September 2019

PSNC Briefing 041/19: The Pharmacy Quality Scheme 2019/20

In July 2019, a new Pharmacy Quality Scheme (PQS) was announced for the 2019/20 financial year; this scheme was formerly known as the Quality Payments Scheme (QPS). This PSNC Briefing is an updated version of PSNC Briefing 029/19 following further discussions between PSNC and NHS England and NHS Improvement (NHSE&I), which provides updated and new information on the Scheme. The requirements of the PQS 2019/20 will also be published in the October 2019 Drug Tariff.

The review period

There will be no review point as there has been in previous schemes. Contractors will be required to make a declaration between 9am on 3rd February 2020 and 11.59pm on 28th February 2020 on the NHS Business Services Authority (NHSBSA) Manage Your Service (MYS) application. Contractors will be required to declare that on the day of making their declaration, that they meet the gateway criteria and that they meet the domains they are claiming payment for (except if they plan to meet the Sugar Sweetened Beverage (SSB) quality criterion by 31st March 2020).

NHS England and NHS Improvement guidance

NHSE&I will be publishing guidance to provide more information on the PQS 2019/20; this will be available on the NHS England website. PSNC will alert contractors once the guidance is published through our normal communication channels.

The gateway criteria

There are **four** gateway criteria which contractors must meet on the day of making their declaration for a PQS 2019/20 payment. As per previous declarations, passing the gateway criteria will not, in and of itself, earn a payment for the pharmacy.

1) Advanced services

On the day of the declaration, contractors must be offering at the pharmacy the New Medicine Service (NMS) and/or the NHS community pharmacy seasonal influenza vaccination service.

If a contractor is declaring that they provide the Flu Vaccination Service and/or NMS at the pharmacy to meet this gateway criterion, they should ensure that either or both of these services are listed on their NHS.UK profile.

2) NHSmail

On the day of the declaration, pharmacy staff at the pharmacy must be able to send and receive NHSmail from their shared premises specific NHSmail account, which must have at least two live linked accounts.

Each pharmacy's designated mailbox owner can add and remove personal NHSmail addresses to or from a pharmacy's shared premises NHSmail account as required. If your pharmacy does not have a shared NHSmail account or two live linked accounts, PSNC's NHSmail page contains further guidance.

3) NHS website

On the day of the declaration, the contractor must update its NHS website profile in respect of its opening hours (including Easter Sunday 2020 and the following public and bank holidays:

- Christmas Day 2019;
- Boxing Day 2019;
- New Year's Day 2020;
- Good Friday 2020;
- Easter Monday 2020;
- Early May Bank Holiday 2020; and
- Spring Bank Holiday 2020),

services and facilities and promptly update this as information changes (including Easter Sunday and public and bank holiday opening hours) to ensure the information is accurate for the public (to be eligible for the PQS 2019/2020 payment. This will have to be done **between 00:00am on 1st October 2019 and 11:59pm on 30th November 2019**). Distance selling pharmacies must send an email to the NHSBSA Provider Assurance Team between **00:00 on 1st October 2019 and 23:59 on 30th November 2019** as per the NHSE&I PQS 2019/20 guidance.

Please note, the period for updating NHS website profiles is ahead of the declaration period, which is different to previous schemes; if contractors miss this deadline, they will not meet the gateway requirements and will therefore NOT be entitled to claim a PQS payment in February 2020.

Q. Why is the time period for completing the NHS website gateway criterion before the declaration period?
A. This is to ensure NHSE&I have up-to-date bank holiday opening hours for the Christmas and New Year period.

4) Safeguarding Level 2

On the day of the declaration, 80% of all registered pharmacy professionals working at the pharmacy have achieved level 2 safeguarding status for children and vulnerable adults in the last two years prior to the date of their declaration.

Registered pharmacy professionals are pharmacists and pharmacy technicians. This includes locums, so contractors should encourage temporary staff, such as locum pharmacists, to undertake the training and assessment.

Level 2 safeguarding training may be available to pharmacy staff locally (for example, organised by local authorities or other providers) or via the Centre for Pharmacy Postgraduate Education (CPPE). This may be completed online or by attending a CPPE workshop; please check the CPPE website for further details.

