

# Medway Health and Well-being Board Delegated Pharmacy and Dental Services

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# Primary Care Strategy 2024 Sustainable Local Care Five Year Plan



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## The Four Pillars of Primary Care

Primary care acts as a first point of contact for most people accessing the NHS and provides an ongoing relationship for those who need it, which is what makes primary care so valued by the communities it serves.

Every day, people benefit from the advice and support of primary care professionals. There are a multitude of dedicated staff working in primary care services delivering care around the clock in every neighbourhood in the county.

### *The Four Pillars of Primary Care*

#### General Practice

GP surgeries are usually the first contact if you have a health problem. They can treat many conditions and give health advice

#### Community Pharmacy

Delivering clinical services, pharmaceutical services, dispensing drugs and appliances.

#### Optometry

Examining eyes, delivering sight tests and prescribing spectacles or contact lenses for those who need them

#### Dentistry

Providing prevention and treatment to keep mouths, teeth and gums healthy and free of pain.

ICBs are responsible to provide leadership, transformation, commissioning and contracting for primary care services as delegated functions on behalf of NHS England.

## Primary care – Areas of greatest need

The first areas of focus in putting in place proactive plans through our strategy are highlighted on this map. There will be a clear focus on sustainability of providers in these areas, to tackle health inequalities, factoring in population growth.

- A. Ebbsfleet
- B. Medway
- C. Swale
- D. Maidstone
- E. Ashford
- F. Thanet



**Areas of greatest need based on a combination of population growth arising from housing developments, deprivation, workforce and patient access challenges**

*Housing data obtained from SHAPE (Strategic Health Asset Planning and Evaluation) Atlas – 5-year growth*

NHS Kent & Medway recognises the unique role that community pharmacy continues to play in communities and the value that harnessing this adds to the local health system and for patients. Our strategy will be to fully maximise the potential of community pharmacy and the healthcare professionals working in that sector, which is one of the four pillars of primary care and key to the delivery of the neighbourhood team.

Every day in Kent & Medway, thousands of patients visit their community pharmacy for a range of services, including flu and COVID-19 vaccines, advice and treatment for minor ailments, blood pressure monitoring and support with medicines after a hospital discharge. Community pharmacy are well positioned and accessible within local communities.

Community pharmacy has an important role to play in medicines optimisation, reducing health inequalities and increasing access to healthcare in communities. We will continue to work closely with the Local Pharmaceutical Council (LPC) as the community pharmacy role continues to expand, with a focus on broadening the range of clinical services available in addition to continuing the core function of dispensing medicines.

## Our priorities are to:

- Ensure maximum uptake and roll-out of nationally commissioned services
- Facilitate development of a comprehensive set of locally commissioned services to meet population health needs and reduce health inequalities
- Ensure services provided are high-quality and consistent, reducing unwarranted variation
- Collaborate with the wider healthcare system to embed referral routes and signposting
- Empower patients to understand the community pharmacy offer and understand how they can access services in their local area
- Support local innovation and creativity
- Maximise local opportunities for digital integration and referral routes
- Look to expand the training and education offer into community pharmacy



## Case Study

The collaboration between Maritime Health partnership and Palmers Pharmacy has been outstanding, with Maritime creating almost 5,000 referrals into the service, encouraging patients to utilise the skills of their local community pharmacies.

Palmers pharmacy have completed 529 referrals, which has saved more than 88 hours' worth of GP appointments.

This service has been integral across the PCN to help build great clinical relationships between healthcare providers, as well as increasing accessibility to clinicians for our patients.

## Community Pharmacy

**Engagement with community pharmacy and about community pharmacy services are key.**

### What will change?

- A wide range of clinical services will be available at community pharmacies across Kent & Medway (national and local)
- These services will be provided in a consistent, high-quality way which reduces unwarranted variation and health inequalities, supporting population health
- Pharmacies will be increasingly integrated into the wider NHS as important components of integrated neighbourhood teams
- The wider system will be aware of the expanding role of community pharmacies and how they can support patient access to relevant services
- It will be easy for patients to understand what they can access at a community pharmacy (and how)
- Local innovation and creativity will be encouraged and showcased
- Opportunities for digital integration and referral routes will be maximised
- We will actively engage and work collaboratively with the Local Pharmaceutical Committee (LPC) and contractors



## Pharmacy First

The Delivery plan for recovering access to primary care has a key focus on the role that community pharmacy clinical services can play in supporting patients and reducing pressure on the healthcare system.

