

GP CPCS  
Report:  
February 2022

11<sup>th</sup> March 2022



**Greater Manchester  
Community Pharmacy**  
Provider Board

# GP CPCS Highlights: February

93% (395) GM practices engaged or live

201 practices trained & live, 135 actively referring

302 of 356 practices completed MS form

29% referrals advice only

20% referrals for children aged 1-9  
61% referrals for females

Top 3 referral reasons: skin/rash, sore throat, cough

# February Update

## Governance

- EMIS procurement:
  - Final contract still not received, GMSS are working with EMIS team to finalise
  - SLA with Pinnacle ended 31<sup>st</sup> Dec, effectively leaving a significant period with no contract in place – WG, LB and GMSS agree this is an acceptable risk given contract status, risk really sits with EMIS who are continuing to activate sites with no contract in place
- IIF / WPAF:
  - Regular updates on responses shared & targeted work with low responding localities
  - 302 of 356 practices required to complete the form have done so
  - WAF reporting by GMHSCP to include GP CPCS data

## Post-Deployment

- Daily support to community pharmacies with follow up written info & fortnightly deployment status updates in place
- Regular ad hoc support to general practices
- GMHSCP direct involvement with any pharmacies of concern agreed – ‘red flag’ list reviewed and updated
- Deep dive into pharmacy performance data for January and February to result in targeted comms in March
- Activity reporting re IIF target to be managed through GMHCSP from April
- Weekly GP post-deployment drop-in sessions in place with comms supported by GP excellence team

## Project Planning & Engagement

- Pharmacy mapping complete
- March go live cohort shared with EMIS
- Feedback shared to inform UEC CPCS pilot
- CP webinar slides reviewed & updated
- Second of 4 community pharmacy webinars was delivered
- Regular deployment plan maintenance and update
- Eventbrite booking system updated re GP training to request cancellations if people unable to attend, to ensure slots are freed up for others
- Work completed re PharmOutcomes notifications and visibility of email addresses in the system for notifications to be sent to – allowing easier response to queries from general practice

## Deployment

- 67 practices went live in February
- 77 practices trained in February
- Total 201 practices live, 135 actively referring