Pharmacy professionals should check with the training provider and satisfy themselves that the training they are completing enables them to attain Level 2 safeguarding status.

The quality criteria

Several changes have been made to the structure and content of the quality criteria.

Domains

Some of the quality criteria are bound together in domains; contractors will need to achieve **all** the quality criteria within a domain to receive payment for the domain. Contractors can seek to achieve as many of the domains as they wish.

The six domains are:

1. Risk management and safety;
2. Medicines safety audits complementing Quality and Outcomes Framework (QOF) Quality Improvement (QI) module;
3. Prevention;
4. Primary Care Networks (PCNs);
5. Asthma; and
6. Digital enablers.

Meeting the gateway criteria and achievement of the domains set for the scheme, described below, will mean a contractor is eligible for payments under the scheme.

Domain	Quality criteria	Points (Value)
Risk management and safety	On the day of the declaration, 80% of all registered pharmacy professionals working at the pharmacy to have satisfactorily completed the CPPE risk management training and assessment. **AND** On the day of the declaration, 80% of all registered pharmacy professionals working in the pharmacy have satisfactorily completed the CPPE sepsis online training and assessment, can demonstrate that they can apply the learning to respond in a safe and appropriate way when it is suspected that someone has sepsis, and demonstrably ensure all patient facing staff have understood alert symptoms to ensure referral of suspected sepsis to a pharmacist. **AND** On the day of the declaration, the pharmacy has available, at premises level, an update of the previous risk review undertaken as part of the 2018/19 QPS, i.e. updated since the last review date of 15th February 2019, that the pharmacy team at the premises had drawn up for a risk in that pharmacy. This update must include a recorded reflection on the identified risk and the risk minimisation actions that the pharmacy team has been taking and any subsequent actions identified as a result of the reflection. The risk review should include the risk of missing sepsis identification as a new risk as part of the review and record demonstrable risk minimisation actions that have been undertaken to mitigate the risk. Note: Pharmacies that did not claim for the risk management quality criterion previously, who wish to claim for the PQS 2019/20, must have a risk review containing two identified risks, including the risk of missing sepsis as above, as part of completion and claiming for this domain. **AND** On the day of the declaration, 80% of all registered pharmacy professionals working at the pharmacy to have satisfactorily completed	**30** **(Minimum payment £1,920 - Maximum payment £3,840)**

	the CPPE reducing look-alike, sound-alike (LASA) errors e-learning and assessment. **AND** On the day of the declaration, pharmacies must have a new written safety report (i.e. new since 15th February 2019 (the last review date) or covering the last year if not previously claimed) at premises level available for inspection from the day of the declaration 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. Demonstrable learnings from the CPPE LASA e-learning should also be incorporated into the safety report. This should include a review of, and subsequent actions, where mitigation taken has failed to prevent a LASA incident or LASA near miss from occurring. Demonstrably, the pharmacy contractor actively identifies and manages the risks at premises level associated with the specified LASA medicines identified from the National Reporting and Learning System (NRLS)*. Demonstrably, the pharmacy contractor has put in place actions to prevent these risks, for example, physical separation, staff awareness raising, visual warnings, tags or labels on shelving, fatigue reduction strategies or enhanced checking procedures for these medicines. There must be demonstrable evidence of all actions identified in the patient safety report having been implemented. Demonstrably, the pharmacy contractor uploads any LASA incident reports to the NRLS and keeps a record for confirmation of this activity at the pharmacy premises or within any electronic reporting system used by the contractor. In the description of what happened in the NRLS report, the contractor must include the text 'LASA' as a unique identifier to facilitate future national learning. *NHS Improvement top combinations by likelihood and harm caused - propranolol and prednisolone, amlodipine and amitriptyline, carbamazepine and carbimazole, rivaroxaban and rosuvastatin, atenolol and allopurinol.	
Medicines safety audits complementing GP Quality Outcomes Framework (QOF) Quality Improvement (QI) module	On the day of the declaration the pharmacy must have completed a lithium audit, over three consecutive months, aligned with requirements of the NPSA alert on lithium. A link to the NPSA alert will be included in the NHSE&I PQS 2019/20 guidance for all patients prescribed lithium. Further details of the required questions to be asked and the details to be recorded will also be included in the NHSE&I PQS 2019/20 guidance. Before starting the audit, the contractor must check their PMR prior to choosing the consecutive three-month period for the audit to verify	**25** **(Minimum payment £1,600 - Maximum payment £3,200)**

