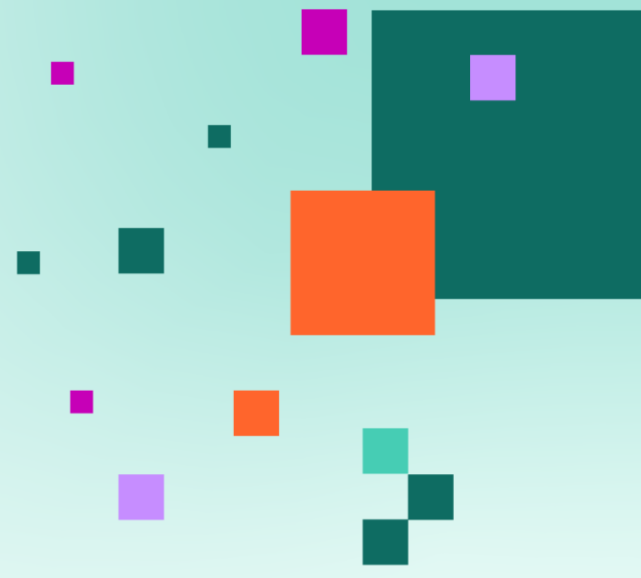


Engaging with the NHS 10-Year Plan

November 2024



New Government: Priorities and Progress



Pre-General Election: Influencing

- **Vision for Community Pharmacy** published by The King's Fund and Nuffield Trust
- **PCRP and Pharmacy First investment** followed by Pharmacy First launch
- **Built relationships with Wes Streeting and the Labour shadow Health team** and wider political stakeholders in preparation for the election
- **Manifesto commitments** recognised the potential for further clinical growth – strengthening the case for urgent stabilisation of the sector to stop the closures
- **The H&SC Select Committee Pharmacy Inquiry reinforced all our messages – Government still to respond (expected soon)**
- **Widescale briefing of Prospective Parliamentary candidates**, political party health teams and advisors, as well as policy think tanks and patient groups
- **Evidence based influencing and media campaigns**



