

<b>REPORT TO:</b>	<b>Primary Care Committee</b>	
<b>MEETING DATE:</b>	<b>17 August 2015</b>	
<b>REPORT TITLE:</b>	<b>Clinical Pharmacists in General Practice</b>	
<b>SUMMARY OF REPORT:</b>	<p>The role of clinical pharmacists is being tested following an NHS England announcement on 7 July. It is the first in a number of pilots testing innovative workforce models designed to support general practice as part of the GP Workforce 10 Point Plan (“Building the Workforce – the New Deal for General Practice”). The intention is to invest at least £15 million over the next three years to test out this new patient-facing role in which clinical pharmacists have extended responsibility over and above many current ways of working. Supported by Health Education England, The Royal College of General Practitioners, British Medical Association’s GP Committee and Royal Pharmaceutical Society, it builds on the experiences of general practices that already have clinical pharmacists in patient facing roles, in some cases as partners. The pilot will be evaluated so that success and learning is identified and reported. The pilot will be part funded for three years with an expectation that practices will continue with the role into year four and beyond. We anticipate that roughly in 250 clinical pharmacists will be involved over this period with the ambition of supporting over 1 million patients. Practices and groups of practices are invited to bid to participate in the pilot and are strongly encouraged to work together to assemble joint bids involving pharmacists across a number of sites. It is anticipated that clinical pharmacists will be in post early in 2016.</p>	
<b>REPORT RECOMMENDATIONS:</b>	To support a collaborative bid on behalf of GP practices with a 50:50 funded arrangement between the practice/cluster/federation and CCG.	
<b>FINANCIAL IMPLICATIONS:</b>	Incremental costs of up to £20k per pharmacist over 4 years (50:50) plus on-costs	
<b>REPORT CATEGORY:</b>	Formally Receipt	<b>Tick</b>
	Action the recommendations outlined in the report.	x
	Debate the content of the report	x
	Receive the report for information	
<b>AUTHOR:</b>	Dr Lisa Rogan	
	<b>Report supported &amp; approved by your Senior Lead</b>	<b>Y</b>
<b>PRESENTED BY:</b>	<b>Dr Lisa Rogan</b>	
<b>OTHER COMMITTEES/ GROUPS CONSULTED:</b>	Local Delivery Group Senior Clinicians Meeting Medicines Optimisation Steering Group	
<b>EQUALITY ANALYSIS (EA) :</b>	Has an EA been completed in respect of this report? Service to be rolled out equitably to all patients across all localities	<b>N</b>
<b>RISKS:</b>	Have any risks been identified / assessed? Long-term funding Recruitment – availability of skilled staff Time involved with mentorship and training	<b>Y</b>
<b>CONFLICT OF INTEREST:</b>	Is there a conflict of interest associated with this report?	<b>N</b>
<b>PRIVACY STATUS OF THE REPORT:</b>	Can the document be shared?	<b>Y</b>
<b>Which Strategic Objective does the report relate to</b>		<b>Tick</b>
<b>1</b>	Commission the right services for patients to be seen at the right time, in the right place, by the right professional.	x
<b>2</b>	Optimise appropriate use of resources and remove inefficiencies.	x
<b>3</b>	Improve access, quality and choice of service provision within Primary Care	x
<b>4</b>	Work with colleagues from Secondary Care and Local Authorities to develop seamless care pathways	x