



South West London

Implementing the NHS Pharmacy Contraception Service & Hypertension Case-Finding Service- with Accumail Referral Demo

26/03/2026

12-12.30pm



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Welcome and Introduction

Welcome to the South West London Training Hub Webinar Supporting the effective implementation of two key NHS services:

- NHS Pharmacy Contraception Service (PCS)
 - NHS Community Pharmacy Hypertension Case-Finding Service (HCFS) From April 2026.
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- SWL will transition from the current EMIS Local Services referral buttons to the Accurx Accumail referral pathway for PCS and HCFS.
 - The Pharmacy First referral button will remain available in EMIS as part of the core contract.
 - Learning outcome: Equip teams with the knowledge and confidence to ensure seamless continuity of PCS and HCFS referrals.
 - Webinar will be Recorded

Why This Matters

This transition provides SWL with an opportunity to:

- Strengthen GP–pharmacy collaboration
- Maintain safe, smooth pathways for PCS & HCFS
- Reduce GP workload through structured, digital-first processes
- Improve consistency and reliability across referral systems
- Enhance patient access and outcomes

Today's session will cover:

- Key points of PCS and HCFS Service
- Key actions for GP Practices
- How GP practices can refer using Accurx Accumail
- Collaboration with community Pharmacies
- Q&A
- [SWL GP implementation toolkits for PCS and HCFS](#)



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Pharmacy Contraception Service (PCS)

Anita Ncube

PCS Service Aims & Objectives

Full details can be found in the [NHSE Service Specification](#).

Aims:

- Provide people with a greater choice on where they can access and continue contraception services.
- Provide extra capacity in primary care and sexual health clinics, allow them to meet the demand for more complex assessment.

Objectives:

- Demonstrate the model where community pharmacy teams initiate and continue the provision of OC supplies initiated in primary care or sexual health clinicals.
 - Both will be undertaken under PGD.
- National model to provide free oral EC to individuals of childbearing potential to reduce the risk of pregnancy after unprotected sexual intercourse (UPSI) or where regular contraception has been compromised or used incorrectly.
- Establish an integrated pathway between existing services and community pharmacy.

Inclusion & Exclusion Criteria

Inclusion Criteria

- People of childbearing potential seeking a supply of oral EC following unprotected sexual intercourse or where regular contraception has been compromised or used incorrectly, or
- People wanting to start an OC, or seeking to obtain a further supplies their current OC for **contraceptive** purposes:
 - Combined Oral Contraceptive (COC) - from menarche up to and including 49 years of age
 - Progestogen Only Pill (POP) - from menarche up to and including 54 years (for norethisterone, levonorgestrel and desogestrel) or up to and including 49 years (for drospirenone only)

Exclusion Criteria

- People considered clinically unsuitable, or are excluded for supply of oral EC or OC according to the PGD, including, but not limited to:
 - individuals under 16 years of age and assessed as not competent using [Fraser Guidelines](#)
 - individuals 16 years of age and over and assessed as lacking capacity to consent
- All advance supplies of oral EC.

Pharmacy Contraception Service: What GPs and Sexual health clinics need to know



The Pharmacy Contraception Service can help reduce pressure on GP practices and sexual health clinics



The service offers **greater choice from where people can access contraception services** and can **create additional capacity** in primary care and sexual health clinics.



Helping to support meeting the demand for more complex assessments.



Pharmacists and pharmacy technicians can **independently initiate and can continue provision of oral contraceptives** initiated in primary care (including general practice and pharmacies) or sexual health clinics.



From 29th October 2025, they can also provide oral emergency contraception as part of the service.

As **pharmacies are highly accessible**, pharmacists and pharmacy technicians providing the service can **help address health inequalities** by providing wider healthcare access in their communities.



They can also signpost service users to local sexual health services.

People can access the service by:

- Being **identified as clinically suitable by the community pharmacist or pharmacy technician** and accepting the offer of the service
- **Self-referring** to a community pharmacy
- Being **signposted by their general practice**
- Being **signposted by a sexual health clinic (or equivalent)**
- Being **signposted by other NHS service provider, e.g. urgent treatment centres or NHS 111**



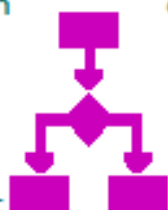
Consultations can only be provided **directly with the person accessing the service**, and for whom the medication is for.

Where the person consents, any oral contraception or emergency contraception supplied is **recorded in the patient's GP record** via GP Connect Update Record.

This provides visibility of both the consultation and the supply to other healthcare professionals.



