

Pharmacy First – Guidance on providing remote consultations

Introduction

Remote consultations, over video link or by phone can benefit patients, save resources, and can help meet public demand for more convenient access to healthcare.

Where it is clinically appropriate to do so, Pharmacy First consultations for both minor illness and urgent medicine supply referrals can be undertaken by telephone or video consultation. Similarly, when it is safe to do so, clinical pathways consultations (excluding those for acute otitis media) can be conducted via a good quality video consultation. They **cannot** be provided by telephone consultation.

In all cases, the pharmacist providing the service must be present on the pharmacy premises.

Pharmacy teams should ensure that patients have the freedom to choose the services which are appropriate to them, and how to access them. They should also be conscious that not all patients will have the digital skills to take part in a virtual consultation. When setting up a remote consultation service, pharmacists should take into account the GPhC [equality guidance](#) to encourage equality of opportunity and respect for diversity.

Before providing services remotely, pharmacists should have completed [CPPE Remote Consultation Skills e-learning](#).

The various options for providing the Pharmacy First service are set out in the table below.

	Must have a consultation room in order to provide Pharmacy First	Pharmacy First Urgent Supply & Minor Illness (former CPCS) provided <u>at</u> the pharmacy premises	Pharmacy First Urgent Supply & Minor Illness (former CPCS) provided remotely <u>from</u> the pharmacy premises	Pharmacy First Clinical pathways consultations provided <u>at</u> the pharmacy premises	Pharmacy First Clinical pathways consultations provided remotely <u>from</u> the pharmacy premises
Distance Selling Pharmacies	Yes	Allowed	Allowed, by telephone or audio link or a live video link	Not allowed	Allowed, but only by live video link and only 6 of the 7 clinical pathways (not acute otitis media)
'Bricks and mortar' pharmacies	Yes	Allowed	Allowed, by telephone or audio link or a live video link	Allowed (all 7 clinical pathways, including acute otitis media)	Allowed, but only by live video link and only 6 of the 7 clinical pathways (not acute otitis media, but patients could come to the pharmacy for a consultation)

Note: In all cases, Pharmacy First (both the Urgent Supply & Minor Illness (former CPCS) and the clinical pathway consultations) must be provided by a pharmacist who is at the pharmacy premises.

Distance Selling Pharmacies (DSPs) can offer the Pharmacy First Service, and when clinically appropriate, minor illness consultations (referrals) and urgent medicine supply (referrals) can be conducted via telephone or video consultation by a pharmacist who is at the pharmacy premises. Alternatively these consultations can be conducted face-to-face on the pharmacy premises.

DSPs can **only** provide clinical pathways consultations via video consultation. They cannot provide them face-to-face because, prior to the gateway point in the clinical pathway being passed, the consultation forms part of the Support for Self-Care Essential service. DSPs cannot provide Essential services on the pharmacy premises.

Safeguards for accessing healthcare remotely

There are potential patient safety risks to remote consultations. Pharmacists must be aware of the risks and be clear of their responsibilities for protecting patients when providing services remotely.

The GPhC guidance on [providing pharmacy services at a distance](#) requires all pharmacies to have a risk assessment in place. Before providing remote consultations for Pharmacy First, contractors should review their current risk assessment to identify any new or changed risks and take appropriate steps to mitigate these risks. To give assurance to people accessing services, the guidance requires a regular audit to be undertaken at an interval that can be shown to be appropriate for these services. Additionally, [NHS England's video conferencing guidance](#) says that a risk assessment should be undertaken as part of the selection process for a video conferencing system.

Practical considerations

Choosing a remote consultation system

Before providing consultations remotely contractors should confirm that their indemnity insurance covers remote consultations. They should also consider:

- The robustness of the pharmacy WiFi connection
- Any additional hardware required e.g. webcams, laptops, headsets etc.
- The usability of the system for the pharmacy team and patients
- The data security features of the consultation system
- The quality of the system from a patient's perspective and any reputational risk for the pharmacy

NHS England has a list of systems that meet the standards for their Digital First Online



Consultation and Video Consultation framework which can be found [here](#)

During the consultation

Clinical pathways consultations require an examination of the patient. In some circumstances the patient may need to send through photographs to allow the pharmacist to assess the condition, as the chosen video conferencing system may not support the examination. These must be sent via secure mail and destroyed in line with the business's Data Protection policy. Alternatively, unless a distance selling pharmacy, it may be more appropriate to ask the patient to attend the pharmacy in person.

After the consultation

If NHS medicine is to be supplied following a consultation, it must be made with reasonable promptness taking into account the clinical need of the patient e.g. supply of antivirals for shingles should be made within the defined timeframes for rash onset as outlined in the clinical pathway.

Distance selling pharmacies providing the service must make the necessary arrangements for prompt delivery of the item.

