



Pharmacist Independent Prescriber Experiential Learning and Clinical Links

National Service Specification for a Locally Commissioned Service

Authors

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Date Approved

Clinical Services CPCF Implementation Subgroup	14 March 2022
Community Pharmacy Wales	10 May 2022

Key dates

Date activated:	11 May 2022
Date to be reviewed:	1 May 2025

Version history

Version	Changes from previous version	Date
1	First approved version	10 May 2022

1. DEFINITIONS

- 1.1. National Extended Services Management Board (NESMB): Board established by LHBs to facilitate national discussion around community pharmacy extended services. In the event that the name of this board changes, this definition will be taken to mean the replacement board
- 1.2. Local Health Board: The Local Health Board for the area where the pharmacy is located
- 1.3. Host: Any healthcare service provider that agrees to host a Pharmacist Independent Prescriber for one or more sessions;
- 1.4. Community Pharmacy contractor: a person lawfully conducting a retail pharmacy business;
- 1.5. Pharmacist Independent Prescriber: a pharmacist whose GPhC register entry is annotated as an independent prescriber (or is awaiting annotation) and who is/intends to providing the PIPS service and is listed in the NHS Wales approved list of Pharmacist Independent Prescribers.
- 1.6. J-Number: number issued by NHS Wales Shared Services Partnership to each Pharmacist Independent Prescriber for each prescribing location that they work from

2. AIMS

- 2.1. To facilitate experiential learning relevant to their current, or intended, area(s) of practice to support Pharmacist Independent Prescribers working in community pharmacy to
 - 2.1.1. gain confidence in the safe and effective management of patients in the community pharmacy setting
 - 2.1.2. gain a wider understanding of service delivery
 - 2.1.3. broaden their scope of practice to include different patient characteristics or new conditions, as appropriate for management in a community pharmacy setting
- 2.2. To support development of closer clinical links between Pharmacist Independent Prescribers working in community pharmacy and other clinicians working in local services that may refer in, or receive referrals from, a community pharmacy independent prescribing service.

3. OUTCOMES

- 3.1. Enable a community pharmacist independent prescriber to gain experience in the delivery of care, relevant to their current or intended area(s) of practice, that support them in gaining confidence of, further their understanding, or develop competence in, providing safe and effective care in their community pharmacy.
- 3.2. Strengthen links between community Pharmacist Independent Prescribers and relevant clinicians to improve multidisciplinary learning for the benefit of patients

- 3.3. Support development of local care pathways (including referral to and from the community pharmacy) for patients who may present in community pharmacy, or be appropriate for management there.

4. SERVICE OUTLINE

- 4.1. The experiential learning and clinical links sessions can be held with a healthcare service provider that is reasonably likely to either refer patients to, or receive referrals from, the community pharmacy where the Pharmacist Independent Prescriber normally works;
- 4.2. Whilst undertaking a session, the Pharmacist Independent Prescriber may participate in some or all of:
 - 4.2.1. Observing the practice of another healthcare professional and/or receive one-to-one support in skills development
 - 4.2.2. Discussion of cases that are relevant to the Pharmacist Independent Prescribers current, or intended future, area(s) of practice
 - 4.2.3. Providing care to patients within their scope of practice, on behalf of the host service (see 4.4)
 - 4.2.4. Discussing local care pathways with other healthcare professionals to improve the flow of patients
 - 4.2.5. Building relationships with other healthcare professionals that are reasonably likely to provide peer support and mentorship to the Pharmacist Independent Prescriber in the near future
 - 4.2.6. Other activities as agreed with the Local Health Board
- 4.3. The following activities would not normally be considered appropriate for sessions funded under this specification¹
 - 4.3.1. Discussion of (non-clinical) operational delivery challenges relating to the service
 - 4.3.2. Meetings or discussions with individuals other than the healthcare professionals
 - 4.3.3. Attending training meetings or taught courses
- 4.4. Where care is provided by the Pharmacist Independent Prescriber on behalf of the host service, the following requirements must ALL be met:
 - 4.4.1. The Pharmacist Independent Prescriber will **only** provide care that falls within the scope of practice that is recorded in the NHS Wales approved list of Pharmacist Independent Prescribers
 - 4.4.2. All consultations will be undertaken in line with the host's policies and the pharmacist independent prescriber must be familiar with these prior to commencing provision of any care,
 - 4.4.3. The Pharmacist Independent Prescriber will be granted access to the clinical system to enable assessment of the patient and documentation of the consultation.

