

National Update

- QPS
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- New Contract Proposals
- CPAF 2018

Quality Payment Scheme

There will only be **one** review point on 29th June 2018, at which a Quality Payment can be claimed.

Payments will need to be claimed between:

**9am on Monday 11th June 2018 and
11:59pm on Friday 13th July 2018.**

Changes to the Gateway Criteria

As per previous declarations, passing the Gateway criteria will not, in and of itself, earn a quality payment for the pharmacy.

1. NHS Choices: Requirement to add Bank Holiday opening hours

The NHS Choices entry for the pharmacy must be up to date **including the addition of Bank Holiday opening hours for 2018/19.**

2. NHSmail:

The pharmacy must be able to send and receive NHSmail from their **premises shared NHSmail account.**

To access a shared NHSmail mailbox, users must have their own personal NHSmail address which is linked to the shared mailbox.

This is to allow different staff members to access the mailbox without sharing of login details.

Use of a personal NHSmail account, rather than a premises shared account, will not meet the Gateway criterion

Quality Criteria – action points

- **Written Patient Safety Report**

contractors that claimed for this quality payment in 2017 will **not be able to use the same patient safety report** to make a claim in June 2018.

For the June 2018 declaration they will need to update their previous report to show how the elements set out in the Drug Tariff have been updated and refreshed since their 2017 patient safety report was completed;

- **Community Pharmacy Patient Questionnaire** results available on the pharmacy's NHS Choices page - to qualify for this quality criterion, contractors are required to publish the results of the CPPQ from the last 12 months on the pharmacy's NHS Choices page. For contractors that claimed for this quality payment in 2017, they will need to **undertake a new survey**, analyse the responses and produce a report of the results and publish the results on the pharmacy's NHS Choices page to meet this quality criterion in June 2018

Quality Criteria – action points

- **Summary Care Record** – the dates for comparison of SCR accesses are now from Monday 1st May 2017 to Sunday 26th November 2017 compared to Monday 4th December 2017 to Sunday 1st July 2018. The SCR Quality Payments Viewing Calculator is now available.
- **NHS 111 Directory of Services (DoS)** – a new DoS profile updater is now available. Contractors will be required to edit or confirm that the information in the pharmacy's DoS profiles are correct on the DoS Profile Updater; this must be done by 23:59 on 29th June 2018; and
- **Referral for asthma review** - for those contractors who claimed for this criterion in 2017, a new review of patients since 24th November 2017 will be required.

Regulatory Changes

- Revalidation (new CPD recording requirements) April 2018
- General Data Protection Regulations (GDPR) May 2018
- Falsified Medicines Directive (FMD) early 2019

CPAF Screening Questionnaire

Dear Pharmacy Contractor

The NHS Business Services Authority (BSA) will once again facilitate the 2018 CPAF Screening Questionnaire on behalf of NHS England which will be available for completion from Monday 04 June 2018 until Sunday 04 July 2018.

Details on how to complete the CPAF Screening Questionnaire and a link to the questionnaire will be emailed to you **Monday 4 June 2018**, if you do not receive this information by Tuesday 5 June 2018 or you have any queries please contact nhsbsa.cpac@nhs.net or [0191 2035050](tel:01912035050).

A PDF copy of the 2018 questionnaire has been made available on NHSBSA website to view in advance of the go-live date. Please note the PDF Version cannot be submitted to NHSBSA.

<https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/dispensing-contractors-information/community>

Regards

Information Services

NHSBSA Information Services

Tel No: 0191 203 5050

Email: nhsbsa.cpac@nhs.net Website: www.nhsbsa.nhs.uk

Contract proposals

PSNC has proposed two ways in which the services that pharmacies currently offer could be developed:

The Community Pharmacy Care Plan (CPCP)

