

# Quality Payment Guidance March 2017

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Quality Payments – PSNC’s suggested plan for contractors

V2 February 2017

	Criteria	Review point	Met the criteria
1	<p><b>Use of the NHS Summary Care Record (SCR)</b></p> <p><i>On the day of the first review, the pharmacy can demonstrate a total increase in access to Summary Care Records (from Monday 27 June 2016 to Sunday 27 November 2016 compared to Monday 28 November 2016 to Sunday 30 April 2017); and on the day of the second review, the pharmacy can demonstrate a total increase in access to Summary Care Records (from Monday 3 October 2016 to Sunday 30 April 2017 compared to Monday 1 May 2017 to Sunday 26 November 2017. (Note – the wording of this requirement was amended in the March 2017 Drug Tariff.)</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p>28th April 2017</p> <p><b>AND</b></p> <p>24th November 2017</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
2	<p><b>Ongoing utilisation of the EPS</b></p> <p><i>On the day of the review, the pharmacy contractor must be able to demonstrate ongoing utilisation of the Electronic Prescription Service at the pharmacy premises.</i></p> <p><b>This is a gateway criterion and it must therefore be complied with before any payment can be achieved.</b></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p>28th April 2017</p> <p><b>AND</b></p> <p>24th November 2017</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
3	<p><b>Provision of one specified Advanced Service</b></p> <p><i>On the day of the review, the contractor must be offering at the pharmacy Medicines Use Review (MUR) or New Medicine Service (NMS); or must be registered for NHS Urgent Medicine Supply Advanced Service Pilot.</i></p> <p><b>This is a gateway criterion and it must therefore be complied with before any payment can be achieved.</b></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p>28th April 2017</p> <p><b>AND</b></p> <p>24th November 2017</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
4	<p><b>NHSmail</b></p> <p><i>On the day of the review, Pharmacy staff at the pharmacy must be able to send and receive NHS mail (Note: For the April 2017 Review, evidence of application for an NHS Mail account by 1 February 2017 will be acceptable).</i></p> <p><b>This is a gateway criterion and it must therefore be complied with before any payment can be achieved.</b></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p>28th April 2017</p> <p><b>AND</b></p> <p>24th November 2017</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
5	<p><b>NHS Choices entry</b></p> <p><i>On the day of the review, the NHS Choices entry for the pharmacy must be up to date.</i></p>	<p>28th April 2017</p> <p><b>AND</b></p>	<p><input type="checkbox"/></p>

	<p><b>This is a gateway criterion and it must therefore be complied with before any payment can be achieved.</b></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	24th November 2017	<input type="checkbox"/>
6	<p><b>Safeguarding</b></p> <p><i>On the day of the review 80% of registered pharmacy professionals working at the pharmacy have achieved level 2 safeguarding status for children and vulnerable adults in the last two years</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	28th April 2017 <b>AND</b> 24th November 2017	<input type="checkbox"/>  <input type="checkbox"/>
7	<p><b>Dementia Friends</b></p> <p><i>On the day of the review, 80% of all pharmacy staff working in patient facing roles are trained 'Dementia Friends'</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	28th April 2017 <b>AND</b> 24th November 2017	<input type="checkbox"/>  <input type="checkbox"/>
8	<p><b>Clinical effectiveness – over use of asthma treatments</b></p> <p><i>On the day of the review, the pharmacy can show evidence of asthma patients, for whom more than 6 short acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period, are referred to an appropriate health care professional for an asthma review.</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	28th April 2017 <b>AND</b> 24th November 2017	<input type="checkbox"/>  <input type="checkbox"/>
9	<p><b>NHS 111 Directory of Services</b></p> <p><i>On the day of the review, the pharmacy's NHS 111 Directory of Services entry is up to date.</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	28th April 2017 <b>AND</b> 24th November 2017	<input type="checkbox"/>  <input type="checkbox"/>
10	<p><b>Healthy Living Pharmacy (HLP) self-assessment</b></p> <p><i>On the day of the review, the pharmacy is a Healthy Living Pharmacy level 1 (self-assessment).</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	28th April 2017 <b>OR</b> 24th November 2017*	<input type="checkbox"/>
11	<p><b>Community Pharmacy Patient Questionnaire (CPPQ) results</b></p> <p><i>On the day of the review, the results of the Community Pharmacy Patient Questionnaire from the last 12 months is publicly available on the pharmacy's NHS Choices page or for distance selling pharmacies it is displayed on their website and</i></p>	28th April 2017	<input type="checkbox"/>

	<p><i>the NHS Choices service desk has been notified as per the NHS England guidance document, "Pharmacy Quality Payments – Quality Criteria Guidance". (Note – the wording of this requirement was amended in the March 2017 Drug Tariff.)</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p><b>OR</b></p> <p>24th November 2017*</p>	<input type="checkbox"/>
<p><b>12</b></p>	<p><b>Patient safety report</b></p> <p><i>Written safety report at premises level available for inspection at review point, covering analysis of incidents and incident patterns (taken from an ongoing log), evidence of sharing learning locally and nationally, and actions taken in response to national patient safety alerts.</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p>28th April 2017</p> <p><b>OR</b></p> <p>24th November 2017*</p>	<input type="checkbox"/>

\*The last three criteria only need to be met at one of the review points and can therefore only be claimed for once.