Supplies are authorised via **patient group directions** with appropriate checks, such as the measurement of the person's blood pressure and body mass index, being undertaken, where necessary.



Eligible individuals seeking supplies of contraception can be considered for:

- **Emergency contraception** – an individual of childbearing age
- **Combined Oral Contraceptive** – from menarche up to and including 49 years of age
- **Progestogen Only Pill** – from menarche up to and including 54 years of age (49 for Drospirenone)



Supplies on initiation will **not exceed 3 months**

Ongoing supplies will be for a **minimum of 6 months** but up to **12 months** can be supplied.

If a supply is not clinically appropriate, the individual will be referred to their GP practice or sexual health clinic.

Please signpost suitable individuals to the Pharmacy Contraception Service at their chosen community pharmacy – For more information, visit cpe.org.uk/PCS

Hypertension Case Finding Service (HCFS)

Mihir Shah



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HCFS: Service & Aims

The [Hypertension Case Finding Service \(HCFS\)](#) is designed to support earlier identification of hypertension, expand access to convenient blood pressure (BP) monitoring, and strengthen collaborative working between general practice and community pharmacy teams.

Aims:

- Enable timely BP checks and ABPM in community pharmacies to identify at-risk patients sooner.
- Widen access to healthcare services.
- Pharmacies record checks, fit ABPM, and share results digitally with the GP practice, supporting QoF and freeing GP capacity.
- Streamlined, collaborative care that strengthens primary care integration and prevents CVD through early follow-up.

Inclusion Criteria

Patients referred directly from the GP:

- Adults of any age, with or without a prior diagnosis of hypertension, for clinic and/or ambulatory blood pressure monitoring.

Opportunistic and patient walk-in:

- Adults aged 40 years and over who do not have a current diagnosis of hypertension.
- Adults aged 35–39 years if they are considered at increased risk of developing hypertension, at the discretion of the pharmacy team.
- Patients, by exception, under the age of 40 who request the service because they have a recognised family history of hypertension may be provided the service at the discretion of pharmacy staff.

Exclusion Criteria

- People under the age of 40 years old, unless at the discretion of the pharmacy staff or unless they have been specified by a general practice for the measurement of blood pressure.
- People who have their blood pressure regularly monitored by a healthcare professional.
- People who require daily blood pressure monitoring for any period of time, e.g. 7-day clinic BP checks as an alternative to ABPM.
- People with a diagnosis of atrial fibrillation or history of irregular heartbeat.

Collaboration and Patient Communication- PCS & HCFS

Collaborative Working with Community Pharmacies

- Establish clear, consistent pathways with local community pharmacies, including expectations around communication, referrals, and follow-up.
- Identify local pharmacies providing relevant NHS pharmacy clinical services (e.g., blood pressure checks, contraception supply).
- Agree appropriate referral routes, digital referral mechanisms or structured signposting processes.

Patient Communication & Engagement

- Promote pharmacy-provided services using approved national and local resources (e.g., [Community Pharmacy England materials](#), [SWL communication assets](#), [DHSC toolkits](#)).
- Use practice waiting rooms, digital screens, newsletters, SMS messaging, social media, and translated patient videos to improve awareness and uptake.
- Update practice website and digital triage tools so they signpost patients appropriately to participating pharmacies.
- Add short telephone prompts encouraging eligible patients to use free NHS pharmacy services.

Identifying people and communication with community pharmacy



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PCS & HCFS

Identifying patients:

- Run targeted searches within your GP clinical system to identify patients eligible for the services.
- To signpost, send a text-message to patients. Templates and patient information links will be available in due course on GP TeamNet.

Referring into community pharmacy :

- **Check patients preferred pharmacy for referral.**
- **Enable templates and workflows** within your GP clinical system and other digital systems within your practice.
- **Send referrals via Accumail** which enables GP practices to send referrals securely through NHS.net compliant channels. Build templates or use pre-existing templates (for HCFS). Accumail pharmacy directory is being updated.
- **Ensure referrals include the following:** Patient name, DOB, NHS number, contact details and if BP check or ABPM is required for HCFS. For PCS note if its for initiation, continuation or for Emergency Contraception
- NHS mail can also be used to send referrals.
- Community pharmacies email addresses are available from [NHS Service Finder](#).
- Pharmacies providing the service is also available from '[Find Pharmacy Services](#)'

Receiving community pharmacy consultations

- **Ensure GP Connect Messaging is switched on** (EMIS Web practices). This is required to receive structured post consultation data into GP IT.
- **Monitor EMIS Workflow Manager queues and NHSmail inbox** for pharmacy-submitted consultation outcomes.
- **Ensure appropriate follow-up** for patients who have completed a consultation at the community pharmacy for either service as per the following NICE resource:
 - NICE Quality Standard [QS129](#)
 - NICE Guidance [NG136](#)
 - [SWL Hypertension Pathway](#)



Megan Williams
Customer Success Lead

Accumail



Overview of Accumail

- in your toolbar



What is Accumail?

