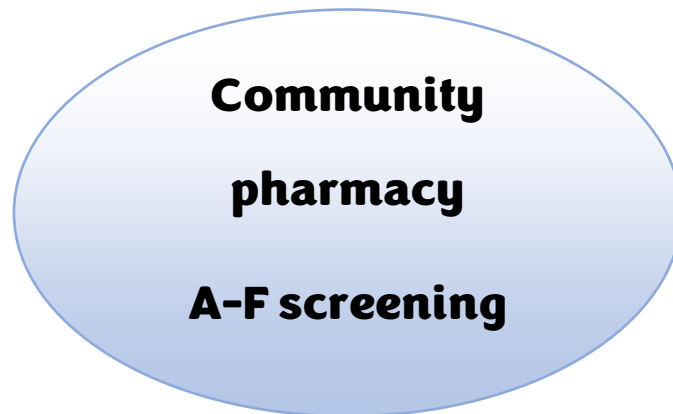




Shropshire Local Pharmaceutical Committee



Community Pharmacy A-F Screening Service

**Atrial fibrillation screening in
Community Pharmacy
Shropshire Telford and Wrekin**

Service Specification

2023/2024

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Community Pharmacy Atrial Fibrillation Screening Service

1.0 Introduction

This community pharmacy screening service is designed to target those most at risk of atrial fibrillation, as early detection has been shown to reduce the risk of stroke. Patients who have this arrhythmia detected will be counselled by the pharmacist about the implications of a potential diagnosis and referred to their GP for confirmation of diagnosis and management of atrial fibrillation.

2.0 Aims and objectives

The service is designed to screen patients aged over 40 years for atrial fibrillation who are most at risk from stroke:

Over 40 years with

- CHD (angina, previous MI, CABG/stent)
- Diabetes
- Hypertension
- Heart failure
- Stroke/TIA
- Peripheral arterial disease

The objectives of the service:-

- To pulse check over 40 year olds
- To measure BP in same target group
- To carryout CHADSVACS scoring on the patient
- To conduct an AliveCor single lead ECG when both an abnormal pulse and CHADSVACS score above 2 has been found
- To send referral and ECG trace to patient's GP if abnormal
- Public Health evaluation on activity levels and follow up treatment

3.0 Eligibility for the Service

3.1 Patient eligibility

This service is available to patients who are registered with a GP practice in Shropshire, Telford and Wrekin only. The practice must be contracted to NHS England Midlands. Patients can access the service at a pharmacy participating in the scheme.

Patients should also be encouraged to complete a patient satisfaction survey (anonymously) as provided to the pharmacy by the LPC.

Patients will be asked by the pharmacy to confirm their registration with the GP Practice before screening is conducted. Pharmacists are encouraged to use Summary Care Records (SCRs) to check eligibility where consent is given to do so (see point 4.1 below "checking GP Registration").

It is anticipated that patients who will make use of the service will access it via the pharmacy where they generally get their prescriptions dispensed. In addition to this, the pharmacist may check the patient's SCR and it is therefore expected that the number of telephone calls to the GP practice to confirm patient registration will be minimal.

4.0 Service Requirements

4.1 Who can provide the A-F screening service?

This service can only be provided from community pharmacies that have been commissioned to do so, that are located within Shropshire, Telford and Wrekin, and are contracted to NHS England Midlands. The pharmacy must have appropriately trained staff available at all times to provide the service.

Pharmacists working in the participating pharmacies can provide this service if they have completed the mandatory training requirements.

It is expected that the main pharmacist and one relief pharmacist have undertaken the relevant training as described below and have access to a copy of the service specification, prior to working in a pharmacy commissioned to deliver this pilot.

4.2 Pharmacist training requirements

LPC specified training. Where face to face is not possible, a video demonstration of the AliveCor will be provided.

Completion of CPPE 'Atrial fibrillation detection in community pharmacy: what you need to become service ready'

Pharmacists should be familiar with NICE guideline (NG196) [Overview | Atrial fibrillation: diagnosis and management | Guidance | NICE](#).

In order to record the consultations on PharmOutcomes the pharmacist must complete a pharmacist enrollment form within the Pharmacy A-F module.

4.3 Additional Requirements

The pharmacy must have an accredited consultation area which has been approved for Advanced Services for the consultations to take place. All consultations must take place in a confidential environment.

The pharmacy must have the Service Specification in place to cover the service.