	whether they have had any ongoing patients to whom they have dispensed lithium in the preceding three months. If the pharmacy has no patients who have had lithium dispensed from the pharmacy in the previous three months, the contractor must complete a safety audit of patients prescribed one of the following medicines instead, in the following order of preference: either methotrexate; amiodarone; or phenobarbital, which are in line with alternatives suggested in the GP QOF QI Prescribing Safety Module (please note that the same process for identifying if the pharmacy has any patients on lithium should be applied for identifying if the pharmacy has any patients on methotrexate, amiodarone or phenobarbital). **AND** On the day of the declaration, the pharmacy must have completed a valproate safety audit, over three consecutive months for all girls and women of childbearing potential who have had valproate dispensed from the pharmacy. Further details of the audit and the details to be recorded will be included in the NHSE&I PQS 2019/20 guidance. **AND** On the day of the declaration, contractors should have implemented, into their day-to-day practice, the findings and recommendations from the previous clinical audit on NSAIDs prescribed for those aged 65 years and above without gastroprotection, undertaken as part of the QPS for the February 2019 review point; the link for the report will be included in the NHSE&I PQS 2019/20 guidance. The pharmacy must then repeat the updated audit of NSAIDs and gastroprotection for all patients 65 years and over (the link for the updated audit will be included in the NHSE&I PQS 2019/20 guidance), including notifying the patient's GP where concerns are identified, sharing their anonymised data with NHSE&I, and incorporating any learning from the re-audit into future practice. Note: Pharmacies that did not claim for the NSAID audit quality criterion previously, i.e. at the last review date of 15th February 2019, and wish to claim for this criterion for the PQS 2019/20 as part of claiming for this domain, must complete the NSAID audit for the first time and complete the other elements as described above. Submission of information to NHSE&I should be reported on the MYS application for all of the above audits.	
Prevention	On the day of the declaration, the pharmacy is a Healthy Living Pharmacy level 1 (self-assessment). **AND** On the day of the declaration, <u>all</u> patient-facing staff are Dementia Friends (Alzheimer's Society).	**25** **(Minimum payment £1,600 - Maximum payment £3,200)**

	AND On the day of the declaration, the pharmacy has completed a specified dementia-friendly environment checklist which will be included in the NHSE&I PQS 2019/20 guidance in relation to the registered pharmacy premises and created an action plan which includes making some demonstrable recorded changes to the environment in line with the checklist, as appropriate. **AND** On the day of the declaration, the pharmacy must confirm that the pharmacy checked that all patients with diabetes, who presented from 1st October 2019 to 31st January 2020, have had foot and eye checks (retinopathy) in the last 12 months– (please note, eye checks are only for patients with diabetes aged 12 or over). The pharmacy must have recorded the patient's response on the PMR or appropriate form/patient record and signposted/referred patients as appropriate. This record should set out the total number of patients who have had this intervention, the number that have not had one or either check in the last 12 months, and it should be recorded where they have been appropriately signposted/referred and reported as part of this criterion. **AND** On the day of the declaration, pharmacies (the registered pharmacy premises) must have either achieved that the sales by the pharmacy of Sugar Sweetened Beverages (SSB) account for no more than 10% by volume in litres of all beverages sold or must declare that they will be meeting this criterion by 31st March 2020. For the definition of added sugar see Annex B in the following link: https://www.england.nhs.uk/wp-content/uploads/2017/04/sugar-action-doc.pdf.	
Primary Care Networks (PCNs)	On the day of the declaration, the pharmacy must be able to demonstrate that their pharmacy, and all of the other pharmacies within the PCN footprint who wish to engage with a PCN, have agreed a collaborative approach to engaging with their PCN. This approach must include agreement on a single channel of communication by appointing a named lead representative for all of the community pharmacies who wish to engage with their PCN in the PCN footprint. The Pharmacy PCN Lead must have provided their name to the Local Pharmaceutical Committee (LPC) in which the PCN lies and must have demonstrable evidence that they have started the engagement process with the PCN, i.e. they have made initial contact with the Clinical Director for the PCN either by contacting them through correspondence (post/email) or by arranging a meeting with them or by meeting them. All pharmacies claiming for this domain must submit the name of their appointed Pharmacy PCN Lead and the pharmacy name and ODS code	**22.5 – PCN lead** **(Minimum payment £1,440 - Maximum payment £2,880)**