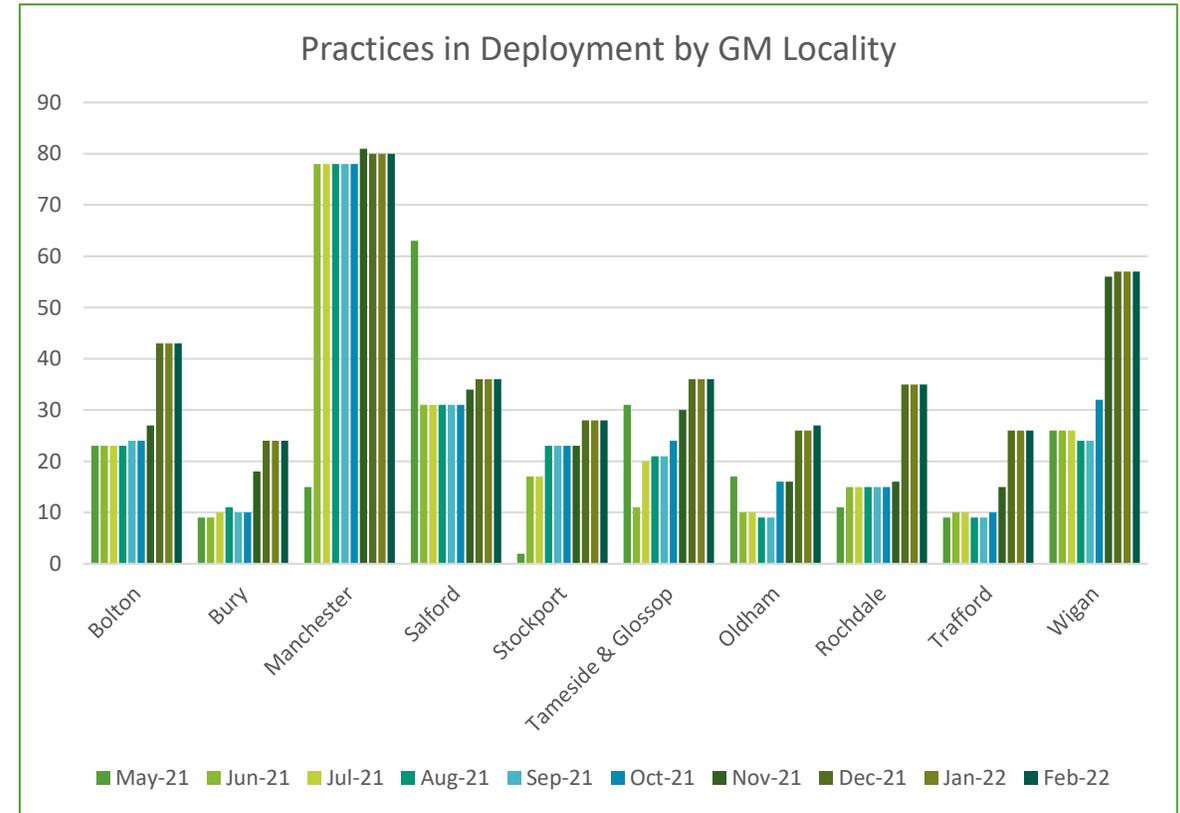
Deployment update

# Deployment Overview

Status Date: 02/03/2022

Number of General Practices in Deployment  
by Deployment Status

Deployment Stage	Number of Practices	% of GM practices
1 Initial Engagement	3	1%
2 Pre Implementation	24	6%
3 Implementation	169*	40%
4 Go Live	12	3%
5 Post Go Live	68	17%
6 Implementation complete	119	28%



**395 (93%) of GM General Practices are currently in deployment**

\* All practices who completed the MS form sent out in November for WPAF / IIF move straight into stage 3 implementation, having agreed to go live and supplied pre-implementation information.

# Deployment Overview by CCG

<b>CCG</b>	<b>Practices in CCG</b>	<b>% Practices engaged</b>	<b>% Practices Trained</b>	<b>% Practices Live</b>
Bolton	49	88%	88%	71%
Bury	25	96%	96%	20%
HMR	36	100%	81%	25%
Manchester	83	96%	88%	66%
Oldham	39	67%	67%	31%
Salford	38	95%	84%	39%
Stockport	36	78%	67%	28%
T&G	36	100%	94%	44%
Trafford	27	96%	89%	52%
Wigan	57	100%	100%	25%

# Deployment Activity

Number of training sessions delivered	Number of attendees	Number of practices represented
8	381	77

## Deployment Resource\*:

Bolton LPC: 22 hours (n=1)

CHL hours: 68 hours (n=2)

GMLPC: 62 hours (n=1)

PCB: 60 hours (n=1)

## Deployment update:

- 67 practices went live in February
- Information and resources were refreshed to all practices who had received the information in January and who had not booked onto a training session
- Training sessions are delivered regularly by the GP CPCS working group twice weekly at 12:30 and practices can book staff onto these sessions via Eventbrite

## Training Session Feedback:

**93%** of attendees at training sessions felt that they were **extremely satisfied or very satisfied** with the session they attended.

