox.** To meet this requirement, contractors must ensure that **at least two members of staff** at the pharmacy premises **have live personal NHSmail accounts that are linked to the shared mailbox.** We have been made aware during recent visits to pharmacies that this is not always the case. We cannot stress enough the importance of ensuring that your pharmacy shared NHS mail must be accessed regularly.

Contractors will therefore need to ensure that:

- those staff that will need to send and receive NHSmail from the shared mailbox have **live personal NHSmail accounts which are linked to the shared mailbox.**
- there are sufficient staff with linked personal NHSmail accounts to **ensure that the shared mailbox can always be accessed when the pharmacy is open, including when locums are acting as the responsible pharmacist.**
- staff are reminded of the need to **regularly check** the shared NHSmail account and **respond accordingly** to emails that have been received; and
- the linked personal NHSmail accounts are **regularly reviewed** so that where staff leave the employment of the contractor, their personal NHSmail account is unlinked from the shared NHSmail account in order to avoid any data breaches.

There is lots more information on NHSmail on PSNC website here - <https://tinyurl.com/yep43hah> – including linking accounts, who to contact if you are having problems and a helpful FAQ's section. Please review this page by following the link above and ensure you are able to meet the duty to access NHSmail requirements.

GPhC Resources on the Duty of Candour

GPhC recently published two new resources; [Keeping patients safe – being open and honest](#) and [Pharmacy team toolkit – learning from incidents](#) to help pharmacy professionals understand the duty of candour. The resources highlight that the duty of candour is not an add-on – it is a fundamental part of pharmacy professional practice. These resources bring together relevant existing GPhC policy, standards, and previous statements on pharmacy professionals' professional obligations with respect to candour when things go wrong. [Read our news item.](#)

The responsibility to be open and honest applies even in difficult or challenging times and it is essential that professionals do the right thing for patients, their families, and carers. Saying sorry meaningfully when things go wrong is vital for everyone involved.

Given the link with issues around liability and indemnity, the National Pharmacy Association, and the Pharmacists' Defence Association – as leading providers of professional indemnity - have also contributed to the new resources and highlighted the importance of openness and transparency in this context.

[Keeping patients safe – being open and honest](#) looks at what our standards, guidance and a joint statement with other health professional regulators say about the duty of candour. It also considers the duty of candour in the context of fitness to practise investigations as well as how it is embedded through education and training.

[Pharmacy team toolkit – learning from incidents](#) includes real case studies and examples of notable practice about how pharmacy teams have learned from incidents, to improve patient safety outcomes and minimise the risk of these happening again. The slides in this toolkit can be used as prompts for individual reflection and learning and can be shared and discussed with pharmacy team colleagues in meetings.

Your knowledge and views sought!

Independent Prescribing – Community Pharmacy Survey



Recently NHS England and Improvement has announced the second phase of the Pharmacy Integration Programme to enhance registered pharmacy professionals' skills through a range of training and development opportunities. A proportion of the funding from the programme will be available for pharmacists contributing to primary care, including community pharmacy clinical services, to undertake independent prescribing training, from early 2022. Health Education England (HEE) are working nationally with accredited

training providers, employers, and pharmacists to establish course capacity and interest in this opportunity.

In preparation for this, it would be helpful for HEE Southwest, Thames Valley, and Wessex to understand:

- How many community pharmacists in the region are already independent prescribers and if / how they are using their qualification in the community pharmacy setting.
- What demand there is for independent prescribing training courses within the community pharmacy workforce in the region.

To help address these questions, if you are a community pharmacist practising within the South West, Thames Valley or Wessex regions, please consider completing the following survey, which should take no longer than 5 minutes: <https://healtheducationyh.onlinesurveys.ac.uk/6td3xkbs2-11>

Response by the 29th of July 2022 please.

Your answers will be collected and stored by HEE and anonymised data may be shared with your Local Pharmaceutical Committee. For those that are not annotated independent prescribers, anonymised data may be passed on to commissioned providers (universities). If you choose to share your contact details with HEE through this survey, we may share information and communication with you relating to independent prescribing training.

