Briefing August 2020



## Pharmacy's role in primary care network multidisciplinary teams supporting care homes

The COVID-19 pandemic has brought into sharp focus the importance of primary care network (PCN) teams providing support for care home residents and staff. This is about more than implementing the network contract directed enhanced service (DES) service specifications for care homes and structured medication reviews, important as they are

This briefing explores how pharmacy professionals are supporting care homes. It spotlights examples of collaborative working in local areas and provides top tips to support PCNs.

## **Key points**

- In May 2020, during the COVID-19 pandemic, NHS England and NHS Improvement requested that <u>pharmacy professionals support care home</u> residents and staff, working in collaborative, multi-professional teams.
- Pharmacy professionals can contribute to improving services to care home residents in four key ways: facilitating medication supply, delivering structured medications reviews, supporting clinical reviews and supporting with medication queries.
- Health and care organisations in several areas are working in partnership to ensure care homes have access to pharmacy support and advice. This briefing spotlights three examples.
- Sharing resources and mutual trust between care home, pharmacy and clinical staff are essential.

#### Background

On 1 May 2020, NHS England and NHS Improvement wrote to GP practices, primary care networks and community health services to <u>request their help</u> <u>in supporting care homes</u>. The letter outlined a system-wide delivery model providing an urgent call to action for pharmacy professionals to work in collaborative, multi-professional teams to support care home residents and staff. It describes how teams can work together across the PCN and wider NHS to ensure residents get the help they need to get the best from their medicines, and that staff feel supported in enabling them to do so. NHS England and NHS Improvement subsequently shared the <u>Pharmacy and Medicines Support to Care Homes</u>: <u>Urgent System-Wide Delivery Model</u>.

As well as supporting the immediate needs of care home residents during the COVID-19 pandemic, the model also describes the vital contribution clinical pharmacists and pharmacy technicians can make in the successful delivery of the wider <u>PCN Enhanced Health in Care Homes Framework</u>.

The framework highlights four roles where pharmacy professionals can contribute to improving services to care home residents:

- Community pharmacies facilitating medication supply to care homes, including urgent and end-of-life medication.
- Delivering structured medication reviews (SMRs) to care home residents via video or telephone consultation, where appropriate, prioritising those on high-risk medicines or combinations of medicines.
- Supporting clinical reviews of residents, including those with COVID-19 symptoms, with acute illness, in high-risk groups, new residents or those who are recently discharged from hospital.
- Supporting care home residents, staff and the multidisciplinary team with medication queries.

The model is already in the process of being implemented across England. In the section below, we spotlight three examples of local support for care homes.

"As a pharmacist in general practice, I've pioneered the establishment of multidisciplinary teams to support care homes for over 15 years. We've come a long way in that time, but if we're to successfully design and implement services at PCN level, PCNs will need to have open and meaningful conversations with their care homes. We will only improve day-to-day care and manage future challenges if we establish the right kind of two-way relationships now. PCN clinical pharmacists are well placed to play a key role in this engagement, as the great examples in this short briefing demonstrate."

Dr Graham Stretch, Clinical Director, Brentworth Primary Care Network

## **Case studies**

#### Partnership working in Leeds

Leeds GP federation, its constituent PCNs and Leeds Community Healthcare NHS Trust, Leeds Teaching Hospital NHS Trust and Leeds and York Mental Health Trust, enabled and supported by Leeds Clinical Commissioning Group, are working in partnership to ensure all care homes have access to pharmacy support and advice, including a single point of access for referrals from secondary care and care homes.

Daily multidisciplinary team meetings are taking place in some care homes, improving communication channels between organisations and cutting down the time spent on referral processes. Pharmacists present on the calls allocate structured medication reviews (SMR), and medicines queries to an appropriate member of the wider pharmacy team. City-wide daily reporting allows identification of care homes needing particular support.

Weekly whole-city video calls for the primary care pharmacy team ensure everyone stays up to date with changes, allowing delivery of training around care homes medicinesrelated needs, such as systems and processes, SMR, swallowing issues, covert medication and end-of-life care.