Three key nationally commissioned services included in this plan:

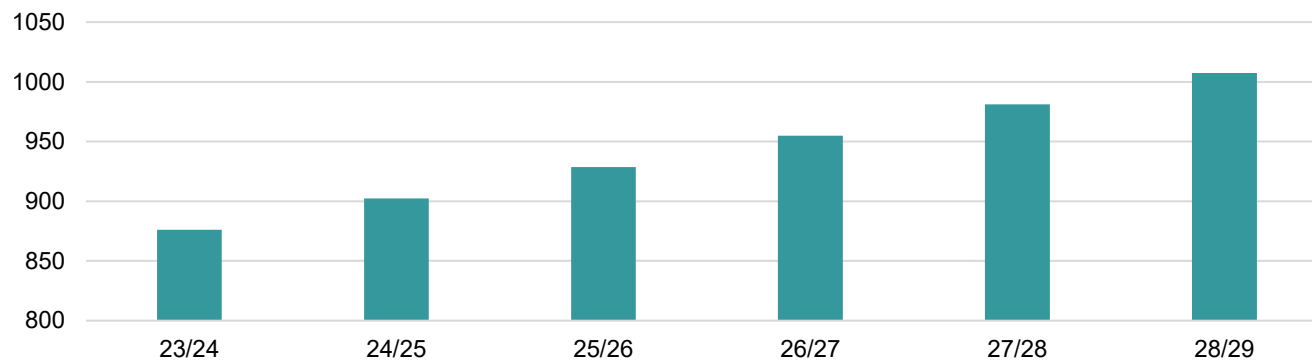
- Pharmacy contraception service
- Hypertension case finding service
- Pharmacy First service
  1. Minor illness consultations with a pharmacist
  2. Supply of urgent medicines (and appliances)
  3. Clinical pathway consultations

Dental workforce recruitment and retention is the number one issue reported by dental providers wishing to terminate their contracts or reduce their contracted activity. The latest annual NHS dental statistics report estimates that **there are 876 dentists working in NHS dentistry in Kent and Medway.**

In 2022-23, 71 dentists left NHS dentistry (a ten year high), whilst 82 dentists joined NHS dentistry (a nine year high). There are an average of **47 dentists per 100,000 population undertaking NHS dentistry** across Kent and Medway. This is marginally less than the SE position (49 per 100,000 population) but higher than the national position (43 per 100,000 population). It is estimated that a full-time dentist can deliver approximately 7,000 units of dentistry activity (UDAs) per annum.

As an ICB we plan to increase the number of dentists working in NHS dentistry by 15% over the next 5 years. This would be targeted at areas of inequality of access. The link between inequality and poor oral health has long been recognised and the approach to the commissioning of dental UDAs has always been to categorise local authority areas by their level of deprivation and **commission more UDAs in the higher deprived areas** which would in turn increase the number of NHS dentists in those areas.

### Dentist Workforce Trajectory



Local Authority RAG rating according to IMD ranking	Number of local authorities	Target Commissioned UDAs per Head of Population
Local Authority with Red IMD	4	1.50
Local Authority with Amber IMD	6	1.20
Local Authority with Green IMD	3	1
ICB Total/average	13	1.23

Local Authority Area	UDAs Commissioned 31/03/24	UDAs Commissioned per Head of Population	Additional UDAs required to reach UDAs per HOP
Ashford	184,513	1.42	18451
Canterbury	188,409	1.14	37682
Dartford	130,920	1.16	29291
Dover	121,425	1.03	36428
Folkestone and Hythe	171,403	1.52	24276
Gravesham	156,468	1.46	0
Maidstone	207,381	1.21	30262
Medway	393,944	1.41	118183
Sevenoaks	118,028	0.98	21748
Swale	202,368	1.35	60710
Thanet	220,056	1.55	44001
Tonbridge and Malling	112,871	0.85	45148
Tunbridge Wells	130,201	1.10	0
Kent and Medway	2,337,987	1.26	466,183