Accumail makes it easy to contact any healthcare professional about a patient, straight from your Accurx toolbar – for secure clinical conversations that let you save into, and attach from, the patient record.

Where can I find Accumail?



Select the @ symbol on the Accurx toolbar to view your messages, find contact details for another healthcare professional or service, and start a quick conversation about your patient.

How do I access my Accumail inbox?



You can access your inbox directly through your toolbar. Notifications will display when there are any replies from a healthcare professional to you or your practice.



What is Accumail?

Accumail simplifies your practice's daily communication with other care settings.

No need to jump between email inboxes, patient records and NHS directories — Accumail gathers all your clinical conversations in one place with a clearer overview that your whole team can keep track of.

The screenshot displays the Accumail interface. On the left, there is a sidebar with navigation options: 'Assigned to you', 'Unassigned', and 'All'. The main area shows a list of messages under the 'Unassigned' tab, with columns for 'Open', 'Done', and 'Sent'. Two messages are listed: one from 'ADAMS, Julie (Miss)' and another from 'DUTTON, Emma (Mrs)'. Below the list, there are filter options for 'Filter messages' (Unread, Current EMIS patient: ADAMS, Julie) and a 'New message' button.

The right pane shows the details for a patient, 'ADAMS, Julie (Miss)', including NHS number, DOB, and gender. Below this, there is a 'Welcome to Accumail!' message with a 'Book onboarding call' button. At the bottom, there is a section titled 'What would you like to do?' with several options: 'Email referral document', 'Chase an existing referral', 'Email local pharmacy', 'Email patient record summary', and 'Something else'.

Key benefits of Accumail

Simple and secure



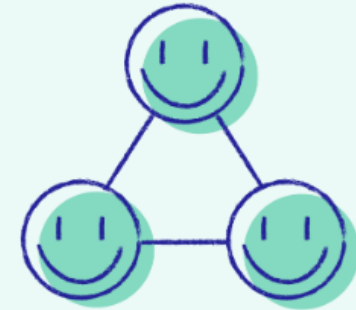
Share patient information and save messages to the record in one click, **eliminating system-hopping and duplication.**

Take control of inbound



Reduce the volume of in-trays, voice mails and paper trails with a single shared inbox **exclusively for clinical conversations.**

Quick conversations



Search for reliable NHS contact details & **send quick messages across care settings.**

Demo

- Where to find Accumail
- How to message outbound (free text, templates & quick links)
- Directory
- Inbound from pharmacies
- Settings & Support





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Community Pharmacy Role

David Tambay-Rajah
SWL LPC

Accumail – what this means for Community Pharmacy

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 Actively monitor NHSmail shared mailbox- suggested

- Minimum: every 30–60 minutes during opening hours
- Named staff responsible per shift

B. Workforce & Skill Mix

- Ensure trained pharmacists + support staff understand:
- Service specs (Pharmacy First, PCS, HTN)
- Clinical thresholds & exclusions
- Train counter staff to:
- Recognise referred patients
- Prioritise them appropriately

-  Patient Experience Focus

Clear messaging:-“Your GP has referred you to the pharmacy today”

Community Pharmacy Offer:

- Walk-in or booked slots
- Avoid asking patient to “come back later unnecessarily”

-  Same-day triage & response

- Contact patient within 2–4 hours
- Book consultation or confirm walk-in

What can GPs and Community Pharmacists do together



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Agree a “Single Neighbourhood Model”

- PCN + Community Pharmacy collaboration
- Share service issues for improvements
- Agreed referral pathways

- Develop one-page referral guide for GP reception teams
 - Standardised Referral Criteria (Critical)
 - Co-produce Simple inclusion/exclusion checklists
- Embed into:
 - GP systems (Accumail templates)

- Closed-Loop Communication

Pharmacy must send structured outcome back:

- Seen & treated
- Advice only
- Referred back/escalation (with reason)

GP must:

- Trust pharmacy clinical decisions
- Avoid duplication unless clinically necessary

Joint Clinical Governance

- Regular GP–pharmacy liaison meetings
- Review:
 - Referral rejection rates
 - Safety incidents
 - Patient feedback

