



The Consumer Healthcare Association



Supporting the implementation of the Government's delivery plan for recovering primary care

Introduction

In May 2023, the Government published a [delivery plan for recovering access to primary care](#) (hereon referred to as the Primary Care Recovery Plan (PCRP)). The plan has been framed as a first step to address access challenges ahead of longer-term reforms to better integrate primary care, as set out in the 2022 [Fuller stocktake report](#).

As members of the Self-care Strategy Group (SCSG) – comprised of representatives from medical royal colleges, professional organisations and trade associations representing clinicians, commissioners, suppliers, pharmacies and manufacturers of self-care medicines, medical devices and food supplements – we welcome the PCRP which has incorporated a number of recommendations from the [Blueprint for a Self-Care Strategy](#), which we published in October 2021.

We are committed to supporting the successful implementation of the PCRP and are keen to work with all relevant parties on the elements within the plan that pertain to self-care, namely:

- Faster navigation, assessment and response
- Expanding community pharmacy services
- Implementing 'Modern General Practice Access', making it easier for patients to contact their GP practice and for practice staff to manage demand
- Communicating with the public

Drawing on best-practice examples of self-care from across the country, this document sets out three essential tests to consider and our recommendations on how to implement the self-care commitments in the PCRP within these four areas of focus. We hope it is a constructive next step in creating policies that encourage self-care for self-treatable conditions.

Three tests for all policies on self-care

Self-care comprises the actions that individuals take for themselves, on behalf of and with others to develop, protect, maintain and improve their health, wellbeing or wellness.

The benefits of self-care are wide-reaching and interlinked:

- [Self-care reduces demand on the NHS](#): it plays an important role in reducing the estimated 25 million GP appointments and 5 million A&E visits used each year for self-treatable illnesses,¹ freeing up healthcare professionals' time to dedicate towards people who are in more need of their help

¹ Frontier Economics. [The economic impact of over-the-counter products in the UK: Report for PAGB, the consumer healthcare association](#). 12 July 2023. p6. Last accessed August 2023.

- **Self-care reduces health inequalities:** where there are wider social determinants impacting on an individual's health, there is a greater need to empower them to know how to take care of themselves, as well as how, where and when to seek advice
- **Self-care empowers people:** it allows people to take ownership of their health by recognising the symptoms of self-treatable conditions and how to act on them to stay well when experiencing minor illnesses

As such, all policies taken forward as part of efforts to implement the PCRCP should consider the three tests:

Three tests for policies on self-care

1. Does it improve patient access and patient outcomes to primary care?
2. Does it lessen health inequalities in the system?
3. Does it empower patients?

Recommendations on PCRCP commitments

Faster navigation, assessment and responses

As part of the PCRCP, the Government has committed to invest in a new National Care Navigation Training programme for up to 6,500 staff, rolling this out from May 2023. This will provide staff with the skills needed to effectively direct patients to the most appropriate care setting, including to self-care.

Aligned with our call to include self-care modules in healthcare professionals' training curricula and continuing professional development, this will be an essential step to encouraging greater self-care for self-treatable conditions. A 2018 survey undertaken by the Royal College of General Practitioners (RCGP) showed that there is still more that healthcare professionals can do to enable their patients to self-care; just 42% of practices surveyed supported their patients to self-care, despite 67% of GPs believing that supporting more patients to self-care would help reduce their workload.

In rolling out this training programme, we would encourage the Government to consider:

- **Expanding the scope of the programme to include all providers of healthcare in the programme** – including community pharmacy teams, wider general practice team, dentists and optometrists – to ensure 'every contact counts' and drive people towards the most appropriate care setting, including to self-care where appropriate
- **Aligning this programme of work with the current ambition of Integrated Care Boards (ICBs)** to deliver care in the right place and right time
- **Being ambitious in this work, not only looking to map out the current pathways, but aiming to improve it.** We would encourage policymakers to develop a national, standardised pathway which enables community pharmacists to refer people directly to other healthcare professionals and that they understand when and

how to do this, and that the patient is aware of the reasons behind this to ensure open lines of communication

To measure the success of this programme, we would suggest developing an annual survey to capture professionals' attitudes towards self-care and knowledge about the most appropriate care settings, to track improvements and highlight areas for further work in the years to come. Existing research studies on healthcare professionals' attitudes to self-care, including those produced by the Self Care Forum (SCF), could be utilised as a baseline for further research in this area. A recent study conducted by the SCF found that before the COVID-19 pandemic, barely more than half of the professionals surveyed saw self-care as fundamentally important to the individuals they served, but this changed to 86% as a result of the pandemic.²

Expanding community pharmacy services

In committing to expand community pharmacy services, the Government's PCRPP noted it would launch Pharmacy First by the end of 2023, allowing community pharmacies to supply prescription only medicines (POM) for seven common conditions, and services for oral contraception and blood pressure.

Additionally, the Medicines and Healthcare products Regulatory Agency (MHRA), Department for Health and Social Care (DHSC), and NHS England (NHSE) will work together with stakeholders in the sector to identify medicines which could be reclassified.