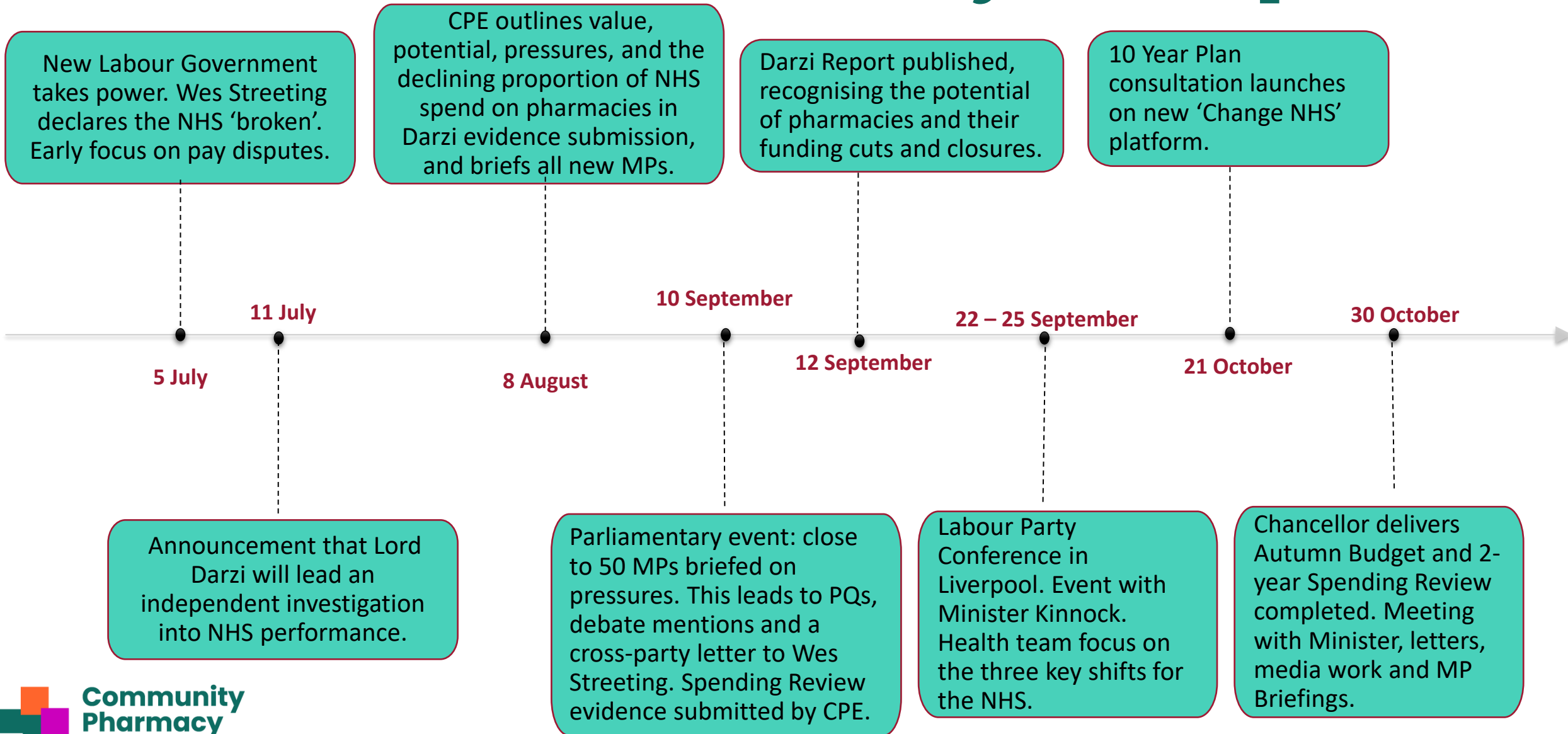
Labour Manifesto Commitments

*“... we will go further, accelerating the roll out of independent prescribing to establish a **Community Pharmacist Prescribing Service covering a broad range of common conditions**. Labour will also cut unnecessary red tape to allow pharmacy technicians to step up to some roles, ensuring pharmacists can work to the top of their license and **focus on their expertise in prescribing and medicines management**, rather than repetitive dispensing processes. Supported by greater digital interoperability, this will **enable them to support GPs in the management of long-term conditions like hypertension and COPD and in tackling the serious issue of overprescribing**, which is responsible for thousands of avoidable hospital admissions every year ...”*



**BUILD AN NHS
FIT FOR THE FUTURE**

Government: First 100 Days Recap



Primary Care Policy



“We are going to expand the role of community pharmacies and accelerate the roll-out of independent prescribers. We need much more care to be delivered in local communities so that problems can be spotted earlier.”

Prime Minister at PMQs

- **The NHS is broken, but not beaten**
- **Three shifts:** hospital to community, analogue to digital, sickness to prevention
- Recognised need to **shift the proportion of funding** spend on secondary vs primary care.
- Minister and Secretary of State have both referred to **pharmacy closure rates**



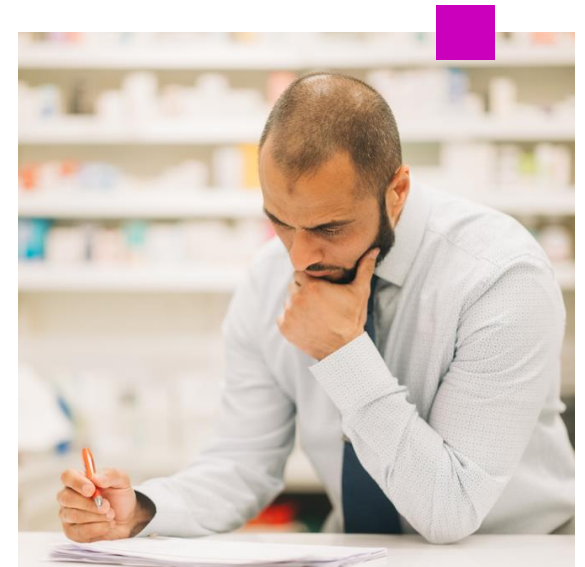
Pharmacy First – what they want to build on

- A **strategically important** service for the future – we need to max out the budget to add it to the CPCF
- **Amazing response from pharmacies**
- **96.5%** of pharmacies signed up and over **1 million** clinical pathway consultations delivered by August
- **Marketing and promotion** have been poor
- **Referrals patchy and impact of GP Action**
- **Thresholds:** concessions for August and October; review of clinical pathways & gateways; lobbying for all minor ailments advice to be included

