



November 2020

PSNC Briefing 042/20: How to become a Healthy Living Pharmacy (HLP) and maintain that status (updated November 2020)

This PSNC Briefing provides an overview of how to become a Healthy Living Pharmacy (HLP) and maintain that status.

In July 2019, following negotiations between PSNC, the Department of Health and Social Care (DHSC) and NHS England and NHS Improvement (NHSE&I), HM Government agreed a [five-year deal for community pharmacies](#). As part of this deal, it was agreed that a requirement would be added to the Terms of Service that all pharmacies meet the HLP Level 1 requirements (“HLP requirements”).

Most pharmacies in England have previously met the HLP requirements, following local initiatives with commissioners or the Pharmacy Quality Scheme. Following the [laying of new NHS regulations](#) on 20th October 2020, the HLP requirements will become a new Terms of Service requirement for all pharmacies **from 1st January 2021**.

Previously, pharmacies assessed their performance against the Public Health England (PHE) HLP quality criteria, but these requirements have now been used to inform the new contractual requirements. Most have remained the same as the PHE requirements, but there are several changes, particularly in relation to some aspects of how Distance Selling Pharmacies (DSPs) need to meet the HLP requirements.

What is an HLP?

HLP is an organisational development framework underpinned by three enablers of:

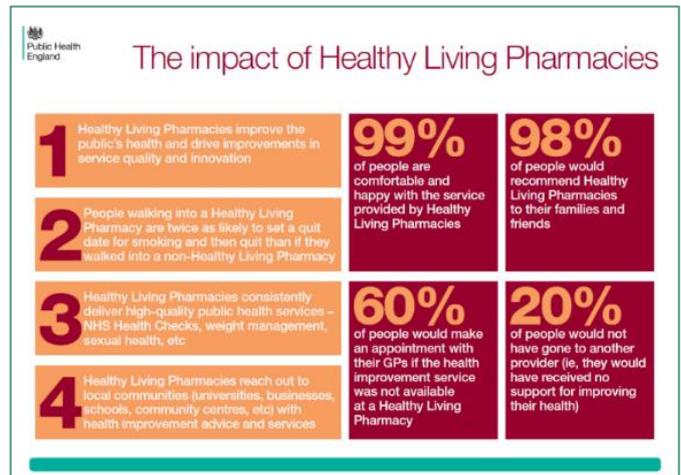
- **Workforce Development** – A skilled team to pro-actively support and promote behaviour change and improve health and wellbeing, including a qualified Health Champion who has undertaken the Royal Society for Public Health (RSPH) Level 2 Award ‘*Understanding Health Improvement*’, and a team member who has undertaken leadership training;
- **Engagement** – Local stakeholder engagement with other health and care professionals (especially general practice), community services, local authorities and members of the public; and
- **Environment (Premises Requirements)** – Premises that facilitate health promoting interventions with a dedicated health promotion zone.

The HLP framework aims to improve people’s health, help reduce health inequalities and ensure community pharmacy can continue to contribute to the Government’s ambition of putting prevention at the heart of the NHS, as set out in the [NHS Long Term Plan](#). It provides a mechanism for community pharmacy teams to utilise their local insight and experience in the provision of high-quality health promoting initiatives. By requiring contractors to have trained Health Champions on site who pro-actively engage in local community outreach within and outside the pharmacy, HLPs have cemented the idea that every interaction in the pharmacy and the community is an opportunity for a health promoting intervention.

The HLP framework is primarily about adopting a change in culture and ethos within the whole pharmacy team. The HLP framework means community pharmacies can supplement their medicines optimisation role with an enhanced

commitment to health promoting interventions in the pharmacy setting and engagement in community outreach activities.

PHE has published the below infographics to illustrate the role of HLPs in the health and care system:



Achieving HLP status or maintaining it

The HLP requirements apply to all pharmacies, including distance selling pharmacies (DSPs), except where specifically noted that different requirements apply to DSPs.

Contractors that have not previously achieved HLP status need to ensure they meet the requirements defined in the Terms of Service and associated guidance, create and retain a portfolio of evidence to demonstrate this compliance and complete an assessment of compliance.