**Please note : All contractors can now access Pharmoutcomes for Quality Payments, HLP and also Asthma referral scheme for data collection. All information and supporting guidance is available at;**

<http://psnc.org.uk/leicestershire-and-rutland-lpc/pharmoutcomes-support/>

## NHSE Guidance Quality Payments March 2017

*It is advised that all contractors read this document as soon as possible*

<https://www.england.nhs.uk/wp-content/uploads/2017/02/quality-payments-quality-criteria-guidance-1.pdf>

### 1,Entry Gateway Criteria

The Department of Health (DH) is introducing a [Quality Payments scheme](#) as part of the Community Pharmacy Contractual Framework in 2017/18. This will involve payments being made to community pharmacy contractors meeting certain quality criteria, with funding taken from the overall funding for 2017/18 of £2.592 billion.

To be eligible to collect the points necessary to claim a Quality Payment, the contractor must meet four gateway criteria (click on the links below for more information):

- [provision of at least one specified Advanced Service](#);
- [have their NHS Choices entry up to date](#);
- [have the ability for staff to send and receive NHS mail \(Note for the April 2017 Review, evidence of application for an NHSmail account by 1st February 2017 will be acceptable\)](#); and
- [ongoing utilisation of the Electronic Prescription Service](#).

Contractors passing the gateway criteria will only receive a Quality Payment if they meet one or more of the quality criteria listed in the table under the 'Quality criteria' subheading below. Therefore, meeting the gateway criteria will not, in itself, attract a Quality Payment; it is subject to how many of the quality criteria the contractor meets.

### 2.CPPE Training Resources to achieve the quality criteria

This maps the quality criteria to the CPPE Resources available to achieve them

[quality-criteria-cp-2017-cppe-resources-final](#)

Contractors and their teams will need to decide how to approach achieving the gateway and quality criteria in a way that works for them; there will be no 'one size fits all approach', but we suggested one approach which contractors may want to consider adopting. The plan covers all elements of the Quality Payment scheme and we have prioritised the plan so that criteria that can be achieved at both review points are generally first, as it is important that an early start is made on achieving them

### 3.NHSE Quality Criteria Guidance (published Feb 2017) – key points below;

NHSE have now published [new guidance](#) on achieving the quality payment and claims information ( as above)  
<https://www.england.nhs.uk/wp-content/uploads/2017/02/quality-payments-quality-criteria-guidance-1.pdf>

This Contains details of the **timeframes and windows** that the BSA website will be open for claims at  
<http://www.nhsbsa.nhs.uk/QualityPaymentscheme details on p.8>

Summary of Key Points from NHSE guidance

1. The timeframe For review Point One (28 April 2017) will open from **Monday 10 April 2017 at 09:00** and will close on **Friday 12 May 2017 at 23:59, claims cannot be made outside of this period.**
2. In order to determine the impact of the quality payments scheme and to inform future development of the CPCF, NHS England will be evaluating the scheme. One element of this evaluation is to include some questions when pharmacies are completing their declaration. Declaration questions and evaluation questions will be clearly identified. Declaration questions are mandatory. We would encourage every contractor to complete the evaluation questions to support future developments in payments for quality on ref: p.9
3. Ensure you meet the NHS gateway criteria – please note this includes NHS mail for which details have not been released yet.
4. NHS Choices Pharmacies are required to edit or validate their opening times, services and facilities information within their NHS Choices profile listing to meet the gateway criterion. For the first review point, contractors must edit and/or validate their NHS Choices entry between 00:00 on 7 February 2017 and 23:59 on 28 April 2017. Detail and links to gain editing rights are on page 11.
5. Contractors making declarations to the NHS BSA that they are offering either the NMS or MURs under the advanced service gateway criterion must ensure that the service is visible on their NHS Choices profile on the relevant review date. Contractors declaring that they are offering either the NMS or MUR service at the first review point must have the service visible in the services section of their NHS Choices profile on 28 April 2017
6. For DSP's the guidance is on p.12
7. NHS mail – For the April 2017 review point, evidence of application for an NHSmail account by 1 February 2017 is acceptable. P.14
8. EPS – demonstrate ongoing usage and declare on the BSA website p.14
9. Patient Safety Written safety report at premises level available for inspection at review point, covering analysis of incidents and incident patterns (taken from an ongoing log), evidence of sharing learning locally and nationally, and actions taken in response to national patient safety alerts. Guidance on p.15 attached are word templates for monthly and annual reporting ref: p15
10. Safeguarding – On the day of the review 80% of registered pharmacy professionals working at the pharmacy have achieved level 2 safeguarding status for children and vulnerable adults in the last two years. P.19 for guidance on CPPE training for pharmacy staff via CPPE ref p.19
11. CPPQ for Pharmacies and DSP's – On the day of the review, the results of the Community Pharmacy Patient Questionnaire from the last 12 months is publicly available on the pharmacy's NHS Choices page or for distance selling pharmacies it is displayed on their website and the NHS Choices service desk has been notified as per the NHS England guidance document, "Pharmacy Quality Payments – Quality Criteria Guidance".
12. Please read 21-22 for guidance on how it should be submitted and the specific wording to be used.
13. Templates available at : <http://psnc.org.uk/contract-it/essential-service-clinical-governance/cppq/>
14. 12.HLP guidance for contractors who are working towards HLP and grandparenting guidance (for those pharmacies already HLP accredited) is now available. This can be claimed for in the November claim point as we are working towards this in LLR ref: p.23
15. 13.SCR – On the day of the first review, the pharmacy can demonstrate a total increase in access to Summary Care Records (from Monday 27 June 2016 to Sunday 27 November 2016 compared to Monday 28 November 2016 to Sunday 30 April 2017); p.2
16. 14. On p.25 an SCR viewing calculator link is provided which will go live soon and can be used as evidence of meeting the criteria in the NHSBSA declaration
17. 15.DOS (directory of services) On the day of the review, the pharmacy's NHS 111 Directory of Services entry is up to date. The process for checking the DoS entry and requesting any appropriate changes for the first