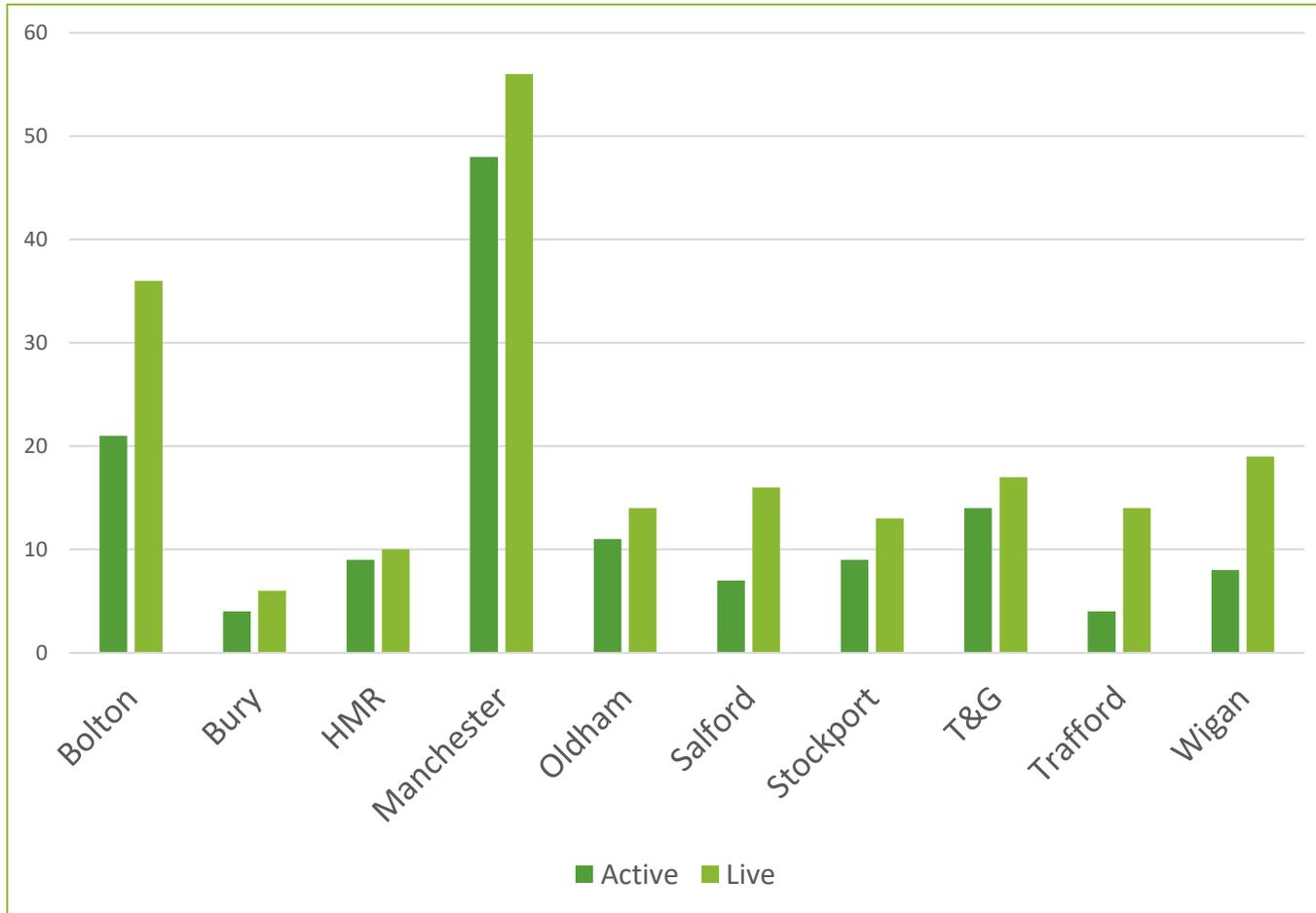
The average confidence level of attendees to start making referrals after the session was **7.7** out of 10.

Comments made: **“informative”**, **“clear”**, **“good explanation”** and **“easy to follow”**.

\*LPC resource is provided from core LPC funding (contractual levy from pharmacy contractors) – no additional funding has been received to deploy GP CPCS.

CHL resource for December to March 22 has been requested.

# Live vs. Active Practices



Locality	% live practices that are active
Bolton	58%
Bury	67%
HMR	90%
Manchester	86%
Oldham	79%
Salford	44%
Stockport	69%
T&G	82%
Trafford	29%
Wigan	42%

**Practices Live : 201 (135 active – 67%)**

# Active Practices vs. PCN IIF referral targets

CCG	No. practices who met IIF target	No. practices who did not meet IIF target	% Live practices who met IIF target
Bolton	6	30	20%
Bury	1	6	17%
HMR	2	10	20%
Manchester	4	56	7%
Oldham	3	14	21%
Salford	0	16	0%
Stockport	1	13	7%
T&G	1	17	6%
Trafford	0	14	0%
Wigan	1	19	5%

## PCN IIF Targets:

From 1<sup>st</sup> April 2022, practices are required to refer 0.65 patients per 1000 list size per week OR 34 patients per 1000 list size per year to qualify for the IIF incentive.