Victims of sexual abuse and violence – Stakeholder Survey

As you may be aware Devon and Cornwall peninsula region has been provided with funding from NHS England to improve pathways for victims of sexual abuse and violence who are experiencing trauma. Davis and Associates have been commissioned to support commissioners through the early stages of the project to understand where we have gaps in our current response.

Part of this includes hearing from all stakeholders across Devon, Cornwall, Plymouth, and Torbay to learn more about what you think works well, and where we could do better. This is why we are inviting all professionals working across the region to take part in a short, anonymous online survey. The survey is aimed all organisations, you do not have to be a specialist sexual violence or trauma service.

To complete the survey please use the link or QR code below. We would also encourage you to continue to share this with colleagues and other relevant networks: <https://freeonlinesurveys.com/s/Oa6FAnHJ>

New resources to help patients take their medicines safely

The West of England Academic Health Science Network (AHSN) working collaboratively with stakeholders has published a **series of free resources** to support appropriate use of Medicines Compliance Aids (MCAs), through promotion of the range of **reasonable adjustments** and how assessments for adjustments should be undertaken. The use of MCAs was recognised as an important medicines' safety issue by the West of England Patient Safety Board and the West of England Medicines Safety Steering group, and an improvement area which the AHSN could support.



Resources to be used by health professionals and to educate patients, carers, and families:

- Patient Equality Act Assessment for Medication Reasonable Adjustment **standardised assessment form (portrait)**. **Landscape format is also available on our website.**
- Patient Equality Act Assessment for Medication Reasonable Adjustment **decision tree infographic poster**
- **Health care professionals video animation** – “**How healthcare professionals can support medicine compliance: reasonable adjustments**”
- **Video animation sharable with patients/carers/public** – “**Helping medications to be taken safely: advice for patients, families and carers about reasonable adjustments**”

Watch this short video where national Polypharmacy Clinical Lead and pharmacist, Clare Howard, discusses our resources and their importance.

The resources aim to promote a culture change around MCAs, through:

- Raising awareness of the other reasonable adjustments available to support patients take their medicines safely and effectively.
- Supporting pharmacy teams with decision making about reasonable adjustment eligibility and appropriateness
- Educating healthcare professionals, patients, carers and the public about available adjustments, and the proper process to obtain them, to support medicines safety based on individual needs.

Find out more about reasonable adjustments and why an MCA may not be the most suitable adjustment for your patients by viewing these resources at www.weahsn.net/mcas

Devon Medicines Optimisation Scheme

Reducing variation in healthcare is a priority for both the NHS nationally, as well as the Devon system as it transitions to an Integrated Care System (ICS). The Medicines Optimisation team at Devon CCG have launched the Devon Medicines Optimisation Scheme (DMOS), a Devon-wide scheme that has been developed to support delivery of local and national medicines optimisation priorities, and to address unwarranted variation in prescribing across Devon.

Practices have been encouraged to undertake activity in areas where their prescribing is an outlier compared to peers nationally. Areas identified in the scheme are designed to improve the safety, clinical appropriateness, and cost effectiveness of medicines, therefore producing the best outcomes for patients for the investment in their medicines.

As a result of this, you may see changes in prescribing habits and stock levels required in your pharmacies. More detailed information can be viewed on the [LPC website](https://devonlpc.org/our-news/dmosnewsletter/). (<https://devonlpc.org/our-news/dmosnewsletter/>)

NHS Community Pharmacy Flu Vaccination Service – Vaccination training including Basic Life Support

Devon LPC have arranged a fantastic and competitively priced training package with ECG to enable pharmacists to provide both the national and private flu services as well as many other vaccination services, e.g., COVID-19 or travel vaccinations.

Full details can be found on our website; <https://devonlpc.org/our-news/nhs-community-pharmacy-flu-vaccination-training-including-basic-life-support/>

Spaces are limited so book your place as soon as possible. These are the only flu training sessions the LPC are organizing this year.

DEVON LOCAL PHARMACEUTICAL COMMITTEE www.devonlpc.org

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If you would like us to add or remove your email address from our database, please email admin@devonlpc.org

