

The Community Pharmacy Hypertension Case-Finding Advanced Service

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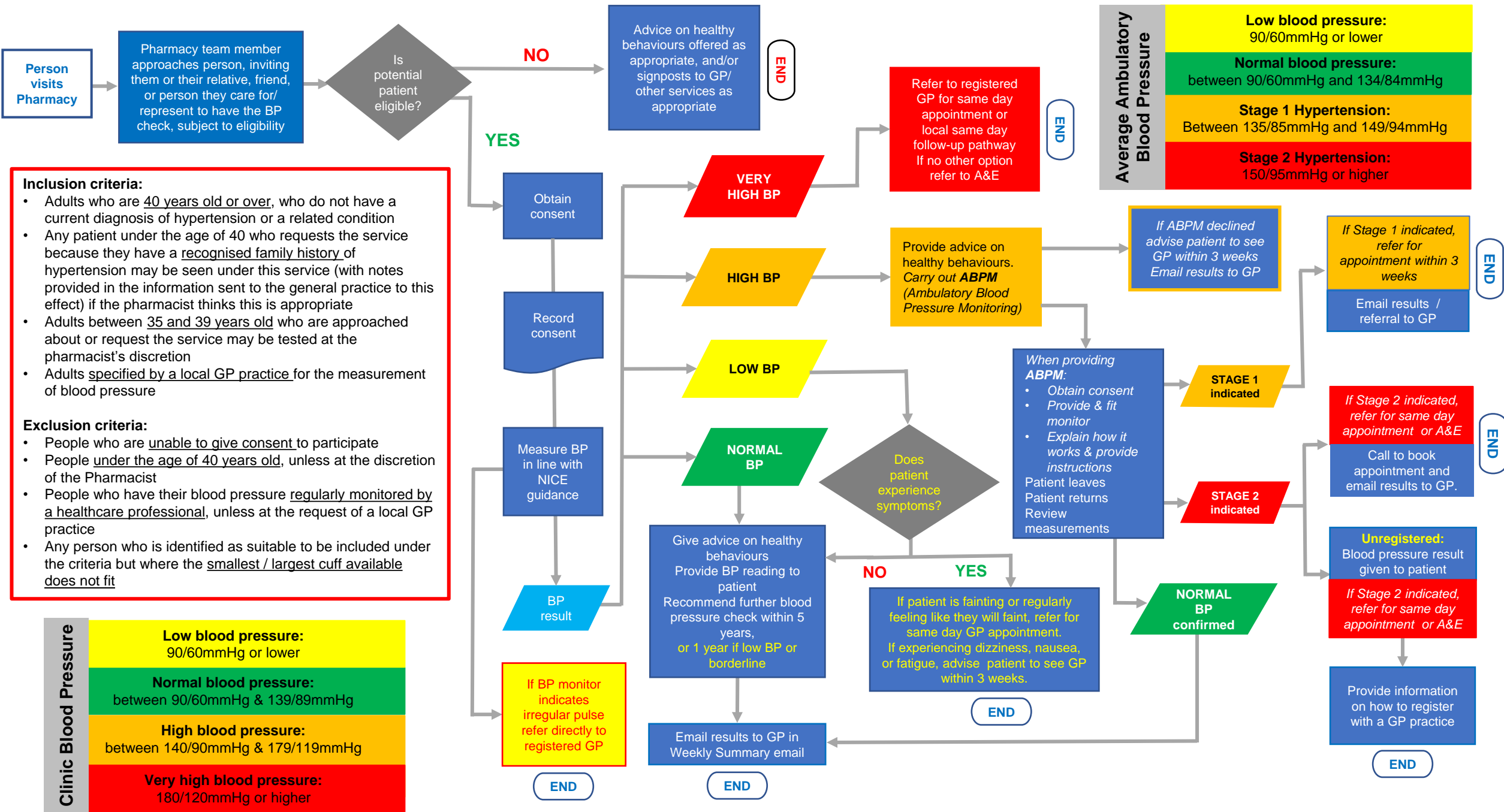


Event Agenda 19:30- 21:00

- Welcome & Introduction
- Word from Sponsor on Atrial Fibrillation.
- Maximising Opportunities with the Hypertension Case Finding Service in Community Pharmacy
- Delivering the Service.
- Questions & Answers
- Meeting Summary

Service Description

- The service is an Advanced service, which commenced on 1 October 2021
- There are Two aspects of the service, case finding and referral from a GP.
- There are Two stages under case finding:
 - **Stage 1** - identify people at risk of hypertension – ‘Clinic check’
 - **Stage 2** - 24-hour ambulatory blood pressure monitoring (ABPM)
- Contractors must be able to provide both stages.
- Under the second aspect a GP can refer an Adult for a BP check or just an ABPM check.
- Currently **only** provided by pharmacists- Pharmacist Led.