review period of the quality payments will be made available in March 2017 and I will update you on the process and link (p.27)

18. 16. Referral for asthma review p.28 all info and templates are available at
19. <http://psnc.org.uk/leicestershire-and-rutland-lpc/quality-payment-overuse-of-asthma-treatment/>
20. 17. On the day of the review, 80% of all pharmacy staff working in patient facing roles are dementia friends
21. Annex 1, 2 and 3 contain templates for monthly patient safety, annual patient safety and CPPQ template.

Key Resources :

**PSNC briefings links and Resources are available at;**

<http://psnc.org.uk/services-commissioning/essential-services/quality-payments/>

[psnc-briefing-067-16-quality-payments-guidance-what-do-contractors-need-to-do](#)

[FAQ quality payment – PSNC](#) (new jan 2017)

*It is Recommended that contractors set up a folder names Quality Criteria Achievement and print off the checklist and below templates to capture the data*

[dementia-friends-record-sheet](#)

[asthma-referrals-suggested-process](#)

[referral-form-asthma](#)



<b>2</b>	<b>Ongoing utilisation of the EPS</b>		
	<p><i>On the day of the review, the pharmacy contractor must be able to demonstrate ongoing utilisation of the Electronic Prescription Service at the pharmacy premises.</i></p> <p><b>This is a gateway criterion and it must therefore be complied with before any payment can be achieved.</b></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<p>28th April 2017</p> <p><b>AND</b></p> <p>24th November 2017</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p>

1. Most pharmacies are already regularly using the [Electronic Prescription Service \(EPS\)](#) and hence will immediately meet the requirements of this gateway criterion (being EPS release 2 enabled, ongoing setting of patient nominations and appropriate endorsement of EPS release 2 prescriptions).

If your pharmacy is not enabled to provide EPS, speak to your PMR system supplier about how to get enabled as soon as possible.

2. Contractors will be required to declare through the [NHS BSA online declaration page](#) that they meet this criterion.





<b>5</b>	<b>NHS Choices entry</b>	28th April 2017	<input type="checkbox"/>
	<p><i>On the day of the review, the NHS Choices entry for the pharmacy must be up to date.</i></p> <p><b>This is a gateway criterion and it must therefore be complied with before any payment can be achieved.</b></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<b>AND</b>	24th November 2017

**1. Contractors are required to edit or validate three parts of their NHS Choices profile to meet the gateway criterion:**

- their opening hours;
- the facilities the pharmacy provides e.g. consulting room, parking etc; and
- the services the pharmacy provides.

All three parts will need to have been amended or validated for the contractor to have met the requirement to update their NHS Choices profile.

**2. Review periods**

**For the first review point, contractors must edit and/or validate their NHS Choices entry between 00:00 on 7th February 2017 and 23:59 on 28th April 2017.**

**For the second review point, contractors must edit and/or validate the NHS Choices entry between 00:00 on 11th September 2017 and 23:59 on 24th November 2017.**

Detail and links to gain editing rights are on page 11 of NHSE guidance

**3. A User Guide for managing NHS Choices profiles to support the Quality Payments Scheme is available on the [NHS Choices website](#).**

**4. Services provided at the pharmacy**

Contractors must update or validate their list of services which is displayed in the ‘services’ section of their NHS Choices profile.