Contractors that have previously achieved HLP status will need to read the requirements defined in the Terms of Service and associated guidance and consider whether they are still meeting all the requirements.

An Evidence portfolio and the assessment of compliance is available at psnc.org.uk/hlp.

To ensure contractors continue to meet their Terms of Service, it is recommended they **review their compliance against the requirements at least every 3 years**. The **HLP checklist** in **Annex A** can be used to assist with this.

For an overview of a process that can be followed to achieve HLP status, or to review compliance with the regulations to maintain HLP status, contractors can refer to the **HLP flow chart** in **Annex B**

Stage 1 – Understanding the framework enablers and how to achieve HLP status

The below tables provide an overview of the Healthy Living Pharmacy (HLP) framework enablers and a summary of the actions contractors will need to take to meet the requirements in the Terms of Service and associated regulations guidance.

Workforce Development

This enabler supports the development of pharmacy staff, so they are well equipped to embrace the healthy living ethos and proactively promote health and wellbeing messages.

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
Public Health Needs	<ul style="list-style-type: none"> All patient-facing pharmacy staff have an awareness of the public health and pharmaceutical needs of the population they serve. Contractors should consider the ways in which they engage with their local community, so they can seek to meet the needs of the local area and help address health inequalities, including targeting deprived communities. This may include the use of virtual and digital communication, as well as provision of face-to-face public health services. DSPs will provide services to patients in a wider geographical area than that of most other pharmacies, so they will need to reflect on the broad health needs of their patients wherever they may live, rather than those living in a specific local area, for example by seeking information on the health profile of their patients when undertaking patient experience surveys or similar. 	<ul style="list-style-type: none"> List of the website links to the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and/or Health Profiles for their area or correspondence about them or evidence of attendance at seminars or meetings on them. Copies of the relevant extracts of the JSNA, PNA and/or Health Profiles for their area as digital files or printed files (as these may be very bulky documents, printing the front page or web page is acceptable). List of pharmacy events in the local area or local/national campaigns showing direct links to the local public health and pharmaceutical needs. Questions linked to health and wellbeing services have been included in the contractor’s activities to assess patients’ and the public’s experience of their services.
Health and Wellbeing Ethos	<ul style="list-style-type: none"> All patient-facing pharmacy staff understand the basic principles of health and wellbeing, and that every interaction is an opportunity for a health promoting intervention. At least one member of the patient-facing pharmacy staff (one Full Time Equivalent) has completed the training and assessment of the Royal Society for Public Health (RSPH) Level 2 Award in ‘Understanding Health Improvement’ and is therefore a Health Champion. 	<ul style="list-style-type: none"> Certificate(s) for the RSPH Level 2 Award in <i>‘Understanding Health Improvement’</i> completed by any pharmacy team members either displayed in the pharmacy or in the evidence portfolio. (REQUIRED) Certificate(s) of any Health and Wellbeing Training completed by any pharmacy team members either displayed in the pharmacy or in the evidence portfolio.

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
	<p>Where a pharmacy has less than one full time equivalent patient-facing staff members, excluding the responsible pharmacist, at least one staff member should complete the training and assessment.</p> <p>Health champion training and assessment may be undertaken through face to face or virtual (online) methods.</p> <p>Where a Health Champion leaves the employment of the contractor and this means no trained Health Champion is in post, the contractor must put in place an action plan to recruit or train a staff member as a Health Champion within six months.</p>	<ul style="list-style-type: none"> Minutes of pharmacy team meetings that show shared learning from the Health Champion(s) to the rest of the pharmacy team. Making Every Contact Count training records for all staff that provide health advice to patients and the public.
Team Leadership	<ul style="list-style-type: none"> An appointed health and wellbeing leader from the pharmacy team has undergone leadership training internally or through an organisation that maps to/encompasses the domains defined in the guidance. <p>Leadership training and assessment may be undertaken through face to face or virtual (online) methods.</p> <p>Where a health and wellbeing leader leaves the employment of the contractor and this means no trained health and wellbeing leader is in post, the contractor must put in place an action plan to recruit or train a staff member as a health and wellbeing leader within six months.</p>	<ul style="list-style-type: none"> Certificate(s) or registration for any leadership training or equivalent completed by a pharmacist or the pharmacy manager either displayed in the pharmacy or in the evidence portfolio. (REQUIRED) An HLP action plan developed by the pharmacy team leader and/or pharmacy team in the evidence portfolio. Written feedback of pharmacy team members on their team leader in the evidence portfolio.
Communication	<ul style="list-style-type: none"> All patient-facing pharmacy staff can use the NHS website and other appropriate public health information sources, e.g. PHE Resource Centre, when providing advice on health issues and where appropriate; The patient-facing pharmacy staff are friendly, welcoming and sensitive to the need for privacy for different individuals seeking advice including respecting people’s values and beliefs; 	<ul style="list-style-type: none"> Making Every Contact Count training records for all staff that provide health advice to patients and the public. Very Brief Advice training records for staff to support Stop smoking services.

