

Hub and spoke technology Q&A event: key findings

The CCA held a virtual Q&A event on 1 October 2020 to help parliamentarians to understand more about the automation of medicines assembly, and the role of hub and spoke models.

The event was hosted by Lord Clement-Jones, and was attended by:

- Jackie Doyle-Price MP, Chair of the All Party Pharmacy Group (APPG)
- Alex Norris MP, Shadow Health and Care Minister
- Sarah Owen MP
- Radika Amin, Boots pharmacist with experience of working in a hub and spoke model
- Jeannette Howe, Head of Pharmacy, Department of Health and Social Care (DHSC)
- Susan Grieve, Claymore Richardson and Katie Driver from the DHSC pharmacy team
- Malcolm Harrison, Chief Executive, the CCA, and
- Neil Bhayani from the National Pharmacy Association (NPA).

Lord Clement-Jones set the legislative context for the event, highlighting that at the time of the event the Medicines and Medical Devices Bill, which refers to hub and spoke technology, has not yet reached Committee stage, giving time for further debate.

The event began with a short film clip from a CCA member illustrating how hub and spoke technology works, including the checks on medicines at the hub before they are sent to spoke pharmacies. This was followed by Radika Amin talking about her personal experience of the benefits this technology provides for her and her team.

She estimated that hub and spoke frees up several hours of her time each day. She talked about how the hub and spoke model creates capacity for her and the whole pharmacy team to use their time more effectively to support her patients. It allows her more time to engage with

her patients, and to provide more care services and advice.

Hub and spoke supports the delivery of essential and more advanced pharmacy services such as medicines use reviews, support during taking new medicines, minor ailments, and vaccinations.

Along with the delivery of NHS and private services, hub and spoke allows her to make clinically significant interactions to support her patients further.

Patient case study: diabetes care



Prescription collection provides a pharmacist with an opportunity to provide advice and support

Radika then described to the attendees a recent example of how the model had enabled her to better support a patient with unstable diabetes.

“Having the opportunity to spend time with this patient, dive deep into the factors affecting his blood sugar control and being able to work together to set some goals, resulted in the patient achieving better blood sugar control over a three-month period...”

“For me, the experience has been absolutely brilliant. It made me come back to why I wanted to become a pharmacist ... supporting my patients rather than administrative tasks.”

Following Radika’s presentation, Lord Clement-Jones chaired a discussion which focused on three of the enablers which the CCA believes

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needs to be addressed for the full potential of this technology to be realised.

These are:

1. Original pack dispensing
2. Government support for infrastructure investment
3. Fair community pharmacy funding

Original pack dispensing

There was a consensus that there would be cross-party support for the CCA's call for original pack dispensing. Very often the quantities prescribed by doctors do not match the amount of medicines in the packs produced by the manufacturers. For example, 28 tablets or capsules are prescribed, when they are manufactured in packs of 30 (or vice versa). Pharmacy teams in England and Wales manually 'snip' the plastic strips of pills to either add or take away from the manufactured quantity. 'Snipping' is a very time consuming and expensive manual intervention, that cannot be automated or delivered at scale.

Jeannette Howe acknowledged that there was a need to resolve this matter. More generally, she hoped it would be possible to enable greater use of hub and spoke within the timescale of the current pharmacy contract, or Community Pharmacy Contractual Framework (CPCF). Jackie-Doyle Price thought that the APPG could hold a session on progress in delivering the CPCF to hold the relevant organisations to account.

Malcolm Harrison expressed a view that many of the current processes in place for pharmacy operations date back to when the NHS was founded in the 1940s. Some parliamentarians agreed and thought that this was the case for much of the activity across the NHS.

Government support for infrastructure investment

Malcolm informed the meeting that he was not confident that the efficiencies expected to be gained from further hub and spoke technology

would be realised within the five-year period of the current community pharmacy funding deal with the government. He estimated that less than 10% of prescription items are currently dispensed using hub and spoke technology. The CCA's members have invested tens, if not hundreds of millions of pounds in this technology. There is no longer any margin available in dispensing to fund this sort of investment today. Government capital investment is needed for this infrastructure to expand further.

He clarified that hub and spoke technology is not the same as an online only pharmacy or a delivery system. The 'spokes' are pharmacies in which pharmacists like Radika provide services.

Fair community pharmacy funding

Parliamentarians were interested in whether the potential efficiencies from hub and spoke could improve the future viability of community pharmacies. Malcolm agreed that the level of remuneration for pharmacy has been a challenge for some time. Improving this is one of the enablers that the CCA has identified. It needs to be addressed to help the sector deliver the urgent care and services the NHS desperately needs, especially in the current COVID environment.

Lord Clement-Jones closed the event by summarising the discussion, adding that he had found it very useful. Attendees agreed that community pharmacy has played a critically important role for the NHS during the Covid crisis. They were grateful for the opportunity to find out more about this technology and what needs to happen for the NHS to fully benefit from it.

About the CCA

Established in 1898, the CCA is the trade association for large community pharmacy operators in England, Scotland, and Wales. Our members are ASDA, Boots, LloydsPharmacy, Morrisons, Rowlands Pharmacy, Superdrug, Tesco, and Well. Between them, they operate nearly half of all community pharmacies in the UK. We represent the interests of our members

and bring together their unique skills, knowledge,
and scale for the benefit of the NHS, patients, and
the public.