

Primary Care Cluster Community Pharmacy Lead

1. Role

1.1. The Primary Care Cluster Community Pharmacy Lead (The pharmacy lead) will play a critical role in shaping the engagement and providing leadership and representation for pharmacies within the primary care cluster. The pharmacy lead will work closely with all pharmacies in the cluster, identifying areas of concern and escalating issues (if required) through the appropriate channels, discussing service change, and communicating with pharmacies around the delivery of pharmacy services, which are aligned to national priorities and specifically those of the primary care cluster.

1.2. The key responsibilities of the pharmacy lead will include:

1.2.1. Promoting effective delivery of pharmaceutical services aligned to the priorities of each primary care cluster.

1.2.2. Supporting the development of effective cluster-wide partnerships.

1.2.3. Facilitating improvement in access to and quality of pharmaceutical services through signposting community pharmacy contractors to appropriate support mechanisms

1.2.4. Developing effective communication methods with pharmacists, pharmacy technicians and pharmacy staff within the cluster.

1.2.5. Providing professional leadership and representing all community pharmacies within the primary care cluster.

1.2.6. Ensuring the role of community pharmacy is considered and reflected in the primary care cluster's integrated medium term plan (IMTP).

1.3. These responsibilities will be met by:

1.3.1. Meeting, physically or virtually, at least quarterly with the representatives of all pharmacies within the primary care cluster;

1.3.2. Meeting regularly with other professional leads within the primary care cluster (how regularly to be determined by the cluster pharmacy lead);

1.3.3. Meeting regularly with local health board community pharmacy leads and primary care teams (how regularly to be determined by the cluster pharmacies);

1.3.4. Attending meetings of the primary care cluster; and

1.3.5. Providing feedback on primary care cluster plans, meetings and priorities to all pharmacies in the primary care cluster

2. Person specification

2.1. The pharmacy lead will be pharmacist or pharmacy technician working regularly¹ in a pharmacy or pharmacies within the cluster and with knowledge of the local area and people working within it.

¹ Regularly means normally working at a pharmacy or pharmacies located within the cluster on two or more days each week for the period during which they are the pharmacy lead

Appointment of the pharmacy lead

3.1. Initial appointments

3.1.1. Individuals interested in the role of pharmacy lead must notify the relevant health board by 31 January 2021, providing evidence that their nomination is supported by at least two other pharmacies in the relevant cluster.

3.1.2. Where only one individual expresses an interest in the role of pharmacy lead they will be appointed subject to meeting the criteria set out in 2.1 and 3.1.1.

3.1.3. Where more than one individual expresses an interest in the role of pharmacy lead, it will be for the pharmacies in the cluster to determine who is appointed. In an instance where the pharmacies are unable to determine who is appointed, e.g. equal vote share, the cluster lead and health board may seek to appoint one of the relevant nominees after consulting with Community Pharmacy Wales (for example by discussing it at a health board/Community Pharmacy Wales forum) and ensuring a relevant governance process is followed.

3.2. Subsequent appointments

3.2.1. Where an individual ceases to be the pharmacy lead for a cluster (e.g. because they no longer meet the requirements in 2.1, they wish to stand down, or the pharmacies in the relevant cluster no longer agree the individual is the pharmacy lead) the relevant health board, having informed Community Pharmacy Wales of its intention to do so, will invite expressions of interest from other individuals in that cluster and allow a reasonable period for any expressions of interest to be returned.

3.2.2. At the end of the period in 3.2.1. the pharmacy lead will be appointed in accordance with 3.1.1, 3.1.2. and 3.1.3.

3.3. Failure to appoint

3.3.1. In circumstances in which no one expresses an interest in the role of pharmacy lead or meets the criteria for appointment, the health board may, after consulting with Community Pharmacy Wales, seek to appoint an individual working at a community pharmacy within the relevant cluster.

3.4. Annual Review

3.4.1. After 1 April of any year and before the 5 July of the same year, the health board will confirm with other pharmacies in the cluster that they wish the current pharmacy lead to remain in post.

3.4.2. In accordance with 3.4.1 where in the event the majority of pharmacies do not wish the current pharmacy lead to remain in post, a new pharmacy lead shall be appointed in accordance with 3.2.

Funding

4.1. For the period October 2020 to January 2021, a payment will be payable to any pharmacy from which one or more pharmacists or pharmacy technicians attends a meeting arranged by CPW and the relevant Health Board in order to engage in the process, with the relevant payment being made to each participating pharmacy.

4.2. The payment under 4.1 shall be calculated as £128,000/the number of individuals meeting the criteria under 4.1 up to a maximum of £250 per pharmacy.

4.3. From April 2021, where the health board confirms to the NHS Wales Shared Services Partnership by the 5th of the month immediately at the start of each quarter (April, July, October and January) following the end of each quarter (ending June, September, December and March respectively), the details of the pharmacy in which the pharmacy lead usually works, a payment of £500 will be made to the pharmacy.²

4.4. Where no one is appointed as the pharmacy lead for a cluster either by the pharmacies, in accordance with 3.1.2 and 3.1.3., or the health board in accordance with 3.3.1., funding for the role in the period in which the pharmacy lead was not in place will be payable to pharmacies on the basis of their engagement in the collaborative working scheme.

5. Relationship with the collaborative working scheme

5.1. From April 2021, the collaborative working scheme will be amended to facilitate greater engagement between community pharmacies and the relevant primary care cluster.

5.2. The attendance and primary care cluster meeting element (£500 per pharmacy) and two of the remaining four collaborative working payments (value £500 per pharmacy). Will be replaced by a new requirement that the pharmacy attends at least three meetings (in person or by video meeting) arranged for all pharmacies in the relevant cluster (£1000).

² The payment will be made to one pharmacy only, as nominated by the pharmacy lead