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
	<ul style="list-style-type: none"> • The patient-facing pharmacy staff routinely explain who they are, wear a name badge and inform people about the information and/or services on offer; • All patient-facing pharmacy staff receive training on how to approach people to discuss difficult or sensitive public health issues; • All patient-facing pharmacy staff are able to provide brief health and wellbeing advice (2-3 minutes) and have an awareness that the person may need additional support for behavioural change; and • When communicating with patients and the public and offering advice on difficult or sensitive issues, contractors and staff need to consider how they offer and maintain patient privacy. The approach taken may differ between contractors depending on the physical structure of the pharmacy, whether they provide services via remote means (e.g. DSPs must have the ability to undertake phone and video consultations. For bricks and mortar pharmacies, while there is no requirement to provide video consultations, offering this type of consultation is encouraged), the local population they serve, and other factors. 	<ul style="list-style-type: none"> • Health Education England E-learning modules, e.g. All Our Health • Briefing notes for health promotion events that include top tips to engage people. Notes should include a briefing record to capture the names, signatures and dates of participating staff. • Dementia Friends Training / briefing

Engagement

This enabler outlines the requirements for contractors to support patients where they require advice, treatment and/or support.

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
Community Engagement	<ul style="list-style-type: none"> • Proactively engage with patients and the public using the pharmacy, to offer them advice, support and signposting to other providers of services in the community; • Encourage charities and other providers to work with the pharmacy for delivery of key health messages; • Direct patients and the public to health and wellbeing providers and resources appropriate to their needs, where this is necessary (e.g. specialist clinics, Smoking Cessation, Drug and Alcohol Services, Health Trainer Service, weight management services, mental health services, community exercise groups). • Contractors must also undertake a community engagement exercise <u>at least once per financial year</u> on the promotion of healthy living, which involves: <ul style="list-style-type: none"> ○ actively working in collaboration with other organisations to deliver pharmacy outreach and any locally commissioned services; and ○ taking prevention and health promotion services beyond the pharmacy premises. Pharmacy outreach may be face to face and take services to people where they live or spend time or may be virtual events. • When contractors and staff work in collaboration with other community organisations to undertake pharmacy outreach and any commissioned services, the contractor and the other organisation must undertake a risk 	<ul style="list-style-type: none"> • Standard Operating Procedure for health promoting interventions & staff training log. • Photographs annotated with dates of the pharmacy team engaging with the public (with appropriate consent). • Case studies and photographs (with appropriate consent) of outreach work (e.g. roadshows attended). • List of community health and wellbeing resources readily available in the pharmacy. • A local health and wellbeing notice board prominently displayed in the pharmacy. • A signposting folder including a signposting log. • A list of appropriate health and social care providers (e.g. specialist clinics, Smoking Cessation, Drug and Alcohol Services, weight management services, mental health services and sexual health clinics). • DSPs could collate a list of both local and national health and social care providers to direct patients to, where they have enquiries or need to provide healthy living support including

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
	assessment prior to the outreach activity to ensure that any activities are undertaken in a safe and culturally competent way.	Smoking Cessation, Drug and Alcohol Services, weight management services, mental health services, sexual health clinics and Health Trainer Services.

Premises Requirements

Contractors should aim to create a health promoting environment that is reflected by the premises, as well as in the actions and attitudes of the pharmacy staff.

