



# Tees Healthy Living Pharmacy (HLP) Prospectus

This prospectus covers Community Pharmacies in:

- Hartlepool
- Stockton on Tees
- Middlesbrough
- Redcar and Cleveland

## Partner Organisations

- Tees Local Pharmaceutical Committee



## *Delivering Sustainable Quality* 2015/16



## FOREWARD

The Healthy Living Pharmacy (HLP) framework is a tiered commissioning framework aimed at achieving consistent delivery of a broad range of high quality services through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities.

The framework comprises of three levels of increasing complexity and required expertise with pharmacies aspiring to go from one level to the next.

It is also an organisational development framework underpinned by three enablers of:

- workforce development – a skilled team to pro-actively support and promote behavior change, improving health and wellbeing;
- premises that are fit for purpose; and
- engagement with the local community, other health professionals (especially GPs), social care and public health professionals and Local Authorities.

A copy of the overarching framework can be found in appendix 1.

Community pharmacies wishing to become HLPs are required to consistently deliver a range of commissioned services based on local need and commit to and promote a healthy living ethos within a dedicated health-promoting environment.

Locally HLP is seen as a key enabler that will support delivery of the Public Health strategic plans in Hartlepool, Stockton on Tees, Middlesbrough and Redcar and Cleveland. Currently public health services are commissioned from 101 of the 122 pharmacies across Tees. These include supervised administration, needle exchange, healthy start vitamins, smoking cessation, weight management and alcohol brief intervention, emergency contraception\* and chlamydia screening\*.

\*Commissioned directly by local sexual health provider who is commissioned by public health.

Tees PCTs and subsequently Tees Local Authority Public Health teams have commissioned and worked in partnership with the Tees Local Pharmaceutical Committee to support the development of HLP since 2012. At present we have approximately 40 pharmacies that are accredited HLP's. In 15/16 local Directors of Public Health would like all pharmacies who are commissioned to deliver public health services to become or be working towards becoming a HLP level 1.

To support this expansion both the local prospectus and the accreditation process have also been reviewed and revised.

## What is special about a Healthy Living Pharmacy?

- Promotes healthy living & wellbeing as a core activity
- Has a team proactive in supporting health & wellbeing, with the community's health at centre of all it does
- Is accessible and approachable
- Is valued and trusted
- Maintains premises to a high professional standard with private consultation facilities and IT linked to local practice when available
- Work closely with other healthcare providers, proactively and reactively
- Will be easily identifiable by the public and healthcare professionals
- Is a community hub capitalising on its community based social asset status

## What are the benefits of implementing HLP in my pharmacy?

- Improvements in outcomes, quality and productivity
- Ability to demonstrate to both present and future commissioners what community pharmacy can deliver to improve the health and wellbeing of the local population.
- Supports raising awareness of the role of community pharmacy in support of Healthy Living to local populations so that increasingly community pharmacy becomes an access point of choice for patients seeking solutions to their health and wellbeing needs
- A recognisable branding for HLP that represents excellent quality to the public and health professionals.
- An engaged and motivated pharmacy team able to deliver proactive health and wellbeing interventions and improved performance.
- Improved involvement and engagement of the wider pharmacy team through the development of trained Health Champion/s (has achieved the Royal Society of Public Health Understanding Health Improvement Level 2 Award)
- Enhanced engagement and collaboration with other health professionals
- A commissioning framework and evidenced health outcomes that highlights the community pharmacy's role in public health intervention for new commissioners

**Being a HLP and the HLP kite mark demonstrates consistent delivery of high quality services and a health and wellbeing ethos in the pharmacy.**

## Tees Healthy Living Pharmacy requirements 2015/16

A revised model has been developed locally that is based on the findings of the national HLP pathfinder programme and tailored to local needs.

### Overarching Requirements

- At all times the pharmacy practices in accordance with all pharmaceutical legislation and professional guidance
- At all times the pharmacy practices in accordance with General Pharmaceutical Council Standards of Conduct, Ethics and Performance.
- The pharmacy actively uses PharmOutcomes
- The pharmacy is contracted to receive and dispense prescriptions on a face to face basis with patients.
- The pharmacy complies 100% with the HLP 15/16 assessment on PharmOutcomes for the level that they are seeking to achieve. NB. Commissioners are only requiring pharmacies to be at level 1.