The Universal Community Pharmacy Care Framework

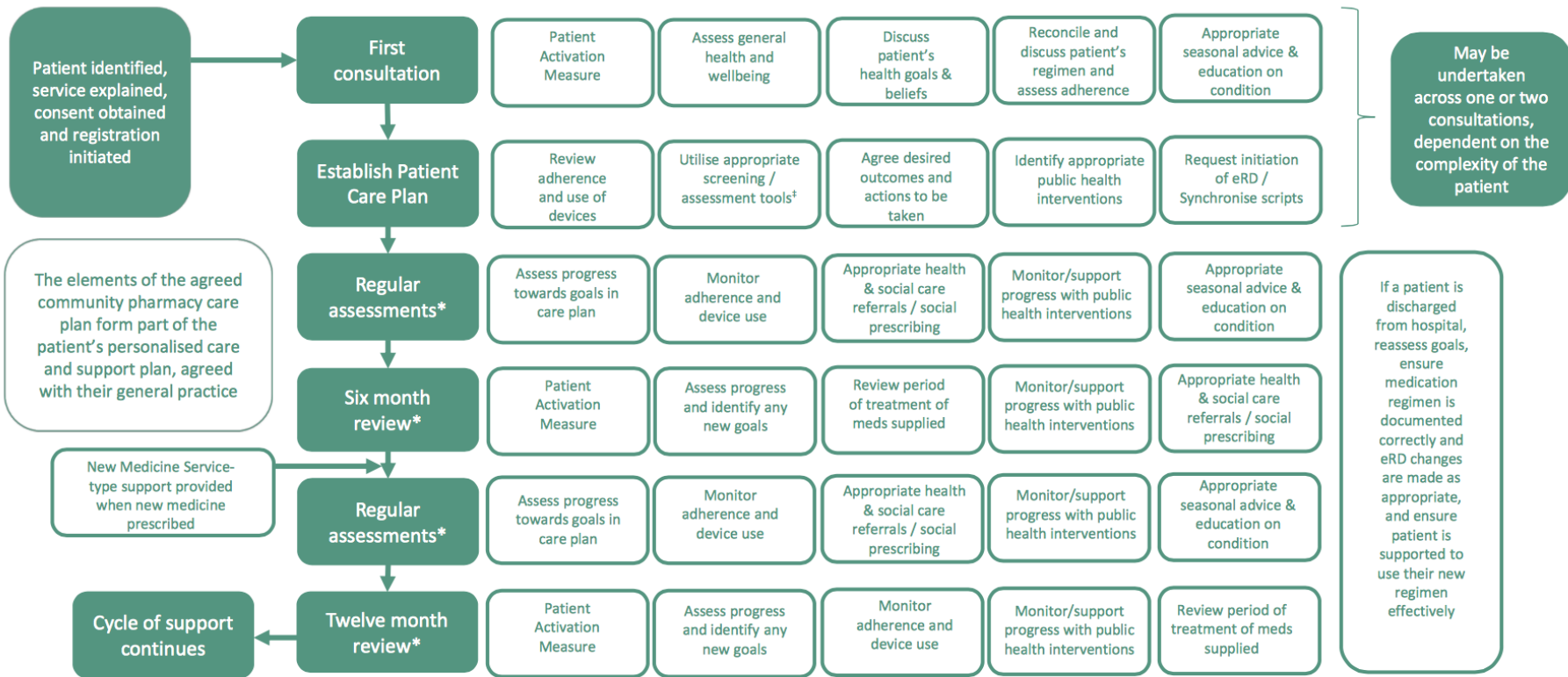
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The Community Pharmacy Care Plan

The CPCP is a service designed to make regular pharmacy support available to people with long-term conditions, such as asthma or diabetes, which can sometimes have life-threatening complications. Pharmacy teams would help people to stay healthy and to manage these conditions and symptoms, meaning they should have less need to see their GP and can avoid being admitted into hospital.

The full service may not be appropriate for all people with long-term conditions, and a move to provision of such a service would need to be undertaken in a managed way. The service would involve changes for pharmacies such as registering patients that will receive the service at the pharmacy.

Illustrative CPCP service patient pathway



eRD – the NHS electronic Repeat Dispensing service

* Consultations usually occur when the patient is due to collect their next set of eRD prescriptions; patient's need for individual eRD items is checked before each supply. Domiciliary consultations would be necessary for some patients.

‡ e.g. STOPP/START, ACT, CAT, Frailty/Falls/Independent living assessment, Pain score

The Universal Community Pharmacy Care Framework

The Care Framework describes some more gradual changes that could be made to the services that community pharmacies currently offer (known as the Community Pharmacy Contractual Framework). This would include asking pharmacies to do things such as helping patients who have recently come out of hospital to use their medicines correctly, checking that patients are getting the most benefit from their medicines and ensuring that all medicines prescribed are as cost-effective as possible.