- Inclusion criteria:**
- Adults who are 40 years old or over, who do not have a current diagnosis of hypertension or a related condition
 - Any patient under the age of 40 who requests the service because they have a recognised family history of hypertension may be seen under this service (with notes provided in the information sent to the general practice to this effect) if the pharmacist thinks this is appropriate
 - Adults between 35 and 39 years old who are approached about or request the service may be tested at the pharmacist's discretion
 - Adults specified by a local GP practice for the measurement of blood pressure
- Exclusion criteria:**
- People who are unable to give consent to participate
 - People under the age of 40 years old, unless at the discretion of the Pharmacist
 - People who have their blood pressure regularly monitored by a healthcare professional, unless at the request of a local GP practice
 - Any person who is identified as suitable to be included under the criteria but where the smallest / largest cuff available does not fit

Clinic Blood Pressure	Low blood pressure: 90/60mmHg or lower
	Normal blood pressure: between 90/60mmHg & 139/89mmHg
	High blood pressure: between 140/90mmHg & 179/119mmHg
	Very high blood pressure: 180/120mmHg or higher

Average Ambulatory Blood Pressure	Low blood pressure: 90/60mmHg or lower
	Normal blood pressure: between 90/60mmHg and 134/84mmHg
	Stage 1 Hypertension: Between 135/85mmHg and 149/94mmHg
	Stage 2 Hypertension: 150/95mmHg or higher

Funding and claiming payment

- Set-up fee of £440
- Fee for each BP clinic check of £15
- Fee for each ambulatory monitoring of £45
- Claim payment via the NHSBSA Manage Your Service (MYS) application on a monthly basis.
- Incentive fees for Years 4 and 5 of the CPCF 5-year for achieving ABPM targets:
 - £400 for 15 ABPM interventions in 2022/23 and
 - £400 for 20 ABPM interventions in 2023/24.