The pharmacy contractor will provide a professional consultation service for patients registered with Shropshire Telford and Wrekin GPs. This agreement will be in writing signed by the pharmacist in charge or designated representative for the contractor and be considered an Enhanced Service.

Patients can access the service at any participating pharmacy, and the aim is that service is available during all hours that the pharmacy is open.

It is understood that the pharmacy may not be able to offer the service over all of their regular opening hours (e.g. regular pharmacist works 4 days and 2 different pharmacists operate the pharmacy on days 5 and 6 but only one was allowed to attend the training). If the cover will form a regular pattern the pharmacy should inform the LPC by adding these details to the sign up page of the SLA (Appendix 6). The pharmacist should also ensure that when they speak to their local practice about the service they make it clear which days they operate the service.

Only in exceptional circumstances should a patient be signposted to another provider if the pharmacy has been unable to provide the service to the patient, and the local practice(s) should also be notified.

A list of pharmacies providing the service will be made available on the LPC website and shared with all of the participating pharmacies. Therefore, if for any reason the pharmacy wishes to withdraw from the service Shropshire LPC and NHS England Midlands must be informed immediately.

5.0 Duties of Community Pharmacies

5.1 Checking GP registration

Before proceeding to supply treatment under the scheme, the patient MUST be asked to confirm that they are registered with a GP practice in Shropshire, Telford and Wrekin contracted to NHS England Midlands.

This may be done by:

- checking the patient's PMR, if the patient is already collecting prescriptions from that pharmacy;
- asking the patient to show the repeat prescription slip;
- knowing the patient to be registered with the GP practice;
- medical card
- checking the patient's SCR

Confirmation of the patient's registration at an eligible GP practice is only required if the above documentation is not available or if it is felt that a patient may be attempting to fraudulently use the scheme. Staff may telephone the patient's GP practice for confirmation of registration with the consent of the patient. They should offer the patient's details i.e. name, date of birth, and postcode or address, and merely ask the practice to confirm 'yes' or 'no' whether the patient is registered with them. The pharmacy should not expect the GP practice to offer any other patient information as they should already be in receipt of this from the patient.

5.2 Consent and Consultation

The pharmacist must complete one consultation record for every patient. The consultation should be recorded on PharmOutcomes, live during the consultation on the tablet device provided.

If not recorded live, the details of the consultation should be entered onto PharmOutcomes as soon as possible after the consultation has taken place and in all cases before the end of the next working day.

Written consent is not required. Agreement to participate will be taken as consent. Patient details must be recorded on PharmOutcomes.

The PharmOutcomes system will send a secure email to the patients' GP to inform them of an abnormal AliveCor screen in order for the patient to be invited for a 12-lead ECG. Where a secure email address is not available for a practice, the PharmOutcomes system will generate a message notifying the pharmacy that they have to inform the practice using a different, secure method.

5.3 Consultation

The pharmacist must carry out a professional consultation which should involve:

- Patient assessment which includes pulse check, blood pressure measurement and CHADSVACS scoring assessment.
- Review of the patients Summary Care Record if appropriate to check medication (unless consent is refused).
- Provision of advice. Explain the reasons for the pulse check and AliveCor screen if appropriate.
- Inform the patient's GP of any abnormal AliveCor screen. This will be done automatically via PharmOutcomes where the system has a valid NHS mail address for the practice. Where a pharmacy sees a message on PharmOutcomes to say that the notification cannot be sent electronically they must print out the notification and the information must be sent to the practice within two working days of the assessment taking place (with due regard to information governance). If the GP practice is not able to receive PharmOutcomes notifications the pharmacist is advised to contact the practice to confirm the NHS mail address they wish to use and then inform the LPC who can facilitate the update of the PharmOutcomes system.
- The outcome of the screen should be recorded on the patient's PMR

All consultations must be carried out by a pharmacist.

It is of paramount importance that all providers of this scheme note that normal rules of patient confidentiality apply.

5.4 Urgent referral to GP

A referral will automatically be sent, together with attached AliveCor ECG screen, to the GP practice the patient is registered with should the reading be abnormal.

Normal screen results will not be referred.

If the patients GP practice is closed and/or the symptoms are sufficiently severe to warrant a referral to a doctor, the patient must be advised to contact the Out-of-Hours service or attend A&E immediately.

