

PHARMACY FIRST

THE FIRST MONTH



Summary

- Pharmacists can now diagnose specific common conditions and supply prescription-only medicines to patients, paid for by the NHS, without a GP appointment.
- Pharmacy First will improve patients' access to care and reduce the pressure on GPs.
- CCA members treated almost **50,000** patients in just the first month of the service.
- Of those, **two and half times more** consultations took place in areas of higher deprivation.
- **Nearly a third** were conducted 'out-of-hours' – outside of the typical working day (9am – 6pm) and at weekends.
- Pharmacists in CCA pharmacies have treated patients for all of the seven conditions.
- **The NHS must now:**
 - **Commit to fund the service beyond 2025** so patients can be confident of getting the healthcare they need from their pharmacy.
 - **Invest in high-quality and targeted campaigns** to promote the service to drive further patient demand and free up GP capacity.
 - **Explore how the service can be broadened** to benefit even more patients.



Pharmacy First: the First Month

Key statistics



Nearly **50,000** Pharmacy First consultations were provided in the first month by CCA members



There were **two and half times** more consultations in more deprived communities



Nearly **a third** of all consultations were provided outside of typical working hours

Background

This year (31st January 2024) saw the launch of 'Pharmacy First' across England. Pharmacies are now commissioned to provide advice and treatment, for seven common conditions: earaches, bladder infections, sore throats, sinusitis, infected insect bites, impetigo, and shingles. As the first significant investment in community pharmacy by the NHS for nearly a decade, Pharmacy First is an important milestone for the sector and the profession.

Across England we have seen patients flock to their local pharmacy for the same treatments they would have previously needed to book a GP appointment for. The location, accessibility, and longstanding relationships pharmacy teams hold with their patients, coupled with the entrepreneurial spirit and 'can-do' attitude of the businesses within the sector has led to a successful service launch.

The NHS Primary Care Recovery Plan (1) sets out how, once scaled up, community pharmacies can eventually save 10 million appointments in general practice every year. **Early indications show that patients are responding favourably to new routes to care and pharmacies are rising to the challenge.**

The CCA has collected data from member pharmacies across England to understand initial roll-out and support implementation, the findings of which are presented below.

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Activity so far

Data from just over 3,000 CCA pharmacies have been collected and in the first month, 93% of these sites have provided at least one consultation for one of the seven conditions.

Across all the seven conditions, **48,195** consultations were recorded between Wednesday 31st January and Sunday 3rd March. Our data indicate that CCA pharmacies have provided **nearly 1,500 consultations a day** since the launch. In just the first month since launch, each CCA pharmacy has treated an average of 3.5 patients every week.

This level of activity is the strongest start of any new national pharmacy led service – and clearly shows both the level of commitment from pharmacy teams and the demand from patients. The numbers so far are from just the first month of the service. **The number of consultations each week will undoubtedly increase as patient awareness grows and pharmacy teams become more experienced providing the service.**



Community pharmacies in England were commissioned to start providing Blood Pressure Checks in 2021. This service saw a 10-fold increase in activity in the first year alone, as patient awareness grew. Given the strong start of Pharmacy First, the service is on track to meet (and potentially exceed) NHS ambitions.

There are several public awareness campaigns underway, both from the NHS and pharmacies themselves, which we hope will help to shift further demand away from GPs, and into pharmacies.

“*CCA pharmacies have provided over 1,500 consultations a day since launch*”

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Patient's health needs

Pharmacy First allows patients to receive advice and treatment for seven common conditions. **Our data indicate that there is patient demand for treatment of all seven conditions.**

Acute Sore Throat is currently the most common condition for patients to present with, most likely due to the service launching in the winter. We will continue to monitor the spread of demand, and work with our members to establish any links to seasonal variation and to identify any other factors that influence relative patient demand.

The treatment of uncomplicated UTIs by community pharmacies has already been well established in some parts of the country through services commissioned locally. This is likely to account for the very high uptake of this element of Pharmacy First.

Acute Otitis Media (earache) is also being well used, despite initial concerns about the need for pharmacists to use Otoscopes when diagnosing, a skill that requires pharmacists to undertake additional training.