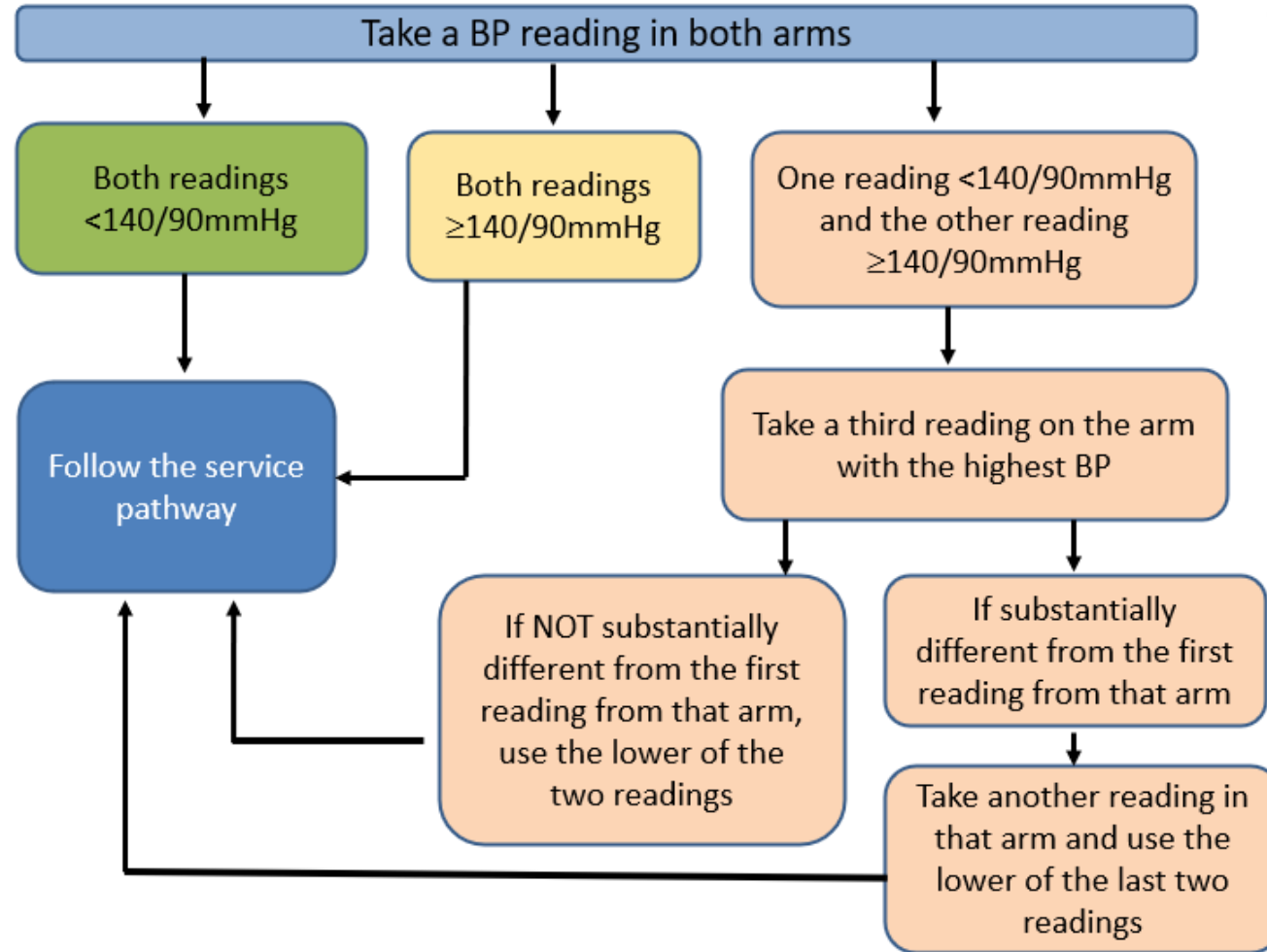
Training requirements

To provide the service, pharmacists must:

- Be familiar with the [NICE guideline Hypertension in adults: diagnosis and management \[NG136\]](#);
- Have read and understood the operational processes to provide the service as described in the [service specification](#); and
- Purchase or rent equipment for each of the two stages of the service – Clinic blood pressure check and 24-hour ABPM using [Validated BP Monitors for Specialist Use](#). Microlife, Schiller, Hingmed are some of the accredited manufacturers for ABPM monitors.
- Complete the recommended training on how to use the blood pressure monitoring equipment which should be provided by the equipment manufacturer/supplier.
- Complete PSNC's implementation [checklist](#) to guide through the steps needed to provide the service.