	for the Pharmacy PCN Lead; further details will be available in the NHSE&I PQS 2019/20 guidance. The Pharmacy PCN Lead must declare: • that they are the appointed Pharmacy Lead for that PCN; • the name of the PCN; • that they have notified this to the LPC in which the PCN lies; and that they have evidence of having started the engagement process with the PCN, as outlined above.	**12.5 – non-PCN lead** **(Minimum payment £800 - Maximum payment £1,600)**
Asthma	On the day of the declaration, the pharmacy can show evidence that patients with asthma, for whom more than 6 short-acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period have, since the last QPS review point (i.e. 15th February 2019), been referred to an appropriate healthcare professional for an asthma review; and can evidence that they have ensured that all children aged 5-15 years old prescribed an inhaled corticosteroid for asthma have a spacer device where appropriate in line with NICE TA38 and have a personalised asthma action plan. The pharmacy must be able to show that they have referred patients with asthma to an appropriate healthcare professional where this is not the case.	**5** **(Minimum payment £320 - Maximum payment £640)**
Digital enablers	On the day of the declaration, the pharmacy must have updated its NHS 111 DoS profile via the DoS updater, including its opening hours for Easter Sunday 2020 and public and bank holidays including: • Christmas Day 2019; • Boxing Day 2019; • New Year's Day 2020; • Good Friday 2020; • Easter Monday 2020; • Early May Bank Holiday 2020; and • Spring Bank Holiday 2020, and must promptly update its profile as information changes, to ensure information is accurate for real time referrals, e.g. from NHS 111 providers. The update window for the February 2020 declaration is **between 00:00am on 1st October 2019 and 11.59pm on 30th November 2019**. **Please note, the period for updating DoS profiles is ahead of the declaration period, which is different to previous schemes; if contractors miss this deadline they will not be able to claim for the Digital enablers domain (contractors need to meet all the quality criteria in a domain to be able to claim payment for that domain).** **AND** On the day of the declaration, the pharmacy can demonstrate access to SCR by having accessed the SCR between 00:00am on 1st October 2019 and the day of the declaration.	**2.5** **(Minimum payment £160 - Maximum payment £320)**

Funding, claiming and payment information

Contractors who successfully meet the requirements will receive a payment funded from a £75 million budget. The funding will be divided between qualifying pharmacies based on the number of points they have achieved. Payments will be made to eligible contractors depending on how many domains they have met and hence points claimed.

Aspiration payments

An Aspiration payment is available for the PQS 2019/20 which supports cash flow and recognises that there is only one declaration period in 2019/20 towards the end of the year.

The Aspiration payment is optional; if contractors do not want to claim it, it will not impact on the contractor's ability to claim a PQS payment in February 2020.

Contractors will need to decide which domains they intend to meet (when they make their declaration in February 2020) and declare this on the NHSBSA MYS application. Contractors must claim for an Aspiration payment between 9am on 30th September 2019 and 11.59pm on 1st November 2019.

Contractors will be paid their Aspiration payment on 29th November 2019.

The maximum number of points for which a contractor can be paid an Aspiration payment is 70% of their average number of points achieved across the two review points in the 2018/19 QPS (claimed in June 2018 and February 2019). Therefore, if a pharmacy did not claim at either declaration period in 2018/19 or made a claim and were deemed not eligible to receive a payment (because they did not meet the gateway criteria), they will not be eligible to claim an Aspiration payment.