NHSE will also work with community pharmacy suppliers and general practice IT suppliers to develop and deliver interoperable digital solutions, supporting community pharmacies including Distance Selling Pharmacies (DSPs) to update patient records more rapidly by improving IT connectivity with other parts of the NHS.

These are all welcome steps that will further encourage and support self-care for self-treatable conditions.

In taking them forward, considerations should be given to the following:

- How will these policies affect rural communities and individuals without easy access to community pharmacies.³
- As the role of pharmacists grows, the relationship between GPs and pharmacists will become increasingly important and should be supported by a defined lead at the PCN level which could be a pharmacy PCN lead subject to funding being made available to support this role
- In considering medicines for reclassification, in addition to looking at international examples, thought should be given to new opportunities to reclassify medicines from prescription only medicines to pharmacy and pharmacy to general sale, as a result of new technologies and the expanded role of pharmacists and the growing role and competence of technicians
- How digital tools which are currently used in primary and secondary care, could be integrated into pharmacies as a conduit for trusted information

² Smith, P.S et al. [How has COVID-19 changed healthcare professionals' attitudes to self-care? A mixed methods research study](#). 24 July 2023. Last accessed August 2023.

³ In some rural communities there is no community pharmacy so they are served by GP practices which are permitted to dispense medications to their patients.

- Recent digital developments, announced in the PCRP, offer new opportunities for data sharing. Current practice should be reviewed in line with the new opportunities available, with best practice shared to enhance patient care

Implementing 'Modern General Practice Access'

As part of this area of focus, the Government has committed to retarget over £240 million of funding in 2023/24 for new technologies and support offers for primary care networks (PCNs) and practices that help them plan and implement Modern General Practice Access, including online tools, digital telephony, care navigation training and transformation support.

Better support for PCNs to deliver self-care will be central to any efforts to truly embed self-care, and as such we welcome this commitment.

In considering its implementation we would encourage the Government to consider the following:

- PCNs need to be supported with fully funded community pharmacy leads (as they previously have been for flu vaccinations) to integrate and ensure continuity of services at the interface between GP and pharmacy care. A survey by Community Pharmacy England in 2021 of PCN leads demonstrated the appetite for continued collaborative working by PCNs with 74% stating that were in favour⁴. GP and pharmacy contracts as well as the PCN Network Contract Directed Enhanced Service (DES) should be leveraged to incentivise this consistently across the country
- As part of efforts to increase the use of technology, particular attention needs to be given to ensure digital exclusion is avoided
- Primary care services within a PCN must be incentivised to collaborate rather than compete. Retargeted funding can and should help with this objective

More information on the opportunities for supporting self-care through online tools and digital technology can be found in PAGB's recently published [Digital Audit](#).

Communicating with the public

The PCRP is underpinned by a national campaign to increase public understanding of the changes to primary care services, the benefits they bring, and how and what services they can access. This includes increasing understanding of digital access, wider practice team roles and when, why and how to access self-care advice, community pharmacy, GP, NHS 111, 111 online and A&E.

In developing this campaign, the Government should look to ensure the information is:

- Easily understood – taking into account often variable levels of health literacy and aligning to the PIF TICK criteria
- Aligned with the Care Navigation Training programme noted above, to ensure a joined-up approach
- A reiteration of a core message that 'self-care is not no-care'

⁴ Community Pharmacy England, [Community pharmacy PCN Lead survey results](#), 2021

- Escalated and phased in over time so that healthcare providers and patients can adapt to new approaches to accessing care

To this last point, it is noteworthy that a survey commissioned by PAGB in 2022 on attitudes towards self-care revealed:

- 64% of people who might not have considered self-care as their first option before the pandemic said they were more likely to do so in the future – down from 69% in 2020
- 47% agreed or strongly agreed that they were less likely to contact their GP as a first option – down from 51% in 2020
- 32% agreed or strongly agreed that they were more likely to ask a pharmacist for advice as their first option

Conclusion

To successfully implement the commitments set out in the PCRCP, it is critical that at each turn, the system tracks success to ensure services are working for all.

By reviewing all policies against the three tests noted above and keeping in mind the suggested recommendations under each commitment, we are confident that in taking forward the PRCP the Government will be able to ensure:

- People are provided with the information they need, trust and understand to feel empowered to navigate the health system, including to self-care
- HCPs are empowered to support people to navigate the healthcare system and promote self-care and/or referral to pharmacy where appropriate
- Community pharmacy is supported to deliver enhanced services
- Reduced pressures on GP and A&E, as a result of smarter ways of working, for conditions which could be self-treated or managed with support outside of these settings
- A reduction in health disparities

We are committed to playing our part, both individually and collectively, to support this work and encourage self-care for self-treatable conditions. The organisations that co-badged this document look forward to working with the Government and associated stakeholders to help bring about the change needed.

Further information

This guide has been co-developed by:

- Company Chemists' Association
- Community Pharmacy England
- Dispensing Doctors' Association
- National Association of Primary Care
- National Pharmacy Association
- PAGB
- Patient Information Forum
- Royal Pharmaceutical Society
- Self Care Forum