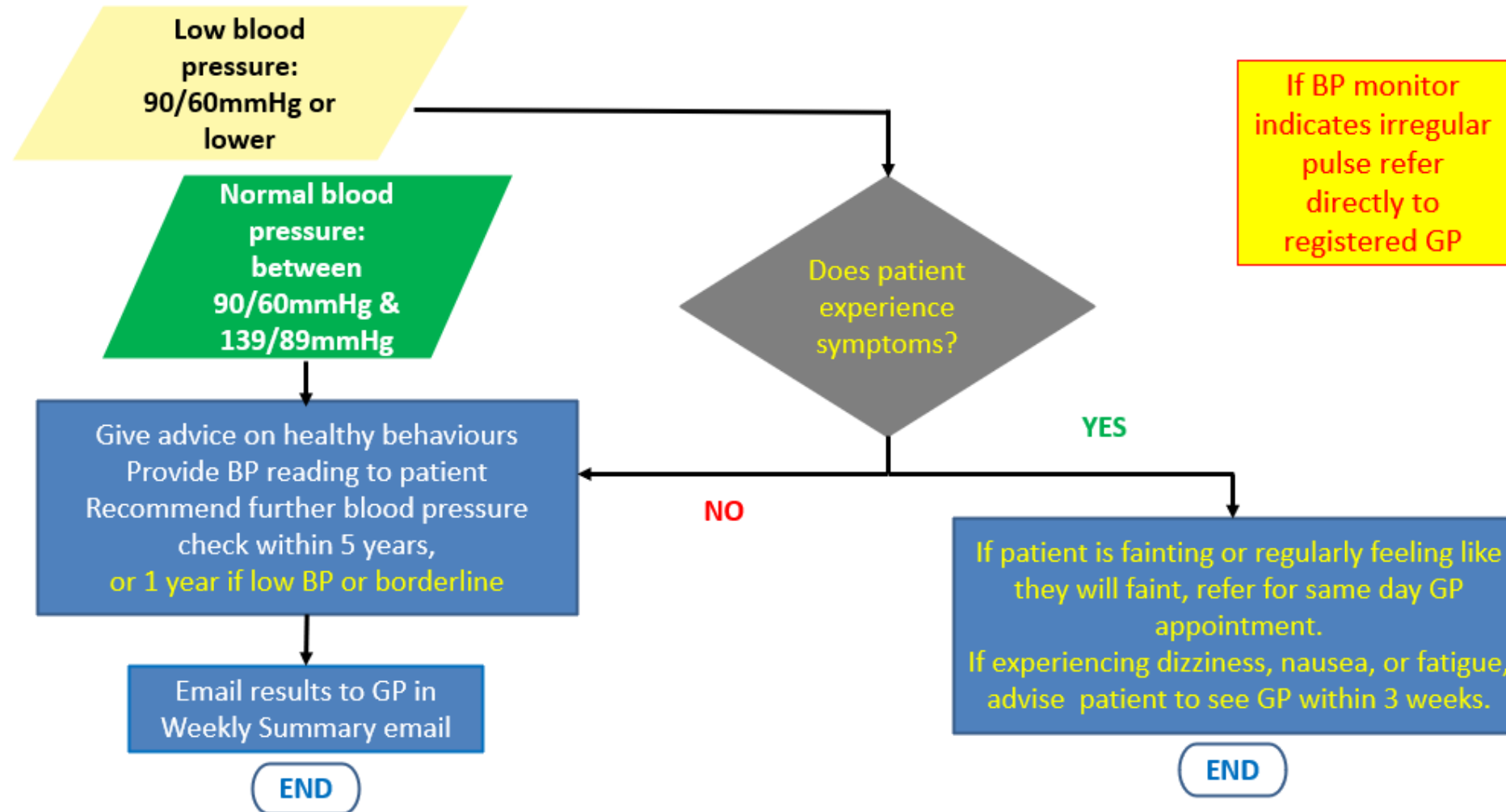
Providing the service – Clinic check

Measure BP
in line with
NICE
guidance



Clinic Blood Pressure	Category
Low blood pressure:	90/60mmHg or lower
Normal blood pressure:	between 90/60mmHg & 139/89mmHg
High blood pressure:	between 140/90mmHg & 179/119mmHg
Very high blood pressure:	180/120mmHg or higher

Providing the service – Clinic check



Providing the service – Clinic check

- Pharmacists can provide the service outside the premises of the pharmacy (with agreement from the regional NHS&I team)
- GPs can refer (informal process) patients to a pharmacy for a BP measurement (clinic or ABPM)
- All BP measurements **must** be sent to GP practices using Pharmoutcomes or NHS mail. All pharmacies that have registered for the service should have access to Pharmoutcomes template for submission of results.
- If the only action required is to update patient records then send in a weekly summary if you do not have access to Pharmoutcomes template.
- If action is needed then send immediately (and for the small number for same day follow up, please call too)

Providing the service - ABPM

Provision

- Loan arrangements - template loan agreement (Available on Pharmoutcomes when using the Template.)
- Reset the ABPM
- Fit the ABPM to the patient
- Explain the functioning & Confirm understanding
- Explain not to get the ABPM wet
- Arrange a follow up appointment

Failure to attend

- Two attempts to contact (on separate occasions)
- Notify GP practice and provide clinic BP reading