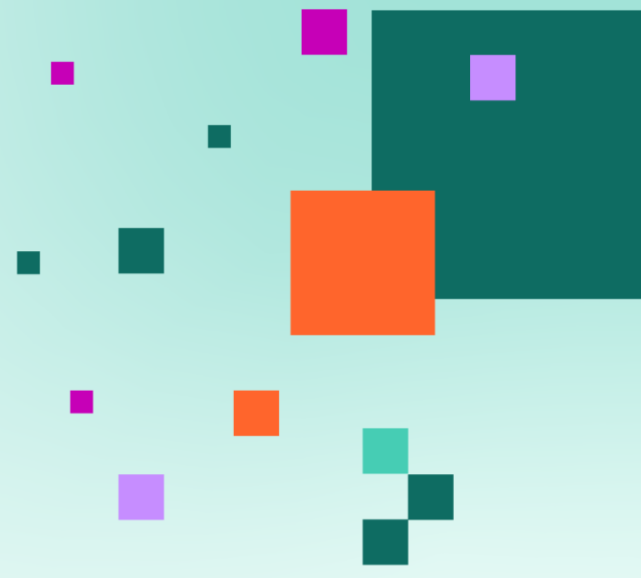
Do you know about
Pharmacy First?

Government need solutions: but there can be no expansion without stabilisation

- The current contract is **unsustainable**
- With stabilisation the community pharmacy sector could deliver clinical solutions for the Government that meet their policy goals
- We are in every community and neighbourhood and are one of the most productive and efficient parts of the NHS and as Darzi says the most accessible



Health Policy

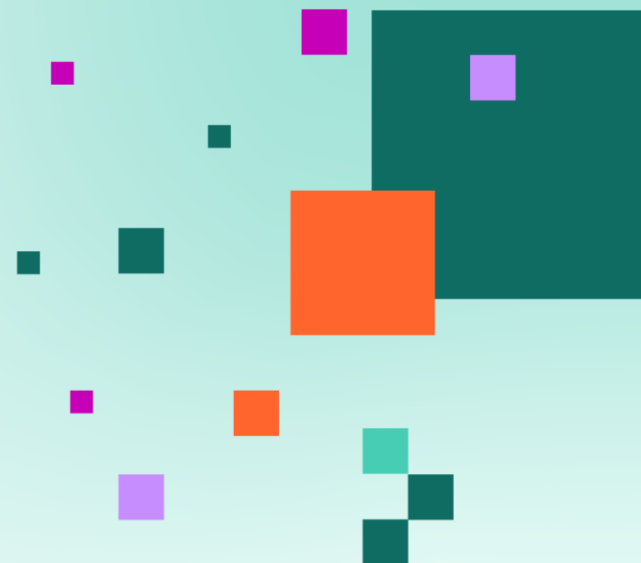


Health Policy Outlook

- **Autumn Budget** sets spending for 2024/25 and 2025/26...
- ...next phase of the **Spending Review in Spring 2025** will set budgets for the following two financial years
- Alongside this, the **NHS Ten Year Plan** will report in Spring 2025
- **Regulatory changes** will also influence the landscape through 2025 and beyond: hub and spoke, and more
- **Wider primary care and NHS negotiations** also important
- Government missions, focus on technology and innovation, and global factors may also **influence health policy**
- Continued work with LPCs to maximise **local opportunities with ICBs**



The NHS Plan



The NHS Plan

- Following the publication of the Darzi report, the Secretary of State announced that he would develop a new ten-year plan for the NHS
- To develop the plan, the Government wants a national conversation on the NHS: [change.nhs.uk](https://www.change.nhs.uk)
- The plan will set NHS policy for the next decade, most likely helping DHSC and NHS England to feed into future Spending Reviews – clearly a critical policy document
- As well as the public conversation, relevant organisations are being invited to submit evidence: **this is a role for Community Pharmacy England and for LPCs to consider**



Government view on the plan

The 10 Year Health Plan is part of the **Government's health mission** to build a health service fit for the future.

The plan will:

- Deliver on the **three big shifts** needed to move healthcare from: hospital to the community; analogue to digital; sickness to prevention.
- Focus on **modernising the NHS** with an emphasis on meeting the healthcare needs of future generations.
- Be **co-developed by the public, patients and staff** so that they feel co-ownership of the plan.