Of the 201 live practices, **19 hit their referral target in February (9%).**

# GP CPCS Objectives: February

Objectives	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22
<b>50% Practices live by 31/03/2022</b>	0.2%	0.2%	0.2%	0.2%	20%	23%	25%	25%	28%	47%
<b>75% Practices live by 31/03/2023</b>	N/A									
<b>Target number of referrals per week for live practices</b>	67%	75%	90%	89%	54%	74%	74%	23%	85%	67%
<b>70% referrals completed within 12 hours</b>	96%	93%	95%	92%	84%	82%	75%	81%	69%	70%

# Deployment Success Criteria: February

Success Criteria	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-21	Feb-21
GM Processes defined, documented & signed off ready for adoption in deployment										
100% of EMIS General Practices included in the deployment plan have the EMIS CPCS template installed & ready for use by agreed date					100%	97%	100%	100%	100%	100%
100% of non-EMIS General Practices included in the deployment plan have access to PharmRefer by agreed date					100%	100%	100%	100%	100%	100%
95% of pharmacies identified as likely to receive referrals from a general practice included in the deployment plan have been informed & confirmed readiness	87%		100%		100%	100%	100%	100%	100%	100%
80% of general practices included in the deployment plan make a referral in the week they go live	67%		100%		70%	50%	55%	67%	63%	40%
70% of referrals completed by community pharmacy within timeframes specified in the service specification and toolkit – within 12 hours or the next working day.	96%	93%	95%	92%	84%	82%	75%	81%	69%	70%

# GP CPCS Objectives: Key

Objectives 1 & 2	
	On track or achieved
	Requires improvement
	Significant issues
	Not applicable

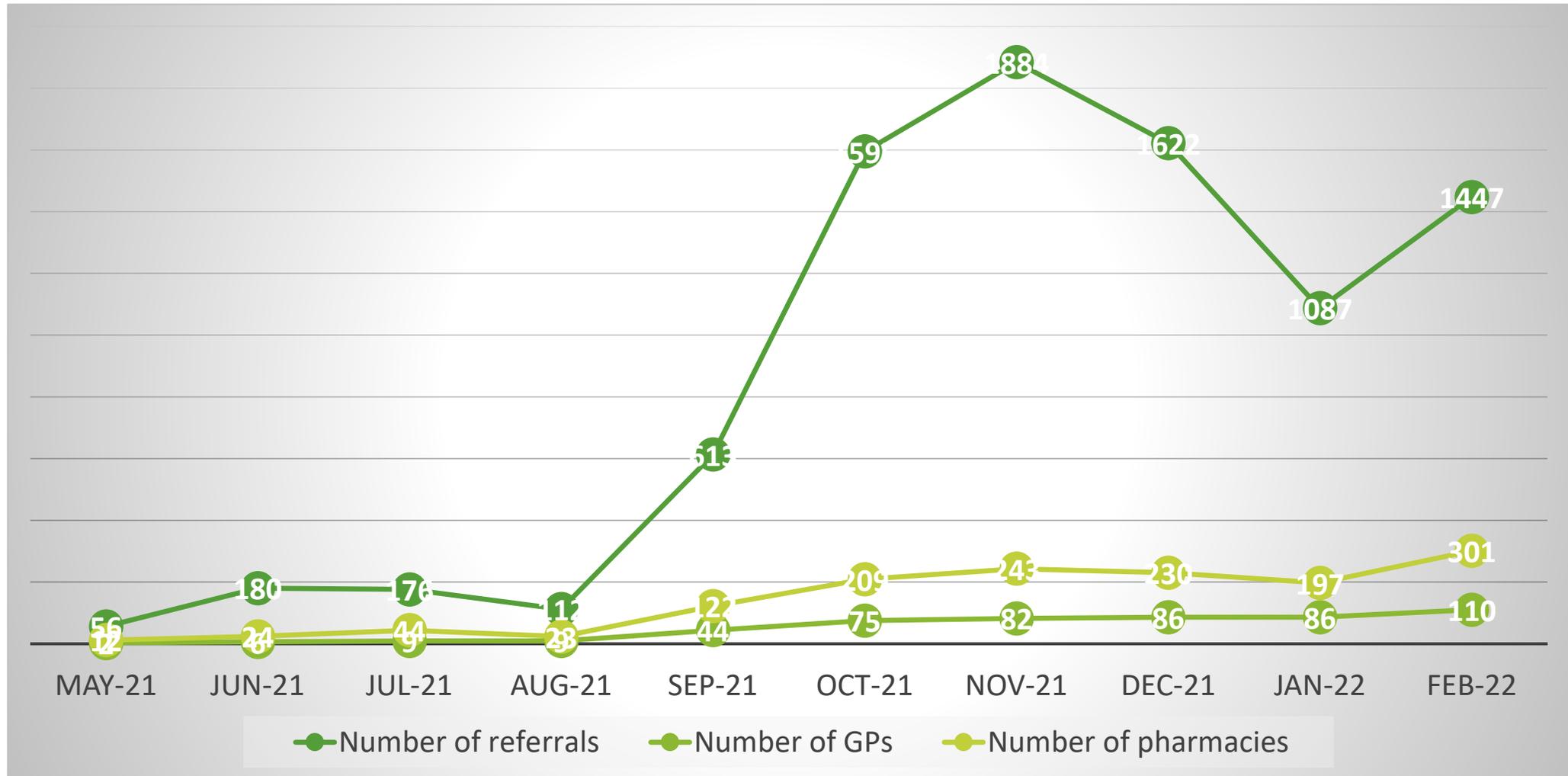
Objective #3	
Within the calendar month:	
>=75% of live practices met referral target	
>=75% of live practices made some referrals	
>25% of live practices did not make any referrals	