If a pharmacy made a declaration for the 2018/19 QPS but during post-payment validation they were found to have not achieved the gateway or quality criteria and, as a result, had a payment recovered from them, the Aspiration payment would be based on the amended number of points, not the amount of points declared.

The value of the point for the Aspiration payment is set at £64, which is the minimum value of a point for the 2019/20 PQS. A pharmacy must have claimed at one or both of the review points in 2018/19 (in June 2018 and/or February 2019), to be eligible to claim an Aspiration payment. An Aspiration payment can only be paid under the same ODS code as that used in 2018/19.

Examples of how the Aspiration payment will be calculated can be found on the PSNC website.

PQS payment

To claim a PQS payment, contractors will be required to make a declaration between 9am on 3rd February 2020 and 11.59pm on 28th February 2020 on the NHSBSA MYS application. Contractors will be required to declare that on the day of making their declaration, that they meet the gateway criteria and that they meet the domains they are claiming payment for (except if they plan to meet the Sugar Sweetened Beverage (SSB) quality criterion by 31st March 2020).

Each domain has a designated number of points shown in the table in 'The quality criteria' section on pages 3-7. The maximum number of points that a pharmacy can qualify for is:

- 110 points for a PCN lead; and
- 100 points for a non-PCN lead.

The £75 million funding budget will be divided between qualifying pharmacies based on the number of points they have achieved up to a maximum £128 per point. Each point will have a minimum value worth £64 based on all pharmacy contractors achieving maximum points. Payments will be made to eligible contractors depending on how many domains they have met and hence points claimed.

In the event that the value of a point will be £128 (the cap on the value of each point), the number of any unused points for the PCN lead payment (i.e. 10 points per unclaimed PCN lead) will be equally distributed amongst all contractors who are eligible for the PQS payment.

Payment for the PQS 2019/20 will be reconciled with the Aspiration payment and will be paid to contractors on 1st April 2020.

Important PQS dates for the diary

Annex 1 contains a list of important PQS dates for contractors to note. Annex 1 is also available as a standalone document on the PQS hub on the PSNC website under the 'Important PQS dates for the diary' section.

The Pharmacy Quality Scheme 2020/21

In order to give contractors better warning of future requirements of the Scheme, PSNC has agreed some of the features of the 2020/21 Scheme. These include the completion of suicide prevention training by pharmacy staff and audits focussed on inhaler technique and anticoagulation. Further details on these points will be published in due course.

Further resources

PSNC is currently updating information on its website and producing new guidance and resources, where appropriate, to assist contractors to meet the criteria of the Scheme. PSNC will also be issuing regular communications to remind contractors of various actions required, so please ensure you have signed up to receive them.

If having read the additional information on the PSNC website, you have queries on this PSNC Briefing or you require more information please contact the PSNC Services Team at: Services.Team@psnc.org.uk.

Please note, that discussions with NHSE&I are still ongoing therefore there is some information on PQS to still be confirmed. This may mean we are not able to provide answers to all questions on PQS immediately.

