

PSNC Briefing 041/20: Part 2 2020/21 Pharmacy Quality Scheme - Evidence checklist

This PSNC Briefing provides community pharmacy contractors with examples of suggested evidence, in a checklist format, that they can use to confirm they have the necessary evidence ready to make their Pharmacy Quality Scheme (PQS) declaration.

It is important that contractors have this evidence to assure themselves that they meet all the requirements for each criteria within a domain, as well as to be able to provide this evidence to the NHS Business Services Authority (NHSBSA) Provider Assurance Team, if requested, who may undertake validation checks on behalf of NHS England and NHS Improvement (NHSE&I).

Completion of and claiming for the [Part 1 scheme](#) is a Gateway requirement for the Part 2 scheme.

The examples provided as suggested evidence are not exhaustive; other evidence may also be suitable.

In relation to any of the training requirements, at the time of declaration, if a contractor has new staff who have recently joined the pharmacy or staff returning from long term leave who have not undertaken the training and assessment, the contractor can make the declaration as if they had undertaken the training and assessment, as long as they have a plan to ensure it is undertaken within 30 days of the day of the declaration. Contractors should keep a copy of the training plan and demonstrable evidence of completion of the training and assessment within 30 days of the day of the declaration as evidence of having met the requirement.

Guidance on all the criteria can be found at:

- [PSNC PQS 2020/21 Part 2](#)
- [NHSE&I Pharmacy Quality Scheme Guidance 2020/21](#)

Domain	Criteria	Complete
Infection Prevention & Control and AMS	<p>Infection Prevention and Control</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> • Copy of certificates of all non-registered staff who have completed the Level 1 e-learning and assessment; • Copy of certificates of all registered staff who have completed the Level 2 e-learning and assessment; • Copy of a team review documenting the reflections and actions following the training; and 	<input type="checkbox"/>

Prevention	<ul style="list-style-type: none"> Amended standard operating procedures (SOPs) and associated guidance, where appropriate. 	
	<p style="text-align: center;">Antimicrobial Stewardship (AMS)</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> Copy of certificates of all patient-facing pharmacy staff who have completed the training and assessment; Copy of an action plan including details of how all pharmacy staff involved in the provision of self-care advice will incorporate the principles of AMS into self-care advice, including reinforcing the messages around appropriate use of antibiotics, and the uptake of vaccinations, including the flu vaccine; Copy of certificates of all patient facing staff that provide health advice to confirm they have become antibiotic guardians; Training record which records a briefing provided to all patient facing staff that provide health advice on the local antibiotic formulary; and Printed copy of the local antibiotic formulary. 	<input type="checkbox"/>
	<p style="text-align: center;">Suicide awareness and action plan</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> Copy of certificates of all patient-facing staff who have completed the Zero Suicide Alliance training; Compile a record of all staff that have not completed the training under the exemption that has been given; and Copy of an action plan prepared or updated which includes the action to take if anyone reports to staff that they have suicidal feelings and details of the resources which can be provided/identified to patients. 	<input type="checkbox"/>
	<p style="text-align: center;">Sugar sweetened beverages</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> A record of the sales of sugar sweetened beverages, which must account for no more than 10% by volume in litres of all beverages sold; and Where pharmacy contractors are part of a larger retail store, local guidance that the pharmacy is not routinely required to sell SSBs through their tills. 	<input type="checkbox"/>
	<p style="text-align: center;">Weight management</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> Copy of the user activity report of all non-registered, patient-facing pharmacy staff that have completed the PHE All Our Health: bitesize training and assessments on Adult Obesity and Childhood Obesity; 	<input type="checkbox"/>