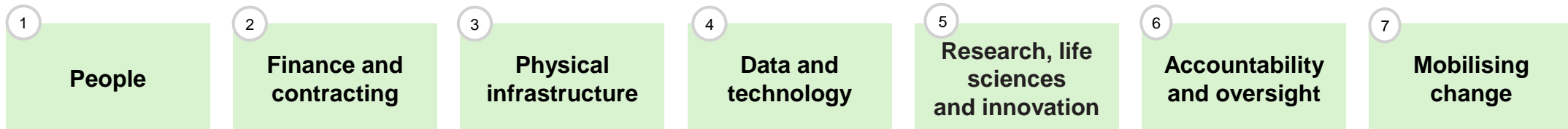
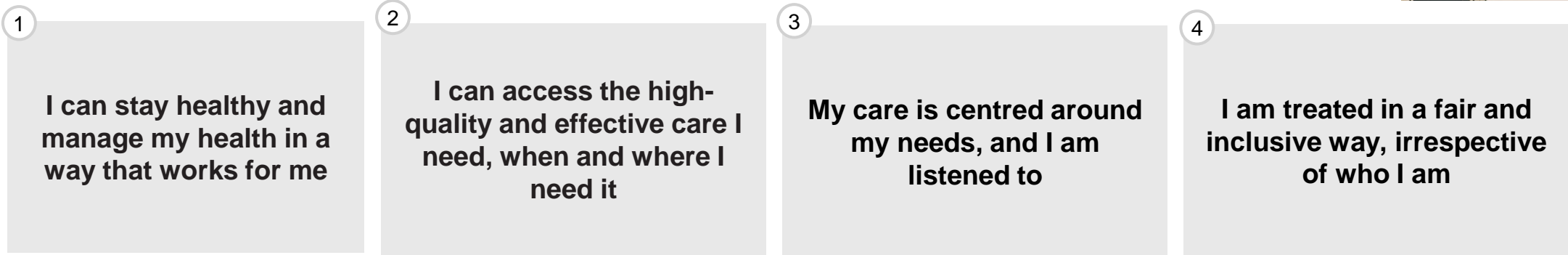
How the plan is being developed

- **Starts with the findings from the Darzi investigation:** including the need to amend financial flows to shift care closer to home, empower patients, bring down waiting lists and unlock the power of digital
- **That gave a common understanding of the problems**
- **Engagement:** with the public, with NHS staff and with key partners. This includes the [change.nhs.uk](https://www.change.nhs.uk) website, events and workshops, and more
- **Policy/plan development:** the plan will be developed using insights from the engagement work, as well as policy development being carried out via dedicated workstreams/working groups

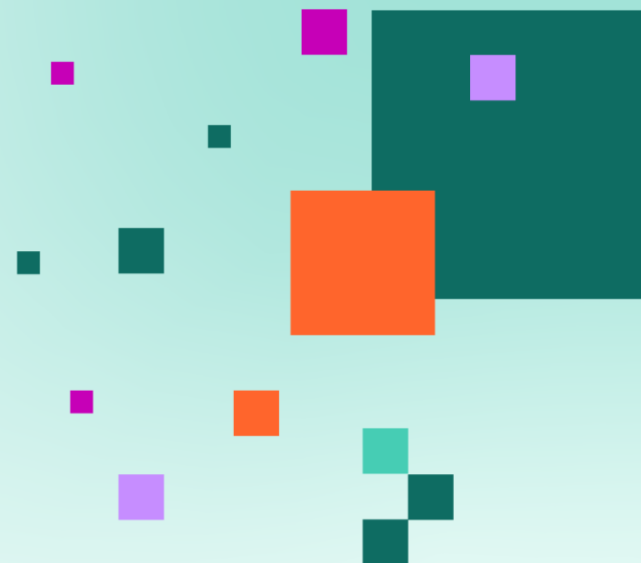


How the plan is being developed

- **Vision:** Looking at what do people want
- **Enablers:** Looking at how we get there and how we make change happen
- **Consolidation:** Will the proposed changes deliver the vision?