# Community Pharmacy Services



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# Community Pharmacy Services

Name of service	Launch date	% signed up	Number of Medway pharmacies signed up	No. of consultations	Costs associated *excludes any incentives	Links
<b>Community Pharmacist Consultation Service (CPCS)</b>	Expired 31 <sup>st</sup> January 2024	100%	51	<b>2023/24</b>  17133 consultations	A consultation fee of £14 will be paid for each completed referral (both urgent medicines supply and low acuity/minor illness).  Scheme superseded by Pharmacy First 31 <sup>st</sup> Jan 2024.	<a href="#">NHS England » Community pharmacy advanced service specification: NHS Community Pharmacist Consultation Service</a>
<b>Pharmacy First Advanced Service</b>	31 January 2024	96%	49	<b>February and March 2024</b>  6904 consultations	15 per consultation*  <a href="https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-first-service/">https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-first-</a>	<a href="https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-first-service/">https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-first-service/</a>
<b>Discharge Medicines Service (essential service)</b>	15th February 2021.	100%	51	<b>2023/24</b>  1024 consultations	Stage 1, 2 and 3 payable separately at £11 or £12 Full service: £45	<a href="#">Discharge Medicines Service - Community Pharmacy England (cpe.org.uk)</a>
<b>Pharmacy Contraception Advanced Service</b>	1 December 2023	66%	34	<b>February and March 2024</b>  124 consultations	After 10 consultations*completed - £18 per consultation	<a href="https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-contraception-service/">https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-contraception-service/</a>
<b>Hypertension Advanced Service</b>	November 2021	86%	44	<b>2023/24</b>  4809 consultations	Clinic check fee of £15  Ambulatory monitoring fee of £45.	<a href="https://cpe.org.uk/national-pharmacy-services/advanced-services/hypertension-case-finding-service/">https://cpe.org.uk/national-pharmacy-services/advanced-services/hypertension-case-finding-service/</a>

# Challenges

Service Area	Challenge	Opportunities
Pharmacy Closures	To better understand the impact of closures as they arise	Collaboration and engagement on the Pharmacy Needs Assessment
Pharmacy First – public awareness	To support messaging around pharmacy first to patients and increase awareness of the service and how to access it, to support us in reaching as many members of the population as possible.	Could public health incorporate messaging about this service (the ICB can provide resources posters etc which have been published nationally) into other pieces they are already doing for patients in relation to other things, for example: posters at services commissioned by public health, or existing comms routes?
Hypertension Case Finding – public awareness	To support messaging around hypertension case finding of patients and increase awareness of the service and how to access it, to support us in reaching as many members of the population as possible.	Could public health incorporate messaging about this service (we can provide resources posters etc which have been published nationally) into other pieces they are already doing for patients in relation to other things, for example: posters at services commissioned by public health, or existing comms routes?

# Challenges

Service Area	Challenge	Opportunities
<p>Oral Contraception Service – take up of services by pharmacies</p>	<p>To maximise the impact of the contraception service locally which enables participating pharmacies to initiate and continue oral contraception using Patient Group Directive (PGD) supply.</p>	<p>Could existing public health networks and resources be utilised to support the contraception service roll-out?</p> <p>Could public health commissioned sexual health provider provide any resources or guidance that they use with patients around contraception and recommendations of choice that the ICB can either use or adapt to help build pharmacist confidence. Provide us with links or information that is often provided to patients on contraception that could be used alongside the Contraception Service.</p> <p>Could public health commissioned sexual health provider support community pharmacy with further training and information sessions around contraception, to build on the mandatory training they already receive. This would increase confidence and willingness of community pharmacies to participate, increasing the availability of the service locally and therefore impact and reduction of pressure on other services. Perhaps 2 half days training?</p>
<p>Oral Contraception Service – public awareness</p>	<p>To support messaging around the oral contraception service to patients and increase awareness of the service and how to access it, to support us in reaching as many members of the population as possible.</p>	<p>Could public health provide the ICB with pointers around areas of focus for greatest need of contraception support, for example: geographical areas, certain population groups that we can then focus our efforts on increasing pharmacies participating to support that. Is there a way for ongoing efforts to engage patients to include this service too?</p> <p>Could public health support us with their existing comms routes and reach into communities around this service- such as universities, patients already visiting sexual health clinics, and general community awareness? We have a suite of poster resources etc which are available nationally.</p>