5.5 Record Keeping

A record of every consultation must be made on PharmOutcomes. (NB only consultations recorded on PharmOutcomes will comply with record keeping requirements and follow-ups recorded on PharmOutcomes will be used to measure activity and will result in payments being made for the service).

The log-on details for PharmOutcomes is pharmacy specific, if pharmacists move between pharmacies they cannot use the same PharmOutcomes log-on.

Within the PharmOutcomes A-F module there is a pharmacist enrollment module which must be completed by the pharmacist the first time that they access this module. Once completed, this pharmacist enrollment will be recognised at all pharmacies offering the A-F screening service in Shropshire and Telford and Wrekin.

All records, electronically or otherwise must be kept in accordance with NHS record keeping and Community Pharmacy Information Governance requirements. Recommendations for the retention of pharmacy records for minor clinical interventions are 2 years. This includes the patient consent record

[Retention of Pharmacy Records – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](#)

5.6 Patient Questionnaire

As part of the assessment, patients should be asked to complete a short questionnaire about the service. The pharmacy may provide a “post box” so that the questionnaire can be completed anonymously and the patient “post” their response into the box so that they do not feel unable to give honest feedback.

A feedback module will be available on PharmOutcomes and a member of the pharmacy team must input all of the data from the form exactly as written by the patient.

5.7 Incident Reporting and Complaints

All incidents should be recorded as part of the pharmacy’s clinical governance procedures (refer to Essential Service 8 – Clinical Governance, Community Pharmacy Contractual Framework)

Pharmacies will also be expected to follow appropriate complaints procedures in accordance with NHS policy, where issues arise so that improvements can be made following significant events or errors.

Pharmacies should also note that by signing up to participate in this scheme they are entering into an agreement to offer a service with NHS England Midlands.

6.0 Duties of Shropshire LPC

Shropshire LPC will be responsible for ensuring timely bonus and activity payments are made to community pharmacies who are participating in the scheme and will be responsible for dealing with operational and payment- based queries.

Post payment verification checks may be made.

7.0 Service Funding and Payment Procedures

7.1 Submission of claims

Pharmacies must enter consultations and supplies onto the relevant PharmOutcomes modules. PharmOutcomes will automatically generate claims for the relevant service payments.

Activity and bonus payments will be made by Shropshire LPC which holds the service funding.

7.2 Service payments

The pharmacy will be paid according to the following schedule.

Activity payment to be made per patient screened at the end of each calendar month. £30 for each AliveCor screen carried out.

Bonus payment of £150 to be paid upon completion of 20 screens.

Second bonus payment of £150 to be made once 40 screens completed.

The fee structure for project has been designed to encourage a volume of screens since the incidence of A-F is approximately 3% of the population. Targeting those who are to be screened should increase the opportunity to identify those at risk.

7.3 Consumables

Pharmacies taking part in the pilot will be provided with an AliveCor monitor and a Samsung Galaxy tablet. These remain the property of Shropshire LPC and will be held on the asset register.

8.0 Contractual Period

This agreement is for the period **31st March 2023 to 31st March 2024** however the funding is limited and activity will be monitored. Contractors will be given notice if the scheme utilises its fund within the contractual period.

9.0 Termination of the Service

The pharmacy, or NHS England Midlands in agreement with Shropshire LPC, may terminate participation in the scheme by giving written notice of their intention at least 28 days before the service end date. No reason needs to be given for the termination of the agreement.

10.0 Dispute resolution

In the event that a Contractor disputes the decision by NHS England Midlands to terminate the agreement on the grounds that the terms of the agreement have not been met and/or remedied within an appropriate time-frame, the Contractor shall make this known in writing without delay.

Upon receipt, local dispute resolution procedures will be followed in accordance with the Pharmaceutical Regulations 2013.

11.0 Patient Confidentiality, Data Protection, Freedom of Information and Transparency

The Parties acknowledge their respective obligations arising under the Freedom of Information Act 2000, Data Protection Act 2018, the Human Rights Act 1998, and under the common law duty of confidentiality, and must assist each other as necessary to enable each other to comply with these obligations. The Contractor must complete and publish an annual information governance assessment and must demonstrate satisfactory compliance as defined in the NHS Data Security and Protection Toolkit (or any successor framework). Any changes to legislation that arise out of the General Data Protection Regulations (GDPR) will become applicable to this contract upon the date of enforcement.