PSNC would like to see elements of the Care Framework introduced in a phased manner over the next two years. Again, not all patients would need all of the services listed in the framework, but it would mean that pharmacies had to offer them to those patients who were eligible for and could benefit from them. This would lead up to the full commissioning of all elements as well as the Care Plan, for appropriate patients, by the end of 2019.

Introducing the Universal Community Pharmacy Care Framework

Services that all pharmacies already offer



- Clinically safe and accurate dispensing service
- Healthy living advice
- Self-care advice and signposting



Services that all pharmacies could offer



- Offering medicines checks and support when patients come out of hospital
- Checking patients' need for all their repeat medicines



Services that all community pharmacies could offer as a second phase

- Compliance with antibiotic guardian pledges, including advising patients on when antibiotics are not required
- Checking the suitability of dosage forms and devices
- Challenging the prescribing of medicines of low clinical value and supporting work to promote self-care and remove prescribing for minor illnesses

- Reviewing medicines returned by patients
- Discussing medicines adherence with patients
- The New Medicine Service (possibly to cover a wider range of conditions)
- Tackling polypharmacy and identifying gaps in prescribing
- Challenging the prescribing of specific medicines to ensure cost effectiveness

Services that all pharmacies could offer as a later phase



- Measuring patient activation levels annually and sharing the data with patients' general practitioners



Potential Phased Transition Approach

		Yr1				Yr2				
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	
Clinical and Accuracy Check	Dispensing	Essential Service								
Review of medicines returned for disposal	Triggered	Notified	Early Adopter		Essential Service					
Transfer of care / Post-discharge support	Triggered	Notified	Essential Service							
NMS	Triggered	Notified			Essential Service					Notification may be shorter if slippage on start
Antibiotic Guardian / AMR	Dispensing	Early Adopter			Essential Service					
Challenging polypharmacy / identifying gaps	Triggered	Notified			Essential Service					To allow training
Challenging prescribing of meds of low clinical value	Triggered	Notified	Early Adopter		Essential Service					MUR shifts
Dosage form / device check	Regular	Notified	Early Adopter		Essential Service					MUR shifts
Adherence check and education	Regular	Notified	Early Adopter		Essential Service					MUR shifts
PAM measurement	Regular	Notified	Early Adopter				Essential Service			MUR shifts
Healthy living advice/public health interventions	Triggered	Essential Service								
Check need for dispensing of all repeat scripts	Dispensing	Notified	Essential Service							
Cost-effective medicines substitution	Triggered	Notified			Essential Service					Requires legislation change if GPs not to be involved
Community Pharmacy Care Plan	Engaged	Developed			Notified		Early Adopter			

Separate Discussion/More development/Timeline for Integrated Urgent Care, Self-care

Essential Services within 2 years?

Clinical and Accuracy Check

Review of medicines returned for disposal

Transfer of care / Post-discharge support

NMS

Antibiotic Guardian / AMR

Challenging polypharmacy / identifying gaps

Challenging prescribing of meds of low clinical value

Dosage form / device check

Adherence check and education

PAM measurement

Healthy living advice/public health interventions

Check need for dispensing of all repeat scripts

Cost-effective medicines substitution

Community Pharmacy Care Plan

Local issues update

- Pharmacyfirst Consultation
- EHC – PGD
- Live Well Barnsley
- APC reporting
- Medicines Ordering



- <https://www.livewellbarnsley.co.uk/>

Barnsley Interface Issues Pathway

Identify Issue:

for incidents that result through a transfer of care e.g. between hospital and pharmacy, GP and pharmacy, care agency and pharmacy.

Complete a form

The completed form should be sent to barnsleyapcreport@nhs.net where it will be logged and distributed to the investigation lead for the organisation concerned.

The form will then be reviewed and investigated according to local procedures and protocols.

The appropriate section of the form or investigation summary will be completed with the outcome of this investigation.

Once completed the form or investigation summary will be sent back to barnsleyapcreport@nhs.net.

The issue will be closed and the 'APC Issues log' will then be updated to reflect this.

Medicines Ordering

- Progress Updates on Pharmoutcomes
- If your pharmacy changes its policy in advance let the CCG know
- Any queries contact the generic mailbox on **barnsleyccg.MOSW@nhs.net**
or contact the Medicines Management Team on **01226433798** between 9am - 4pm.

LPC Activity

- LPC website <http://psnc.org.uk/barnsley-lpc/>
- LPC newsletter (sign up via website)
- Pharmacy BEST events
- Pharmoutcomes Activity Reports