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
Health Promoting Environment	<ul style="list-style-type: none"> It is clear to the public that free, confidential advice on their health and wellbeing can be accessed; For pharmacies which are visited by patients and the public, the pharmacy has a dedicated Health Promotion Zone, of sufficient prominence, that contains up-to-date professional health and wellbeing information that meets the needs of the population they serve; and DSPs must have a website for use by patients and the public accessing their services, which has an interactive page clearly promoted to any user of the website when they first access it, which provides public access to a reasonable range of up to date materials that promote healthy lifestyles, by addressing a reasonable range of health issues. DSPs must be compliant with this requirement from 1st April 2021. 	<ul style="list-style-type: none"> Photographs of pharmacy and consultation area. List of leaflets or promotional material used in the Health Promotion Zone. Including consideration of barriers to access, e.g. material in different languages to reflect the local population, easy read material etc. Other formats for the health and wellbeing information may include: a touchscreen, plasma screen, books, DVDs, leaflets, promotional displays, demonstration models, etc. Data from the contractor's assessment of patient experience. Record of Health Promotion Zone being checked by a member of the pharmacy staff at least once monthly and updated and restocked appropriately. A local health and wellbeing notice board prominently displayed. DSPs – screenshots of online content on their website's health and wellbeing promotion section, and records of the content being checked on a monthly basis and the dates when updates are made. If health and wellbeing advice is also included in any apps the pharmacy makes available to patients, screenshots of this could also be retained as evidence. Additionally, where healthy living advice

	Requirement	Suggested Evidence <i>This lists only suggested evidence unless clearly stated as required</i>
		is provided in emails sent to patients, copies of these could also be retained as evidence of meeting the requirements.
Sustainability	<ul style="list-style-type: none"> The pharmacy contributes to a sustainable environment and this is reflected in the way they operate their business (e.g. using recyclable materials). Contractors could also consider highlighting to patients the environmental benefit of returning used inhalers to the pharmacy for safe disposal via the disposal of unwanted medicines service. 	<ul style="list-style-type: none"> Photographs of recycling bins, paper disposal system, etc. Screenshots of websites and online materials. Waste transfer notes.

Consultation Rooms

Pharmacy premises, other than distance selling premises, must have a consultation room which is:

- clearly designated as a room for confidential conversations;
- distinct from the general public areas of the pharmacy premises; and
- a room where both a person accessing pharmaceutical services and a person performing pharmaceutical services are able to be seated together and communicate confidentially.

Where a pharmacy has not provided any Advanced services at or from the premises during 2020, they will be exempt from the requirement to have a consultation room on the premises until 1st April 2023, after which they will also be required to have one in place.

Where pharmacy premises, other than DSPs, are too small for a consultation room to be included, the contractor must apply to the NHSE&I regional team to request an exemption from this requirement (NHSE&I will publish a form on which to make this request). NHSE&I will consider the information provided by the contractor and where it is of the opinion that the pharmacy is too small for a consultation room, it will confirm this with the contractor. The contractor must then ensure that they put arrangements in place at the pharmacy which enable staff and patients to communicate confidentially by **telephone** or another **live audio link** and a live **video link**.

Contractors are advised to keep a copy of the NHSE&I decision confirming that the contractor is exempt from the requirement of having a consultation room on the premises.

Where NHSE&I are of the opinion that the pharmacy is **not** too small for a consultation room, the contractor will be advised of this and they will need to install a consultation room.

Contractors who open new pharmacy premises on or after 1st January 2021 will need to have a consultation room from the first day they open for business.

Distance Selling Pharmacies (DSPs)

DSPs must ensure that there are arrangements in place at the pharmacy which enable staff and patients to communicate confidentially by telephone or another live **audio link and a live video link**.

DSPs can choose to install a consultation room at their pharmacy to allow the provision of Enhanced and Advanced services on the premises, but this is not a requirement of the Terms of Service.

Stage 2 – Action once a contractor has met the HLP requirements

Once a contractor has met all the HLP requirements, they should complete an assessment of compliance and retain this in the pharmacy:

[Assessment of compliance \(Word e-form\)](#)

[Assessment of compliance \(PDF\)](#)

Completing the assessment of compliance

This form must be completed by a pharmacy professional (pharmacist or pharmacy technician) in the pharmacy, who must provide their General Pharmaceutical Council registration number.

