

# Pharmacy First

## Digital transformation of Primary Care

general practice and community  
pharmacy

3 April 2025



England



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# Digital transformation

NHS England has significantly improved the digital infrastructure between general practice and community pharmacy to support the implementation of Pharmacy First, and the expansion of the Blood Pressure Check Service and Pharmacy Contraception Service.

Enable easy, streamlined digital referrals from general practice to community pharmacy  
(Referral Standard)

Provide community pharmacy real-time, read-only access to patient GP records  
(GP Connect Access Record: Structured)

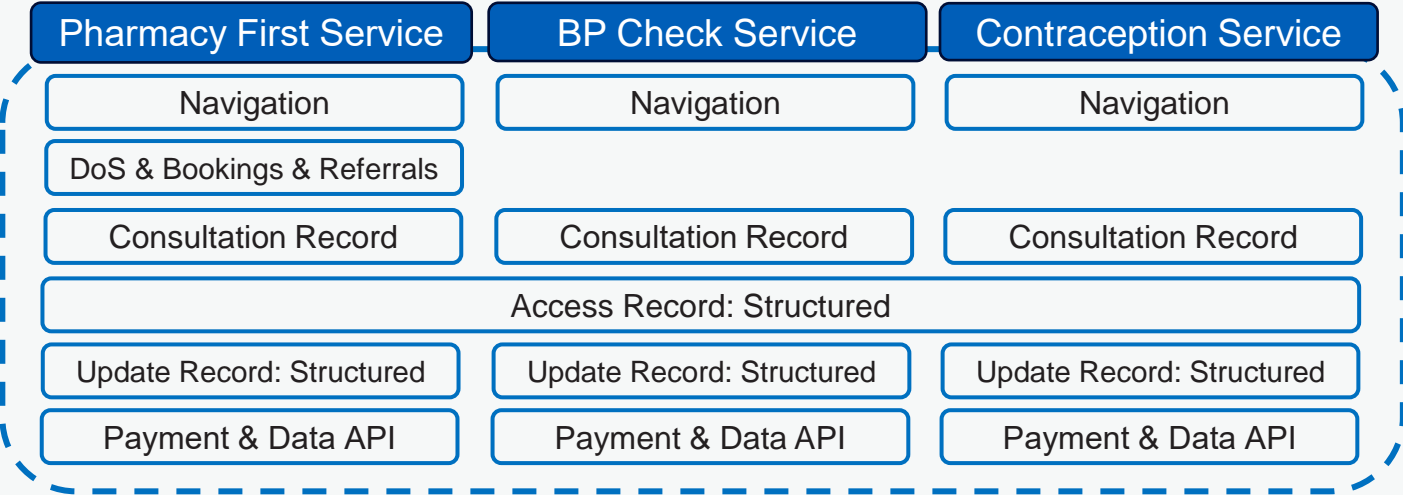
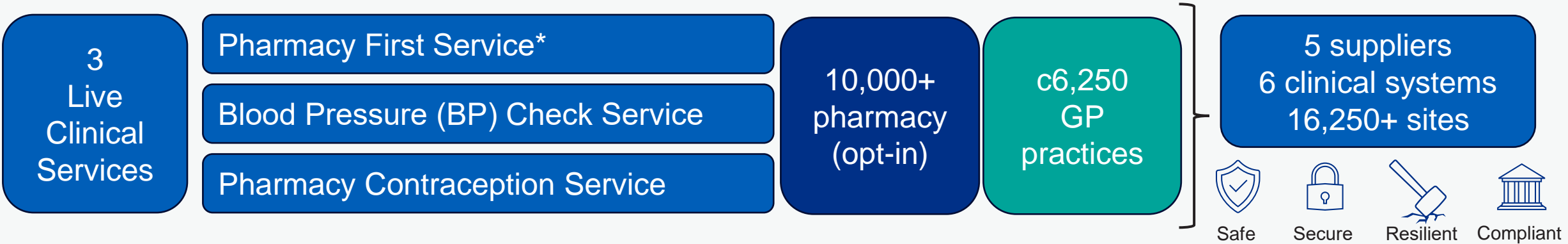
Streamline claim processes and monitoring of services  
(NHS BSA Payment & Data APIs)

Signposting to support patients to choose community pharmacy  
(DoS, Profile Manager, nhs.uk and 111 online and 111 telephony pathways)

Send structured information to update patient GP records after community pharmacy consultations  
(GP Connect Update Record: Structured)

Assured clinical systems used in community pharmacy to meet national standards  
(Digital Service for Integrated Care for Community Pharmacy)

# Scale of transformation to improve patient care



## Impact

Reduced frontline burden and improved access and services for patients

Scale, once fully rolled per month:

- 170k referrals into pharmacy workflows
- 660k views of real-time clinical information
- 660k structured updates into GP workflows, and into patient's hands in the NHS App

\* Covers 3 flows of patients: 1) GP, NHS111 and Urgent Treatment Centre referrals for minor illness 2) NHS111 referrals for Emergency Supply of Medicines 3) GP and NHS111 referrals or walk-ins for seven conditions

# Benefits: reduce burden and improve patient care

Digital improvements is reducing burden and improving patients experience and safety, freeing up general practice appointments for patients who need them most, giving people quicker and more convenient access to high quality healthcare.