To find out more, please contact Heather Edmonds, head of clinical pharmacy at the Leeds GP Confederation <u>heather.edmonds@nhs.net</u> or Sue Alldred, head of clinical pharmacy, South and East Leeds GP Group <u>s.alldred@nhs.net</u>

#### Partnership working in Sunderland

Sunderland Clinical Commissioning Group is working with a GP federation and six PCNs. Together, they currently employ an integrated team of 19 PCN clinical pharmacists led by a senior pharmacist, who is working with the local authority, healthcare providers and the local pharmaceutical committee to transform out-of-hospital services.

PCN, community and hospital pharmacists are saving care home staff time by developing a system to align residents' medicines supplies if they return after a stay in hospital, so all the residents' medicines are aligned on a 28-day cycle. This, in turn, reduces waste.

Urgent access to out-of-hours medicines is assured through anticipatory prescriptions being written up for end-of-life medicines, dispensed only if needed where there is COVID-19 in a care home, and for those at risk. The PCN clinical pharmacist identifies the residents and keeps these prescriptions up to date. All residents have access to end-of-life medicines within one hour of the need being identified, where appropriate.

To find out more, please contact Ewan Maule, head of medicines optimisation, Sunderland CCG: <a href="mailto:ewan.maulel@nhs.net">ewan.maulel@nhs.net</a>

#### Partnership working in Birmingham

Sandwell and West Birmingham Integrated Care Provider and its four constituent PCNs in Western Birmingham, working with the CCG, NHS providers and the local authority, are working at pace to deliver improvements and prepare for the roll out of the PCN DES from October 2020. They've written a standard operating procedure for care homes in response to COVID-19 and are sharing resources to implement it across all PCNs.

Multidisciplinary teams, including pharmacists, work together across providers, taking part in weekly check-ins about care home residents identified as a priority and carrying out virtual care homes visits. A checklist is used for each resident, providing a personalised care and support plan, with activity measured.

Each care home has a nominated advanced care practitioner from the community trust and a lead clinical pharmacist from the PCN. Ongoing plans will link in hospital teams and where possible, align each care home to one community pharmacy.

To find out more, please contact Helen Kilminster, clinical director, People's Health Partnership PCN: <u>helen.kilminster1@nhs.net</u>

#### **Top tips**

- 1. Optimise communications between care home staff, community pharmacy, GP/ PCN and secondary care teams. New ways of working such as WhatsApp or teleconferences are useful, but be mindful of access issues with internet connectivity, lack of appropriate technology in care homes and information governance issues. Having a single point of contact for medicines-related issues is valued by care home teams.
- 2. Sharing resources and mutual trust between care home, pharmacy and clinical staff are essential. Practices can signpost and share teaching and assist with the procurement of physical resources.
- 3. Early illness diagnosis is key. Working closely with care staff enables them to notice soft signs of unwell residents, such as people who are off food and drink, or showing a lack of interest in normal activities, and refer them swiftly to an appropriate clinician.

# Support and resources for pharmacy teams

- Clinical pharmacists and pharmacy technicians supporting care homes can self-assess their own training and knowledge via the <u>NHS Specialist</u> <u>Pharmacy Service resource hub</u> and the <u>Royal Pharmaceutical Society</u>. These provide pharmacy teams with access to essential resources to effectively support care homes.
- A Royal College of General Practitioners (RCGP) and AHSN Network webinar <u>Primary Care in Care Homes during COVID-19</u> includes examples of current good practice and collaboration between primary care and care homes, including resources to support virtual ward rounds.
- The <u>network contract directed enhanced service (DES) specification guidance</u> provides the specifications for the structured medication review, medicines optimisation service and the enhanced health in care homes service.

#### **About the PCN Network**

The PCN Network has been established by the NHS Confederation to support primary care networks and ensure they are effectively represented within the health and care system.

Read more at www.nhsconfed.org/PCN-Network

#### **About the NHS Confederation**

The NHS Confederation is the membership body that brings together and speaks on behalf of organisations that plan, commission and provide NHS services in England, Wales and Northern Ireland. We represent hospitals, community and mental health providers, ambulance trusts, primary care networks, clinical commissioning groups and integrated care systems.

To find out more, visit www.nhsconfed.org



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