

Version 2: Issued May 2018



GMLPC

Supporting Community Pharmacy
in Greater Manchester

Pharmacy Contract Compliance Guide 2018/19

GREATER MANCHESTER LOCAL PHARMACEUTICAL COMMITTEE

Address: Suites 9-10, Barlow House, Minshull Street, Manchester, M1 3DZ

Telephone: 0161 228 6163

Website: <http://psnc.org.uk/greater-manchester-lpc>

Pharmacy Planner

GREATER MANCHESTER LPC

Your guide to complying with the NHS Pharmacy Contract

This briefing aims to help you comply with the Pharmacy Contract by making the core requirements and deadlines clear. It is accompanied by an annual calendar of key dates. It is important pharmacies understand their contractual requirements because failing to achieve them will create an extra, and time-consuming, administrative workload for you and prevent you from being able to participate in other paid work.

Back in the late 1990s the quality of service provided by a pharmacy was judged by how quickly they could provide the correct medication to the patient. Patients primarily used pharmacy as a supply outlet. The 2005 contract aimed to move the profession forward by establishing minimum standards and to promote and reward high-quality services. The 2016 amendments introduced Quality Payments, which mean some income is now contingent on your pharmacy achieving certain quality criteria.

Failure to achieve basic contract standards is holding our profession back and putting pharmacy businesses at risk

About your NHS Contract

A pharmacy must be listed in the pharmaceutical list maintained by NHS England to dispense NHS prescriptions. Pharmacies have to agree to follow the Terms of Service set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and subsequent amendments, often referred to as the [Pharmacy Contract](#). More details can be found in the table at the end of this document.

This Contract is negotiated nationally on behalf of all pharmacy contractors by Pharmaceutical Services Negotiating Committee (PSNC) with NHS England. NHS England is responsible for the monitoring of the contract and ensuring compliance. This responsibility is delegated at a local level to NHS England Regional Teams (previously Area teams). **In Greater Manchester, it is devolved to Greater Manchester Health and Social Care Partnership (GMHSCP).**

What does monitoring look like?

Pharmacies are required to complete the Community Pharmacy Assurance Framework (CPAF) each year to demonstrate compliance to the contract. This is issued by NHS England, and is completed using NHS BSA online platform every June. It will be sent directly to the pharmacy.

CPAF needs to be completed by the individual pharmacy branch because it asks questions about how that individual team operates.

How prepared are you?

- Is there a copy of the completed CPAF available to view?
- Do you have a copy of both the last 2 years' clinical audit and multidisciplinary audit?
- Do you have local details of other health and social care providers?
- Are you up to date with SOP sign-off and implementation?
- Are local safeguarding contacts available?
- Are there records of signposting/referrals?
- What significant interventions are documented?
- Do you have anonymised records showing advice given?
- Have you promoted the 6 mandatory public health campaigns for Greater Manchester pharmacies? Have you got evidence?

Completion isn't a contractual requirement but was agreed as a useful way of supporting a reduction in monitoring visits. The timings of the CPAF audit may vary and will be communicated by area commissioners each year.

Pharmacy Planner

GREATER MANCHESTER LPC

What measures will NHS England take to ensure compliance?

Failure to complete CPAF or return an action plan will result in a monitoring visit. During the monitoring visit, NHS England will carry out a full inspection working through the complete framework and ask for evidence to demonstrate compliance. This can be time-consuming for the pharmacy.

Remedial and Breach notices

A breach of contract may arise as a result of behaviours that give cause for concern or failure to deliver the contract.

Two types of notice can be issued where there is a concern about contract performance that leads to a breach of terms of service:

1. Remedial notice (for contract failures that can be put right).
2. Breach notice (for a repeat of (1) or a contract failure that cannot be remedied).

If a **remedial notice** is issued, then required action(s) must be completed within 30 calendar days. This will require a completed action plan being returned to NHS England / GMHSCP and possibly a subsequent monitoring visit.

