

Coventry LPC

Secretary & Development - Annual Report (2008/09)

The 08/09 year has been quite a progressive one for the LPC and for pharmacy contractors in Coventry. It would be fair to say that the working relationships have strengthened between LPC members and PCT directors & the PCT executive management team. The LPC and contractors have assisted the PCT in dealing with both lesser and more significant service issues, which is a key balance in terms of relationship building.

Primary Care Strategy - the Chief Exec and other PCT directors attended joint LPC/PCT strategy development discussions, where, for example, points from the Pharmacy White Paper were well received and subsequently included in the PCT's overall strategy.

Web Site – The LPC web site has been well used by contractors during the year. Guidance and information (inc. service support paperwork) on delivering local services, such as STOP Smoking services, are available to download. Also it has been useful to keep contractors informed regarding the Pandemic Flu situation. The website will become increasingly more important as an information repository for contractors. Pharmacists should advise if there is anything else they would wish to see on the website.

TB Prescriptions – This is a good example of a small-scale issue which the LPC was able to assist the PCT to resolve. It builds up and portrays community pharmacists as a source of solutions. (conversely it is imperative that LPC ensures that the PCT is not forced to look elsewhere for medicines supply solutions)

Premises Improvement Grants (£500,000) – Thanks to close team working the LPC was successful in making a case for this financial assistance. The release of the money has been held up due to Swine Flu distractions, but it will come. The PCT 'dead-lines' will be amended to ensure that contractors are not disadvantaged by the administrative problems.

Smoking Cessation – A new STOP Service manager started in September and working relationships have developed well. Over 400 quitters were achieved by pharmacy service providers in the first full year, which was an excellent result! The LPC is in discussions with the PCT about revisions to the SLA for the 09/10 year. *(NB: From 1st April 2010, there will be fundamental changes to STOP Smoking Services across the W.Mids when all service providers being able to claim a fixed 'tariff' price for each quitter. More info to follow)*

Cardio-Vascular Disease risk assessments (Healthy LifeCheck Service) – considerable efforts by the LPC during 2008 have paid off with community pharmacy being commissioned to provide HealthyLifeCheck Services. This is perhaps the single most important achievement to report for the year. The PCT is clear that the diagnostic instruments required in this CVD service can also be used to support Weight Management Services, brief alcohol interventions, and many other services. (still to be developed)

“Got a Cough” campaign – participation in this public health concept was a great PR success for community pharmacy, as well as making some very important Public Health points and a considerable number of referrals. Such PR is important for keeping pharmacists on the general public's radar.

Emergency Hormonal Contraception – This service has been relaunched with a revised SLA and new ‘harmonised’ Accreditation requirements that allow pharmacists to provide the service elsewhere in the W.Midlands. (with the HAG Certificate)

Chlamydia Screening – This new service was launched, and 15% of total PCT chlamydia screens came through pharmacy in the first year. Whilst the volume was encouraging, the % return rate was poor for various reasons. So the LPC considered how it could be improved. The partnership concept of a “free *Pregnancy Testing & Chlamydia Screening*” proposition was developed by the LPC to drive this forward. Clearly the PCT cannot oblige contractors to refuse a ‘private sale’ for a take-home pregnancy test (just like it cannot stop contractors selling NRT over the counter) However, contractors will appreciate that sometimes the overall NHS proposition is a better win/win for all parties than an OTC sale.

Medicines Use Reviews (MURs) – Based on 84 contractors, 35% (26.5% last year) of the allowable MURs were provided, ie out of a possible 33,600.
However this equates to a PCT windfall of £614,000k (£675k),
ie 21740 (24,682) MUR service opportunities were unclaimed at £28 (£27) each !!!

69% (64%) of pharmacies submitted claims to the PPA for MUR services during the year. The average number of MURs claimed per month by the participating 58 (54) pharmacies was 20 (17) with an average £551 (£450) per monthly claim submitted.
11,860 (8,918) MURs were provided out of a possible 33,600 MURs.

Going Forward into 2009/2010

EPRISE & Not-Dispensed – It is hope to review this during 2009/10 and perhaps develop an electronic solution . It has been acknowledged that this service could benefit from an active marketing campaign perhaps in partnership with the PCT.

Weight Management – The LPC will encourage the PCT to further roll out this service on the back of the HealthyLifeCheck service.

MURs in Focus – Following last years success, another “*MURs in Focus*” event looking at “Anticoagulants & Antiplatelets” attracted good attendance. It is hope to run another focussing on patients taking analgesics.

STOP Smoking – The LPC will be considering the implications of the proposed W.Midlands tariff, and will be making recommendations to contractors.

HealthyLifeCheck – The successful implementation and roll out of this service to the maximum number of pharmacy contractors will be one of the most important objectives of the LPC in 2009/10

Summary

There has been relatively good and solid progress made during the year, with recurring benefits to contractors where SLAs roll over from one year to the next.

Gareth McCague, Executive Officer, Coventry LPC