Services are classified into the following three sections:

- i) Pharmacy Services - Advanced Services and other services which are useful for patients to know about. Please note that there is no listing for Essential Services in the first review period. For the second review period, Essential Services will be included but auto-populated onto each provider profile.
- ii) Pharmacy (NHS) Services commissioned by local authorities or Clinical Commissioning Groups
- iii) Pharmacy (Non-NHS) Services - Patient-funded services (private services)

## 5.NMS and MUR declaration

Contractors declaring that they are offering either the New Medicine Service (NMS) or Medicines Use Reviews (MURs) at the first review point must have the service visible in the services section of their NHS Choices profile on 28th April 2017. Contractors declaring that they are offering either NMS or MUR service at the second review point must have the service visible in the services section of their NHS Choices profile on 24th November 2017.

Any inaccuracies between a contractor's NHS Choices profile and their contractual opening hours, facilities and the services provided is the responsibility of the contractor. **As this is a gateway criterion, an inaccurate NHS Choices profile may then jeopardise the entire payment claimed for under the Quality Payments Scheme.**

## 6. NHS Choices profile – registering to self-manage the content

[NHS Choices profile – registering to self-manage the content](#) ( press ctrl and click to access the guidance on self editing rights , how to do it and also contact details if you have not yet registered for web editor or management rights))

Contractors that do not currently have profile editing rights can apply on the [NHS Choices](#) website. The NHS Choices team is expecting a large number of applications; therefore, contractors may experience a delay in being provided with editing rights. NHS England has recommended that contractors should apply as soon as possible for editing rights to ensure these are obtained before the first review point.

If a contractor has lost their password, they can request a new password on the [NHS Choices](#) website.

[PSNC website page on NHS Choices and self-management of pharmacy profiles](#)

## 7.NHS Choices profile – not listed on the website

Contractors that have a pharmacy which is not listed on the NHS Choices website (not including distance selling pharmacies) should contact their local NHS England team. An NHS Choices profile is set up following authorisation from the local team. Making the local team aware that a profile has not been set up will then initiate this process.

## 8.Contractors with multiple pharmacies

Contractors with multiple pharmacies will need to decide whether to complete the review of NHS Choices profiles at head office or pharmacy level. Each profile is specific to that pharmacy and when a profile is edited or validated; staff will need to ensure that the pharmacy details submitted are accurate for that particular pharmacy at the time of completion. Any inaccuracies that result from editing by head offices and local pharmacy teams will be the responsibility of the contractor.

## 9.Automating the NHS Choices profile update process

An Application Programming Interface (API) is available to automate the process of updating profile information on NHS Choices. This will be useful for contractors with multiple profiles to manage. Rather than using the NHS Choices PIMS to enter the information, pharmacies can use the API to connect their IT systems to NHS Choices to create an automated way of updating their profile information saving time and ensuring that their information, on NHS Choices is always up-to-date. Contractors can make changes to the editable fields listed above using the API.

For further information on using the API, please email the NHS Choices Service Desk (email address is [nhschoicesservicedesk@nhs.net](mailto:nhschoicesservicedesk@nhs.net)) requesting a call back from the Syndication team. Please add 'Organisation API' in the subject field of the email; please include one contact per organisation.

10. NHS Choices Pharmacies are required to edit or validate their opening times, services and facilities information within their NHS Choices profile listing to meet the gateway criterion. For the first review point, contractors must edit and/or validate their NHS Choices entry between 00:00 on 7 February 2017 and 23:59 on 28 April 2017. Detail and links to gain editing rights are on page 11 of NHSE guidance

11. Contractors making declarations to the NHS BSA that they are offering either the NMS or MURs under the advanced service gateway criterion must ensure that the service is visible on their NHS Choices profile on the relevant review date. Contractors declaring that they are offering either the NMS or MUR service at the first review point must have the service visible in the services section of their NHS Choices profile on 28 April 2017

12. Contractors will be required to declare through the [NHS BSA online declaration](#) (this webpage is not live yet) page that their NHS Choices profile has been edited and/or validated within the time frames set out in the guidance:

<p><b>Safeguarding</b></p> <p><i>On the day of the review 80% of registered pharmacy professionals working at the pharmacy have achieved level 2 safeguarding status for children and vulnerable adults in the last two years</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	28th April 2017	<input type="checkbox"/>
	24th November 2017	<input type="checkbox"/>

1.Safeguarding – On the day of the review 80% of registered pharmacy professionals working at the pharmacy have achieved level 2 safeguarding status for children and vulnerable adults in the last two years. P.19 for guidance on CPPE training for pharmacy staff via CPPE ref p.19 in NHSE guidance

2.The aim of the quality criterion is to ensure that all pharmacy professionals are fully aware of their role in safeguarding vulnerable adults and children and that they are confident in what to look out for and what action to take should safeguarding concerns arise.

3.While the target for achievement of this criterion is set at 80% of registered pharmacy professionals ( including locums and temporary staff) , best practice is that all staff should undergo safeguarding training. Non-registered pharmacy professionals may wish to consider undertaking level 1 training (which is available as online training from the [Centre for Pharmacy Postgraduate Education \(CPPE\)](#)).