Conclusion

- Accumail is a great opportunity to increase HCFS and PCS referrals to community pharmacy .
- AccuMail enables scale, but needs discipline and shared learning.
- Eligibility alignment is the biggest success factor
- Closed-loop communication is key to success
- Pharmacy can offer same-day clinical assessment



PCS + HCFS Resources

Service Specifications & Clinical Guidance	NHS Pharmacy Contraception Service (PCS)	https://www.england.nhs.uk/primary-care/pharmacy/pharmacy-services/nhs-pharmacy-contraception-service/
	PCS Service Specification	https://www.england.nhs.uk/publication/nhs-pharmacy-contraception-service/
	NHS Hypertension Case Finding Service (HCFS) – Service Specification	https://www.england.nhs.uk/publication/advanced-service-specification-nhs-community-pharmacy-hypertension-case-finding-advanced-service/
	NICE NG136 – BP/BMI & Hypertension Guidance	https://www.nice.org.uk/guidance/ng136
	NICE QS129 – Contraception Quality Standard	https://www.nice.org.uk/guidance/qs129
Patient Communication & Engagement	SWL Hypertension Pathway	https://swlimo.southwestlondon.icb.nhs.uk/clinical-guidance/cardiovascular/hypertension/
	Community Pharmacy England – PCS Public Resources	https://cpe.org.uk/national-pharmacy-services/advanced-services/pharmacy-contraception-service/
	Community Pharmacy England – Hypertension Resources	https://cpe.org.uk/national-pharmacy-services/advanced-services/patient-facing-website-to-promote-nhs-pharmacy-clinical-services/
	Community Pharmacy England – Hypertension PIL & Service Info	https://cpe.org.uk/national-pharmacy-services/advanced-services/hypertension-case-finding-service/
	SWL Pharmacy Engagement Materials (PCS & HCFS) incl. multilingual videos	https://drive.google.com/drive/folders/1s9qh9klfaLesV17_Ep7LNRwrDLxt6dtko
Pharmacy Service Finder Links	DHSC: Blood Pressure Check – All Partner Toolkit	https://campaignresources.dhsc.gov.uk/campaigns/help-us-help-you-heart-attack-and-stroke/hypertension-high-blood-pressure/blood-pressure-check-all-partner-toolkit/
	NHS Pharmacy Finder – Find Pharmacy Services	https://www.nhs.uk/service-search/pharmacy/
	NHS Service Finder (for pharmacy NHSmail details)	https://digital.nhs.uk/services/nhs-service-finder
Referral Tools & Templates	AccuMail – Create Accumail Template	https://support accurx.com/en/articles/8239413-accumail-creating-accumail-templates
	AccuMail – Communicating with colleagues	https://support accurx.com/en/collections/2275382-accumail-communicating-with-colleagues
	AccuMail – How to send email with Accumail	https://support accurx.com/en/articles/3924513-accumail-how-to-send-emails-with-accumail
	AccuMail – BP & ABPM Referral Guidance	https://app.arcade.software/share/wZnrpPEoanSRhy5h631C
Practice Website, Triage, Pathways wording	Suggested PCS Website Wording (NHS)	https://www.nhs.uk/nhs-services/pharmacies/find-a-pharmacy-offering-contraceptive-pill-without-prescription/
	Suggested HCFS Website Wording (NHS)	https://www.nhs.uk/nhs-services/pharmacies/find-a-pharmacy-that-offers-free-blood-pressure-checks/
6) EMIS Digital Configuration & Workflow	EMIS – Enable GP Connect Messaging (PCS + HCFS)	https://www.emisnow.com/csm?id=kb_article_view&sys_kb_id=02fea016835c5e54563d5a50ceaad348
	EMIS Workflow Manager Guide	https://www.emisnow.com/csm?id=kb_article_view&sysparm_article=KB0063875
SWL MO GP Toolkits, slides and webinar recording are be available on GP Teamnet:		https://teamnet.clarity.co.uk/qwe-36l/Topics/View/Details/85aa0275-4e3a-4063-9347-b169009247a0

Questions

SWL ICB MO Team:

If you have any questions, please contact your Place based team in the first instance:

- Croydon Place Team: Croydon.Medicines@swlondon.nhs.uk
- Kingston & Richmond Place Team: KR.medicines@swlondon.nhs.uk
- Merton & Wandsworth Place Team: MW.medicines@swlondon.nhs.uk
- Sutton Place Team: Sutton.Medicines@swlondon.nhs.uk

AccuRx: support@accurx.com

SWL LPC:

Contact page: <https://swl.communitypharmacy.org.uk/about-us-2/contact-us/>

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