Objective #4	
Within the calendar month:	
>70% referrals completed within 12 hours	
60-69% referrals completed within 12 hours	
<60% referrals completed within 12 hours	

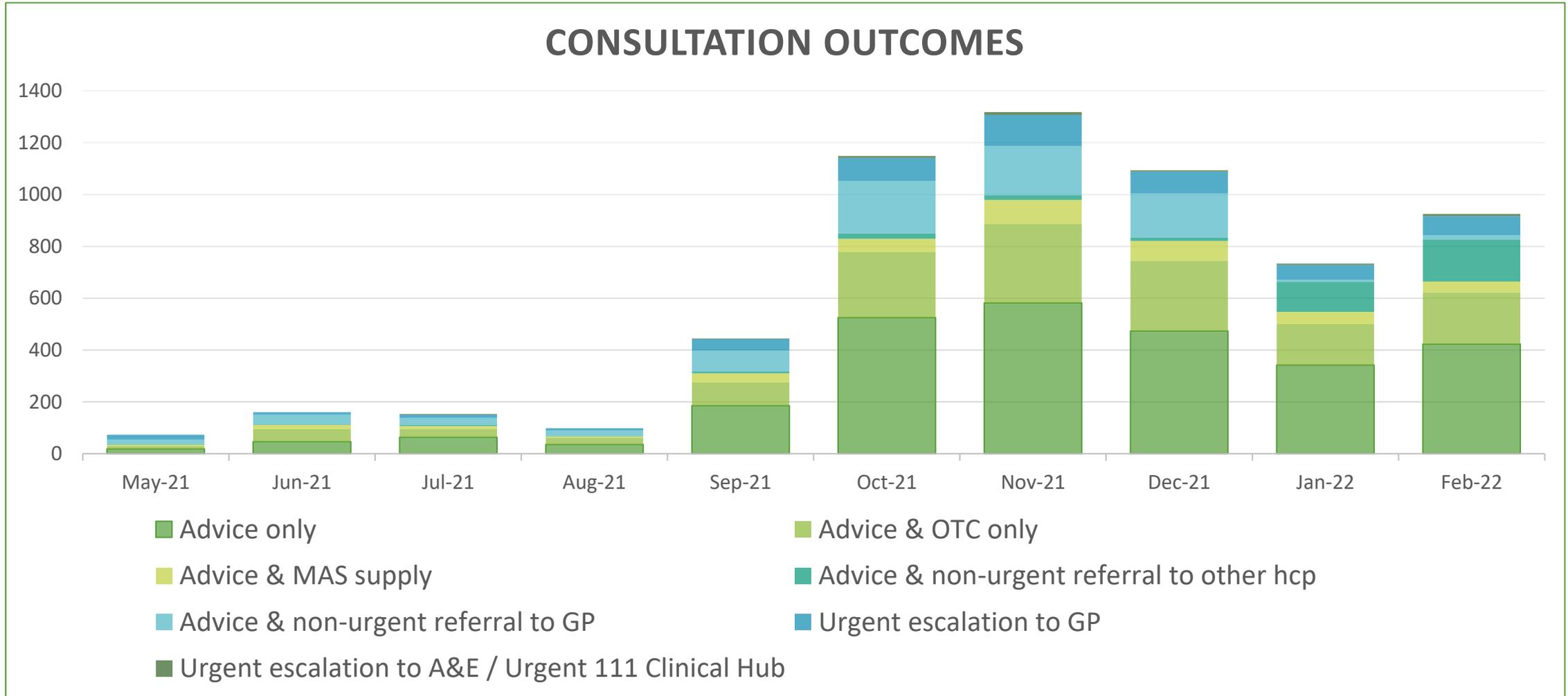
# Activity report

# Referral Activity Trend

**1447 referrals in February**  
**9308 referrals to date**



# Referral Activity Trend



# February Referral Activity

## Consultation Outcomes:

Number of Referrals sent	Number of General Practices actively referring	Number of Pharmacies referred to
1447	110	301

Advice only  
423 (29%)

Advice & OTC sale  
200 (14%)

Advice & MAS supply  
41 (3%)

Advice & non-urgent referral  
179 (12%)

Urgent Escalation  
74 (5%)

Urgent Escalation (A&E)  
8 (1%)