Part 1 of the assessment of compliance relates to the key requirements that the pharmacy must have in place before self-declaring HLP status. Pharmacy professionals must be able to answer YES to all the statements for the pharmacy to be compliant. The assessment lists the evidence they possess in the pharmacy, which they can use to demonstrate compliance with the requirements. Evidence must be provided against all requirements.

Note: Contractors who have used the PSNC's Healthy Living Pharmacy (HLP) Evidence Portfolio Workbook will not need to complete Part 1 of the assessment of compliance provided they have listed all their evidence to meet the requirements of the regulations in the Workbook.

Part 2 requires the pharmacy professional to declare compliance with the HLP requirements and the contractor should then retain this declaration in the pharmacy (they do not need to register as an HLP with an external organisation). The assessment of compliance does not need to be submitted routinely to NHSE&I.

Training providers

There are several organisations that provide HLP training for pharmacy staff and those that PSNC has been made aware of are listed at: psnc.org.uk/hlp (listing on the PSNC website **does not** constitute endorsement of the course or provider by PSNC). Some LPCs occasionally arrange local HLP training for their contractors; contact your [LPC](#) or check their website to see if they are organising any training or other support.

Completion of training

Contractors should be aware that when members of staff complete the RSPH Level 2 Award in Understanding Health Improvement course, which is provided by several national and local organisations, it may take a few weeks after completion of the assessment before staff members receive their certificate from the course provider (RSPH return certificates to the course provider and aim to do that within 10 working days).

Contractors are therefore advised to consider these time frames when planning how long it will take to achieve the HLP requirements and meet any planned timeline.

PSNC resources to support contractors

The HLP pages on the PSNC website (psnc.org.uk/hlp) have further information, documents and links to various websites including the following PSNC resources:

- HLP Flow Chart;
- HLP Evidence Portfolio Workbook;
- HLP Checklist;
- Assessment of compliance;
- PSNC Briefing 032/19: Healthy Living Pharmacy – Holding a health promotion event/campaign;
- Checklist for holding a health promotion campaign/event;

- Event/campaign questionnaire; and
- A hub page to provide health promotion ideas for pharmacy teams.

If having read this PSNC Briefing and the information and resources on the PSNC website you have further queries about HLP or you require more information please contact Services.Team@psnc.org.uk.

Annex A: HLP checklist

Workforce development

Public health needs		Completed
1a.	All pharmacy staff have an awareness of the local public health and pharmaceutical needs outlined in the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and Health Profiles for the area the serve including where and how to access them.	<input type="checkbox"/>
1b.	For DSPs only: As DSPs will provide services to patients in a wider geographical area than that of most other pharmacies, they will need to reflect on the broad health needs of their patients wherever they may live, rather than those living in a specific local area, for example by seeking information on the health profile of their patients when undertaking patient experience surveys or similar, or using the health profiles reflecting a broader area.	<input type="checkbox"/>
Health and Wellbeing Ethos		
2.	All pharmacy staff understand the basic principles of health and wellbeing , and that every interaction is an opportunity for a health promoting intervention.	<input type="checkbox"/>
3.	At least one member of pharmacy staff (1 Full Time Equivalent) has completed the training and assessment of the Royal Society for Public Health (RSPH) Level 2 Award in Understanding Health Improvement and is therefore a Health Champion.	<input type="checkbox"/>
Team leadership		
4.	An individual from the pharmacy team has undergone leadership training internally or through an organisation that maps to/encompasses the following domains: <ul style="list-style-type: none"> Inspiring a shared purpose – Valuing a service ethos, curious about how to improve services and care, behaving in a way that reflects the principles and values of the organisation; Sharing the vision – Communicating a compelling and credible vision of the future in a way that makes it feel achievable and exciting; Engaging the team – Involving individuals and demonstrating that their contributions and ideas are valued and important for delivering outcomes and continuous improvements to the service; Developing capability – Building capability to enable people to meet future challenges, using a range of experiences as a vehicle for individual and organisational learning, acting as a role model for personal development; and Influencing for results – Deciding how to have a positive impact on other people, building relationships to recognise other people’s passions and concerns, using interpersonal and organisational understanding to persuade and build collaboration. 	<input type="checkbox"/>
Communication		
5.	All patient-facing pharmacy staff can use the NHS website and other appropriate public health information sources, e.g. PHE Resource Centre, when providing advice on health issues and where appropriate, bearing in mind the findings of e.g. PNAs and JSNAs such as location of services, when providing advice on health issues when appropriate.	<input type="checkbox"/>
6.	The pharmacy team is friendly, welcoming and sensitive to the need for privacy for different individuals seeking advice including respecting people’s values and beliefs.	<input type="checkbox"/>