Annex 1: Important PQS dates for the diary

Date	Why is this date important?
30th September 2019	The window **opens** for contractors to claim for an Aspiration payment on MYS. This opens at **9am**.
1st October 2019	The window **opens** for contractors to update their NHS website profiles or for distance selling pharmacies (DSPS) to send an email to the NHSBSA Provider Assurance Team (further details will be available in the NHS England and NHS Improvement (NHSE&I) Pharmacy Quality Scheme (PQS) 2019/20 guidance). This opens at **00:00am**.
	Contractors should start checking that all patients with diabetes, have had foot and eye checks (retinopathy) in the last 12 months (please note, eye checks are only for patients with diabetes aged 12 or over. PSNC will issue a resource to support contractors to meet this criterion soon. **DO NOT MISS THIS START DATE: CONTRACTORS NEED TO START WORKING ON THIS QUALITY CRITERION ON THIS DATE TO ENSURE THEY ARE ELIGIBLE TO MEET THIS QUALITY CRITERION.**
	The window **opens** for contractors to update their NHS 111 DoS profiles. This opens at **00:00am**.
	The window **opens** for contractors to demonstrate access to SCR. This opens at **00.00am**.
1st November 2019	The window **closes** for contractors to claim for an Aspiration payment on MYS. This closes at **11.59pm**. **DO NOT MISS THIS DEADLINE: CONTRACTORS WILL NOT BE ABLE TO CLAIM AN ASPIRATION PAYMENT IF THEY MISS THIS DEADLINE.**
29th November 2019	This is the final day by which contractors must have started the lithium audit, or other patient safety audit if they have no patients receiving regular lithium prescriptions. This will allow contractors to complete their lithium audit, within a three month consecutive period (if the contractor starts the audit when the pharmacy opens on 29th November 2019 and makes their declaration on the final day of the declaration window (28th February 2020) after the pharmacy has closed for the day. Contractors are strongly encouraged to start their lithium audit well before this date to reduce the risk of missing this deadline and allow themselves more flexibility on the date on when they make their declaration.
	This is the final day by which contractors must have started their valproate audit. This will allow contractors to complete their valproate audit, within a three month consecutive period (if the contractor starts the audit when the pharmacy opens on 29th November 2019 and makes their declaration on the final day of the declaration window (28th February 2020) after the pharmacy has closed for the day. Contractors are strongly encouraged to start their valproate audit well before this date to reduce the risk of missing this deadline and allow themselves more flexibility on the date on when they make their declaration.

	Contractors will be paid their Aspiration payment (if they claimed within the required time period).
30th November 2019	The window **CLOSES** for contractors to update their NHS website profiles or for DSPs to send an email to the NHSBSA Provider Assurance Team (further details will be available in the NHSE&I PQS 2019/20 guidance). This **CLOSES** at **11.59pm.** **DO NOT MISS THIS DEADLINE: CONTRACTORS WILL NOT BE ABLE TO CLAIM A PQS PAYMENT IF THEY MISS THIS DEADLINE AS THIS IS A GATEWAY CRITERION.**
	The window **CLOSES** for contractors to update their NHS 111 DoS profiles. This **CLOSES** at **11.59pm.** **DO NOT MISS THIS DEADLINE: CONTRACTORS WILL NOT BE ABLE TO CLAIM FOR THE DIGITAL ENABLERS DOMAIN IF THEY MISS THIS DEADLINE AS CONTRACTORS NEED TO MEET ALL THE QUALITY CRITERION WITHIN A DOMAIN TO BE ABLE TO CLAIM PAYMENT FOR THAT DOMAIN.**
31st January 2020	Contractors can stop checking that all patients with diabetes, have had foot and eye checks (retinopathy) in the last 12 months (please note, eye checks are only for patients with diabetes aged 12 or over) in order to meet the quality criterion.
1st February 2020	This is the final day by which contractors must have started their NSAID audit. This will allow contractors to complete the NSAID within four weeks (the audit may be required to be completed over four weeks if the required number of patients do not present within a two week period). The contractor will need to start the audit when the pharmacy opens on 1st February 2020 and if they contractor is required to complete the audit over a four week period, make their declaration on the final day of the declaration window (28th February 2020) after the pharmacy has closed for the day. Contractors are strongly encouraged to start their NSAID audit well before this date to reduce the risk of missing this deadline and allow themselves more flexibility on the date on when they make their declaration.
3rd February 2020	The window **opens** for contractors to claim for a PQS payment on MYS (this opens at **9am**).
28th February 2020	The window **closes** for contractors to claim for a PQS payment on MYS (this closes at **11.59pm**). **DO NOT MISS THIS DEADLINE: CONTRACTORS WILL NOT BE ABLE TO CLAIM A PQS PAYMENT IF THEY MISS THIS DEADLINE.**
31st March 2020	Deadline for contractors to meet the Sugar Sweetened Beverages quality criterion, if not already done so when they made their PQS declaration.
1st April 2020	Contractors will be paid their PQS payment (if they claimed within the required time period).