Baseline evidence from general practices and community pharmacies visited over the last three months has shown significant variation in the amount of time it takes to process referrals, access clinical information and update the patient GP record. The minutes saving statements below are the estimated minimum benefit of implementing in-workflow referrals, enabling sharing of clinical information and streamlined updating of the patient GP record:

## General practice and community pharmacies

Less manual burden to manage referrals

**3-minute saving per in-workflow referral**

## Community pharmacies

Less logins to access patient information

**1-minute saving per view of patient GP record**

## General practice

Less admin burden to update the patient GP record

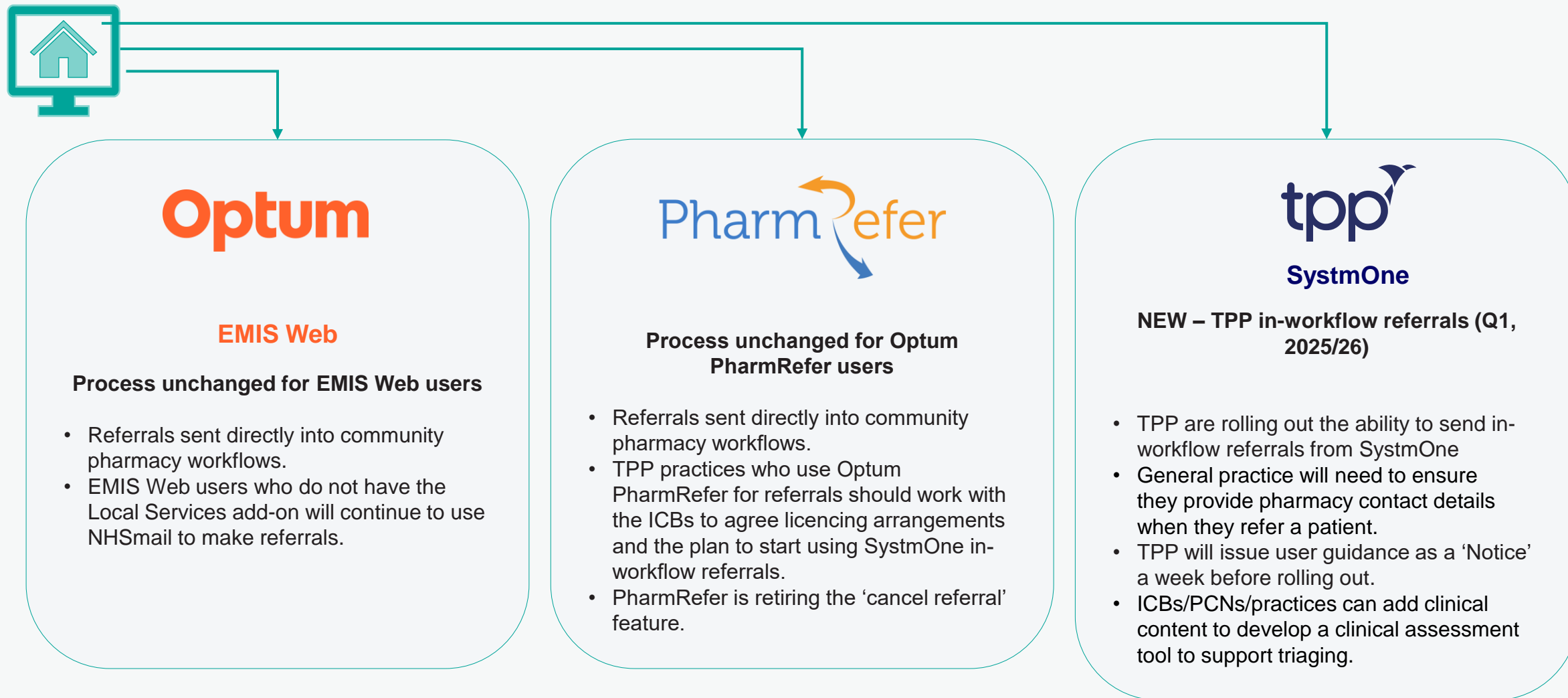
**2-minute saving per community pharmacy consultation**

# Streamlining referrals from general practice to community pharmacy

Referral Standard



# Referral process for general practice



# Referral Standard



The Referral Standard enables GP IT systems to send standardised referrals directly into community pharmacy clinical IT systems. General practice cannot use this system yet to book community pharmacy appointments.

A patient journey - from the patient presenting with symptoms, to appropriate treatment - often involves two or more NHS services. Clinical and administrative information is sent and received at all stages of this journey.



This new Referrals Standard streamlines the way Pharmacy First referrals are sent from general practice to community pharmacy. Community pharmacies now receive the information they need, in a standardised format they can use, integrated into their clinical system.



## More information is available at:

- [Referral Standard - NHS England](#)
- [BaRS Core](#) - core set of functionality and BaRS applications



# Steps to refer patients from general practice to community pharmacy using assured in-workflow referrals systems

## General practice

## Community pharmacy



### Step 1:

Patient presents or calls their general practice – triaged as appropriate for referral against service specification



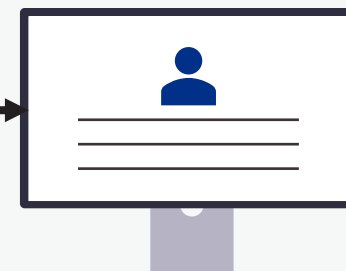
### Step 2:

General practice creates a referral by entering the presenting complaint, including relevant details for the recipient, and select an appropriate pharmacy using the Directory of Services (DoS)



### Step 3:

The referral is sent. General practice provides the patient with the pharmacy contact details so they can arrange when they visit the pharmacy



### Step 4:

Referral received directly into the community pharmacy clinical system



### Step 5:

Patient seen by community pharmacy (in person or online)

# Information sent in referral to community pharmacy

The in-workflow referrals contain the following information:



**Personal demographics** – name, date of birth, gender, ethnicity, NHS number, address, preferred contact method, telephone number, email address



**General practice information** including ODS code



**Legal information** including consent for information sharing



**Clinical summary** – clinical narrative



**Presenting complaints** or issues



**Referral details** – date of referral, service of the referrer, referral type for example Pharmacy First, contact details of referrer, person referral reference journey ID, ODS code of the community pharmacy

# Information for general practice

Referral Standard

# Directory of Service: Distance Selling Pharmacies

When a general practice makes a Pharmacy First referral the system will use the Directory of Service to return a list of nearby community pharmacies, which may include distance selling pharmacies (DSPs).



1. General practice cannot refer patients with suspected Acute Otitis Media (earache) to distance selling pharmacies for the Pharmacy First Service.



2. Distance selling pharmacies only provide remote (telephone or online) consultations.



3. A distance selling pharmacy is not always identifiable by their name or address, so the referrer needs to work with the patient to choose the pharmacy before the referral is sent.

