

# Commissioning PhwSI services

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# POLICY LEADING TO OPPORTUNITIES FOR PhwSI

- Change in Pharmacy contract
- Broadening access to Primary Care
- Delivering 18 weeks
- Services closer to home
- PBC + new contracting arrangements SPMS, APMS etc.
- E.T.P. + repeat prescribing

# POTENTIAL ROLES FOR PhwSI

- Medicines management and best value
- Case management of patients, e.g. in nursing homes/long term care
- Monitoring of long term conditions especially supporting self-care
- First response to more minor conditions
- Early investigation and work up to diagnosis

# MOVING FROM GOOD IDEAS TO A CONTRACT

- Influence policy making
- Collaborate with commissioners
- Build a case for a service
- Negotiate and achieve a contractual arrangement

# INFLUENCE POLICY MAKING

- Ensure Pharmacy voice in National policy discussion
- Involve Pharmacy at SHA level
- Promote Pharmacy to PCTs/PBC in setting strategy
- Become involved at all levels in Our NHS, Our future

# COLLOBORATE WITH COMMISSIONERS

- Understand who makes commissioning decision
  - Practice Based Commissioners
  - PCT Commissioning Leads
  - Collaborative Commissioning Arrangements
  - Public Influence – Commissioning Petitions

# BUILD A CASE FOR A SERVICE

- Research and understand how service is currently provided and by who
- Investigate how it can be improved
- Build a strong business case
  - Demonstrate the need
  - Ensure best value
- Consider working with influential partners e.g other Primary Care providers, Independent & Voluntary sectors

# NEGOTIATE AND ACHIEVE A CONTRACTING ARRANGEMENT

**Do not underestimate how difficult and lengthy this process can be!**

- PCT/PBC lack experience in procurement
- Any willing provider policy
- Lack of clarity around standard setting
- Little understanding of pricing and tariff

# WORDS OF ENCOURAGEMENT

- Huge opportunity for Pharmacy to broaden the range of services and use clinical skills
- Massive potential for patients and the public to be much more actively involved in care