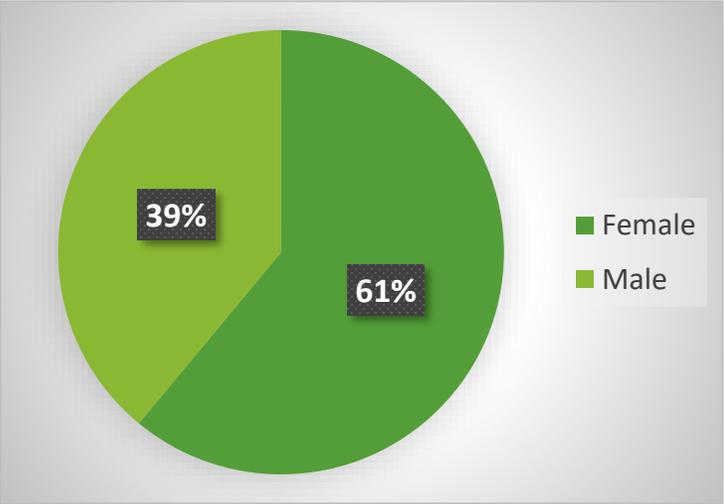
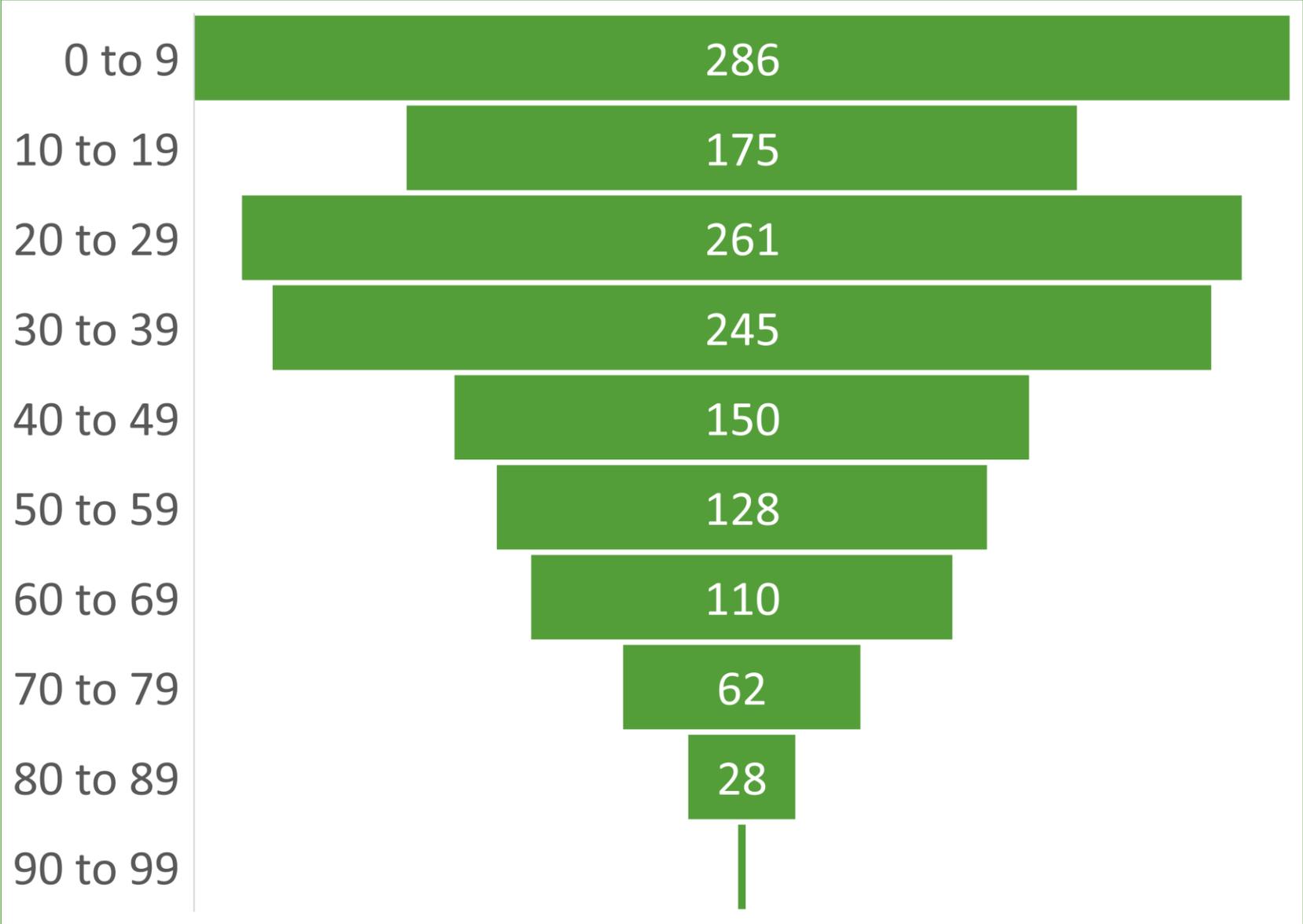
### Escalations

Of **179 Non-urgent escalations**, 163 were to GP and 16 to other healthcare professionals.

