

This newsletter contains useful information for community pharmacy owners and staff in Kent



I was delighted to visit Neetin and Nisha Kanani owners of M.D Moore pharmacy with Priya Mattu, Kent LPC GPCPCS and DMS project lead. The pharmacy is one of two sites in Kent and Medway that will be piloting IP pathfinder. It was great to visit the pharmacy to see how we can support his set up and answer any questions they may have.

The Pharmacy was well organised and already provides a wide range of NHS and private services. Well done team M D More.

### **Healthwatch Medway**

What Medway Residents told use about community pharmacies?

On 30<sup>th</sup> July 2023, Healthwatch Medway carried out a survey in Chatham high street, and spoke to 81 residents who shared their thoughts about community pharmacy.

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### **Healthwatch Medway**

What Medway Residents told us about community pharmacies?

On 30<sup>th</sup> July 2023, Healthwatch Medway carried out a survey in Chatham high street, outside pharmacies and spoke to 81 residents who shared their thoughts about community pharmacy. To read the full report click [here](#).

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### **Webinars on Pharmacy First and the Recovery Plan agreement (NEW!)**

The two webinars on the on Pharmacy First and recovery plan agreement will provide pharmacy owners a summary of the agreement and its importance for the future of the sector.

Booking must be made in advance via the relevant registration form:

- [Monday 27th November at 7pm](#)
  - [Tuesday 28th November at 12:30pm](#)
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# CPPE

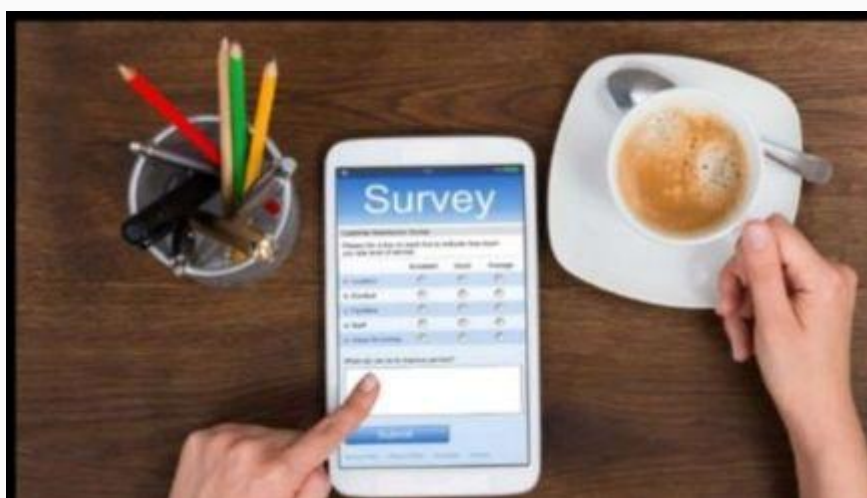


## CENTRE FOR PHARMACY POSTGRADUATE EDUCATION

### **CPPE workshops on ENT – getting Pharmacy First service ready (NEW!)**

Kent LPC are working with the Centre for Pharmacy Postgraduate Education (CPPE) to organise a face-to-face Pharmacy First workshop on a Sunday in January. The workshop is supported by a GP and advanced clinical practitioner, including time to practice examination, particularly the use of an otoscope. I will send more information once confirm.

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### **Community Pharmacy Workforce Survey 2023 (CPWS23) (Mandatory!)**

The [Community Pharmacy Workforce Survey 2023](#) launched on the 23rd of October 2023 and will close on Sunday the 17th of December.

This annual survey is part of the community pharmacy regulations since 2022 and provides consistent, accurate data to support effective workforce planning. The survey is being conducted by North of England Commissioning Support Unit (NECS)

on behalf of NHS England. Completion of the survey **is a mandatory requirement for all pharmacy owners.**

Click here to access the survey [Community Pharmacy Workforce Survey 2023 \(onlinesurveys.ac.uk\)](https://onlinesurveys.ac.uk).

For any questions about CPWS23, please contact [england.pharmacyteam@nhs.net](mailto:england.pharmacyteam@nhs.net).  
For any questions relating to the online survey, please contact: [necsu.reteam@nhs.net](mailto:necsu.reteam@nhs.net)

**The LPC will send a reminder email to all contractors that have yet to complete the survey.**



**Kent LPC Pharmacy contractor and PCN leads webinar.**

It was great to see the majority of you at the PCN leads and contractor webinar on Wednesday the 15<sup>th</sup> of November. The recording for the webinar can be found [here](#).

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### **Oral contraception and hypertension case finding service.**

NHS England has published the updated service specification and PGDs for the Pharmacy Contraception Service and the updated the specification for the Hypertension Case-Finding Service.

The expanded service will enable pharmacists to initiate oral contraception, as well as continuing to provide ongoing management of oral contraception that was initiated in general practice or a sexual health clinic.

[Pharmacy Contraception Service: Updated service spec and PGDs](#)

[Hypertension Case-Finding Service: Updated service spec](#)

The changes to the services come into force on the 1st of December 2023.