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# Primary Care Dentistry Services



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# National Dental Recovery Plan

## National Minimum £28 UDA

- Uplift to £23 UDA rate introduced Oct 2023
- Effective from 1 April 2024
- 31 Dental Practices have had their UDA rate uplifted
- Cost £365K per annum to ICB

## New Patient Premium

- Claimable for patients who have not accessed NHS dentistry treatment in last 2 years
- From 1 March 2023 until 31 March 2024
- £199K additional funding to support roll out
- £15 for a band 1 dental treatment, and £50 for band 2 and 3 treatments, paid as a UDA credit
- Providers may deliver their contracted activity earlier
- Providers may push existing patient recall intervals which could generate patient queries and complaints (NICE recommended recall intervals up to 24 months for adults and up to 12 months for children)

## Mobile Dental Vans

- For most isolated under-served rural and coastal communities with no dental practices
- No areas identified in Kent and Medway or across the Southeast

## Contract Rebasing

- Amendments to GDS Contract regulations contractually take effect from **1 April 2025**.
- Allows activity from underperforming contractors to be invested in improving access to NHS dentistry
- Rebasing notice must be served on contractor with 28 days' notice relating
- Cover the three consecutive financial years, and must immediately precede the financial year in which the rebasing notice is served on the contractor
- Years of focus
  - 1 April 2020 – 31 March 2021, 1 April 2022 – 31 March 2023 and 1 April 2023 – 31 March 2024 - **excludes 31 March 2021 – 31 March 2022, due to Covid.**

## Workforce Reforms

- Reaffirmation of workforce plan commitments
  - By 2031/32 Increase dental undergraduate training by 40%
  - By 2031/32 increase dental therapists and dental hygienist training by 38%
  - Consultation on 'tie-in' for dental graduates
  - Make overseas recruitment easier
- Promote dental therapist led models of care
- Unclear how workforce initiatives for dental will be funded

## Golden Hello for Dentists

- Targeted funding to attract dentists to hard to recruit areas – Medway, Thanet, Swale, Dover and CDS providers
- £20K support package - year 1 = £10K, year 2 = £5K and year 3 = £5K
- Funding approved for 10 support packages across Kent and Medway over 3 years
- Links with Primary Care Training Hub to benefit shared learning from similar GP initiative

## Contract Reform

- Consultation with profession on reforming the contract with changes phased from 2025

## Public Health led Initiatives

- Promotion of prevention initiatives to improve the oral health of pregnant mums, and guidance for parents about how to protect baby gums and milk teeth from decay.
- Promotion of Smile for Life good oral hygiene into the daily routines of infants and toddlers so that, by the time they reach primary school, every child sees daily toothbrushing as a part of their normal routine.
- deploy mobile dental teams into schools in under-served areas to provide advice and deliver preventative fluoride varnish treatments to children, strengthening their teeth and preventing tooth decay.
- consultation on expanding water fluoridation aimed at reducing the number of tooth extraction due to decay in most deprived areas

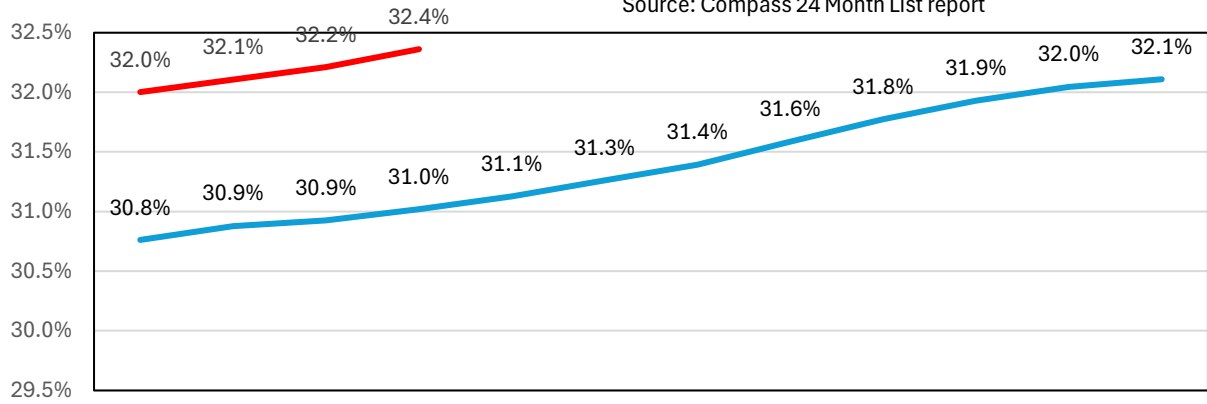
# % of resident population seen by an NHS dentist