Providing the service - ABPM

Return and follow up

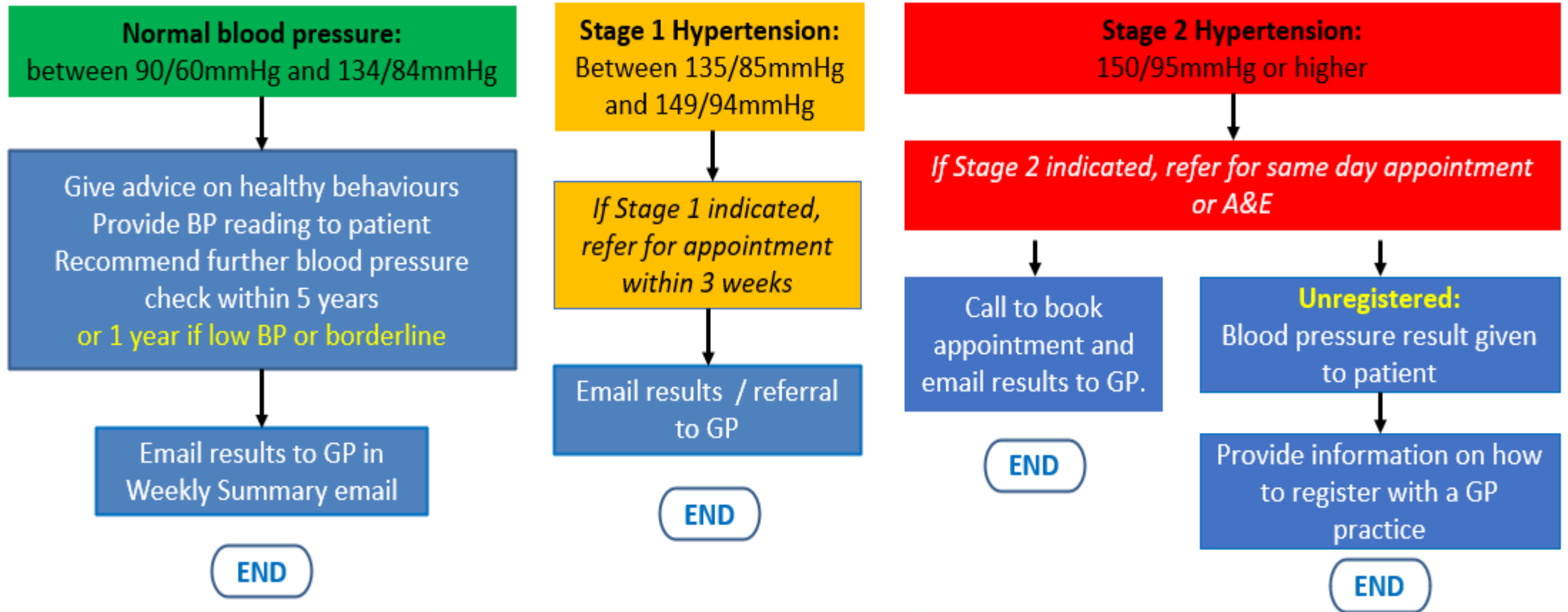
- Retrieve consultation data
- Record the average daytime, night-time and 24-hour blood pressure readings
- Based on the average 24-hour reading, follow service pathway
- GP practice notification to include all six readings (systolic and diastolic for day, night and 24-hour average) and the full ABPM report

Failure to attend

- Make attempts to contact
- If no contact or return after 5 days:
 - Notify GP practice and provide clinic BP reading
 - Suspend service until the ABPM meter is retrieved or replaced

Providing the service - ABPM

- Outcomes



Referrals from GP Practice

At the request of a General Practice, Community Pharmacists can undertake ad hoc clinic and ambulatory blood pressure measurements as part of the hypertension service;

GP Practice

- Can refer patients for both normal BP checks and ABPM.
- No specific requirements for the process, but important to have a record if GP referral.
- ABPM referrals best done electronically
- Template referral form available for GP's to use, where digital platform not available.

Engage with local GP Practice / PCN

- Engage with your local General practices and/or PCN colleagues to make them aware the pharmacy is participating and providing the service.
- [Briefing for General practice teams](#) available on PSNC website.
- Explain that you will be sending all results to them.
- Ask if they would like you to complete any BP measurements for them and agree how they will let you know which patients. **Eg** Patients on the Hypertension Register where the practice have not got an up-to-date BP reading.

Primary Care Networks

- New PCN Directed Enhanced Service requirements commenced on 1st October 2021
- Service supports CVD prevention and management work in GP practices & PCN, PCNs are seeking to improve diagnosis of hypertension.
- PCN are keen to refer patients to Community pharmacy for BP checks and have a cohort of patients that they can refer to CP
- PCN's prefer that all Community Pharmacies provide the service to ensure access for patients at their local pharmacy and avoid any issues and complaints.
- This will support the GP Practices achieve their QOF Points as well.