- Action plans / evidence records to meet the assessment criteria are entered in the boxes under each criterion in Pharmoutcomes under the Assessments tab. Boxes are revealed by clicking 'Reveal Plans'
- Evidence of compliance e.g. documents referred to in action plans / evidence record is also collected and organised in a portfolio that is available for inspection by TVPHSS / LPC representatives.
- Pharmacy maintains a log of public health interventions on PharmOutcomes. HLP pharmacies (all levels) will be expected to record a minimum of 20 such interventions / month. These should be recorded on the Healthy Living Pharmacy Data Collection pharmoutcomes template. These will be in addition to data collected for any commissioned services. Pharmacies should also keep a record / log of any campaign and community engagement activity. As a minimum the pharmacy must record details of activity in relation to 6 mandatory public health campaigns.

## The Community Pharmacy Contractual Framework (CPCF): Essential Services

The pharmacy meets the requirements of the Community Pharmacy Contractual Framework for Essential Services.

### Health Champion and Health Promotion

- The pharmacy has at least two\* trained Health Champions that have passed a Tees specified Royal Society of Public Health Understanding Health Improvement Level 2 course. This is a two day course that will be provided free of charge to participating pharmacies and delivered locally. The course will be arranged and delivered by the HLP Lead Tees LPC.  
\*100 hour pharmacies must have at least 3 trained health champions, small pharmacies may request that they only have 1 health champion. The request for less than 2 health champions should be made in writing to the HLP Lead TVPHSS.
- The pharmacy has a dedicated Healthy Living Pharmacy Zone with professional regularly updated displays. New posters and leaflets reflecting the current contractual directed or pharmacy selected contractual campaign, to be displayed for at least one week. Displays should be impactful to the public and raise interest. All pharmacy staff actively promote each campaign.
- The Health Champion maintains a supply of relevant, up to date health promotion literature.
- The Health Champion co-ordinates the pharmacy approach and delivery as a minimum of the 6 mandatory contractual campaigns including which customers to target and how.
  - Of the 6 contractual campaigns 1 must be in partnership with a charity, community organisations, voluntary sector organisation, Clinical Commissioning Groups or health care professional; and one must be a special outreach event with an invited guest e.g. local GP, Councillor, School Teacher etc
  - For each of these campaigns a short report and photographic evidence of your activity must be prepared, documented on Pharmoutcomes (NHS England Health Promotion Campaign Review for HLP) and a press report for the HLP Lead Tees LPC to include in the HLP newsletter or to pass to the local communications team to forward to the local media.
- The Health Champion plans how to target relevant customers for each campaign the pharmacy conducts and obtains adequate supplies of materials in advance.
- The pharmacy sources and displays suitable resources and targets suitable customers opportunistically.
- The Health Champion keeps evidence in the HLP evidence folder detailing all pharmacy health promotion campaigns including details of partner organisations and invited guests (e.g. see above) where appropriate and training provided or cascaded to pharmacy staff
- Health champions will be provided with additional support from a HLP Peer Champion.

## Signposting

- The Health Champion maintains and updates the pharmacy signposting information in a file whether from local commissioners or independently sourced and ensures that staff are aware of its contents
- The pharmacy identifies individuals who need support for health and wellbeing and services. This may include a service within the pharmacy setting. Such public health interventions are recorded on PharmOutcomes in the Healthy Living Pharmacy Data Collection template ( minimum of 20 records / month)
- Pharmacy proactively approaches individuals about their health and wellbeing
- The pharmacy refers potential quitters to locally commissioned stop smoking services. This may be within the pharmacy or elsewhere
- If not commissioned to provide emergency contraception, pharmacy staff signpost clients to alternative emergency contraception service provision nearby, checking there is a qualified person to deliver the service in attendance able to deliver the service
- The pharmacy actively promotes Chlamydia screening to young people and signposts to the specialist service as appropriate