	<ul style="list-style-type: none"> • Copy of certificates of at least 80% registered pharmacy professionals that have completed sections 1 and 3 of the CPPE Weight management for adults: understanding the management of obesity training and assessment; • A copy of a completed weight management action plan on how they would proactively engage with people to discuss weight and assist a person who would like support with their weight; this should include a list of local support or physical activity groups that the person could be referred to and support materials/tools they could use; and • A record of data capture, over a period of 4 consecutive weeks showing the total number of people who had a conversation with a trained member of the pharmacy team about the benefits of achieving a healthy BMI, who have been shown how to self-measure and calculate their BMI and self-measure their waist circumference and the total number of people referred to other services for weight management support, e.g. physical activity. 	
<p>Risk Management</p>	<p>Risk Management</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> • Copy of certificates of at least 80% of all registered pharmacy professionals who have completed CPPE Risk management training and e-assessment (If the training and assessment were completed between 1st April 2018 and 31st March 2020, this does not need to be repeated in 2020/21); • Copy of certificates of at least 80% of all registered pharmacy professionals who have completed the CPPE sepsis online training and assessment (If this was not completed as part of the PQS 2019/20); • A copy of a new risk review (or update of the previous risk review undertaken as part of the 2019/20 PQS) including a recorded reflection on the risk of missing sepsis identification and the risk minimisation actions that have been undertaken to mitigate this risk; and • The risk review should also include the risk of missing red flag symptoms during over the counter consultations and have recorded demonstrable risk minimisation actions that have been undertaken to mitigate this risk. These actions could include: reviewing staff training records, observing over the counter advice being provided to patients, identifying any gaps in knowledge or capability for pharmacy team members, conducting a team discussion focusing on identifying common danger signs and symptoms and knowing how to manage these, including when to refer patients. 	<input type="checkbox"/>
<p>Primary Care Network – Prevention</p>	<p>Primary Care Network – Prevention</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> • A record to indicate communication with the Pharmacy PCN Lead, and agreement to be involved in increasing the uptake of flu vaccinations to patients aged 65 and over by the provision of flu vaccinations; 	<input type="checkbox"/>

	<ul style="list-style-type: none"> • A record of the number of vaccines that have been administered to eligible patients between 1st September 2020 and 31st January 2021 which contributed to the PCN achieving at or above a specified percentage; • A copy of the PCN Community Pharmacy Flu plan; and • Details of the aligned PCN name, name of the Pharmacy PCN Lead, the name and the ODS code of the pharmacy the Pharmacy Lead is based in. <p>Pharmacy PCN Lead</p> <ul style="list-style-type: none"> • A record to indicate communication with the PCN Clinical Director and all community pharmacies in the PCN that wish to be involved, to agree how they will collaborate with each other and discuss how they could collaborate with general practice colleagues; • A record of the number of vaccines that have been administered to eligible patients between 1st September 2020 and 31st January 2021 (where the pharmacy provides the service); • The ODS codes of the pharmacies which have engaged in the process for increasing the uptake of flu vaccination to patients aged 65 and over; and • An email confirming, they have notified the LPC in which the PCN lies that they are the appointed Pharmacy Lead for the named PCN. 	
<p>Primary Care Network – Business Continuity</p>	<p>Primary Care Network – Business Continuity</p> <p>Suggested evidence:</p> <ul style="list-style-type: none"> • A record indicating participation in a group business continuity discussion with the Pharmacy PCN Lead and other contractors in the PCN; • Copies of the updates made to the pharmacy business continuity plan, to reflect the collaborative work required in the event of closures, if appropriate; • A copy of the PCN Community Pharmacy business continuity plan; and • Details of the aligned PCN name, name of the Pharmacy PCN Lead, the name and the ODS code of the pharmacy the Pharmacy Lead is based in. <p>Pharmacy PCN Lead</p> <ul style="list-style-type: none"> • A record to show the facilitation of a business continuity discussion, for all contractors in the PCN who wish to take part in it; • Copy of the collated information from the group business continuity discussion; • Evidence of sharing this information with all the contractors within the PCN, the PCN Clinical Director, the LPC and the NHSE&I regional team; • The ODS codes of the pharmacies which have taken part in the business continuity discussion; and • An email confirming, they have notified the LPC in which the PCN lies that they are the appointed Pharmacy Lead for the named PCN. 	<input data-bbox="1369 1133 1417 1173" type="checkbox"/>

Submissions of declarations to NHSBSA

Contractors will be able to claim for their PQS payment via the [Manage Your Service \(MYS\)](#) application. The PQS must be claimed for between 09:00 on 1st February 2021 and 23:59 on 26th February 2021.



DO NOT MISS THIS DEADLINE: CONTRACTORS WILL NOT BE ABLE TO CLAIM A PQS PART 2 PAYMENT IF THEY MISS THIS DEADLINE.

Information on how to register with MYS is available on the [PSNC website](#).

Once a contractor has completed and submitted their online declaration via MYS, it cannot be altered.

The evidence of meeting the criteria should be retained as it may be required for post payment verification purposes.

If you have queries on this PSNC Briefing or you require more information, please contact the [PSNC Services Team](#).