What can CPH do to support.

- CPH have been approached by PCN's and are trialling with a couple of PCN's in Hertfordshire to refer patients to Community Pharmacy.
- These are patients with a last recorded high BP and require follow up to ensure appropriate diagnosis or have not got an upto date BP reading.
- The referral process for both GP practices and community pharmacies has been looked into. PCN has funded initial integrated PharmOutcomes for the pilot linked to GP system and community pharmacy picks up the referral from PharmOutcomes like other services. Or can refer through AccuRx text referrals to patients.
- CPH are actively engaging at ICS level and also invited on a working group for hypertension and are working to achieve IT Platform for all CP's in Hertfordshire.
- Let CPH know if you receive calls or engagement from the PCN practices.

Implementation of service from a local pharmacy in Hertfordshire.

Experience shared by Bhavisha from Hoddesdon pharmacy.

Any other contractors willing to share their experience and what works well for them.



Current Pharmacy performance in Hertfordshire

- **176 Community Pharmacies in Hertfordshire have registered** to provide the service (up to 16 September 2022).
- Based on MYS submissions of May 2022:
- 36 contractors out of 142 registered (upto May) in Hertfordshire delivered and claimed for the service.
- 846 clinic test were completed by 36 contractors in Hertfordshire.
- 31 ABPM were completed by 9 contractors out of the 36 that completed Clinic tests.
- Contractors completing high numbers of Clinic tests with no ABPM.

What are the Barriers? - Discussion

- What will help you engage and deliver this service.
- How can we support you to deliver ABPM along with the BP clinic check.
- Is there any thing we can do to support you in delivering the service.

Key Reminders

- Ensure Pharmacy Team aware and engaged with the service. Remember the test should be undertaken by the Pharmacist.
- Read and understand the Service Specification and the Nice guideline for Hypertension in adults. Ensure you have an SOP for the service.
- Ensure you have your blood pressure monitoring equipment including the ABPM and complete the recommended training.
- GP Practices can refer patients for both Clinic check and Ambulatory check. Please keep evidence of referral or annotate if GP practice referral.
- Important to send the test results for all tests undertaken to the GP, by recording on Pharmoutcomes or by NHS mail if not available on PO.

Hints & Tips

- Have a copy (laminated) of the pathway so you can refer to it easily.
- When patients need ABPM consider the best time to fit it. Some pharmacies have found asking the patient to come for fitting one day at 9:00 and then return the next day at 9:00 for removal and for them to interpret the results works for them
- Try the ambulatory equipment on yourself or a staff member so you understand what patients experience which will support explaining to the patient.
- Regularly check in with your local practices and keep them updated informing them that you are delivering the service and keep the door open if they want to make future referrals.

Key Next steps

- **Not registered for the service:-** If willing to provide the service than register for the service after completing the prerequisite training and requirements.
- **Registered for the service:-** Are you currently delivering the service and have an ABPM.
- If required complete or update any outstanding training.
- **If a pharmacy completed 10 BP checks and 1 ABPM a week that would equate to £780 of income per month.**

Resources and further information

- Visit: psnc.org.uk/hypertension
- For further information [Access the on-demand webinar](#)

The screenshot shows the PSNC (Pharmaceutical Services Negotiating Committee) website. The header includes the PSNC logo, the text 'Pharmaceutical Services Negotiating Committee', and the 'PHARMACY the Heart of our Community' logo. A navigation bar contains links for 'PSNC's Work', 'Funding and Statistics', 'Contract and IT', 'Dispensing and Supply', 'Services and Commissioning', 'The Healthcare Landscape', and 'LPCs'. The main content area is titled 'Hypertension case-finding service' and includes a breadcrumb trail: 'Home > Services and Commissioning > Hypertension case-finding service'. The page contains an introduction, a table of contents with expandable sections (Introduction, The policy background, Working with Primary Care Networks, Service description, BP meters to be used in the service, What do contractors need to do to provide the service?, Patient eligibility to receive the service, Providing the service, Funding and claiming payment), and a sidebar with a list of services including 'Hypertension case-finding service'.



- Good luck with the service!



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