# Benefits for general practice



**Accurate information:** General practice teams have access to an up-to-date list of nearby community pharmacies to support patients having choice. The referrer can offer the patient a face-to-face consultation in a pharmacy or a remote consultation via telephone or online (excluding suspected acute otitis media).



**Streamlined referrals:** General practice teams can send referrals to community pharmacy from within the workflow, avoiding the need to log into different systems, saving time.



**Safe patient care:** Patient referral information is sent in a structured, standardised format to community pharmacy workflows, improving patient safety.

# Information for community pharmacy

Referral Standard

# Receiving referrals from general practice

Community pharmacies receives Pharmacy First referrals directly into the same clinical IT system as NHS 111 referrals.

Referral information is sent in a structured, standardised format to support the patient consultation.

## Actions for registered community pharmacy professionals

- ✓ **Business continuity:** Continue to monitor NHSmail for all other referrals. Email remains a business continuity solution for referrals from both general practice and NHS 111 if the in-workflow referral system fails.
- ✓ **Directory of Services:** The referral system uses the Directory of Services to display a list of community pharmacies, including distance selling pharmacies that provide the NHS Pharmacy First Service. It is important community pharmacies ensure the NHS Profile Manager entry is up-to-date.



[Directory of Services \(DoS\) - NHS England Digital](#)

# Benefits for community pharmacy



**Accurate information:** General practice teams will have access to accurate, up-to-date information via the Directory of Services, so community pharmacy teams can ensure patients who attend are being referred for services they can offer.



**Streamlined in-workflow referrals:** Community pharmacy teams will receive referrals directly into clinical IT systems, reducing the need to work across two or more applications and saving time.



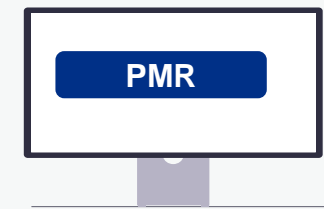
**Patient safety:** Patient referral information received is in a structured, standardised format, reducing the likelihood of errors and improving patient safety.



# Accessing clinical information

GP Connect Access Record: Structured

# Ways for registered community pharmacy professionals\* to access clinical patient information



**Patient Medication Record (PMR)** if the patient is known to the community pharmacy



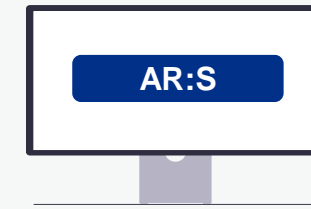
**Shared Care Record (ShCR)** if the patient lives in an area with ShCR and the pharmacy has access to the ShCR system



Smartcard / [Care Identity Service 2](#)



**National Care Records Service (NCRS) or Summary Care Record (SCR)** if the patient is not known to the community pharmacy, or if the patient is known but data is not available via PMR



Role Based Access Controls (RBAC)\*\*



**Access Record: Structured** real-time access to the patient's GP record during the community pharmacy consultation. The following clinical information is available to view in the clinical system:

- Medications
- Investigations
- Observation items – weight, height, body mass index, pulse rate, smoking status, alcohol intake and blood pressure readings

\* Pharmacists and Pharmacy Technicians (General Pharmaceutical Council - register of clinical professionals)

\*\* IT systems will apply Role Based Access Controls (RBAC) to provide access to registered community pharmacy professionals only.

# GP Connect Access Record: Structured



GP Connect Access Record: Structured allows registered community pharmacy professionals to securely view areas of the patient's GP record within their own assured IT system. Information is provided in a structured, standardised format that is user-friendly and easy to interpret.

Community pharmacy clinical service specifications (e.g. [NHS Pharmacy First service specification](#)) outline that with the patient's consent, a pharmacist must consult the patients GP record, using GP Connect Access Record, National Care Record or an alternative clinical record.



Access Record: Structured is used for NHS **direct care** and gives registered community pharmacy professionals access to the **real-time information** they need for safe, informed clinical decision-making.

Areas of Access Record: Structured are already deployed in assured general practice systems, ready for approved clinicians to request. Assured community pharmacy suppliers have started to rollout, providing access to three clinical areas of the patient's GP record:

- Medications
- Investigations
- Observation items - weight, height, body mass index, pulse rate, smoking status, alcohol intake and blood pressure readings



More information is available at: [GP Connect: Access Record](#)

# GP Connect Access Record: Structured and NCRS

Features and information available to community pharmacy professionals	Access Record: Structured	NCRS (SCR)
<b>Real time access</b> to structured data	✓	✗
<b>Access from within pharmacy clinical system</b> (as opposed to access via separate system/log in/browser)	✓	✗
<b>Available now</b>		
<b>Medications</b> (current/repeat/past)	✓	✓
<b>Observation items</b> (weight, height, body mass index, pulse rate, smoking status, alcohol intake and blood pressure readings)	✓	✓
<b>Investigations</b> (including blood tests, urinalysis)	✓	✗
<b>Potential development for community pharmacy access in the future</b>		
<b>Allergies and adverse reactions</b>	✓	✓
<b>Consultation encounters</b>	✓	✓
<b>Problems/medical history</b>	✓	✓
<b>Immunisations</b>	✓	✓

**Key:** ✓ available   ✓ availability varies   ✗ not available

See [Summary Care Record](#) and [National Care Records Service](#) for more information

# Benefits to community pharmacy



**Time saving:** Less time switching between community pharmacy applications, providing role-based access without the need for a Smartcard



**User friendly system:** Provided in a structured format which can be filtered. Information not limited to the past 12 months



**Improved clinical decision making:** Reducing clinical risk and improving patient outcomes.



**Joined up care:** Verifying patient medical history and reducing burden on patient to remember or relay information



**Patient safety:** Ensuring community pharmacy have the most accurate, up-to-date information for patient care

**‘Accessing the patient’s GP record was very straightforward. Each section was simple to navigate. The whole record was user friendly’**

Feedback from Tower Pharmacy, London (pilot site)

# Protecting patient data

Information governance for  
general practice and community  
pharmacy



# Protecting patient data - Access Record: Structured

General practice	Community pharmacy		
General practice's remains the data controller for their patients' GP held records	Role-based access – registered community pharmacy professionals	Community pharmacies have signed up to the <u>National Data Sharing Arrangement (NDSA)</u> to use GP Connect*	NHSE monitoring and alerting if non-assured sections of the GP record are being requested, indicating a breach of connection agreement
Patient consent is managed by the general practice	May only be used for NHS direct care	Information is read-only and cannot be extracted or stored in the community pharmacy system	Community pharmacies verify patient's consent before viewing their GP record



\*Pharmacy contractors who registered for the Pharmacy First, Blood Pressure Check, or Pharmacy Contraception Service will have signed up to the terms of the NDSA as part of registration with Manage My Service, NHS BSA.