## Health Promotion Resources

- Campaign material, either sourced by the contractor or provided by a commissioner should be displayed in a prominent area within the pharmacy
- Supporting literature for mandatory contractual campaigns, such as patient leaflets and/or briefing sheets for staff for each campaign, where available, will be provided to contractors in advance. This campaign material may come from a host of organisations including Department of Health, NHS Public Health England, NHS England, CCGs and Local Authorities or individually sourced by pharmacy staff.
- Pharmacists and pharmacy staff are to actively take part in, and contribute to the campaigns for patients (and general pharmacy visitors) during the campaign period, including giving advice to people on the campaign issues. This advice may be supplemented by provision of written information and in-store displays
- Pharmacy staff are aware of the public health campaigns and their involvement.

## Team leadership

- Pharmacy has a person either the main pharmacist or an individual in a management or leadership role who has undertaken locally specified HLP leadership training (or equivalent to be approved by HLP Lead LPC). This is a one day course that will be provided free of charge to participating pharmacies and delivered locally. The course will be arranged by the HLP Lead Tees LPC.
- Ensure appropriate recording and documentation is undertaken.
- The individual identified as the team leader has set up a plan and records how staff training and development in this area is being supported. Typical entries should include: Healthy Living Champion support and development, how training is cascaded to staff and skill mix development
- The pharmacy team leader has approached the local GP practices to discuss how the pharmacy agenda can support the GPs. Examples of planned collaboration are recorded e.g. targeting patients for MURs in line with GP agenda

## Advanced Services

- The identified pharmacist leader/regular manager if not team leader is MUR accredited

- The pharmacy delivers a minimum of 50 MURs on patients and feeds back any actions to the patient's GP according to national requirements for the advanced service. 70% of MURs to be conducted on patients in national target groups defined as patients on high risk medicines, patients recently discharged from hospital, patients with respiratory conditions and patients with or at risk of cardiovascular disease.
- The pharmacy has set up a system for actively recruiting patients for the New Medicines Service. The pharmacy actively delivers NMS every month.

## Specific Local Requirements

- The pharmacy has an internet linked IT terminal accessible to the consultation area.
- The pharmacy and consultation area are clean uncluttered and welcoming providing a professional environment with the impression that health and wellbeing services can be accessed readily
- The pharmacy refrains from promoting e-cigarettes unless or until regulated licensed Nicotine Replacement e-cigarette products become available. Current products do not have an established evidence base of effectiveness or safety as NRT products. RPS, NICE and MHRA guidance do not endorse the use of these unlicensed products as a form treatment through pharmacies.
- The pharmacy refrains from promoting healthy lifestyle products that are not endorsed through national licensing and regulatory guidance.
- Information about which commissioned, free at the point of delivery services are available at the pharmacy is conspicuously displayed
- For Level 2 and above a minimum of 2 commissioned public health services are required to be actively provided. (This can include flu vaccination service commissioned by NHS England).
- All level 1 HLP will deliver dispensing only stop smoking service. Level 2 and above will deliver or be willing to deliver tier 2/3 smoking service.
- Champions; For level 1 to have a Dementia Champion ,for level 2 to have a Mental Health Champion for level 3 to have a Breast Feeding Champion

## Quality criteria

- The pharmacy has completed and complies 100% with the HLP 15/16 assessment on PharmOutcomes for the level that they are seeking to achieve. NB. Commissioners are only requiring pharmacies to be at level 1.

## How to Apply

- Complete the HLP Application form on Pharmoutcomes. The application form is for the 'pharmacy' to become a HLP. You are responsible for ensuring that the application is supported and authorised by the appropriate staff from your organisation. As part of the application you will need to identify which staff will require health champion and leadership training and provide their contact details.
- In submitting the application, applicants are consenting to the information regarding Healthy Living Pharmacy to be shared with Hartlepool, Stockton on Tees, Middlesbrough, Redcar and Cleveland Local Authorities and Tees Local Pharmaceutical Committee with the consent of the Tees Community Pharmacy Development Group steering group.
- Ensure you have read and understand the prospectus.