12.0 Indemnity

The Contractor shall maintain adequate insurance for public liability and professional indemnity against any claims which may arise out of the terms and conditions of this agreement.

Any litigation resulting from an accident or negligence on behalf of the Contractor is the responsibility of the Contractor who will meet the costs and any claims for compensation, at no cost to NHS England Midlands.

13.0 Equity of Access, Equality and Non-Discrimination

The Parties must not discriminate between or against Service Users, Carers or Legal Guardians on the grounds of age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, race,

religion or belief, sex, sexual orientation, or any other non-medical characteristics, except as permitted by Law (Equality Act 2010).

The Contractor must provide appropriate assistance and make reasonable adjustments for Service Users, Carers and Legal Guardians who do not speak, read or write English or who have communication difficulties (including hearing, oral or learning impairments).

14.0 Governing Law and Jurisdiction

This Contract will be considered as a Contract made in England and will be subject to the laws of England. Subject to the provisions of Section 7 (Dispute Resolution), the Parties agree that the courts of England have exclusive jurisdiction to hear and settle any action, suit, proceedings or dispute in connection with this Contract (whether contractual or non-contractual in nature)

15.0 Completion of Signed Agreement

In order to participate in the service, each contractor must complete the signed agreement, and return to NHS England Midlands as indicated. Once received, the pharmacy will be accredited for the Pharmacy A-F module on PharmOutcomes, and delivery of the service can commence.

FOR BRANCHES OF MULTIPLE PHARMACY GROUPS, THIS AGREEMENT SHOULD BE COMPLETED BY AN AUTHORISED PERSON(S) AT HEAD OFFICE AND A COPY SENT TO EACH PARTICIPATING BRANCH FOR THEIR INFORMATION.

Referral from Community Pharmacy – to be used only when screens are conducted out of hours and the pharmacist believes this is a medical emergency that requires immediate attention

Patient's name:.....

Patient's D.O.B:.....

Patient's address:.....

.....
The patient named above has accessed the Pharmacy A-F screening service and following assessment by the pharmacist on duty a referral has been recommended based on the following information;

Pharmacist's comments:.....

Indication of urgency (please tick):

- Accident and Emergency
- Contact GP practice or other HCP within 24 hours
- Contact GP practice or other HCP within days if symptoms do not resolve

Pharmacist's name (PRINT).....

Pharmacy telephone number.....

Pharmacy address.....

.....
Date and time.....

Pharmacist signature.....

Please ensure that this form is given to your GP or other Healthcare Professional

Appendix 2

Supplier Set Up Form: IMPORTANT – Please ensure all relevant sections are completed including authorisation before returning.

SUPPLIER DETAILS

Company Name	
Address Line 1	
Address Line 2	
Town	
County	
Postcode	
Telephone No.	
Contact email	
VAT Registration No.	

BANK DETAILS (payment will be made by BACS)

Name of Account	
Sort Code	
Account Number	
Reference	
Payment email address	

AUTHORISATION

Please sign and return the completed form by post: FAO L Fairbrother, Secretary, Shropshire LPC, 4 Bakewell Street, Penkull, Stoke on Trent, ST4 5HJ. Any queries regarding this form should be sent to lfairbrother1@gmail.com

Signature		Date	
Position		Contact No.	

LPC Office use only

Validation		LPC Officer	Signature	Date
Create Payee	Business Acc			
	Service Acc			
Checked By				

Community Pharmacy A-F screening service 2023/2024

SIGNED AGREEMENT

On behalf of (Pharmacy Name and Address)

.....
.....

Contractor Code (F Code).....

I have read and understood the terms in this service specification and agree to provide the standard of service specified*.

Signature.....

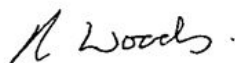
Print name.....

Designation..... Date.....

*Please indicate which days of the week you intend to offer this service. The aim is to provide over all of your opening hours but where a regular shift cannot be covered by an extended care pharmacist it would be helpful for Shropshire LPC & NHS England Midlands to know which days you will operate the service. State here:

.....

On behalf of NHS England Midlands, I commission the above pharmacy to provide the service detailed in this service specification for the Pharmacy A-F screening service.



Signature (on behalf of NHS England Midlands):

Print name: Rebecca Woods

Designation: Head of Primary Care

Date: 30.03.23

Please return a signed copy of this form by email to england.pharmacy-westmidlands@nhs.net

Upon receipt the relevant module within PharmOutcomes will be activated.