# The National Data Sharing Arrangement (NDSA)

## Access Record: Structured

The GP Connect [National Data Sharing Arrangement \(NDSA\)](#) sets out the data sharing requirements and obligations for the use of GP Connect. This ratifies the safe sharing of clinical information through GP Connect to support direct patient care.

- Use of GP Connect products requires the pharmacy contractor to first agree to the terms of the NDSA. [Check which organisations use GP Connect on the NDSA Portal](#).
- Pharmacy contractors who registered for the Pharmacy First, Blood Pressure Check, or Pharmacy Contraception Service will have signed up to the terms of the NDSA as part of registration. Users can also sign up directly on the [NDSA Portal](#).

To sign up to GP Connect you must hold a current (valid) [Data Security and Protection Toolkit \(DSPT\)](#) for the pharmacy ODS code to be applied to the NDSA.

NHSE Information Governance, responsible for GP Connect, confirms the NDSA is sufficient to cover the rollout of Access Record: Structured and its enablement by default.



### More information is available at:

- [National Data Sharing Arrangement for GP Connect - NHS England Digital](#)





# Information for general practice

GP Connect Access Record: Structured

# What is GP Connect Access Record?

GP Connect Access Record has been used since 2018 to enable a variety of health and care professionals to access patients' GP records in a range of settings\*. In 2024, Access Record: HTML processed more than 257 million requests, and Access Record: Structured handled more than 6.2 million requests.

From March 2025, community pharmacy will start to use Access Record: Structured to support direct patient care.

Product	Description
Access Record: HTML	Enables a read-only view of a patient's record for another care setting.
Access Document	Allows access to documents which are attached to the patient's GP record, such as a consultation summary from another care setting.
Access Record: Structured	<p>Provides access to a patient's GP record in a machine-readable, structured, and coded format.</p> <p>Already adopted by NHS Trusts and primary care networks for access to medications and allergies records.</p>

\*Examples of where GP Connect: Access Record is being used is available on the [GP Connect: Access Record website](#).

# Accessible patient data

Access Record: Structured has started to roll out to community pharmacy for three areas of the patient's GP record:



## Medications



**Observation items** –weight, height, body mass index, pulse rate, smoking status, alcohol intake and blood pressure readings



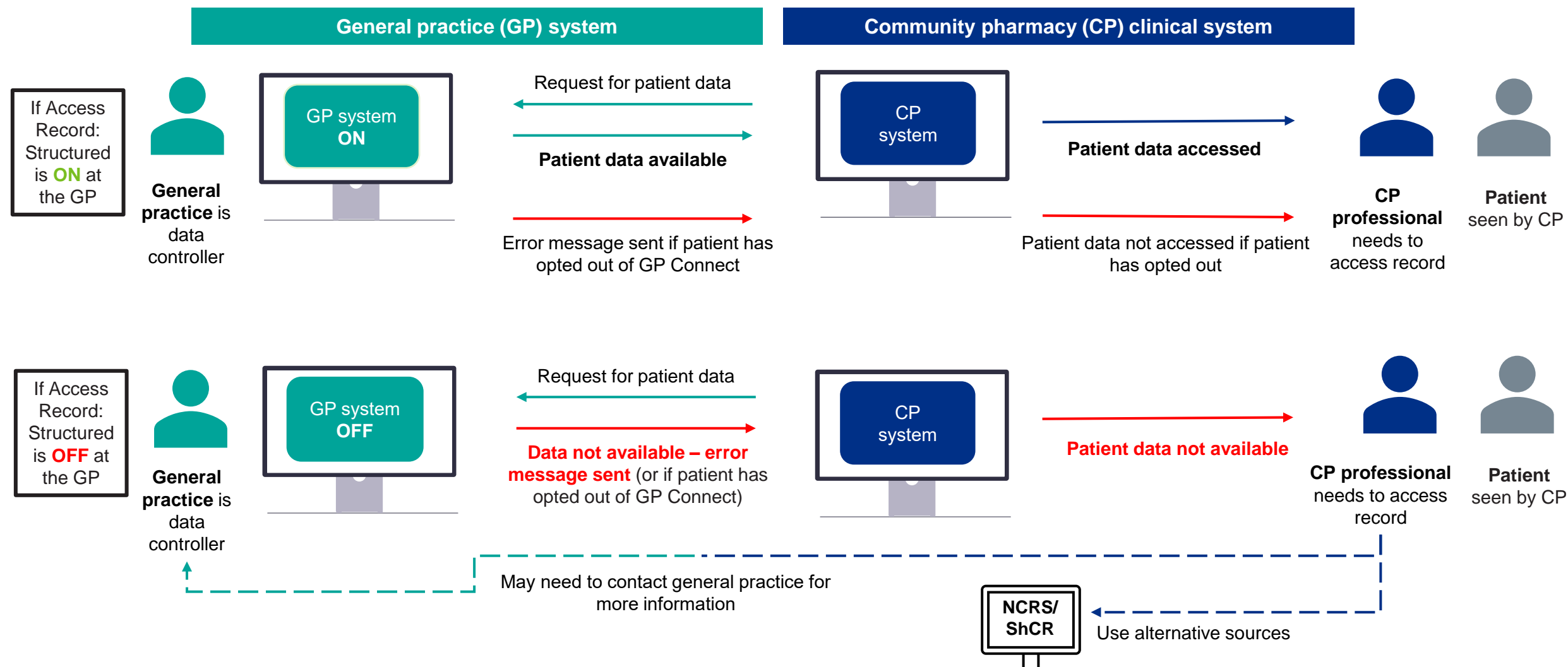
## Investigations

Information will only flow to community pharmacy if Access Record: Structured is enabled within the GP IT system of an individual general practice and the patient has not withdrawn their consent.