**We are currently working on a google map that will show all pharmacies providing oral contraception service.**

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### **Clinical IT system update: New Medicine Service (NMS), Smoking Cessation Service (SCS) and Discharge Medicine Service (DMS)**

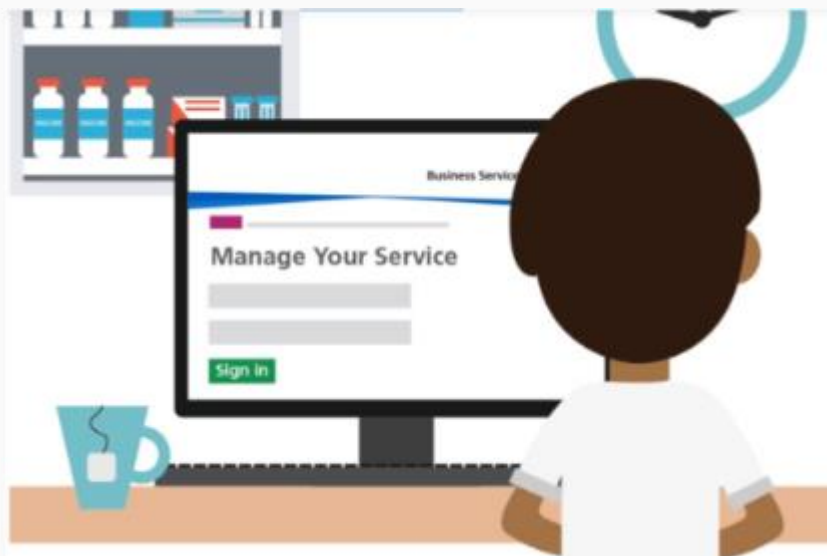
NHS England has issued an email update to pharmacy owners on progress with the development of APIs for the current clinical services which do not yet have one in place. Click [here](#) for NHSE API update.

Further information can be found on the CPE website using the links below...

[Developments in NMS IT support planned for December.](#)

[Development of APIs: SCS and DMS.](#)

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## **Community Pharmacy Assurance Framework (CPAF) – full survey deadline extended**

NHS England has extended the final completion deadline for the full CPAF survey.

The survey will now close at midnight on the 17th of December.

Contractors required to complete the full CPAF survey will be contacted directly by the NHS Business Services Authority if their pharmacy has been selected and users of the NHSBSA's [Manage Your Service \(MYS\) portal](#) will be able to complete the survey via their MYS login until the closing date.

## **CPAF Questionnaire**

The full CPAF questionnaire is only for those pharmacy owners who have been selected by the NHSBSA to complete. It is available until midnight on the 3rd of December 2023 via the [Manage Your Service \(MYS\) website](#).

If you have a query about accessing or using this questionnaire, please email [pharmacysupport@nhsbsa.nhs.uk](mailto:pharmacysupport@nhsbsa.nhs.uk), including your pharmacy ODS/F code and pharmacy contact details.

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## **LFD advanced service (Reminder!)**

Free lateral flow device tests available from community pharmacy to [eligible patients](#).

Pharmacy owners must have signed up to the service via NHSBSA's [MYS portal](#). Participating pharmacies are encouraged to ensure their [NHS Profile Manager](#) profile is up to date, so patients and other health care professionals can check NHS.uk to access the service. Click [here](#) for more information.

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## CENTRE FOR PHARMACY POSTGRADUATE EDUCATION

### Centre for Pharmacy Postgraduate Education CPPE

Please click [here](#) for various useful latest learning resources from CPPE.



### CPCS Frequently Asked Questions

To make sure urgent medicines supplies for Controlled Drugs are provided appropriately, please remember that:

- Emergency supplies of Schedule 2 and Schedule 3 Controlled Drugs are **not permitted** by the HMR, with the exception of **phenobarbitone** or **phenobarbital sodium** for the treatment of epilepsy;
- **Temazepam, gabapentin, pregabalin and tramadol** are all Schedule 3 Controlled Drugs. **Emergency supplies of these medicines are not allowed and so they cannot be supplied via the CPCS;**
- Medicines such as **benzodiazepines** (apart from temazepam, which is Schedule 3), **zopiclone**, and **zolpidem** are Schedule 4 Controlled Drugs. **Up to five days' treatment may be supplied**, if it is clinically appropriate and



after an assessment has been made of the risk that the patient is using the CPCS to inappropriately gain additional supplies;

- Medicines such as **dihydrocodeine** and **codeine** containing products (including **co-codamol 30mg/500mg**) are Schedule 5 Controlled Drugs. **Up to five days' treatment may be supplied** if it is clinically appropriate and after an assessment has been made of the risk that the patient is using the CPCS to inappropriately gain additional supplies.
- Where the legislation does permit an emergency supply, it limits the supply to a **maximum of 5 days for Controlled Drugs**;
- Some CCGs have issued guidelines to local GP OOH services on the supply of medicines liable to misuse. Whilst it is for the pharmacist to determine whether a supply is appropriate, they should check if any such local guidelines are in place. The pharmacist needs to balance the potential for misuse versus the need and the impact on the patient of not supplying a medicine. A limited supply of up to 5 days treatment, until the GP practice reopens, may be appropriate. It is particularly important to check the patient's NHS Summary Care Record for such requests, as part of the assurance that the patient has been prescribed it before and that there has not been a recent supply made;
- A GP OOH service will only prescribe medicines liable to misuse in limited circumstances and will not usually prescribe medicines such as methadone or buprenorphine. If the pharmacist decides not to make a supply for a medicine liable to misuse, they should consider advising the patient to wait until they can collect their usual prescription from their GP practice or usual pharmacy, rather than referring them to the GP OOH service.

For more information click [here](#).

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[Medicines Optimisation Newsletter - Issue 52](#)

[KM Melatonin Guidelines](#)

[Emollient Prescribing Guidance](#)

[Safe Prescribing of Injectable Medicines in Primary Care](#)

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**Community Pharmacy Kent**

Address: 2017 6-8 Revenge Road, Lordswood, Chatham, Kent, ME5 8UD

Tel: 01634 649101 | Email: [Admin@kentlpc.org.uk](mailto:Admin@kentlpc.org.uk)

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