Condition	Proportion of all consultations
Acute Otitis Media (Earache)	16%
Acute Sore Throat	31%
Impetigo	6%
Infected Insect Bites	3%
Shingles	4%
Sinusitis	14%
Uncomplicated Urinary Tract Infection (UTI)	27%

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Meeting patient need through enhanced access

Research shows that people living in areas of higher deprivation have much greater health needs, but often have poorer access to healthcare. The NHS has found that people who live in the 10% most deprived areas were twice as likely to attend A&E departments as those in the least deprived areas. (2)

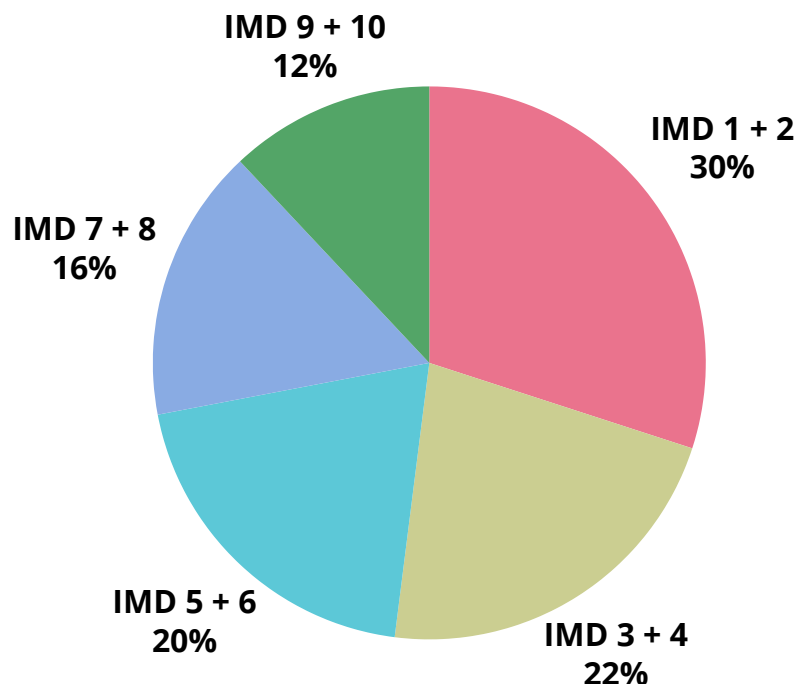
This is because lack of access to private transport, inflexibilities with work commitments, or caring commitments make it difficult to attend appointments. This is especially true if they are in rural areas. This is often referred to as the inverse care law. (3)

Community pharmacies are present across the country, in health centres, shopping promenades, and in communities. Interestingly, research shows that there are more pharmacies in areas of higher deprivation, creating a *positive pharmacy care law* (4). The ability of pharmacies to offer access to healthcare where it is most needed means that commissioning care nationally through all community pharmacies is a route to tackle health inequalities.

Deprivation is often measured through the 'Index of Multiple Deprivation' (IMD) which is the official measure of relative deprivation for neighbourhoods in England. (5) This groups the country into 10 deciles, showing relative deprivation and affluence.

Despite being available nationally, significantly more Pharmacy First consultations were provided in areas of higher deprivation. **Nearly a third of all Pharmacy First consultations were provided in the 20% most deprived communities**, compared to 12% in the least deprived. This means, there were two and a half times more consultations in the 20% most deprived communities, when compared to the least deprived.

There were **two and a half times** more Pharmacy First consultations provided in the 20% most deprived communities