## Changes to the GP Contract in 2025/26

The Department of Health and Social Care (DHSC) and NHS England consulted with the profession on changes to the GP contract for 25/26. The agreed changes are set out in [the contract announcement letter](#) which includes a requirement [\(para 8\)](#) on general practices to ensure the functionality in GP Connect (Access Record: HTML, Access Record: Structured and Update Record: Structured) is enabled by 1 October 2025.

# Data flow example – general practice view



# What do general practice teams need to do?

## Enabling Access Record: Structured



**No action** for practices who already have GP Connect Access Record: Structured (medications and allergies) enabled

**For those who don't:**

- ☒ Go to **Organisation Configuration**
- ☒ Select **Edit Organisation**
- ☒ Select **GP Connect Configuration**
- ☒ Under **GP Connect API Configuration** tick the box next to **Structured Record** to turn on



General practices using TPP will **need to enable** remaining areas of Access Record: Structured

**To do this:**

- ☒ Go to **Organisation Preferences**
- ☒ Select **Interoperability**
- ☒ Select **Third Party Patient Record Settings**
- ☒ Select **Enable Access Record Structured: Medications and Allergies** if not already turned on
- ☒ Select **Enable Access Record Structured: Immunisations, Consultations, Problems, Investigations, Outbound Referrals, Diary Entries (Recalls), Uncategorized Data** to turn on

Patients should contact their GP practice if they want to opt out of their patient GP record being shared via GP Connect.

# General practice configuration screens

## Enabling Access Record: Structured

Optum

EMIS Web

Edit Organisation: X

Organisation details  
Location Details  
Email Configuration  
SMS Configuration  
FitNote Configuration  
CDA Configuration  
SCR Configuration  
**GP Connect Configuration**  
GP Connect Messaging Configuration

**GP Connect API Configuration**

☒ **GP Connect**  
Allows patient information held at this organisation to be available to healthcare professionals at other accredited GP Connect care settings, regardless of their clinical IT system.

☒ **HTML Views**  
Allows healthcare professionals at other care settings to access a read-only views of patient care records held at this organisation.

☒ **Foundation**  
Core APIs and services that make data from clinical systems available in a form that can be viewed and shared across different clinical IT systems, e.g. Find a patient, Register a patient, etc. This must be turned on to use GP Connect Appointments in EMIS Web.

☒ **Appointments**  
Allows healthcare professionals at other care settings to book, amend and cancel patient appointments at this organisation or at another care setting.

☒ **Structured Record**  
Allows healthcare professionals at other care settings to access patient care records, held at this organisation, in a structured format. Includes access to medications and coded data.

☐ **Access Document**  
Allows healthcare professionals at other care settings to search for and retrieve clinical documents from patient care records held at this organisation.

**GP Connect Messaging Configuration**

☒ **GP Connect Messaging - Send Consultation (Encounter) Summary**  
Allow users to send summaries of consultations (encounters) with external patients, held at this organisation, back to the the patients' registered organisations.

Confirm the default settings for sending a consultation (encounter) summary in the **GP Connect Messaging Configuration** tab.

[EMIS Web \(Optum – formerly known as EMIS\)](#)

tpp

SystemOne

Organisation Preferences X

Enter text to search Search Clear

**GP Connect**

Enabling the following options allows you to view and share patient records between this organisation and other organisations via GP Connect. Further settings to control which organisations can send GP Connect messages are set on Spine by NHS Digital.

☒ **Enable Access Record: HTML**

☒ **Enable Access Structured Record Provider: Medications and Allergies**

☐ **Enable Access Structured Record Provider: Immunisations, Consultations, Problems, Investigations, Outbound Referrals, Diary Entries (Recalls), Uncategorised Data**

☐ **Enable Access Document**

**EMIS Direct**

☐ **Enable EMIS integration**

Restore Defaults Export Import OK Cancel

[TPP SystemOne](#)

# Information for community pharmacy

GP Connect Access Record: Structured



# Process for accessing clinical patient information through Access Record: Structured



A registered community pharmacy professional may need to review the patient's health information, such as current and past medications, for a consultation.



Registered community pharmacy professionals can view the patient record directly within the consultation page.



Role-based access controls, no Smartcard required.



No need to copy and paste patient details, such as the NHS number, between systems.

Registered community pharmacy professionals will have access to three clinical areas of the patient's GP record: medications, investigations, and observations.