Other useful information

Principles for remote consultations

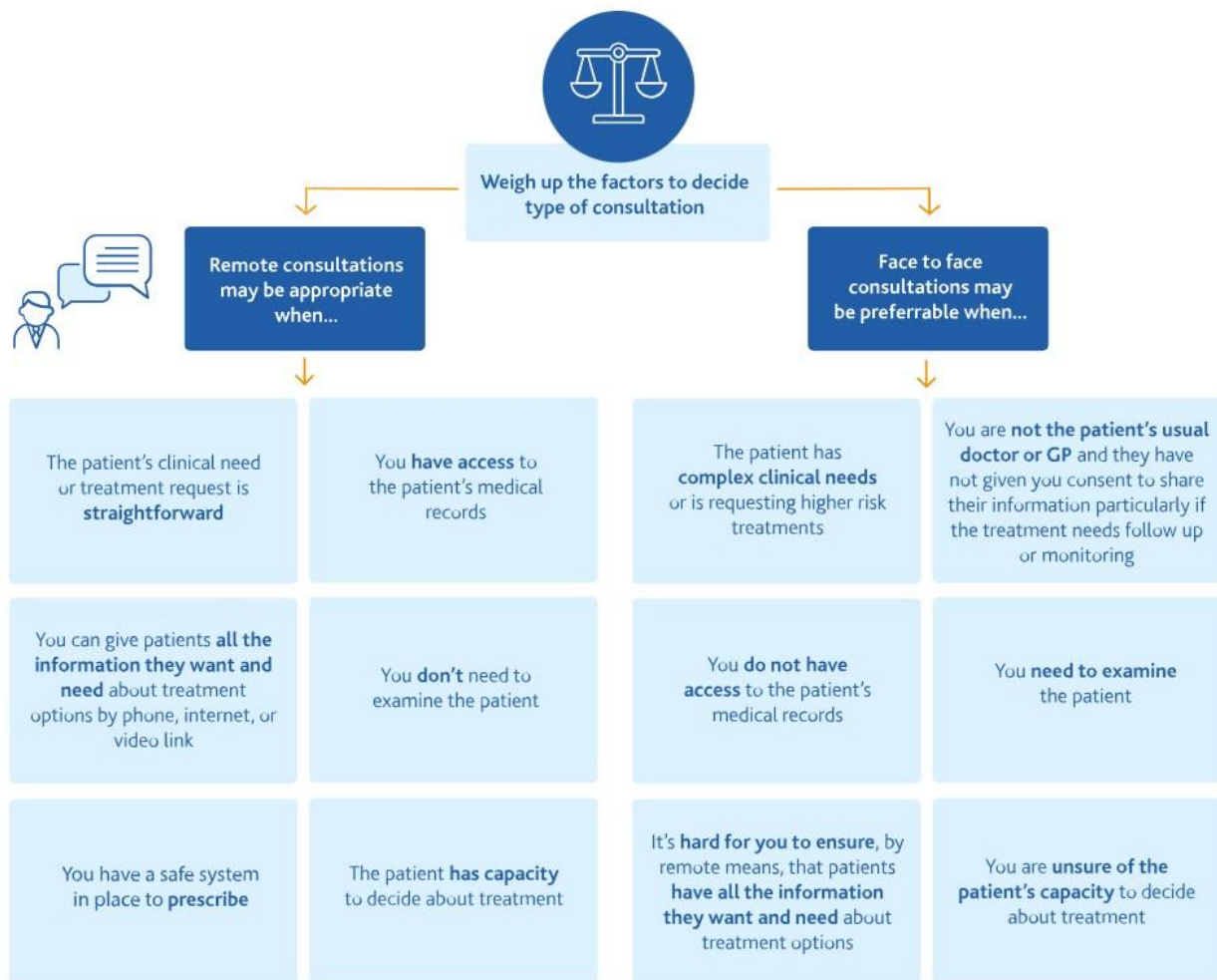
UK healthcare providers are expected to follow [10 high level key principles](#) when providing remote consultations (and prescribing).

1. Make patient safety their first priority and raise concerns if the service or system they are working in does not have adequate patient safeguards including identity and verification checks
2. Understand how to identify vulnerable patients and take appropriate steps to protect them

3. Tell the patient their name, role and professional registration details, establish a dialogue and make sure that the patient understands how the remote consultation will work
4. Explain that:
 - they will only supply medication if it is safe to do so
 - it's not safe if they don't have sufficient information about the patient's health or if remote care is unsuitable to meet their needs
 - it may be unsafe if relevant information is not shared with other healthcare providers involved in their care
 - if they can't supply medication because it's unsafe, they will signpost to other appropriate services
5. Obtain informed consent and follow the relevant mental capacity law and codes of conduct
6. Undertake an adequate clinical assessment and access medical records or verify important information by examination or testing where necessary
7. Give patients information about all the options available to them, including declining treatment, in a way that they understand
8. Make appropriate arrangements for aftercare
9. Keep notes that fully explain and justify the decisions they make
10. Stay up to date with relevant training, support and guidance for providing healthcare in a remote context

Deciding if a remote consultation is appropriate

This flowchart from the GMC can help you to decide whether a remote consultation is appropriate.



Guidance and resources on remote consultations

[Using video conferencing and consultation tools](#) (NHS England)

[NHS remote consultation guidance for pharmacy teams](#) (2022)

[Video consulting with your patients – a quick guide for NHS staff](#) (University of Oxford/NHS)

[Video consulting with your NHS – a quick guide for patients](#) (University of Oxford/NHS)

[Remote pharmacy consultations: how pharmacy teams can practise them successfully](#) (Pharmaceutical Journal)

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