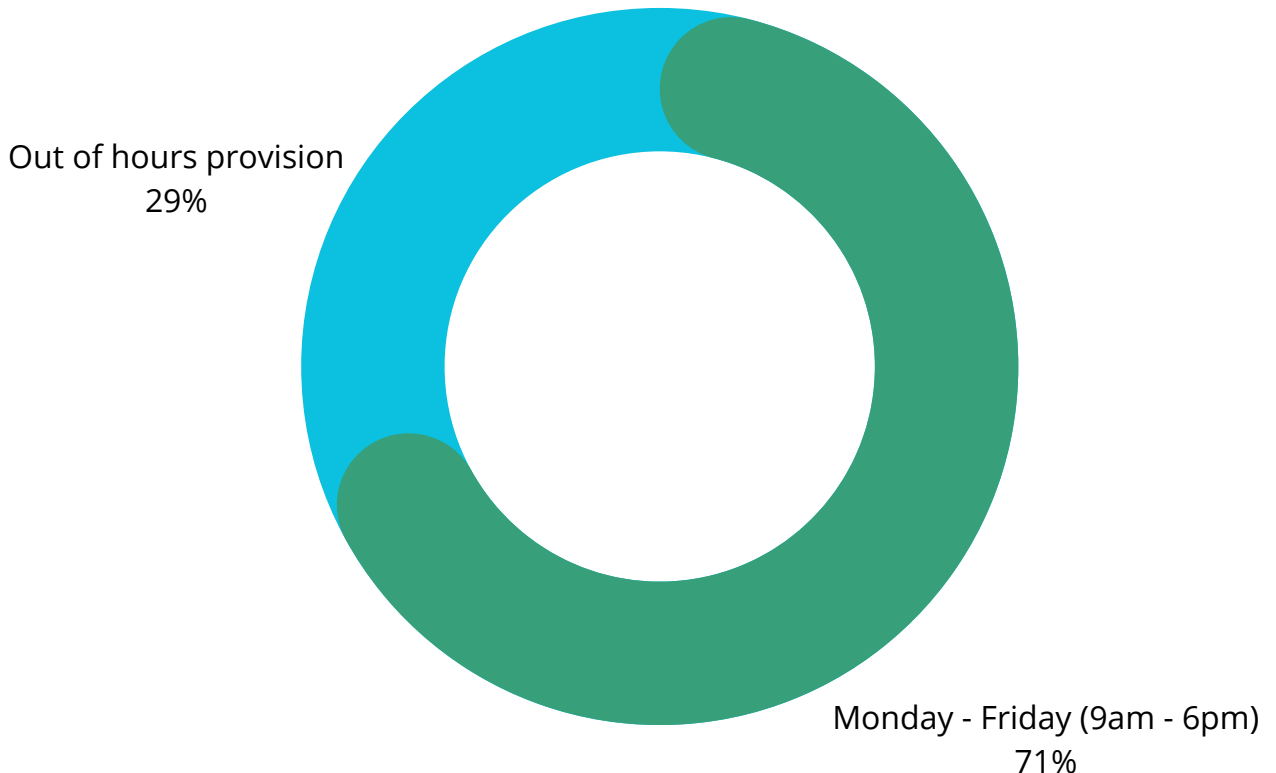
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Pharmacies offer Pharmacy First throughout their opening hours, and many pharmacies are open outside of normal GP opening times. A key advantage community pharmacy offers in meeting urgent care needs, is providing same day care without the need for appointments. This is especially true for those in deprived areas where access offered outside of the 'standard working week' is invaluable.

This access is clearly valued, with nearly a third of all consultations provided either at weekends or outside core hours (9am - 6pm). Out-of-hours access has been used consistently across the country, but uptake is greater in more deprived areas (29% in the most deprived communities, compared with 26% in the least deprived).

“...nearly a third of all consultations [were] provided either at weekends or outside of core hours”

Over 12,000 consultations were provided outside of core Monday to Friday 9am - 6pm hours



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Summary

Early data has shown pharmacies are providing high quality care, with a level of initial patient engagement not seen before. Patients are attending pharmacies, demonstrating both a need and acceptance of receiving care from community pharmacists and their teams. Crucially, care is being provided in areas with greater deprivation, directly tackling health inequalities.

We will continue to gather data from pharmacies on the front line, to build the evidence base needed to secure this vital route for patients to access urgent care across England.

Next steps for Pharmacy First

- 1** **Commitment to fund the service beyond 2025, so businesses can invest to continue to improve patient access to urgent care.**
- 2** **Invest in high quality and targeted public engagement campaigns to raise awareness of this new pathway into the NHS for patients.**
- 3** **Expand the scope of care provided by Pharmacy First, so even more patients can access same-day appointments in community pharmacies.**

References

- [1] NHS England. Delivery plan for recovering access to primary care. (<https://www.england.nhs.uk/wp-content/uploads/2023/05/PRN00283-delivery-plan-for-recovering-access-to-primary-care-may-2023.pdf>), May 2023.
- [2] NHS England. Delivery plan for recovering urgent and emergency care services. (<https://www.england.nhs.uk/long-read/delivery-plan-for-recovering-urgent-and-emergency-care-services-january-2023/>), Jan 2023.
- [3] Hart, J. The Inverse Care Law. *The Lancet*, 1971, Vol. 297.
- [4] Todd, Adam, *et al.* The positive pharmacy care law: an area-level analysis of the relationship between community pharmacy distribution, urbanity and social deprivation in England. *BMJ Open*, 2014, Vol. 4.
- [5] Ministry of Housing Communities and Local Government. The English Indices Multiple Deprivation 2019 (FAQs). (https://assets.publishing.service.gov.uk/media/5dfb3d7ce5274a3432700cf3/loD2019_FAQ_v4.pdf), 2019.

WHO WE ARE

Established in 1898, the CCA is the trade association for large pharmacy operators in England, Scotland and Wales. The CCA membership includes ASDA, Boots, Morrisons, Pharmacy2U, Rowlands Pharmacy, Superdrug, Tesco, and Well, who between them own and operate around 5,500 pharmacies, which represents nearly half the market. CCA members deliver a broad range of healthcare and wellbeing services, from a variety of locations and settings, as well as dispensing 500 million NHS prescription items every year. The CCA represents the interests of its members and brings together their unique skills, knowledge, and scale for the benefit of community pharmacy, the NHS, patients and the public.



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