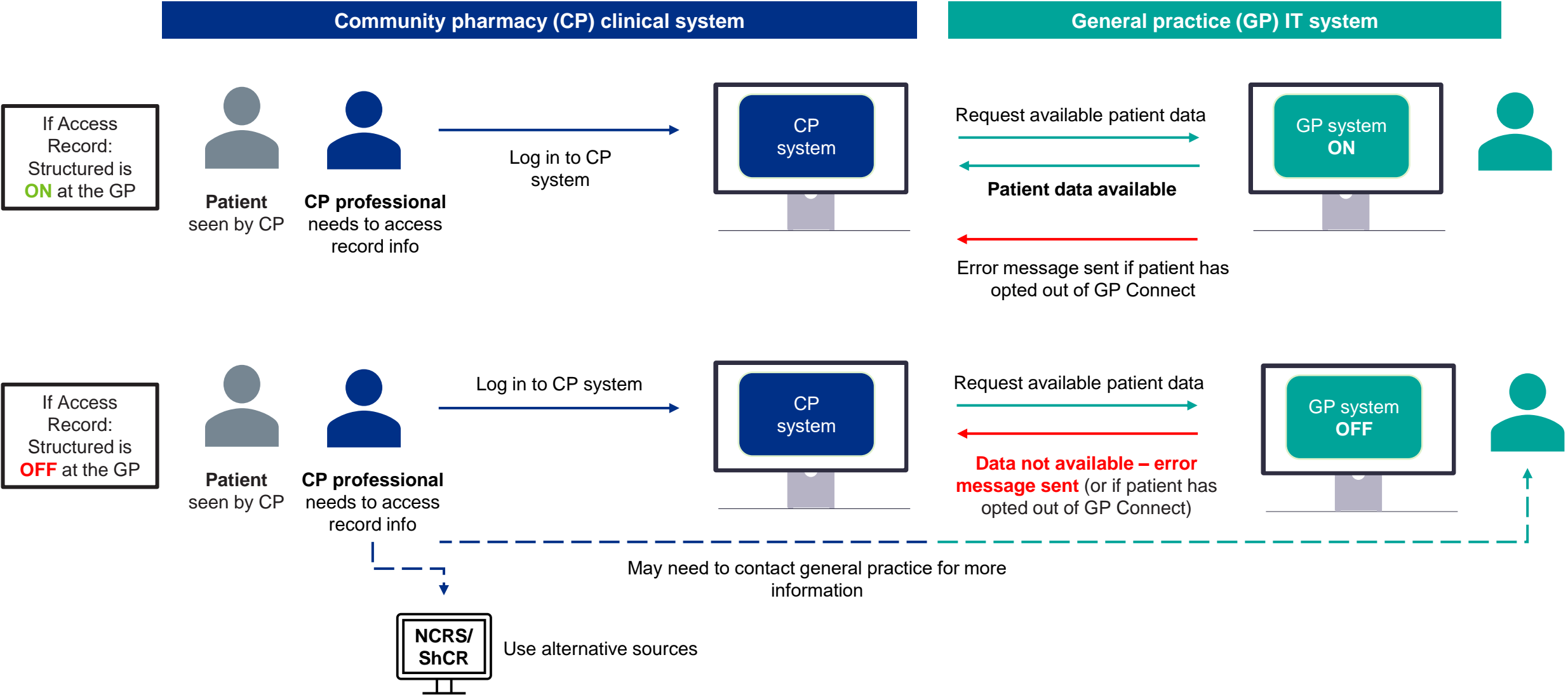
**Continue to use National Care Records Service/Summary Care Record for allergy information**

- If a general practice has Access Record: Structured turned off, the community pharmacy will see an error message.
- If a patient has requested their patient GP record is not shared, the community pharmacy will see an error message.

In these instances, community pharmacy professionals should access clinical information via alternative resources, for example NCRS/SCR and ShCR, ask the patient or call the general practice.



# Data flow example – community pharmacy view



# Accessible patient data

Access Record: Structured has started to roll out to community pharmacy for three areas of the patient's GP record:



## Medications



**Observation items** – weight, height, body mass index, pulse rate, smoking status, alcohol intake and blood pressure readings



## Investigations

Information will only flow to community pharmacy if the system is enabled with the GP IT system and the patient has not withdrawn their consent.

## Changes to the GP Contract in 2025/26

The Department of Health and Social Care (DHSC) and NHS England consulted with the profession on changes to the GP contract for 25/26. The agreed changes are set out in [the contract announcement letter](#) which includes a requirement [\(para 8\)](#) on general practices to ensure the functionality in GP Connect (Access Record: HTML, Access Record: Structured and Update Record: Structured) is enabled by 1 October 2025.



# Updating the patient's GP record

GP Connect Update Record: Structured

# GP Connect Update Record: Structured



Allows registered community pharmacy professionals to send pharmacy consultation summaries in a **structured** format, including details of any medicines supplied. This goes directly into general practice workflows for filing, rather than via NHSmail or letter.

Been technically and clinically assured **for use between registered community pharmacy professionals\* and general practice and can only be used for three services:**

- NHS Pharmacy First Service
- NHS Community Pharmacy Blood Pressure Check Service
- NHS Pharmacy Contraception Service

**Not used** for community pharmacy to communicate urgent actions, referrals or safeguarding concerns to general practice. Community pharmacy will continue to communicate urgent actions or referrals directly to general practice following local processes, for example NHSmail or telephone.



Designed to make it easier for general practices and their teams to support the safe, accurate and timely update of patient GP records.



**More information is available at:**

[GP Connect: Update Record: Structured - NHS England Digital](#)

\* Pharmacists and Pharmacy Technicians (General Pharmaceutical Council registered clinical professionals)

# Benefits of GP Connect Update Record: Structured



# Case study GP Connect Update Record: Structured in general practice (page 1 of 3)



"If the summaries come straight in as tasks, they are picked up and actioned much more quickly"

## About the practice

**Practice size:** 16,000 patients, 5 GPs

**Demographic:** Suburban location with deprived patient population

**Admin team size:** 6 reception staff and 4 admin office staff

**GP Connect: Update Record:** Switched on

## Pharmacy First

The general practice team are trained 'care navigators' and refer patients, whenever possible, to community pharmacy if they meet the age and condition criteria.

- It takes time to refer to a pharmacy, but they see the benefit as saving that 10-minute GP appointment slot for those that really need to see a GP.
- They refer digitally through the practice IT system, as this enables the pharmacist to be better informed by receiving the patient's NHS number and the reason for the referral.

## Engagement

- Work closely with the local pharmacists and meet regularly to discuss what's working well and what can be improved to help make best use of the service for the patients.

# Case study GP Connect Update Record: Structured in general practice

(page 2 of 3)

## Pharmacy First summaries by email



### Previous process for managing Pharmacy First summaries

- The practice received many Pharmacy First patient updates each day and they wanted to make sure patient records were updated as soon as possible.
- They had a target of 48 hours to add care details to records, but would like to do this more quickly.
- Pharmacy First summaries came into the practice NHSmail inbox, which was monitored regularly, but not constantly throughout the day. This could cause delays in the time taken for patient information to be added to the record.
- They would print the emailed pharmacy consultation summary, place it in a filing tray to be scanned, coded and then filed in the patient's GP record.
- This process could take up to 3 days to complete and could take longer if there were staff absences.

