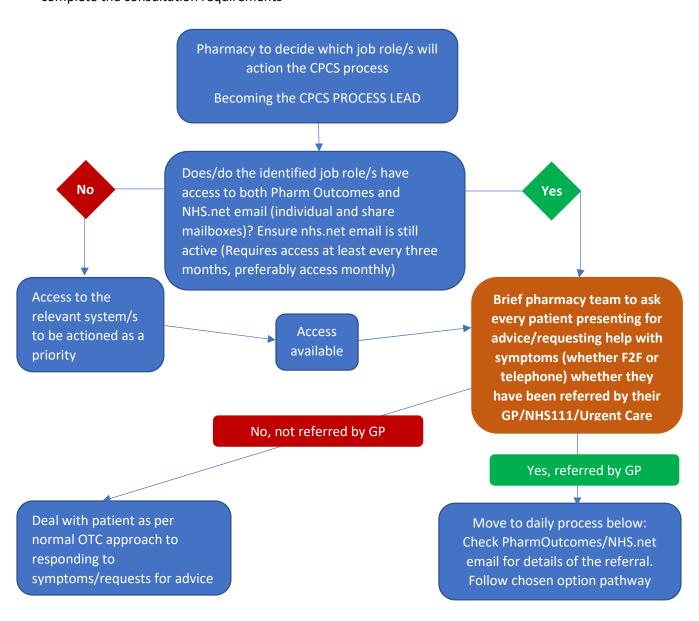


Delivering the Community Pharmacist Consultation Service (CPCS) when a relief or locum pharmacist is working in the pharmacy

PRINCIPLES:

- Pharmacies signed up to deliver CPCS must ensure that the service is available throughout the pharmacy's full opening hours. This inevitably means that for most pharmacies, locum or relief pharmacists will form part of the delivery model
- Pharmacies should identify members or roles within the team that will have
 responsibility/accountability for ensuring that the CPCS process is undertaken, and for providing
 the locum/relief pharmacist with the essential patient information to allow them to conduct the
 necessary consultation, and capture the necessary information within PharmOutcomes (or
 alternative CPCS system)
- All locum/relief pharmacists should ensure that they can access the relevant pharmacy system (e.g. PharmOutcomes), enter their pharmacist registration, and process the consultation. This may require re-enrolment if prompted by the system (a simple and brief process)
- All pharmacies should ensure that the specified team members or roles have access to the PharmOutcomes (or alternative system) as well as to the NHS.net shared mailbox for the pharmacy, to ensure that can access and process referrals, regardless of whether these come from GP surgeries, NHS111 or urgent care centres, ready for the pharmacist to conduct and complete the consultation requirements





DAILY PROCESS

During the pharmacy's opening hours, the CPCS IT system must be checked with appropriate regularity, to pick up referrals in a timely manner. This includes checking the pharmacy's shared NHSmail mailbox when a pharmacy opens and before the pharmacy closes each day to ensure that no messages have been missed. To ensure this happens, the following is suggested:

CPCS PROCESS LEAD

Advises locum/relief Pharmacist of the process in place for CPCS consultations and follows Option A or B below at the start of the day then:

- 1. Checks nhs.net mail regularly throughout the day for new CPCS referrals (we suggest at least four times during the day)
- 2. Checks PharmOutcomes regularly throughout the day for new CPCS referrals (we suggest at least four times during the day)

LOCUM/RELIEF PHARMACIST

At start of day
ensure Locum has
access to
PharmOutcomes
and, if prompted by
the system, should
re-enrol if required
(a simple and brief
process – this may
only be necessary if
a referral is
received)

Pharmacy Team decide which option pathway arrangements will be used from the options A and B.

Option A: Dispersed appointments through day based on pharmacist availability

Option B: Using specific CPCS consultation periods/slots

Patient appointments are made and presented to the locum/relief pharmacist as part of normal workflow as "walk-in" requests

Specific appointment times are set aside for F2F and telephone consultations

Print patient details from system and place in immediate workflow queue for pharmacist to see patient F2F or conduct consultation by telephone CPCS PROCESS LEAD
Contacts patient to agree time for either return to pharmacy for F2F pharmacist appointment or telephone consultation

Pharmacist completes consultation using system, checking Summary Care Record and Clinical Knowledge Summaries for 'red flags', completing the electronic record and capturing outcomes before sending feedback to GP