4.Staff should retain proof that they have completed the training (such as a certificate of completion). Where no suitable evidence is provided, staff could complete the CPPE e-assessment in order to obtain evidence of having acquired the necessary knowledge to meet the level 2 requirements. Contractors should ensure that evidence of this training is kept within the pharmacy; the certificates do not need to be submitted to NHS England.

4.Training must have been completed within two years of the review date, so for the first review date on 28th April 2017 this means the period 29th April 2015 to 28th April 2017 and for the second review date on 24th November 2017 this means from 25th November 2015 to 24th November 2017.

5.Staff who have completed the previous version of the CPPE e-learning (or learning via another route), **before 29th April 2015 for the first review, or before 25th November 2015 for the second review, will need to successfully complete an assessment to obtain evidence that their knowledge is up to date.** This could be the CPPE e-assessment and it may be necessary for them to undertake additional training in order to refresh their knowledge.

6. PSNC has created a record sheet which contractors can choose to use to keep a record of their pharmacists and pharmacy technicians, that have undertaken level 2 safeguarding training. Contractors should keep a copy of any certificates that staff receive once they have completed the training and assessment as evidence of compliance with this quality criterion.

[Safeguarding record sheet \(Word\)](#)

8. Contractors will be required to confirm through the [NHS BSA online declaration page](#) that 80% of staff working on the review date have achieved the Level 2 safeguarding.

<b>7</b>	<b>Dementia Friends</b>	28th April 2017	<input type="checkbox"/>
	<p><i>On the day of the review, 80% of all pharmacy staff working in patient facing roles are trained 'Dementia Friends'</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	AND	24th November 2017

1. There are various routes by which people can become a Dementia Friend and step by step instructions for each route are outlined in [PSNC Briefing 073/16: Quality Payments – How to become a Dementia Friend](#)

**-For organisations** -Watch a minimum of two short online videos via your online code ([register your organisation](#) to receive a unique code).

**-For individuals** -Individuals can register through the organisation route by either using the unique code from a pharmacy they are working in or by registering as an organisation using their name and the words 'Pharmacy Locum' e.g. 'Jane Smith Pharmacy Locum'; or Attending a face-to-face Dementia Friends Information Session – some [LPCs](#) or [CPPE](#) Regional Tutors may be planning to hold these events so consider contacting these organisations if you would like to attend a face-to-face session.

2. It is advisable that contractors seeking to achieve this criterion should aim to ensure that all staff who work in roles where they deal with patients (e.g. pharmacists, pharmacy technicians, dispensary staff, counter assistants and delivery drivers) become Dementia Friends. The requirement for this quality criterion is **that at least 80% of pharmacy staff in patient facing roles are Dementia Friends on the day of the review; this includes locums**, so contractors should encourage temporary staff, such as locum pharmacists, to become Dementia Friends.

3. Contractors should keep evidence that staff have become Dementia Friends. If staff have registered through the organisation route, this could be a copy of the email sent to request Dementia Friend badges.

**4. Pharmacy staff with a patient-facing role should include all registered pharmacy professionals, all pre-registration graduates, everyone working in the dispensary, all medicines counter assistants and all delivery drivers (it also includes locums). Contractors may also have other staff that can be identified as having patient-facing roles. Although it is not required for the quality payment, NHS England would encourage all pharmacy staff to become Dementia Friends.**

In order to calculate the total number of staff working in patient-facing roles in the pharmacy on the day of the review (i.e. 28th April 2017 and 24th November 2017), each full or part-time member of staff working in roles listed above counts as one. For example, if on 28 April 2017 the following staff are working at the pharmacy:

- One locum pharmacist – 1
- One pharmacy technician – 1
- Two full-time delivery drivers – 2
- Two part-time medicines counter assistants – 2

In this example, the total number of patient facing staff working on the day of the review is six. Therefore at least five of those staff must have become Dementia Friends in order to meet the quality requirement.

#### 5. Record sheet

PSNC has created a record sheet which contractors can choose to use to keep a record of their staff members and temporary staff, such as locums, that have become Dementia Friends.

[Dementia Friends Record Sheet \(Word\)](#)

[Dementia Friends Record Sheet \(PDF\)](#)

6. Contractors will be required to declare through the [NHS BSA online declaration page](#) that they meet this quality criterion.

<b>8</b>	<b>Clinical effectiveness – over use of asthma treatments</b>	28th April 2017	<input type="checkbox"/>
	<i>On the day of the review, the pharmacy can show evidence of asthma patients, for whom more than 6 short acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period, are referred to an appropriate health care professional for an asthma review.</i>	<b>AND</b> 24th November 2017	<input type="checkbox"/>
<a href="#">PSNC guidance and resources to support contractors to meet this criterion</a>			

1. The aim of this quality criterion is for community pharmacy to contribute to reducing preventable deaths from asthma through surveillance of patients' use of inhalers. The quality payment encourages contractors to routinely carry out surveillance of patients' use of inhalers ensuring patients are given appropriate advice and are referred for an asthma review when this is indicated.