¹ Funding for these activities may be available through the quarterly funding provided as part of the PIPS service, or the collaborative working scheme

- 4.4.4. An appropriate physical examination of patients will be undertaken where the Pharmacist Independent Prescriber considers it necessary to determine the most appropriate treatment or course of action;
- 4.4.5. **Before** any physical examination takes place, the Pharmacist Independent Prescriber should explain the reason for the examination and gain explicit consent of the patient, or a parent/guardian in the case of children;
- 4.4.6. A full record of the consultation will be documented by the Pharmacist Independent Prescriber in the host's usual clinical system immediately following the consultation
- 4.4.7. Any prescribing deemed necessary by the Pharmacist Independent Prescriber will be done either by the Pharmacist Independent Prescriber themselves (using a J number allocated to them), or on their behalf by another member of the clinical team at the host provider
- 4.4.8. The Pharmacist Independent Prescriber will take full clinical responsibility for the care that they provide and ensure that any necessary referrals or follow up are appropriately documented/carried out to ensure continuity of care for the patient.
- 4.4.9. The Pharmacist Independent Prescriber will ensure that appropriate and adequate indemnity insurance cover is in place for any care they provide on behalf of the host.

5. COMMUNITY PHARMACY CONTRACTOR RESPONSIBILITIES

- 5.1. Community Pharmacy Contractors who wish one or more of their Pharmacist Independent Prescriber(s) to be able to undertake these sessions shall apply to their Local Health Board by completion of the premises listing form in Part B;
- 5.2. The community pharmacy contractor shall ensure that the sessions are only undertaken by a Pharmacist Independent Prescriber who is, or will in the near future be, offering PIPS consultations in their pharmacy/ies and is listed in the NHS Wales approved list of Pharmacist Independent Prescribers
- 5.3. The community pharmacy contractor shall ensure that the pharmacist independent prescriber undertaking sessions is adequately released from their normal duties to enable them to commit fully to these and maximise the benefit that they are able to gain from undertaking them;

6. LOCAL HEALTH BOARD RESPONSIBILITIES

- 6.1. Local Health Boards, or their authorised officers, shall determine the fees and allowances payable in respect of the service;
- 6.2. The Local Health Board, or its authorised officer, shall support the resolution of difficulties so far as they relate to issues within the control of the Local Health Board;
- 6.3. The Local Health Board, or its authorised officer, shall support the handling of any complaints or issues relating to the service so far as they relate to issues within the control of the Local Health Board.

7. CONFIDENTIALITY AND DATA PROTECTION

- 7.1. The Community Pharmacy Contractor will take such steps as are reasonable to ensure that any Pharmacist Independent Prescriber involved in sessions under this specification will
 - 7.1.1. do not disclose or allow to be disclosed to any person any information of a confidential nature acquired by them in the course of carrying out their duties under this Agreement, except as may be required by law.
 - 7.1.2. protect personal data in accordance with the provisions and principles of Data Protection Act, GDPR and the Confidentiality: NHS Wales Code of Practice.
 - 7.1.3. prevent unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data that is under their control, or to which they have access through provision of this service;
- 7.2. The Community Pharmacy Contractor must be aware that the any information held by the Welsh Government, Local Health Boards or their authorised officers is subject to disclosure under the Freedom of Information Act.

8. AUTHORISED OFFICERS

- 8.1. For the purpose of the service, the local health board shall inform the Community Pharmacy Contractor immediately, in writing, of the details of any officer authorised to act on its behalf. Any notice, information or communication given by the authorised officer shall be deemed to have been given by the Welsh Government or Local Health Board as the case may be.

9. REVIEW VARIATION AND TERMINATION

- 9.1. Variation to the service specification can only be made following consultation with Community Pharmacy Wales.
- 9.2. Contractors will be notified of any variations to the service specification in writing. No variation to the specification will be made until 90 days after that notice is received, other than where it is clinically or legally necessary to do so.

10. FEES AND ALLOWANCES

- 10.1. A maximum of 12 full days of time will be funded per contractor premises
- 10.2. The contractor shall receive professional fees to enable back fill of the Pharmacist Independent Prescriber to release the Service Provider to attend sessions as follows:
 - 10.2.1. £150 for one session (half-day) provided on a single day
 - 10.2.2. £250 for two sessions (full day) provided on a single day
- 10.3. Contractors shall submit all claims to the health board using the appropriate claim mechanism;
- 10.4. Fees shall be paid monthly in arrears;
- 10.5. Claims for payment shall be subject to Local Health Board arrangements for Post Payment Verification