

# **Greater Manchester LPC**

## **NMS Toolkit for Contractors**





#### Background

The New Medicines Service was introduced in October 2011 and provides support for people with long-term conditions who have been prescribed medication for specific conditions.

Around 15 million people in England have a long-term condition (LTC) and optimal use of appropriately prescribed medicines is vital to managing LTCs. However, reviews have shown that between 30 and 50% of newly prescribed medicines are not taken correctly. This can lead to inadequate management of the LTC and a cost to the patient and the NHS.

People make decisions about the medicines they have been prescribed, and whether they are going to take them, very soon after being prescribed the new medicine. The aim of the NMS is help improve medicine adherence by intervening soon after the medication is prescribed with a repeated short-term follow up.

### Funding

NMS forms part of the gateway criteria for the Pharmacy Quality Scheme (PQS). For year 4 contractors must deliver 20 completed NMS to achieve this criterium. This changes in year 5 to 4% of the maximum number of interventions that can be claimed. For example: a contractor dispensing between 4501 and 5500 per month will need to deliver a minimum of 24 NMS completions to achieve the gateway criterium ((50 x 12) x 4%). Likewise, one dispensing between 9501 and 10500 will have to deliver 48.

The price for each completed NMS increases at certain target levels. It ranges from £20 for those that fall below the 10% target to £28 for those that reach the 40% target. Payment is limited to 1% of the contractor's eligible monthly prescription volume. As an example, a contractor dispensing between 5501 and 6500 items and delivering 24 NMS per month would meet 40% of the target would receive payment of £8064 per annum.

Contractors claim payment by stating the number of completed NMS on their monthly FP34C.



30 and 50% of newly prescribed medicines are <u>not</u> taken correctly







### Number of completed service interventions needed per month to achieve target and associated payment

Monthly items	10% target £25	20% target £26	30% target £27	40% target £28	50% target £28	60% target £28	70% target £28	80% target £28	90% target £28	Max. number per month											
											0 – 1500	1	2	3	4	5	6	7	8	9	10
											1501- 2500	2 – 3	4 -5	6- 7	8 -9	10 - 11	12 - 13	14 - 15	16 - 17	18 - 19	20
2501- 3500	3 – 5	6 - 8	9 - 11	12 - 14	15 - 17	18 - 20	21 - 23	24 - 26	27 - 29	30											
3501 - 4500	4 - 7	8 - 11	12 - 15	16 - 19	20 - 23	24 - 27	28 - 31	32 - 35	36 - 39	40											
4501 - 5500	5 – 9	10 - 14	15 – 19	20 -24	25 – 29	30 - 34	35 – 39	40 -44	45 – 49	50											
5501 – 6500	6 - 11	12 – 17	18 -23	24 – 29	30 -35	36 - 41	42 – 47	48 – 53	54 – 59	60											
6501 – 7500	7 – 13	14 - 20	21 – 27	28 - 34	35 – 41	42 – 48	49 – 55	56 - 62	63 – 69	70											
7501 – 8500	8 - 15	16 - 23	24 – 32	32 – 39	40 - 47	48 -55	56 - 63	64 - 71	72 – 79	80											
8501 – 9500	9 – 17	18 - 26	27 – 35	36 - 44	45 – 53	54 – 62	63 - 71	72 – 80	81 – 89	90											
9501 - 10500	10 - 19	20 -29	30 -39	40 - 49	50 – 59	60 -69	70 -79	80 - 89	90 – 99	100											
+ 1000	(+1) - (+2)	(+2) - (+3)	(+3) - (+4)	(+4) - (+5)	(+5) – (+6)	(+6) - (+7)	(+7) – (+8)	(+8) - (+9)	(+9) – (+10)	(+10)											



### **Premises requirements**

The premises must have a consultation room which is:

- Clearly designated as an area for confidential consultations
- Distinct from the general public area of the pharmacy
- One where both the person receiving the service and the service provider can sit down together and have a conversation at normal speaking volumes which cannot be overheard by any other person (unless the patient has consented to a carer or chaperone being present.

If the pharmacy premises are too small for a consultation room to be included, the contractor can apply to their NHS Regional Team for an exemption.

Distance selling pharmacies can provide the NMS from their premises by telephone or video conversation. Despite the fact that they will not be seeing patients in person, they must still have an "acceptable location" (consultation area) on their premises

### Pharmacist knowledge and skills requirement

All pharmacists working in the pharmacy, including locums, should be able to provide the NMS.

Pharmacists no longer need to be MUR accredited to provide the NMS

Pharmacists must check that they have the necessary knowledge and skills before providing the service. To assess this, they are required to complete and sign the NMS self- assessment form.

CPPE have a range of NMS learning materials which can be accessed here

https://www.cppe.ac.uk/services/nms#navTop









### Getting ready to deliver the service

Before providing the NMS the contractor must:

- Have an SOP in place for the service
- Notify GPs within their locality of their intention to provide the service
- Notify their NHS Regional Team of their intention to provide the service using the NMS Pharmacy Contractor Declaration Form

Organisation and engagement are key to delivering a successful New Medicines Service and there are a number of tools that will help:

- Make sure that all your pharmacy team know what the NMS is and how to talk confidently to patients about it. Talk to your local GPs and practice nurses about the NMS. Often, they will appreciate the support and will flag/ signpost patients when prescribing a new medicine in asthma or diabetic clinics. This also supports collaborative working and helps to ensure good outcomes for the patient.
- Many, if not all, PMRs have the functionality that will flag any potential patients that are eligible for the NMS. Ensure
  that all members of your pharmacy team know how to use it, and that they flag all potential NMS interventions when
  labelling prescriptions. This can be done either using a printed label from the PMR or having special NMS stickers that
  can be attached to the dispensing bag.
- Make sure that you have a 1 31 day file that you can use to hold the completed consent forms. File the forms on the day that the next part of the service is due. This makes it easy for the Responsible Pharmacist to see immediately which patients need contacting that day.
- Your pharmacy team should make the pharmacist aware of any NMS interventions or follow ups that need to be completed on the day.

Records of the service must be kept, either electronically or using the NMS worksheet



https://psnc.org.uk/wp-content/uploads/2021/09/NMS-worksheet-Sept-2021.pdf





Make sure that all your pharmacy team know what the NMS is and how to talk confidently to patients about it.





### Patients eligible for the NMS



From 1<sup>st</sup> September 2021 the following conditions are covered by the service:

- Asthma and COPD
- Diabetes (type 2)
- Hypertension
- Hypercholesterolaemia
- Osteoporosis
- Gout
- Glaucoma
- Epilepsy

- Parkinson's disease
- Urinary incontinence/retention
- Heart failure
- Acute coronary syndrome
- Atrial fibrillation
- Long term risks of venous thromboembolism/embolism
- Store/ transient ischaemic attack
- Coronary heart disease

If a patient is newly prescribed medication to treat one of these conditions, they are eligible for the service. Where a medicine can be used to treat multiple conditions, e.g. gabapentin, the pharmacist must be able to determine that it is being used to treat one of the conditions above.

The NHSBSA has published a list of medicines suitable for the NMS

https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/dispensing-contractors-information/new-medicine-service-nms-drug-lists

Usually, it is not appropriate to provide the service if there has been a change of formulation. However, there are some circumstances, when a pharmacist believes it would benefit the patient. An example being the change to a different inhaler device.

More information on the New Medicines Service can be found on the PSNC website

https://psnc.org.uk/national-pharmacy-services/advanced-services/nms/



