

Introduction to the Pharmacy First Service

NHS England launched the Pharmacy First service on 31st January 2024. Under this service, community pharmacies across England will be able to provide a wider range of clinical treatments to the public. The introduction of this service is designed to help ease pressure on GP surgeries and improve patient access to care, as part of the Department of Health and Social Care’s [Primary Care Access Recovery Plan](#). The full NHS [Pharmacy First service specification](#) is made up of the following three elements:

NHS referrals for minor illnesses

- This allows patients with minor illnesses to be **referred from general practice**, UEC or NHS 111 settings to a community pharmacy for a consultation with a community pharmacist. The pharmacist will assess the patient, offer advice, recommend treatments to purchase over the counter, or refer to another setting or service if needed.

Clinical pathways

- This element of the service enables the management of seven common conditions by community pharmacists through offering self-care and safety-netting advice, and, only if appropriate, supplying certain NHS-funded prescription-only medicines under Patient Group Directions (PGD’s).
- Patients can walk in or be **referred from general practice**, UEC or NHS 111 settings to a community pharmacy for a consultation with a community pharmacist.
- **The seven common conditions include:**
 - **sinusitis** (for those aged 12 years and over)
 - **sore throats** (for those aged 5 years and over)
 - **earaches** (for those aged between 1 and 17 years old)
 - **infected insect bites** (for those aged 1 year and over)
 - **impetigo** (for those aged 1 year and over)
 - **shingles** (for those aged over 18 years old)
 - **uncomplicated urinary tract infection in women** (for women aged 16-64)

Urgent repeat medicines supply

- This allows UEC and NHS 111 settings to refer patients to community pharmacy for a supply of an urgent repeat medicine. **Note- General practices are not able to refer into this element of Pharmacy First.**

What are the benefits for the Practice and its Patients?

Benefits for General Practice

- Frees up GP time by redirecting minor conditions to pharmacies.
- Improves access and reduces appointment pressure.
- Supports care navigation and empowers reception teams.

Benefits for Patients

- Faster access to care—often same-day.
- Convenient locations and longer opening hours.
- No GP needed for minor illnesses—treatment via pharmacy.
- Promotes self-care and appropriate NHS use.

Who can I refer?

You can refer patients with minor conditions covered by the [Pharmacy First service](#), including the **seven clinical pathways** and a range of **minor illnesses** under the NHS Community Pharmacist Consultation Service (CPCS). Referrals are appropriate where the patient meets the relevant age and inclusion criteria and no red flags are identified. At the pharmacy, upon receipt of an electronic referral, the patient may be managed under either element of the service, depending on the symptoms presented and the pharmacist’s clinical assessment.

Please refer to the attached [Referral Tool](#) for the full list of eligible conditions and detailed inclusion/exclusion criteria.

Which Pharmacies are delivering this service?

There are two ways participating pharmacies details can be located:

- **Integrated GP IT referral systems:** When sending a referral via EMIS Local Services, PharmRefer or using Accumail the system will automatically return nearby pharmacies that are currently able to offer the Pharmacy First service.
- **NHS Service Finder:** NHS Service Finder is a free tool for healthcare staff to locate live NHS services near a specific postcode. To find participating pharmacies, search for ‘Pharmacy First’ under Type of Service.

How do I refer a patient to a pharmacy?

Patients can be referred to a community pharmacy using a range of approved systems, depending on your practice's clinical IT platform.

For practices using **EMIS Web**, referrals should be made via **EMIS Local Services**, an integrated tool that supports collaboration with local service providers.

From June 2025, an integrated electronic referral mechanism is being tested by early adopter **SystemOne** practices. Prior to this switch-on, **SystemOne** practices may have been using **PharmRefer** to send electronic referrals. A phased rollout of the integrated system is planned following the testing phase.

Where digital systems are not available, referrals can be made securely via **NHSmile** to the community pharmacy's NHS.net address.