2. This process looks to identify patients who have been diagnosed with asthma and have been prescribed more than 6 short-acting bronchodilators in the last 6 months as these patients are likely to require their asthma to be assessed urgently. You may wish also to provide an inhaler technique and and MUR to support medicines optimisation

3. It is up to the contractor how they choose to engage and implement regular surveillance of patients' use of inhalers into their processes and procedures but at a minimum, historical dispensing of SABA and steroid inhalers for patients should be assessed at every point a SABA inhaler prescription is presented for dispensing for the treatment of asthma, without a prescription for a steroid inhaler also being presented at the same

[Asthma referrals – Suggested process for referring patients for an asthma review \(Word\)](#)

4. Where no patients are identified for referral, the contractor will still be eligible for payment as long as they can evidence that they have been working to identify suitable patients and that they have a process in place for referral should they identify someone ( evidence of the process and records of the work undertaken must be kept in any case)

5. Contractors should retain evidence that this process has been carried out in the pharmacy and may be required to provide evidence to local NHS England teams to show that they have met the quality criterion. ( please note that patient information should not be shown to NHSE if used as evidence during a visit)

[Data collection form – Patients referred for an asthma review \(Word\)](#)

Please note : Pharmoutcomes module is available to all contractors for usage in quality payments and also for the asthma referral

<http://psnc.org.uk/leicestershire-and-rutland-lpc/pharmoutcomes-support/>

5. The contractor will normally be referring the patient to their general practice – please keep evidence of this in your pharmacy and patient details must not be shown or shared during any visits from NHSE

[GP practice briefing document \(Word\)](#)

[Template letter for GP practice \(PDF\)](#)

Where the notification to the GP practice is undertaken via hardcopy/fax the Community pharmacy referral form can be used.

[Community pharmacy referral form \(Word\)](#)

6. Contractors will be required to confirm through the [NHS BSA online declaration page](#) that they meet this quality criterion.

<b>9</b>	<b>NHS 111 Directory of Services</b>	28th April 2017	<input type="checkbox"/>
	<p><i>On the day of the review, the pharmacy's NHS 111 Directory of Services entry is up to date.</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>	<b>AND</b> 24th November 2017	<input type="checkbox"/>

Please note the process to follow to update your DoS profile, is different to that stated in the NHS England guidance. Contractors should follow the process on the [NHS England website](#); the process is also listed below:

How to achieve this quality criterion -First review point (28th April 2017) to achieve the quality payment

1. Visit the [DoS checker website](#).

<https://view.pathwaysdos.nhs.uk/?SearchTerm=f286>

link to PSNC microsite for further information : <http://psnc.org.uk/services-commissioning/essential-services/quality-payments-nhs-111-directory-of-services/>

2. Enter either your ODS code (F code), postcode or pharmacy name to search for your pharmacy.

Please note : Please search the DOS by i) entering the ODS code ii) entering the postcode iii) entering the pharmacy name to ensure you pick up all the DOS entries and make a note of all the inaccuracies before completing the form ( there may be multiple entries that may not be picked up otherwise)

Even if you have multiple entries you will only need to complete one form at this stage and if any of data on any profile are incorrect you can state this in the form. The national team are still clarifying next steps with the local DOS teams so this is all you need to do at this stage.

The DOS entry may be made of more than one profile ( ie you may offer a MAS or emergency repeat medicines service) and hence there may also be multiple entries as a result.

3. If you cannot find your pharmacy after searching using all three fields, please email [england.communitypharmacy@nhs.net](mailto:england.communitypharmacy@nhs.net) with 'DoS' in the title, for further assistance.

4. Click on the profile for your pharmacy or one of the profiles if more than one is listed for your pharmacy.

Check that the information displayed for your pharmacy is accurate.

5. Make a note of any inaccuracies and keep this information. Your local NHS 111 DoS Lead will be in contact for this information at a later date.

6. If there is more than one profile listed for your pharmacy you should repeat steps 4-6 for each profile listed.

7. DOS FAQ 's are available at ; <http://psnc.org.uk/our-news/quality-payments-dos-fags/>

8.The [survey form](#) must then be completed. **Please note, even if your DoS entry is up to date, you will still need to complete the survey form to confirm you have reviewed your DoS entry.** The results of the survey will inform your local NHS 111 DoS Lead that you have checked your DoS entry and will let them know where changes need to be made.

9.Once the survey form has been completed, you will receive a confirmation email which should be retained as evidence that this quality criterion has been met.

10.Although the quality criterion states 'On the day of the review, the pharmacy's NHS 111 Directory of Services entry is up to date' NHS England has confirmed that as long as the above process is followed, contractors will meet the quality criterion for the April review point even if changes are not made to a pharmacy's DoS entry by the local NHS 111 DoS Lead by the April review point.

