



Humber & North Yorkshire (H&NY) ICB Community Pharmacy Hypertension Case-Finding (BP Check) Service

Local Protocol for Management of Patients Requiring Escalation / Referral for GP Practices / PCNs

This protocol has been adapted from one developed in South Yorkshire ICB to support the successful delivery of the [NHS Community Pharmacy BP Check \(Hypertension Case Finding\) Service](#). H&NY ICB would like to encourage PCNs/practices and Community Pharmacies to work together in the management of patients identified within community pharmacies with high/low BP readings.

Pharmacists will take blood pressure measurements following best practice as described in NICE guidance ([NG136](#)) and follow the pathway in Appendix A (page 14) of the [Service Specification](#)
NB: ABPM now only needs to be worn for 14 readings during patients normal waking hours.

[Clinic blood pressure guide](#)

Recommended local protocol:

Blood pressure checks within the pharmacy and returning of ABPM machines should normally be organised so that there is sufficient time for the GP practice to review any results/arrange an appointment should patient escalation be required. **If escalation is required urgently and / or it is after the surgery is closed, the patient should attend an Urgent Treatment Centre (UTC) or Accident and Emergency (A&E) (Please see section on escalation at the end of the document).**

Normal Readings:

All patients with normal BP readings (90/60 - 134/84mmHg) will be entered on a weekly spreadsheet/template that will be emailed to the practice (this could be to a dedicated member of staff/dedicated email address where available IT solutions/local arrangements can accommodate this).

The normal BP readings will be passed to the practice to enter into patient records (unless there is an IT solution in place).

For Patients requiring non-urgent escalation due to Stage One Hypertension:

An ABPM reading between 135/85 – 149/94 will be emailed to the practice team/agreed email address without waiting for the weekly return.

Pharmacies should discuss with their local practices what the usual patient pathway would be for patients once they have been referred by the pharmacist back to the GP practice, this will help pharmacy staff to effectively communicate to patients what to expect and manage patient expectations. **Pharmacists should not direct patients to ask for an appointment or direct them to a particular clinician at their practice as arrangements will vary locally. Patients should be reassured their results will be actioned by their practice and they will be contacted if any further appointments are required.**

- These patients will also be indicated on the weekly return by the pharmacy as a fail safe.

For Patients requiring non-urgent escalation due to BP reading below 90/60 with no symptoms



These should be entered on the weekly return and emailed to the practice (this could be a dedicated member of staff).

These will be passed to the practice to enter the BP reading and at the same time, a task could be sent to a practice clinician, e.g. practice pharmacist, to review the notes to make sure that there is no indication of more significant problems or medication adjustment needed.

Please note that community pharmacy teams are required to follow the Service Specification for the Hypertension Case-Finding service which states that same day escalation is required. It is the decision of the receiving healthcare provider e.g. general practice, urgent and emergency care setting as to the timeframe within which the patient is reviewed within. As an example, a patient escalated the same day to their general practice may be offered an appointment within 3 – 5 days, depending on the general practice clinician's professional judgement.

Patients requiring same day escalation include:

- Patients with very high clinic blood pressure (180/120 or higher)
- Patients who had high clinic readings who then have Stage 2 Hypertension indicated following ABPM (ABPM above 150/95 or higher)
- Patients who had low clinic readings (90/60 or lower) with symptoms (fainting or regularly feeling like they will faint)
- Patients identified as having an irregular pulse

The results should be passed by the community pharmacist to the practice by telephone and ask them to review the results and advise on what further action needs taking.

If patient requires same day escalation and / or the GP practice is uncontactable/closed:

- Patients who are significantly unwell (e.g. new significant headache, fits, nausea and vomiting, visual disturbance, stroke) should be directed to A & E.
- Patients with:
 - very high clinic blood pressure (180/120 or higher),
 - low clinic readings (90/60 or lower) with symptoms (fainting or regularly feeling like they will faint)
 - identified as having an irregular pulse will need a face-to-face assessment. This group of patients should be encouraged to attend Urgent and Emergency Care Centre (UECC) if not willing/able to attend UECC contact your local out of hours GP provider **(Appendix 1)**
- All other patients requiring same day escalation contact your local out of hours GP provider **(Appendix 1)**.



Appendix 1

	Accident & Emergency (A&E)	Urgent & Emergency Care Centre / Walk In Centre	GP Out of Hours
Hull		Bransholme Urgent Treatment Centre (Hull) Goodhart Road, Bransholme, Hull, HU7 4DW Non-Public Contact Number - 01482 344 665	
East Riding	Hull Royal Infirmary, Anlaby Road, Hull, HU3 2JZ	Bridlington Urgent Treatment Centre Bridlington and District Hospital, Bessingby Road, Bridlington, YO16 4QP Public Contact Number - 01262 425 631 East Riding Urgent Treatment Centre (Beverley) East Riding Community Hospital, Swinemoor Lane, Beverley, HU17 0FA Non-Public Contact Number - 01482 336 531 Urgent Treatment Centre (Goole) Goole and District Hospital, Woodland Avenue, Goole, DN14 6RX Non-Public Contact Number - 01405 720 720	
North Lincolnshire	Scunthorpe General Hospital, Cliff Gardens, Scunthorpe, DN15 7BH	North Lincs Urgent Treatment Centre (Scunthorpe) Scunthorpe General Hospital, Cliff Gardens, Scunthorpe, DN15 7BH Non-Public Contact Number - 03033 302 235	
North East Lincolnshire	Diana Princess of Wales Hospital, Scartho Road,	North East Lincs Urgent Treatment Centre (Grimsby) Diana Princess of Wales Hospital, Scartho Road, Grimsby, DN33 2BA	



	Grimsby, DN33 2BA	Non-Public Contact Number - 0303 330 6777	
York	York Hospital, Wigginton Road, York, YO31 8HE	Selby Urgent Treatment Centre The New Selby War Memorial Hospital, Doncaster Road, Selby, YO8 9BX Non-Public Contact Number - 01904 724 305 York Urgent Treatment Centre York Hospital, Wigginton Road, York, YO31 8HE Non-Public Contact Number - 01904 726 588	
North Yorkshire	Emergency Department, Scarborough General Hospital, Woodlands Drive, Scarborough, YO12 6QL Harrogate	<u>Hambleton, Richmondshire and Whitby CCG</u> The Friarage Urgent Treatment Centre (Northallerton) The Friarage Hospital, Bullamoor Road, Northallerton, DL6 1JG Non-Public Contact Number – xxxx Whitby Urgent Treatment Centre Whitby Minor Injuries Unit, Whitby Community Hospital, Springhil, YO21 1DP Non-Public Contact Number - 01947 899 183 <u>Scarborough and Ryedale CCG</u> Malton Urgent Treatment Centre Signposted Malton MIU, Malton Community Hospital, Middlecave Road, YO17 7NG Non-Public Contact Number - 0300 123 1780	



		Scarborough Urgent Treatment Centre Emergency Department, Scarborough General Hospital, Woodlands Drive, Scarborough, YO12 6QL Non-Public Contact Number - 0300 123 1780	
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