

October 2020

PSNC Briefing 034/20: IPMO guidance and the development of system leadership

In August 2018, NHS England and NHS Improvement (NHSE&I) announced the launch of a new programme, supported by the [Pharmacy Integration Fund](#), to test how NHS pharmacy, medicines optimisation and medicines safety could be integrated into [Sustainability and Transformation Partnerships \(STP\)](#) and [Integrated Care Systems \(ICS\)](#). The [Integrating NHS Pharmacy and Medicines Optimisation \(IPMO\) programme](#) aimed to develop a framework which would set out how to tackle the medicines optimisation priorities for the local population in an STP/ICS footprint. It additionally aimed to use the expertise of pharmacy professionals in the transformation of systems to deliver the best patient outcomes from medicines and value to the taxpayer.

In September 2020, NHSE&I published *Leading integrated pharmacy and medicines optimisation - Guidance for ICSs and STPs on transformation and improvement opportunities to benefit patients through integrated pharmacy and medicines optimisation* via the [Future NHS platform](#) (login required). This document sets the future direction for system leadership for pharmacy and it summarises the learning from the IPMO pilots. This PSNC Briefing is aimed at Local Pharmaceutical Committee (LPC) members and officers and it highlights the key points in the NHSE&I document relevant to community pharmacy and suggests actions which LPCs may want to take.

Key points in the guidance for community pharmacy

As LPC members will already know, every part of the country is expected to move towards becoming an ICS by April 2021, with ICS undertaking two core roles: **system transformation** and **collective management of system performance**.

The NHSE&I guidance document sets out the principles and approach to the development of a **pharmacy and medicines optimisation transformation plan** in each ICS and a system-wide pharmacy professional leadership model to bring about collective management of system performance. The system-level plans will be coordinated and supported by the regional chief pharmacists in each of the seven NHSE&I regions.

The guidance provides an overview of current activity and developments within pharmacy and the field of medicines optimisation, noting that the primary function of the pharmacy workforce will increasingly be the safe and effective use of medicines and reducing health inequalities.

The guidance:

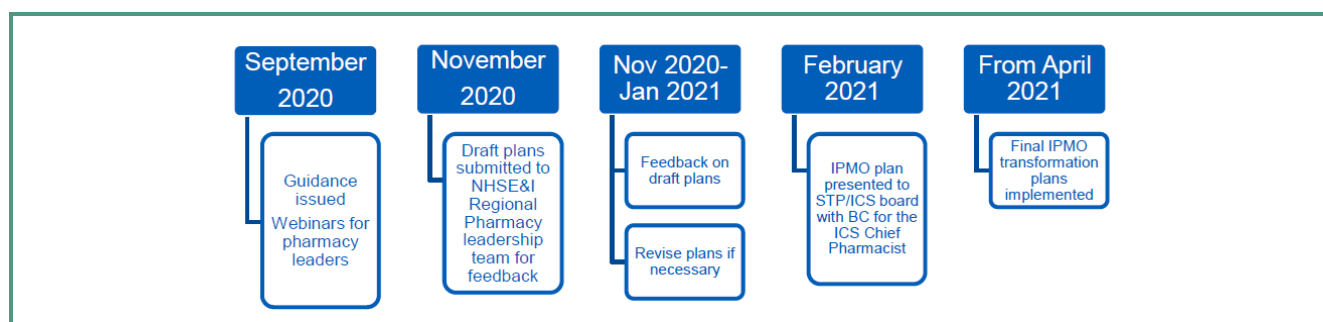
- identifies the importance of there being a named system-wide lead for pharmacy and medicines optimisation, sitting within the ICS structure and supported by a collaborative, senior leadership group;
- proposes that each system establishes a pharmacy and medicines optimisation governance framework;
- states the system leadership group created, is expected to have collective responsibility through senior decision makers across the system and it will take responsibility for developing an ICS transformation plan for pharmacy and medicines optimisation. The leadership group will be drawn from senior pharmacy leaders across acute, mental health and community services NHS Trusts, clinical commissioning groups and community pharmacy; and
- says once the system leadership group is established, it is expected that where affordable, systems should

use the transformation plan to establish an ICS chief pharmacist role to take forward a programme of work to support the integration of the pharmacy workforce and deliver medicines optimisation across the system.