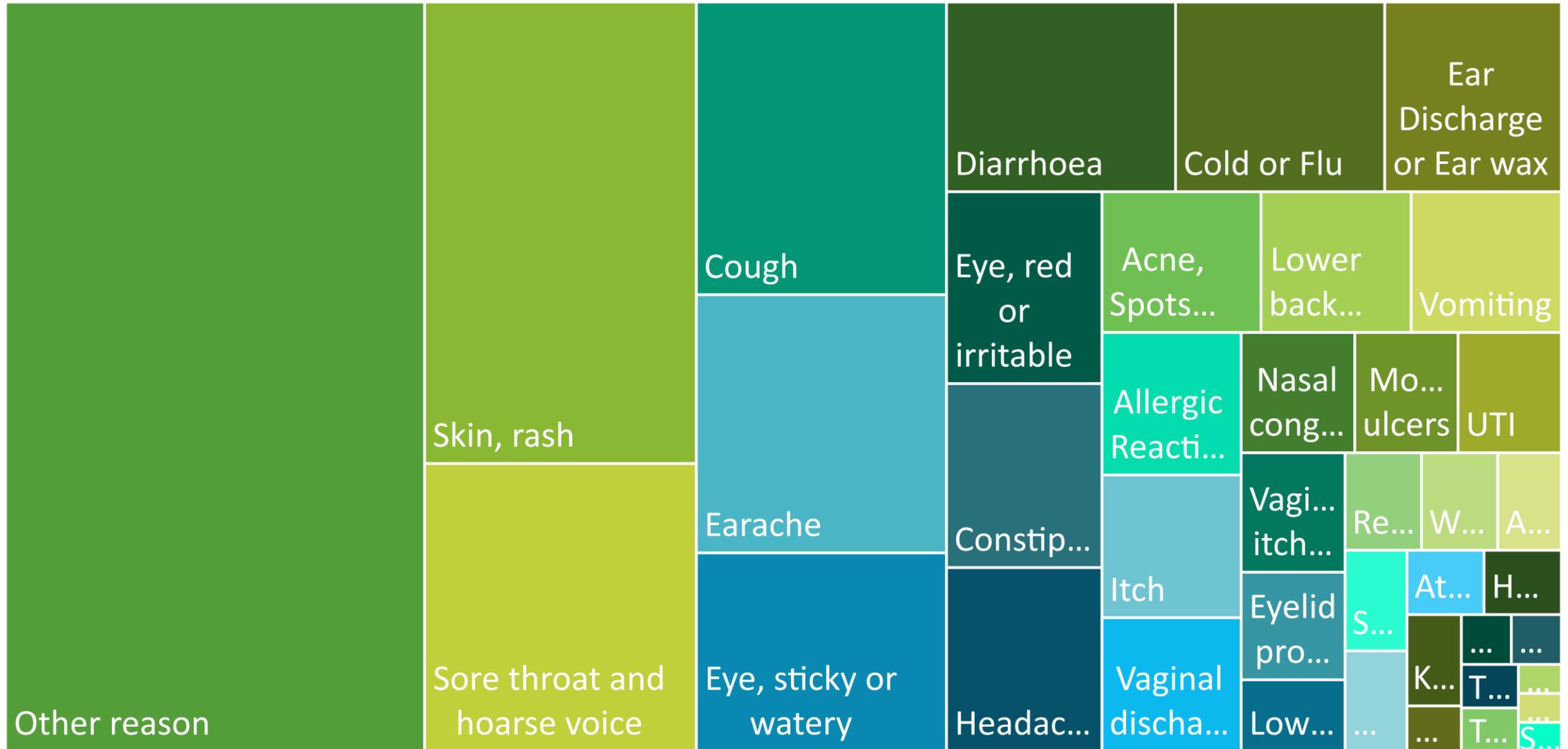
Of **74 urgent escalations**, all were a same-day appointment request to GP.

Of **8 urgent escalations**, 5 patients were referred to urgent NHS 111 clinical hub, 3 to the NHS 111 walk-in centre

# Age & gender of referred patients



# Presenting Complaint



Looking Ahead

# Activities Planned for March:

Governance	Project Management	Engagement	Deployment	Post-Deployment
<ul style="list-style-type: none"><li>• c/f EMIS SBS contract received, reviewed and signed with ways of working into 2022 agreed</li><li>• c/f Finalise PMO support and SLA arrangements for funding flow</li><li>• c/f PMO funding for CHL for Dec 21 to Mar 22 to be confirmed</li><li>• c/f Decision on bid submitted for PMO support for 22/23</li><li>• Continue to tackle localities with low engagement to MS form</li></ul>	<ul style="list-style-type: none"><li>• Review training provision &amp; delivery for 22/23</li></ul>	<ul style="list-style-type: none"><li>• c/f GM association of LMCs</li><li>• c/f Work with GP excellence team to plan a GP webinar</li></ul>	<ul style="list-style-type: none"><li>• Achieve 50% live by deadline of 31<sup>st</sup> March 2022</li></ul>	<ul style="list-style-type: none"><li>• Targeted comms to community pharmacies re service delivery</li><li>• Review of support available to community pharmacy re GP CPCS &amp; methods of delivery</li></ul>

GM Locality Deployment Leads

If you require any specific information or updates in your CCG or locality, please contact the appropriate GP CPCS lead.

Bolton: [louise@boltonlpc.org.uk](mailto:louise@boltonlpc.org.uk)

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