11.Local NHS 111 DoS Leads are developing systems locally to improve how updates to the DoS are made. Local DoS leads will communicate with contractors separately about this after the declaration period for the April review point closes.

### **Second review point (24th November 2017)**

The process for reviewing the DoS entry for the November review point is subject to change and further guidance will be issued when this process is finalised on the [NHS England website](#).

12. Contractors will be required to confirm through the [NHS BSA online declaration page](#) that they have checked and, if appropriate, requested appropriate changes to their DoS entry.

<b>10</b>	<b>Healthy Living Pharmacy (HLP) self-assessment</b> <i>On the day of the review, the pharmacy is a Healthy Living Pharmacy level 1 (self-assessment).</i>  <a href="#">PSNC guidance and resources to support contractors to meet this criterion</a>	28th April 2017  <b>OR</b>  24th November 2017*	<input type="checkbox"/>
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1. Community pharmacy contractors who wish to become a Healthy Living Pharmacy (HLP) Level 1 must be able to meet the 27 quality criteria ([tinyurl.com/HLPLevel1](http://tinyurl.com/HLPLevel1)) developed by the HLP Task Group of the Pharmacy and Public Health Forum, which has been published by Public Health England (PHE). This can be claimed at the November claim point.

**Action:** Read and Print HLP level 1 checklist and PHE HLP self-assessment guidance for your reference. The LPC will be providing further guidance and support to help you achieve this In due course. We are currently working with public health teams to formulate local support guidance to support you.

[HLP Level 1 Checklist \(Word\)](#)

<https://www.gov.uk/government/publications/healthy-living-pharmacy-level-1-quality-criteria>

2. Contractors must be able to provide evidence for each of the quality criteria and may be required to make this available for inspection. The evidence should be collated in a folder in the event there is a quality assurance or monitoring visit and should demonstrate ongoing activity to engage with the HLP Process.

The LPC will be supporting commissioning of a folder with a workbook to support you to achieve this and also to use the folder to keep your evidence . This folder will be sent to all contractors who have registered for HLP champion training and leadership.

3. The LPC are supporting contractors to achieve 2 criteria through the provision of HLP leadership Training and providing HLP champion training for pharmacy staff ( x 1 funded place). This will help you achieve 2 out of the 27 criteria you need to achieve.

**Action:** The deadline is to complete the HLP champion training is within 8 weeks of receipt as per your declaration and our agreement with health education england when ordered so please complete this as soon as you possibly can to achieve this criteria and Pharmacy Complete are supporting us to follow this up and complete the accreditation process

Link : HLP leadership event booking form : <https://www.eventbrite.co.uk/e/hlp-pharmacist-leadership-training-llrlpc-tickets-29647581715>

Link : HLP champion training booking for staff at ; <https://www.surveymonkey.co.uk/r/BHNF9GL>

4. The HLP concept is a vision to to develop community pharmacies from being suppliers of medicines to become Healthy Living Centres providing self-care advice and treatment for common ailments and healthy lifestyle interventions, in addition to providing the safe supply and use of prescribed medicines in everyday practice.

There are three levels of service delivery within the HLP framework: Level 1: Promotion – Promoting health, wellbeing and self-care (in July 2016, Level 1 changed from a commissioner-led process to a profession-led self-assessment process); At a later stage the aim is to work towards Level 2 and 3 .Level 2 being about prevention through service delivery (commissioner led) and level 3 being about Protection through provision of treatment. The achievement of Level 1 status will support us in the long term to gain more commissioned services for delivery.

5. Below are links to **the checklist of the 27 quality criteria** which pharmacy teams need to achieve to gain HLP Level 1 status:

[HLP Level 1 Checklist \(Word\)](#)

[HLP Level 1 Checklist \(PDF\)](#)

A **HLP Level 1 Evidence Portfolio Workbook** which pharmacy teams can use to guide them through the HLP quality criteria and assist them with recording their evidence to show they have reached HLP Level 1 is available below:

[HLP Level 1 Evidence Portfolio Workbook v2 \(Word\)](#)

[HLP Level 1 Evidence Portfolio Workbook v2 \(PDF\)](#)

A **flow chart detailing the process** to follow to achieve HLP Level 1 can also be found below:

HLP Level 1 Flow Chart v2 (Word)

[HLP Level 1 Flow Chart v2 \(PDF\)](#)

### **Holding a health promotion event/campaign**

Holding health promotion events/campaigns and documenting details of these are a way for pharmacy teams to demonstrate that they meet several of the quality criteria that pharmacy teams need to meet to achieve and maintain HLP Level 1.

[PSNC Briefing 011/17: Healthy Living Pharmacy – Holding a health promotion event/campaign](#)

7.All PSNC resources including guidance, resources and support are available at;

<http://psnc.org.uk/services-commissioning/locally-commissioned-services/healthy-living-pharmacies/>

8. Pharmacies becoming HLPs for the first time will need to register on the RSPH online register by completing the [assessment of compliance](#) once they have met the requirements of a HLP Level 1 as defined by [PHE](#).