Kent and Medway

Numbers of Unique Adult Patients Seen by an NHS Dentist

Source: Compass 24 Month List report



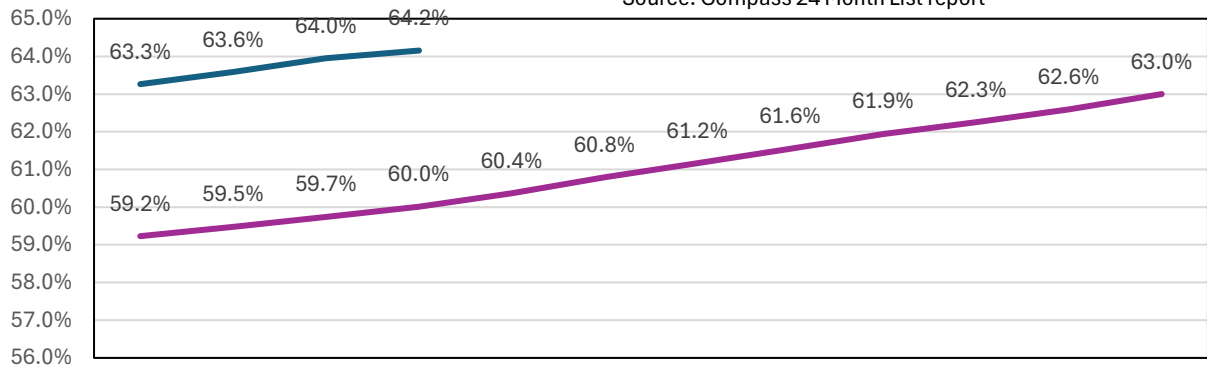
- New patients seen by an NHS Dental – adult seen are defined as number of adult patients who have not received NHS dental care in the previous 24 months

- Adult target for Q1 2024-25 = 32.5%
  - April performance = 32.0%
  - May performance = 32.1%
  - June performance = 32.2%

- Adult target for Q2 2024-25 = 32.5%
  - July performance = 32.4%

Numbers of Unique Child Patients Seen by an NHS Dentist

Source: Compass 24 Month List report



- Child target for Q1 2024-25 = 54%
  - April performance = 63.3%
  - May performance = 63.6%
  - June performance = 64.0%

- Child target for Q2 2024-25 = 57%
  - July performance = 64.2%

- Performance from April to July 2024 has exceeded the performance for these months in 2023-24

# Challenges

Service Area	Challenge	Opportunities
Dental Closures	The NHS dental contract is not considered fit for purpose and little incentive for dental providers to offer NHS dental services	Greater engagement with the profession and explore opportunities to highlight issues nationally
Understanding Dental Demand	To build a more comprehensive picture of dental demand and find ways of converting oral health survey findings into practical commissioning intentions	<p>Collaboration on Joint Strategic Needs Assessments, Oral health Surveys and to better understand dental patient demand</p> <p>Work with public health to provide the ICB with pointers around areas of focus for greatest need of dental capacity, for example: geographical areas, certain population groups that we can then focus our efforts on increasing pharmacies participating to support that. Is there a way for ongoing efforts to engage patients to include this service too?</p>
Patient Engagement	To improve access whilst managing patient expectation	Collaboration to help patients better understand dental offer, improving awareness and access that dental and GP services are not a like for like offer
Workforce	To attract and retain dentists working on NHS dental contracts	Golden hello – 3-year support packages offered in targeted locations including Medway

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