Inputting into the NHS Plan



Inputting into the NHS Plan

- **Submissions and Meetings:** We will submit a response, which will reflect the Vision, economic work and service prioritisation. Plus a joint response with the other primary care negotiators. We are represented on the Plan Partners Council and have met with the team leading its development
- **LPCs might choose to make submissions:** Discussed at LPC Conference
- **Advocates:** Keeping working group members and others briefed
- **Wider conversation:** Supporting the sector to take part in this including via webinars, publication of key messaging and articles

Negotiations and work to influence Spending Reviews and short to medium term health policy will continue alongside work on the NHS Plan.



What are our key messages?

- **Economic and social value** of community pharmacy and return on investment
- **Evidence of current pressures:** crisis and risk to Government and patients
- **Vision for what you could get:** if community pharmacy is stabilised and sustainable
- **Real clinical solutions** for a 'broken NHS'...
- **...that support Government objectives** *sickness to prevention, hospital to community*



How do they align with the Plan?

- **Sickness to prevention:** Pharmacies can play a wider role in both the **prevention and identification of disease**, as well as supporting people with long-term condition management
- **Hospitals to community:** Community pharmacies are located in the **heart of local neighbourhoods, providing highly accessible care**. The NHS can take advantage of this and of pharmacies' regular contact with patients, as the Neighbourhood Health Service develops
- **Person-centred care:** When using community pharmacies, **patients have free choice of provider and can access high-quality care on a walk-in basis**. This is not the case elsewhere in the health system
- **Health inequalities:** As has been shown with vaccinations, pharmacies can help to **deliver public health services to communities and groups of patients who are less well served by other NHS services**



Implementing the Nuffield Trust and The King's Fund Vision for community pharmacy

Preventing ill-
health and
supporting
well-being

Providing
clinical care
for patients

Living well
with
medicines

Part of integrated
primary care
offer for
neighbourhoods

Priority community pharmacy service enhancements for patients, the NHS and Government



Expanded Pharmacy First

*Open access to the current service	Supply of OTC meds for low-income individuals
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*Additional Pharmacy First conditions:

- Lower resp tract infections
- Acne
- Minor skin infections
- Eczema
- Psoriasis
- Acute otitis externa
- Bacterial conjunctivitis
- Oral thrush in infants

Prevention / Public Health

*Expanded vaccination services	Smoking / nicotine cessation service (open access)
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Case-finding & referral service, e.g. COPD	Add AF detection to Hyp service
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Health checks for specific target groups	Weight management
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Women's health

*Addition of LARC to Pharmacy Contraception Service	Emergency Contraception service
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*Menopause advice service (incl. supply of HRT)

Ind Prescribing and LTCs

Amendment of prescriptions and deprescribing	Management of single LTCs (hyp, lipids, asthma, dermatology)
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Structured medication review

* All services which involve the supply of a prescription medicine use independent prescribing instead of PGDs, where the pharmacist is an IP.



Key:

High priority
Medium priority

Input into our submission to the Plan

Please consider the following questions:

1. What is the most important thing we want to see included in the plan?
How can we make the most persuasive case for this?
2. How can pharmacy help move more care from hospitals to communities?
3. What role can technology play in improving primary care?
4. How can pharmacy help spot illnesses earlier and prevent ill health?
5. What are our top priorities for change (one for each): short term (within one year); medium term (2–5 years); and long term (five year plus)?



Next Steps and Actions

- **Community Pharmacy England:** Submit response and joint response with the primary care negotiators. Share key messaging and outputs of LPC Conference discussion with LPCs. Working with advocates
- **LPCs may choose to consider submitting evidence:** Considered and discussed at the recent LPC Conference
- **Pharmacy owners and team members:**
 1. Thank you for joining tonight and taking part in polls which will inform our response
 2. Consider submitting a response via **change.nhs.uk**
 3. Look out for local events and workshops. Info on NHS local events:



Next Steps and Actions

- Negotiations and work to influence Spending Reviews and short to medium term policy must continue alongside work on the NHS Plan
- Pharmacy owners can support this in several ways:
 1. **Write to your MP:** Guidance is available on our website, along with updated MP Briefing Notes
 2. **Offer to support us or your LPC with media work and pharmacy MP visits:** email comms.team@cpe.org.uk
 3. **Take part in our regular polling and audits:** this provides the ongoing data and evidence we need
 4. **Coming soon:** help gather patient feedback on Pharmacy First