Another option is the use of **AccuMail**, which allows the practice to send a secure message directly to the pharmacy's NHSmile inbox. [See Accumail Referral Guide here.](#)

Key Points when choosing a referral method

- Communicate with your local Pharmacies which mechanism you intend to use.
- Have an agreed process for how referrals are managed .
- Have a back-up plan for sending referrals in case of technical issues

What are the benefits of sending an electronic referral?

Sending a formal electronic referral to a pharmacy—rather than simply signposting—offers clear advantages for both patients and the wider healthcare system:

- **Improved patient experience:** Patients are booked in for a confidential consultation with a pharmacist, either in person or remotely. Unlike signposting, they won't risk being treated as a walk-in or passed to a non-clinical team member.
- **Clear handover of care:** Once referred, clinical responsibility for that episode of care transfers to the pharmacy until resolved or appropriately escalated.
- **Patient reassurance and follow-up:** Patients know their concerns are being taken seriously, and if they don't attend, the pharmacist may follow up based on clinical need.
- **Efficient pharmacy workflow:** Referrals help pharmacies plan workload and ensure timely consultations, reducing wait times and improving access.
- **Continuity and accountability:** A formal referral creates a clinical audit trail, supporting safer onward care and better record-keeping.
- **Supports system-wide goals:** Electronic referrals provide data that demonstrate how general practice is actively managing demand and contributing to the NHS Delivery Plan for Recovering Access to Primary Care.

Can I start sending referrals to my local pharmacy?

While most pharmacies are already registered and ready to deliver the Pharmacy First Service, successful implementation relies on clear communication and agreed processes between general practice and local pharmacies.

In areas where the service works well, this is often because the practice and pharmacy have worked together to agree on:

- **How referrals will be sent**
- **How the pharmacy will manage them**
- **What steps to take if a patient needs to be escalated back to the GP**

Establishing a shared understanding of these processes helps ensure safe, timely care for patients and builds confidence on both sides. We recommend connecting with your local pharmacy team to discuss and agree on practical arrangements before going live with routine referrals.

What if a patient needs to be escalated back to the practice?

There will be times when the pharmacist will need additional advice or will need to escalate the patient to a higher acuity care location e.g. a GP, UTC (Urgent Treatment Centre) or ED (Emergency Department). The pharmacist will use their clinical judgement to decide the urgency, route and need for referral and then choose where to escalate the patient.

For escalations back to the GP practice patients should **not** be advised or signposted back to their GP practice, pharmacies will contact the patient's usual GP practice and use locally agreed procedure to support the patient to access an appointment- this locally agreed procedure will vary from practice to practice.

How can we promote this service to patients?

Raising awareness of the Pharmacy First Service is key to encouraging appropriate use and supporting patient understanding.

The Department of Health and Social Care (DHSC) and Community Pharmacy England (CPE) have released a range of promotional materials to help inform patients and the public. These include posters, flyers, social media graphics, and a press release template, all available for download:

- [DHSC Campaign Resources](#)
- [Community Pharmacy England – Pharmacy First: resources](#)

In addition, your South Yorkshire integrated Care Board (ICB) in collaboration with Community Pharmacy South Yorkshire (CPSY) have produced posters and leaflets tailored to local populations. These are available to use in GP practices, pharmacies, and other community settings.

- [ICB Comms Toolkit](#)
- [A4 Pharmacy First Service Poster – For display in Schools](#)
- [A4 Pharmacy First Service Poster – For display in GP Practice](#)
- [Pharmacy First UTI Patient Leaflet](#)
- [Pharmacy First General Information Patient Leaflet](#)



Where can I share positive learnings or raise concerns?

If you would like to share positive experiences, examples of good practice, or raise any concerns, please include as much detail as possible—such as the name of the pharmacy, a brief summary of events, and any relevant dates.

For service delivery or contractual matters, please contact the South Yorkshire ICB Primary Care Team at: syicb.syprimarycare@nhs.net

For clinical queries related to the service, contact: Claire Thomas – claire.thomas47@nhs.net

For support with implementing referrals or collaboration with community pharmacies, contact: Community Pharmacy South Yorkshire (CPSY) – info@cpsy.org.uk