Retail services provide the evidence base for pharmacy NHS services

Lloydspharmacy has shown that pharmacies can to offer credible, effective clinical care and all-important capacity gains in delivering NHS Health Checks. Ailsa Colquhoun spoke to the company’s senior healthcare development manager

Where community pharmacies are involved in delivering the NHS Health Check, Lloyds pharmacies are involved, and it is the view of Shafeeqe Mohammed, Lloydspharmacy’s senior healthcare development manager, that this is due, in no small part, to the organisation’s track record with its retail cardiovascular disease (CVD) risk check service.

He says: “It put us in a strong position. We could give primary care trusts the evidence and the confidence that pharmacies can deliver, particularly when dealing with hard-to-reach groups.”

Retail experience

Three years on from the launch of the retail service — work which also won Lloydspharmacy a Pharmaceutical Care Award in 2007 — 250 Lloyds pharmacies are still delivering the £15 service to patients who are unable to use the NHS service.

In total some 600 staff have been trained to deliver tests for total cholesterol, high density lipoprotein cholesterol and blood pressure, to ask patients about their family history of CVD, medical history and lifestyle, and to provide relevant lifestyle advice.

To date, the evidence points to the service providing a vital role in preventive care. From an initial sample of 1,613 service users, almost 43 per cent were referred to a GP.

Most commonly, pharmacies referred patients to a GP because of an elevated blood pressure (15.9 per cent), elevated total cholesterol (4.9 per cent). Thereafter, the main referral causes were elevated blood pressure (15.9 per cent). Some 600 staff have been trained to deliver tests for total cholesterol, high density lipoprotein cholesterol and blood pressure, to ask patients about their family history of CVD, medical history and lifestyle, and to provide relevant lifestyle advice.

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Evidence base

But, as well as saving lives and money for the NHS, the retail service has also provided Lloydspharmacy with a vital evidence base to support the concept of an NHS commissioned pharmacy service. Mr Mohammed believes that the experience of the past three years has been invaluable in securing the involvement of Lloyds pharmacies, as well as the profession of pharmacy more generally, in the current NHS Health Check service. Since rolling out its retail service, Lloydspharmacy has been actively promoting the concept to NHS commissioners to get pharmacy on the NHS Health Check agenda, including debating the role of alternative providers in cardiovascular screening at recent Primary Care Cardiovascular Society interactive workshops.

Lloydspharmacy representatives have also made presentations to top-level NHS commissioners and their representatives, explaining how pharmacies can help local health communities plan to meet the challenge of improving health and targeting those most in need.

Mr Mohammed thinks that the greatest benefit of using pharmacies lies in improving service capacity. He says: “Seventy per cent of GP practices across the three PCTs in Birmingham have said that they didn’t have the capacity and that they would prefer an alternative provider to carry out those checks, as long as the results came back to be uploaded on the GP practice record.”

For the business of Lloydspharmacy, part of the return on its time and cost investment in cardiovascular health has been involvement in three commissioned projects in this area, and a named citation for this work in the 2008 pharmacy White Paper. These projects have involved Lloydspharmacies in offering:

- Heart “MOTs” offered opportunistically to people over 40 years old (49 per cent subsequently referred to their GP)
- Systematic cardiovascular checks for men over 40 years of age using near patient testing in a community outreach programme (10,000 men screened, of which 65 per cent were referred)
- An opportunistic/systematic screening project in Manchester for people aged over 40 years (over 1,500 patients were screened by Lloyds pharmacies in three months)

Mr Mohammed says that these projects have provided invaluable learning, namely that:

- There is a need to include outreach services when targeting hard-to-reach groups
- Services need to be appropriately marketed to the target population group
- Different models will suit different PCTs so it is important for pharmacies to remain flexible
- It is hugely important for PCTs to see evaluation data and patient outcome information
- Efficiency is driven by consultation and engagement with stakeholders.

He says that pharmacies have the ability to offer credible, effective clinical care, and all-important capacity gains. “We know that patients are more likely to come to pharmacies than GP practices. And we have data that shows that the most deprived and hard to reach populations will come into pharmacies. It can work as long as everyone is willing to make it work.”