The RSPH online register has been commissioned by PHE and is only open to those pharmacies that have undertaken the profession led self-assessment process and have not been previously accredited as an HLP. This online register is a pilot and is open to a limited number of pharmacies for a limited period of time. ( further updates will be provided by the LPC on developments)

9.Contractors will be required to confirm through the [NHS BSA online declaration page](#) that they meet this quality criterion.

<b>11</b>	<b>Community Pharmacy Patient Questionnaire (CPPQ) results</b>	28th April 2017 <b>OR</b> 24th November 2017*	<input type="checkbox"/>
<p><i>On the day of the review, the results of the Community Pharmacy Patient Questionnaire from the last 12 months is publicly available on the pharmacy's NHS Choices page or for distance selling pharmacies it is displayed on their website and the NHS Choices service desk has been notified as per the NHS England guidance document, "Pharmacy Quality Payments – Quality Criteria Guidance". (Note – the wording of this requirement was amended in the March 2017 Drug Tariff.)</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>			

1. CPPQ for Pharmacies and DSP's – On the day of the review, the results of the Community Pharmacy Patient Questionnaire from the last 12 months is publicly available on the pharmacy's NHS Choices page or for distance selling pharmacies it is displayed on their website and the NHS Choices service desk has been notified as per the NHS England guidance document, "Pharmacy Quality Payments – Quality Criteria Guidance".

**Please read 21-22 of NHSE guidance for guidance on how it should be submitted and the specific wording to be used.**

In order that the CPPQ is presented in a way that NHS Choices users can easily understand and interpret, the following introductory text must be inserted by the contractor into the 'description text' field of the news item so that it will appear before the questionnaire report:

*Every year we undertake an annual patient survey to enable our patients to provide valuable feedback on the services that we provide. The survey, undertaken by all community pharmacies in England, is called the Community Pharmacy Patient Questionnaire. The report of our survey results allows us to identify the areas where we are performing most strongly, the areas for improvement and the actions required to address issues raised by respondents. Our results for 2016/17 are provided here.*

2. In order to meet this quality criterion, the results of the CPPQ from the last 12 months must be uploaded to the pharmacy's NHS Choices profile by the contractor in a Portable Document Format (PDF) file format. This will be achieved by the contractor creating a news item within the overview section of the profile.

3. A User Guide on the process to follow to upload the CPPQ onto a NHS Choices profile is available on the [NHS Choices](#) website. Please note that **if the naming conventions are not followed as outlined in the guidance, the pharmacy will not appear on the report, provided by NHS Choices to NHS England, validating that the pharmacy meets this quality criterion**

4. A template worksheet and report for publication on the NHS Choices website have been developed to collate and analyse the responses received in the CPPQ. Both documents can be found on the [CPPQ page](#)

5. Contractors will be required to confirm through the [NHS BSA online declaration page](#) that they have uploaded their 2016/2017 CPPQ report to their NHS Choices profile.

<b>12</b>	<b>Patient safety report</b>	<p>28th April 2017 <b>OR</b> 24th November 2017*</p>	<input type="checkbox"/>
<p><i>Written safety report at premises level available for inspection at review point, covering analysis of incidents and incident patterns (taken from an ongoing log), evidence of sharing learning locally and nationally, and actions taken in response to national patient safety alerts.</i></p> <p><a href="#">PSNC guidance and resources to support contractors to meet this criterion</a></p>			

1. The aim of this criterion is to foster a culture of learning and continuous improvement in every pharmacy with regard to patient safety. It is based on the following principles that have been developed in collaboration with community pharmacy Medication Safety Officers (MSOs) and stakeholders, to support the production of the written patient safety report

2. The written safety report should be specific to each individual pharmacy and should be a summary that reflects the events taking place in that pharmacy. Contractors are encouraged to work with other pharmacies to share their learning.

In order to meet this quality criterion, contractors should:

- collate incidents and near misses from an ongoing log;
- analyse these and look for patterns;
- reflect on the learning from these;
- take actions to minimise future risk from repeated errors; and
- share their learning (both locally and nationally).

3. This should then be documented in a written patient safety report. Incidents to be included in the report should include errors or near misses that involve medication that have caused patient harm or had the potential to do so. Errors picked up early in the dispensing process or documentation errors would therefore not be included.

The report must also include evidence of specific actions taken by the pharmacy in response to local errors and national patient safety alerts issued by the [Central Alerting System](#).

**4. A template to collate and review patient safety incidents each month:**

[Monthly patient safety report template \(Word e-form\)](#)

**A template to complete the annual written patient safety report:**

[Annual patient safety report template \(Word e-form\)](#)

5. Contractors will be required to declare through the [NHS BSA online declaration page](#) that they meet this quality criterion.

Compiled by Luvjit Kandula correct as of 3.4.2017