7.	The pharmacy team routinely explain who they are, wear a name badge and inform people about the information and/or services on offer.	<input type="checkbox"/>
8.	All pharmacy staff receive training on how to approach people to discuss difficult or sensitive public health issues.	<input type="checkbox"/>
9.	All pharmacy staff are able to provide brief health and wellbeing advice (2-3 minutes) and have an awareness that the person may need additional support for behavioural change.	<input type="checkbox"/>

Engagement

Community engagement		Completed
10.	The pharmacy team proactively engages with patients and the public in the pharmacy, to offer them advice, support and signposting to other providers of services in the community where applicable.	<input type="checkbox"/>
11.	The pharmacy encourages local charities and other providers to work with the pharmacy for delivery of key health messages/displays where appropriate.	<input type="checkbox"/>
12.	The pharmacy team is aware of appropriate health and wellbeing providers and resources in their community and is able to direct patients and the public to these to meet their needs where this is necessary (e.g. specialist clinics, Smoking Cessation, Drug and Alcohol Services, Health Trainer Service, weight management services, mental health services, community exercise groups etc).	<input type="checkbox"/>
13.	The pharmacy team actively work in collaboration with other organisations to deliver pharmacy outreach and any locally commissioned services.	<input type="checkbox"/>
14.	The pharmacy team take prevention and health promotion services beyond the pharmacy premises. Pharmacy outreach may be face to face and take services to people where they live or spend time or may be virtual events.	<input type="checkbox"/>