## What happens after an application is made?

- Pharmacy completes a baseline HLP 15/16 assessment on PharmOutcomes for the level that they are seeking to achieve. This will help identify action plans they will need to develop and implement to achieve the required status – these should be recorded on the template. Pharmacy should continue to update and

record evidence of actions completed in the template until they are happy they have achieved requirements for required level. The template should be viewed as an on-going record of actions and activity – so please add to the template rather than delating or overtyping information.

- When the pharmacy has signed up to HLP there is a maximum 1 year to become accredited. NB Public Health commissioners locally have issued a contract variation which sets out their requirement for any pharmacy contracted to provide a public health service should achieve HLP level 1 by 31/3/16 or within a year of starting to deliver services.
- If after a year the pharmacy has not achieved the criteria then a 6 months period must lapse before any subsequent application can be made
- Pharmacy should start to record PH interventions on the Pharmoutcomes Healthy Living Pharmacy Data Collection template. ( This also helps support delivery of CPAF)
- Champions / Leaders requiring training will be contacted via pharmoutcomes to book on next available training

### How will Pharmacies be supported to become a HLP?

- Pharmacies will be provided with opportunity to train at least two health champions – Training planned 30/31<sup>st</sup> July and 16<sup>th</sup>/17<sup>th</sup> Sept.
- Pharmacies will be provided with opportunity to have a pharmacist attend leadership training. Training planned on 15<sup>th</sup> July, 14<sup>th</sup> October and 26<sup>th</sup> January.
- Health champions will be supported by a HLP Peer Champion employed by the LPC. This post will provide practical support and advice to health champions. The post will also advise and support some elements of the accreditation process.
- HLP Lead LPC will provide support and mentorship to participating pharmacies and help support community engagement activity. They will also co-ordinate HLP specific training.
- TVPHSS HLP Lead will be responsible for managing the accreditation process and maintaining register of HLP. They will be supported by sessional Pharmacist Accreditors who will undertake the assessment of compliance.

### What if a pharmacy was accredited under requirements of a previous prospectus?

- All pharmacies will be reaccredited annually. In 15/16 any pharmacies due for reaccreditation will expect to be working towards the new prospectus from 1/7/15. In order to support working towards your reaccreditation we suggest you also complete the HLP 15/16 assessment and use this update and assess your evidence of compliance with the level you seek to be accredited for. The main additional requirement is on an-going basis to record a minimum of 20 public health interventions / month in the Healthy Living Pharmacy Data Collection pharmoutcomes template. Pharmacies will be expected to have started recording these from 1/7/15. There is also a new template for recording evidence of NHS England Health Promotion Campaigns.

### What happens when a Pharmacy is ready to be accredited / reaccredited?

- Once the pharmacy lead is happy that they are 100% compliant with the requirements for the level and where relevant have documentary evidence to support this they should update their HLP assessment template on pharmoutcomes to reflect this.
- Pharmacy should then submit a request for an accreditation visit via the link on pharmoutcomes.

## Assessment of achievement of HLP standards

From 1/6/15 responsibility for accreditation will sit with TVPHSS.

Assessment will be by

1. Inspection of HLP Evidence Folder e.g.
  - a. Copies of certificates e.g. RSPH, Leadership
  - b. Pharmacy public health campaign log
  - c. Reports or photographs from public health campaigns
  - d. CPD entries (optional but may prevent need for duplicate recording)
  - e. Signposting resources
2. PharmOutcomes
  - a. Completion and 100% compliance with the HLP 15/16 assessment on PharmOutcomes for the level that they are seeking to achieve. Service and HLP data – minimum of 20 HLP interventions / month, 6 public health campaigns.
3. An accreditation visit – this will be undertaken by a sessional pharmacist accreditor supported by the HLP Peer Champion. As part of their visit they will ask to view plans and evidence recorded.

## Recognition of HLP accreditation

- On accreditation as a Healthy Living Pharmacy, the pharmacy will receive a certificate.
- The pharmacy will be able to use the Healthy Living Pharmacy Logo.