System priorities for pharmacy and medicines optimisation are identified, including:

- the creation of the ICS chief pharmacist role;
- the development of a cross-system leadership team, including community pharmacy;
- providing a focus for pharmacy workforce planning and deployment. This will include supporting the development and delivery of workplace-based foundation training across all settings for pharmacists, replacing the existing pre-registration year;
- pharmacy technicians having access to place-based pre-registration training across secondary and primary care, including community pharmacy;
- supporting access to education and training resources to enable the pharmacy workforce to use digital tools such as robotics;
- community pharmacy, as the first port of call for self-care, prevention and minor illness consultations, working closely with general practices and within primary care networks, and always working to reduce health inequalities, including in people from Black, Asian and minority ethnic communities;
- delivering pharmaceutical advice to senior ICS colleagues, including establishing and leading an ICS medicines optimisation committee that will link through to the Regional Medicines Optimisation Committee, reducing the duplication of work created by local area prescribing committees;
- delivering the Government five-year anti-microbial strategy across care settings, to ensure antimicrobial stewardship across systems and deliver against the national medicines safety agenda;
- supporting the implementation of the community pharmacy Discharge Medicines Service, building on the Academic Health Science Network Transfers of Care Around Medicines (TCAM) programme to ensure patients are prioritised for support with their medicines at discharge from hospital; and
- providing professional leadership for the Pharmacy Quality Scheme and clinical services delivered through the Community Pharmacy Contractual Framework 2019 to 2024 (e.g. the NHS Community Pharmacist Consultation Service and the New Medicines Service).

The document contains the following indicative timeline:



It states that each STP/ICS is asked to deliver an IPMO transformation plan setting out how the opportunities of collaboration and transformation across the local health system can support the creation of a flexible and sustainable workforce, supporting patients across care settings and within their homes. It will focus explicitly on the need to develop professional pharmacy leadership and the local and regional infrastructure for medicines optimisation and pharmacy in health and social care systems.

Suggested actions for LPCs

At a recent meeting of the PSNC and LPC Operations Team, there was a review of the guidance and consideration of the actions LPCs may want to take over the next few weeks.

It was noted that LPCs have been engaging with pharmacy colleagues at a system level for some time and this includes

collaborative working with neighbouring LPCs where one system spans multiple LPC areas.

In some areas, LPCs report that they are already having discussions with other pharmacy leaders within their system, but they were not part of the IPMO pilots, so the local leadership is effectively already in place, but the governance and structure developed in the pilots and envisaged in the NHSE&I guidance document may not be.

Whether such local discussions are taking place or not, LPCs should talk to fellow system leaders to ensure community pharmacy is part of the formal creation of the system-wide pharmacy and medicines optimisation governance framework. Where necessary, the NHSE&I regional chief pharmacist can be approached to facilitate introductions to the other system leaders.

Where a system covers the areas of multiple LPCs, the constituent LPCs should identify a single representative of community pharmacy to join the system leadership group and agree the process by which that individual will report back to the constituent LPCs.

Once the system leadership group is in place, the LPCs should seek to ensure they provide appropriate support for taking forward the community pharmacy-focused priorities in the above list. Support for the implementation of the Discharge Medicines Service would be an appropriate initial priority during 2020 and 2021, as the rollout of this service will benefit from system-level leadership to ensure all NHS Trusts are supported to make referrals to community pharmacy.

LPCs are asked to share progress on engaging with system leadership groups with their regional representative on the PSNC and LPC Operations Team, so learnings and best practice can be rapidly shared across the country. The PSNC and LPC Operations Team will discuss the topic again in the coming weeks and will look to provide further guidance to all LPCs, where this is thought to be necessary.

If you have queries on this PSNC Briefing, or you require more information, please contact the [Services Team](#).