## GP Connect: Update Record

### Current process: summaries sent directly to the system workflow

Decided to trial *GP Connect: Update Record* for 2 weeks and made the decision to continue, based on the benefits it brought

- All Pharmacy First consultation **summaries now come directly into the IT system workflow**, within half an hour of the patient's consultation
- As the summary comes into the workflow, it **can be picked up straightaway, reviewed** and filed
- No attachments – **all details easily viewable in the record**
- **Already matched to the patient** – no admin effort
- **Pharmacy details** included
- **Condition** treated included – **no manual coding**
- **Medications prescribed or supplied show automatically** in the medications tab
- Just need to **review and file/save**
- Patient can see the **summary details in the NHS App** once approved by their GP



# Case study GP Connect Update Record: Structured in general practice

(page 3 of 3)

## In their words

"The ones that come into the workflow, they're dead easy for us and save a lot of time, because it's already matched to the patient. Everything's already been entered. We just double check the details match and file it"

"If they come straight in as tasks, they're picked up and actioned much more quickly"



"It's miles quicker! [Previously] we were reliant on someone picking up the email and adding it to Docman and that could take up to 48 hours depending on staffing"

"If a patient has been seen by the pharmacy, we get a document into workflow manager. Go into 'consultations' and everything's come through and been coded. The medications are in the medications tab. All we have to do, which is great, is just press file"

# Information for general practice

GP Connect Update Record:  
Structured

# GP Connect Update Record: Structured



Community pharmacy consultation summaries (including observations, notes and any medicines supplied) arrive in the general practice workflow in GP IT systems for filing in the patient's GP record.



A workflow task is created in the GP IT system for every community pharmacy consultation summary received, so it is visible to the practice before filing into the patient's GP record with one click.



Patients will be made aware that a consultation summary and any medicines supplied may be visible in NHS App and other patient-facing services, where this has been enabled by the practice. In the case of contraception consultations, a patient can choose to not have this information shared.



As clinical healthcare professionals, registered community pharmacy professionals have full responsibility for ensuring that any medicines supplied are clinically appropriate. GPs are not responsible for management and treatment decisions including any medicines supplied by registered community pharmacy professionals.



In the vast majority of cases, patients will not require ongoing treatment or monitoring by GPs following a community pharmacy consultation. The specification for each of the services delivered through community pharmacy sets out guidelines for escalation and onward referral where clinically appropriate.

# What is sent as part of GP Connect Update Record: Structured?

GP Connect Update Record: Structured is used for the Pharmacy First Clinical Pathways and Minor Illness Service, Blood Pressure Check Service, and Pharmacy Contraception Service.

Information sent will include:



**Person demographics and general practice details**



**Date and time of consultation**



**Pharmacy details**



**Outcome of consultation**



**Clinician details**



**Presenting complaint**



**Clinical summary of consultation**



**Observations e.g., blood pressure and temperature**



**Pregnancy status**



**Medicine details or reasons for no supply**



**Information and advice given to the patient**



**Signposting information**

# What is not sent as part of GP Connect Update Record: Structured?



## **Is not used to communicate urgent actions or referrals**

Where urgent action or an urgent referral to general practice is required, the pharmacist must communicate directly, following local processes e.g., NHSmail or telephone.



## **Is not used to communicate safeguarding concerns**

Where a safeguarding concern is identified, follow local safeguarding procedures.



## **In the case of contraception consultations, a patient can choose not to have this shared with the GP**

The community pharmacy registered professional should capture in the pharmacy consultation record that the patient does not consent to the information being shared with general practice. The community pharmacy IT system won't share where non-consent has been recorded.

# Enabling GP Connect Update Record: Structured

If a general practice has GP Connect Update Record: Structured turned off, the community pharmacy must send the consultation summary via NHSmail or letter for the practice to manually transcribe into the GP patient record.

GP practices using Optum's EMIS Web or TPP's SystmOne need to follow the steps below to enable Update Record: Structured.



EMIS Web

- ☒ EMIS button > **Configuration** > **Organisation Configuration**
- ☒ Select **Organisation** (make sure practice is correct) > **Edit**
- ☒ Select **Organisation Details** > Scroll down to option for **Accept GP Connect Update Record via Mesh**
- ☒ Select **Yes**

[EMIS Web \(Optum – formerly known as EMIS\)](#)



SystmOne

- ☒ **Setup** > **Users + Policy** > **Organisation Preferences**
- ☒ Scroll down to **Interoperability** > Select the **arrow** to open up options
- ☒ Select **Incoming Messages**
- ☒ For turning on select
  - **File automatically** from within GP Connect Update Record Messages (default)
  - Or **Create Task for Manual Filing** (this will require a user to view and accept the summary data before it is added to the patient)

[TPP SystmOne](#)

**Changes to the GP Contract in 2025/26** - The Department of Health and Social Care (DHSC) and NHS England consulted with the profession on changes to the GP contract for 25/26. The agreed changes are set out in [the contract announcement letter](#) which includes a requirement (para 8) on general practices to ensure the functionality in GP Connect (Access Record: HTML, Access Record: Structured and Update Record: Structured) is enabled by 1 October 2025.

# Data controller responsibilities for general practice

GP Connect Update Record: Structured has not changed the general practice's data controller role or responsibilities.

## General practice

General practice are responsible for the data in the patient's GP record.

Update Record: Structured presents the community pharmacy consultation summary in the practice workflow ready for it to be added to the patient's GP record.

It is only when the data has been added to the patient GP record that the GP becomes responsible for the data.

The details of the community pharmacy where the consultation took place and the name of the clinician that the patient was seen by is in the message and clearly visible in the patient record.

## Community pharmacy

Community pharmacy businesses are responsible for the data generated as part of the patient consultation.

## NHS England

NHS England is responsible for the safe and secure transit of data between care settings

# Information for community pharmacy

GP Connect Update Record:  
Structured





# GP Connect Update Record: Structured



Community pharmacies do not need to take any action to implement GP Connect Update Record: Structured and will not notice any changes to the user interface. Community pharmacy professionals should continue to record and submit consultation summaries into their clinical IT system in the usual way.