## Maintenance of HLP accreditation

The pharmacy continues to comply with all the requirements of this prospectus on a rolling basis.

If an accredited pharmacy cannot comply with the requirements of this prospectus, then the pharmacy is invited to withdraw from the programme and relinquish HLP accreditation by contacting the HLP TVPHSS Lead. This does not exclude the pharmacy from re-applying when it is in a position to achieve compliance with the Tees HLP requirements. Loss of a Healthy Living Champion or Leader does not require scheme withdrawal provided that the pharmacy replaces this capacity within 6 months.

If a Health Champion or pharmacist/pharmacy team leader trained in the Tees Locality leaves the pharmacy, then the pharmacy will be expected to fund the training of a replacement according to the Tees locality specified training, within a reasonable time (Maximum 6 months)

## Removal of HLP Accreditation

As the HLP awarding body, TVPHSS reserves the right to remove the HLP accreditation. This may take place, for example for

- Failure to meet the HLP standards
- Failure to meet the GPhC standards for good pharmaceutical practice
- Unfit to practice
- Evidence of unprofessional/fraudulent practice at the pharmacy

## Pharmacy and Public Health Contact Details

Tees Valley Public Health Shared Service		
HLP Lead TVPHSS Community Pharmacy Lead Contract Manager	Jo Linton Philippa Walters  Philip Ray	<a href="mailto:jolinton@nhs.net">jolinton@nhs.net</a> <a href="mailto:philippa.walters@nhs.net">philippa.walters@nhs.net</a>  <a href="mailto:philip.ray@nhs.net">philip.ray@nhs.net</a>
Local Authority Lead Commissioners for HLP		
Hartlepool	Carol Johnson	
Stockton on Tees	Kerry Anderson	
Middlesbrough	Joe Chidanyika	
Redcar and Cleveland	Rebecca Laidler	
Other Useful Contacts		
HLP Lead LPC	Sandie Hall	<a href="mailto:sandie.hall1@nhs.net">sandie.hall1@nhs.net</a>
Chair Tees LPC	Jay Badenhorst	
Tees Local Pharmaceutical Committee Website		

## Appendix 1 Tees HLP FRAMEWORK

### LOCAL HEALTH NEEDS

QUALITY CRITERIA				
		LEVEL 1: HLP PROMOTION	LEVEL 2: HLP PREVENTION	LEVEL 3: HLP PROTECTION
<b>FOUNDATION AND CULTURE</b>	Workforce Development and Capacity	Health Champion x 2 Leadership skills	Behavioural change skills Leadership skills	Prescriber qualification Proactive leadership and mentorship of other teams
	Pharmacy Environment	GPhC Standards Pharmoutcomes	Enhanced IT and premises	Enhanced IT and premises
	Engagement	Delivery of contractual campaigns Involvement in 2 public engagement events	Proactive community engagement	Public Health and clinical leadership
SERVICE CRITERIA				
For Level 2 and above a minimum of 2 commissioned public health* services are required *can include NHS England commissioned flu service				
<b>SERVICE PROVISION</b>	Smoking	Proactive health promotion, brief advice, assess willingness, signpost. Dispensing only voucher service	Tier2/3 smoking service	COPD and cancer risk assessment with referral Prescriber /PGD for stop smoking service
	Alcohol	Proactive health promotion, brief advice, assess willingness, signpost.	Alcohol screening and intervention service including use of AUDIT	Structured alcohol intervention service Vaccination
	Sexual Health	Proactive health promotion, brief advice, signpost.	C Card Provision, EHC Chlamydia screening	Prescriber for sexual health services
	Substance misuse	Proactive health promotion, brief advice, signpost.	Needle and syringe exchange service /Methadone /Buprenorphine supervised administration service	Vaccination, prescriber for drug misuse clients
	Long Term Conditions	Proactive health promotion, brief advice, signpost. NMS / MUR/tMUR	Influenza vaccination service	Pharmacist with Special Interest for LTC (prescriber) Clinical Medication Reviews
	Other	At least one Dementia Champion in each pharmacy	At least one Mental Health Champion in each pharmacy	One Breast Feeding Champion in each pharmacy