If a **breach notice** is issued, depending upon the nature and seriousness, the Pharmacy Services Regulations Committee could take action including one or more of the following,

- Withholding of payments
- Additional fine and penalty
- Warning letter to the Pharmacy Superintendent/Directors
- Removal of the pharmacy from the register

If there are concerns of a professional standards nature this could lead to a referral to the GPhC for the pharmacy and / or Superintendent Pharmacist. The Superintendent Pharmacist could also be referred to a Performers List Decision Panel (PLDP) to review their fitness to remain in that role.

Withholding Payments

The Terms of Service provide for payments to be made as set out in the Drug Tariff Part VIA.

In addition, NHS England can request payment to be returned for any Advanced Services claimed e.g. MURs and NMS which could be in the region of £14,000.

Information Governance

Having a firm foundation in Information Governance (IG) means you are less likely to make a mistake or error where a customer's confidentiality is breached.

Do:

- Make sure you are compliant with the new EU-wide General Data Protection Regulation (GDPR). It comes into effect on 25th May 2018.
- Know the importance of the information you hold, which may be confidential or sensitive.
- Follow legislation, best practice and guidelines for looking after such important information.
- Take responsibility for how you obtain, record, use, retain and share information.

Do Not:

- Disclose any information unless you are certain you have the necessary consent and authority to do so.

Did you know?

If IG training isn't up to date and/or annual declaration isn't completed or a significant IG breach occurs, then the pharmacy may be asked to stop providing EPS.

Patients would need to be signposted to two other local pharmacies which could be competitors.

You can only provide Advanced Services (i.e. MUR/ NMS/NUMSAS) if you fully comply with all the Essential Services.

Pharmacy Planner

GREATER MANCHESTER LPC

Controlled Drugs

Controlled drug (CD) incidents must be reported to Karen O’Brien, CD Accountable Officer for Greater Manchester, using the [online reporting tool](http://www.cdreporting.co.uk) (www.cdreporting.co.uk). You can also use it for any queries, issues and requests for destruction of controlled drugs. Karen’s contact details are: karen.obrien1@nhs.net, 07970 749843 and 0113 825 5216.

Reporting Closures

The Terms of Service require that pharmacies are open for all of their contracted hours, so any closures must be reported as soon as reasonably practicable. If a pharmacy is unable to open for **any** reason, you must inform the GMHSCP team immediately or as soon as practicable by completing the form '[Notification of unplanned temporary suspension of services](#)' and emailing it to england.gmtop@nhs.net.

Submitting MUR/NMS activity data

Quarterly submission of your MUR and NMS activity data is an ongoing requirement of your NHS Pharmaceutical Terms of Service. Failure to submit the information via the NHS BSA portal may result in a contractual breach. The submission deadlines are the tenth working day of the month after each quarter:

- Quarter 1 (1st April – 30th June): submission by **10th working day of July**
- Quarter 2 (1st July – 30th September): submission by **10th working day of October**
- Quarter 3 (1st October – 31st December): submission by **10th working day of January**
- Quarter 4 (1st January – 31st March): submission by **10th working day of April**

Find out more about these quarterly submissions on the [NHS BSA website](#).

Annual Community Pharmacy Patient Questionnaire

All pharmacies are required to conduct an annual community pharmacy patient questionnaire (CPPQ). The questionnaire allows patients to provide valuable feedback to community pharmacies on the services they provide. Further information can be found on the PSNC website: <http://psnc.org.uk/contract-it/essential-service-clinical-governance/cppq/>

Pharmacy Contract Table

Service	Terms
Responsible Pharmacist	<ul style="list-style-type: none"> • Specified activities can only take place under the control of a Responsible Pharmacist
Trading hours	<ul style="list-style-type: none"> • Core hours were agreed. Closure within these times constitutes a breach. • Changes must be submitted 90 days in advance and require approval.
Dispensing	<ul style="list-style-type: none"> • Request proof of patient exemptions unless computer-generated age exemption • NEW – if no proof is available then inform the patient about NHS checks on exemptions and potential fines. • Check the legality of all prescriptions before supply. • Provide with reasonable promptness medication requested by a prescription (including EPS). • Give an estimated time the medication will be ready and if necessary a revised time. • Provide emergency supplies when at the request of a prescriber. • Supply medication requested on the NHS Repeat Dispensing Service.