GP Connect Update Record: Structured is designed to reduce the admin burden for community pharmacy staff having to send consultation summaries via NHSmail or letter.

Consultation summaries and medicines may fail to send via Update Record: Structured if the GP IT system is not working or the GP practice has not enabled Update Record: Structured. Community pharmacy must send the consultation summary via NHSmail or letter in accordance with their IT system processes in such cases.



Community pharmacy must communicate urgent actions or referrals directly with the patient's GP following local processes, for example NHSmail or telephone. Update Record: Structured only provides the summary of the community pharmacy consultation, it must not be used to communicate actions or referrals to general practice.



Registered community pharmacy professionals must follow local safeguarding procedures where they have a safeguarding concern. Update Record: Structured must not be used to communicate safeguarding concerns.

# What is sent as part of GP Connect Update Record: Structured?

GP Connect Update Record: Structured is used for the Pharmacy First Clinical Pathways and Minor Illness Service, Blood Pressure Check Service, and Pharmacy Contraception Service.

Information sent will include:



**Person demographics and general practice details**



**Date and time of consultation**



**Pharmacy details**



**Outcome of consultation**



**Clinician details**



**Presenting complaint**



**Clinical summary of consultation**



**Observations e.g., blood pressure and temperature**



**Pregnancy status**



**Medicine details or reasons for no supply**



**Information and advice given to the patient**



**Signposting information**

# What is not sent as part of GP Connect Update Record: Structured?



## **Is not used to communicate urgent actions or referrals**

Where urgent action or an urgent referral to general practice is required, this must be communicated directly, following local processes e.g., NHSmail or telephone.



## **Is not used to communicate safeguarding concerns**

Where a safeguarding concern is identified, follow local safeguarding procedures.



## **Pharmacy Contraception Service. In the case of contraception consultations, a patient can choose not to have this shared with the GP**

The community pharmacy registered professional must capture patient consent to share details of the consultation with their GP. Patients should be made aware that a consultation summary and any medicines supplied may be visible in the NHS App and other patient-facing services where this has been enabled by the practice.

In these cases, the community pharmacy professional should capture in the pharmacy consultation record that the patient does not consent to the information being shared with general practice.

# Data controller responsibilities for community pharmacy

GP Connect Update Record: Structured has not changed community pharmacy data controller role or responsibilities.

## Community pharmacy

Community pharmacy businesses are responsible for the data generated as part of the patient consultation.

## NHS England

NHS England is responsible for the safe and secure transit of data between care settings

## General practice

General practice are responsible for the data in the patient's GP record.

Update Record: Structured presents the community pharmacy consultation summary in the practice workflow ready for it to be added to the patient's GP record.

It is only when the data has been added to the patient GP record that the GP becomes responsible for the data.

The details of the community pharmacy where the consultation took place and the name of the clinician that the patient was seen by is in the message and clearly visible in the patient record.

# Observations and SNOMED CT



Using digital standards, community pharmacies can record referred patient's observations and treatments and share vital information about a person's care with GP practices.

Please refer to the [Community Pharmacy Standard – PRSB](#) v3.01.03, released September 2023.



NHSE clinical leads together with terminology specialists and SNOMED team agreed the recommended list of SNOMED codes to be used for the Pharmacy First UR payloads. This was primarily developed to support system suppliers.



Endorsed by several professional representation bodies incl. RCGP.



The recommended codes were included based on clinical appropriateness and how commonly they are used in general practice. GP IT suppliers were consulted in some cases e.g. ABPM readings

# Managing digital live service issues



# Managing digital live service issues



**General practice or community pharmacies should report any digital or technical issues directly with suppliers.**



**The supplier will either:**

- Support a local resolution
- Fix the issue themselves in their back office, or
- Escalate to NHS England, using agreed and well tested protocols



**ICBs and regions with their own IT support hub should follow local procedures, with escalations being to suppliers**



**Standard way of reporting live service issues to NHSE via suppliers that:**

- Ensures fast, responsive support
- Provides regular updates for high impact issues
- Enables us to triage the issue and provide the right level of expertise
- Suppliers understand and use regularly
- Has 24/7/365 cover

# Links





# Useful links

## **NHS Pharmacy First Service**

[NHS England » Pharmacy First](#)

## **NHS Pharmacy Contraception Service**

[NHS England » NHS Pharmacy Contraception Service](#)

## **NHS Community Pharmacy Blood Pressure Check Service**

[NHS England » NHS Blood Pressure Check Service](#)

[Advanced service specification: NHS community pharmacy hypertension case-finding advanced service \(NHS community pharmacy blood pressure check service\)](#)

## **Booking and Referral Standard**

[Booking and Referral Standard - NHS England Digital](#)

## **GP Connect**

[GP Connect - NHS England Digital](#)

[Sign the National Data Sharing Arrangement - National Data Sharing Portal](#)

[National Data Sharing Arrangement for GP Connect - NHS England Digital](#)

[Search by Organisation Name - National Data Sharing Portal for GP Connect](#)

## **Access Record: Structured**

[GP Connect: Access Record - NHS England Digital](#)

## **Update Record: Structured**

[GP Connect: Update Record - NHS England Digital](#)

## **Data**

[Dispensing contractors' data | NHSBSA](#)

## **Changes to the GP Contract in 2025/26**

[NHS England » Changes to the GP Contract in 2025/26](#)

## **Suppliers – for further information and guidance**

## **Cegedim Rx (previously known as Cegedim Healthcare Solutions)**

[Cegedim Pharmacy Solutions](#)

[Cegedim Pharmacy Solutions Help Centre](#)

[GP Connect: Access Record](#)

## **Optum (previously known as EMIS)**

[Optum UK - Healthcare Solutions & Services](#)

## **PharmOutcomes**

[Product](#) | [PharmOutcomes](#) | [Optum](#)

## **EMIS Web**

[System](#) | [EMIS Web](#) | [EMIS](#)

## **Positive Solutions**

[Positive Solutions](#) | [Intelligent Healthcare Technology](#)

## **Sonar Health**

[Home - SonarHealth](#)

## **TPP SystemOne**

[TPP](#)