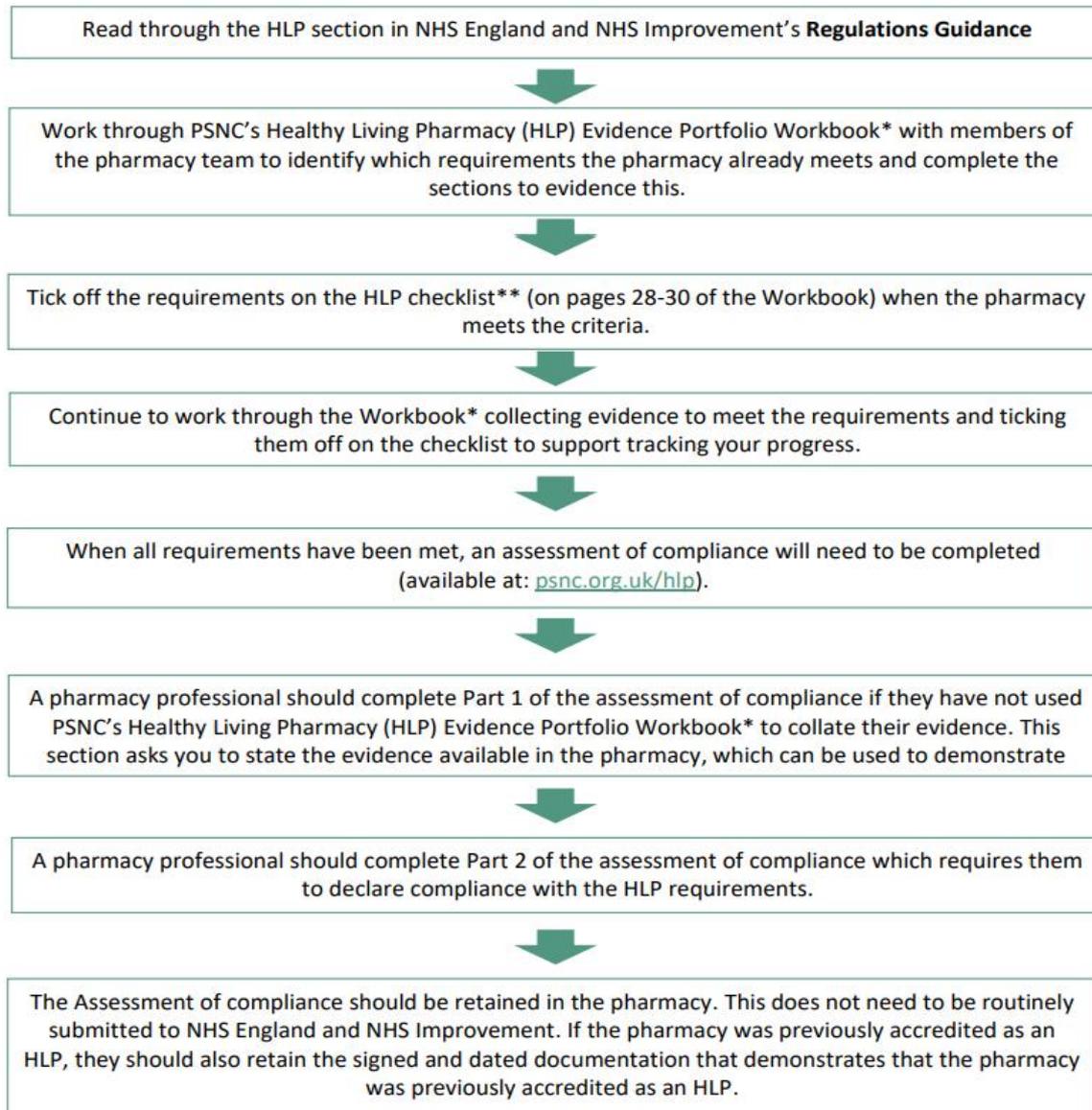
Premises Requirements

Health promoting environment		Completed
15.	It is clear to the public that free, confidential advice on their health and wellbeing can be accessed.	<input type="checkbox"/>
16a.	<p>For pharmacies which are visited by patients and the public, the pharmacy has a dedicated Health Promotion Zone, that:</p> <ul style="list-style-type: none"> • Is clearly marked and accessible; • Has a professional appearance; and • Is appropriately equipped with up-to-date professional health and wellbeing information that meets the local public health needs as suggested in the JSNA/PNA, Annual Report of the Director of Public Health or after discussion with commissioners/public health professionals. 	<input type="checkbox"/>

16b.	For DSPs only - DSPs must have a website for use by patients and the public accessing their services, which has an interactive page on their website clearly promoted to any user of the website when they first access it, which provides public access to a reasonable range of up to date materials that promote healthy lifestyles, by addressing a reasonable range of health issues. DSPs must be compliant with this requirement from 1st April 2021	<input type="checkbox"/>
17a.	The pharmacy has a consultation room which meets the minimum NHSE&I's approved particulars for premises, or will have fitted a consultation room (if they do not currently have one) by 1st January 2021.	<input type="checkbox"/>
17b.	For DSPs or some small sized pharmacies There are arrangements in place at their premises which enable a person performing pharmaceutical services to communicate confidentially with a person accessing pharmaceutical services: a) by telephone or another live audio link; and b) via a live video link.	<input type="checkbox"/>
17c	For pharmacies that do not provide Advanced Services Where a pharmacy has not provided any Advanced services at or from the premises during 2020, they will be exempt from the requirement to have a consultation room on the premises until 1st April 2023, after which they will also be required to have one in place.	<input type="checkbox"/>
Sustainability		
18.	The pharmacy contributes to a sustainable environment and this is reflected in the way they operate their business (e.g. using recyclable materials).	<input type="checkbox"/>

Annex B:

HLP flow chart – process to follow to become an HLP or maintain status as an HLP



*Use of the PSNC HLP Evidence Portfolio Workbook is optional, contractors can choose another option to support them to meet the requirements of the Terms of Service.

** The HLP checklist is also available as a standalone document in the resources section (available at: psnc.org.uk/hlp).

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