Pharmacy Planner

GREATER MANCHESTER LPC

	<ul style="list-style-type: none"> If your pharmacy is unable to provide EPS, provide the details of two other pharmacies that can provide EPS. Provide appropriate advice to patients.
Healthy Lifestyles & self-care	<ul style="list-style-type: none"> Support 6 public health campaigns annually, defined by NHS England/GMHSCP. This may involve data collation. Collateral should be provided by the NHS. Provide healthy living advice to patients, particularly those in key groups.
Environmental	<ul style="list-style-type: none"> Accept and dispose of unwanted medicines, ensuring they are stored in the containers provided by the NHS. Team have personal protective equipment such as aprons and gloves.
Appliances	<ul style="list-style-type: none"> Supply specified appliances in a package with no markings. Provide additional items such as disposable wipes and bags.
Other	<ul style="list-style-type: none"> Comply with IG requirements which includes annual refresher training and an annual declaration to the NHS. Must not incentivise patients by way of a gift or reward for presenting a prescription. Compliance with the Health and Safety Act. Allow NHS England to monitor compliance with the contractual framework.
Clinical Governance	<ul style="list-style-type: none"> Publicise services provided in a practice leaflet. Follow appropriate SOPs which are reviewed regularly. Report all patient safety incidents. Promptly act on drug recalls and alerts. Keep and maintain records. Follow the NHS Complaints Regulations and supply an annual report. Complete an annual patient satisfaction survey (Community Pharmacy Patient Questionnaire, CPPQ) and display the results and action plan. Complete an annual practice-based audit (including an action plan). Share with NHS England when requested. Complete an annual multi-disciplinary audit (defined by NHS England). Monitor Owings. Colleagues have had inductions and received appropriate training. Annual appraisals for all colleagues. Qualifications checked for new colleagues. Support development of the team and address any poor performance. Premises standards are maintained which includes date checking, cleanliness and infection control. Complete an assessment to ensure compliance with the Equality Act (premises and services).

Pharmacy Contract deadlines

Activity	Deadline
IG Toolkit declaration to NHS	End of March
Annual IG training	Completed at any time
Clinical Audit	Submitted by end of March
Multidisciplinary Audit	Completed when instructed by NHS England
Multidisciplinary Audit Action Plan	Submitted by end of March

Pharmacy Planner

GREATER MANCHESTER LPC

Quarterly MUR/NMS activity data	Submit previous quarter's data by 10 th working day of January, April, July & October
Specials paperwork: certificate of conformance (CofC) and certificate of analysis (CofA)	Every month
6 Public Health campaigns (see details below)	Any audit/documentation linked to the 6 <u>mandatory campaigns</u> for Greater Manchester pharmacies
CPAF Light	June
CPAF action plan	If requested to complete
Community Pharmacy Patient Questionnaire	End of March
Complaints report	As soon as practicable after 31 st March
Pre-waste acceptance audit in 2018 (five-yearly)	2018 deadline TBC

Health Campaigns 2018

Period	Theme
1 st February - 1 st April	Stay Well Pharmacy
1 st -30 th April 2018	Bowel cancer screening
4 th -20 th May	Dementia awareness
15 th May - 15 th June	Oral health
1 st July - 30 th September	Physical activity
1 st -31 st October	Stoptober (smoking cessation)

For full details (including the campaigns calendar) and suggestions to use during Health Campaigns please go to <http://psnc.org.uk/greater-manchester-lpc/service-information/health-improvement/>

Greater Manchester Health and Social Care Partnership: Contact Information

Optometry and Pharmacy Team,
Greater Manchester Health and Social Care Partnership,
Floor 4,
3 Piccadilly Place,
London Road,
Manchester,
M1 3BN.
Fax: 0161 625 7504
Email: england.gmtop@nhs.net

We hope you have found this guide useful. If you have feedback that will help us improve it, let us know at enquiries@gmlpc.org.uk.