# **Quality Payments Scheme – February 2019 Review**

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| **Gateway Criteria 1**  Advanced Services | On the day of the review, was your pharmacy offering Medicines Use Review (MUR) or New Medicine Service (NMS), or were you registered for the NHS Urgent Medicine Supply Advanced Service (NUMSAS) pilot? |
| **Gateway Criteria 2**  NHS website (formerly NHS Choices)  *Non-DSP* | On the day of the review, was your pharmacy’s NHS website (formerly known as NHS Choices) entry up to date, including bank holiday opening hours?  Contractors are required to update or validate each of the following three parts of their NHS website entry between 00:00 on 3 December 2018 and 23:59 on 15 February 2019:  - Opening hours, including the following Bank Holiday opening hours: Friday 19 April 2019, Sunday 21 April 2019, Monday 22 April 2019, Monday 6 May 2019 and Monday 27 May 2019  - Services the pharmacy provides  - Facilities available  If you have declared you are offering NMS and/or MUR in the advanced services gateway criterion, this service must be visible on your NHS website entry on the review date. |
| *DSP* | On the day of the review, as a Distance Selling Pharmacy (DSP) had you carried out the following actions?  DSPs do not, currently, have full NHS website (formerly known as NHS Choices) entries.  Therefore, DSPs are required to:  - Check the name of their pharmacy on the NHS website - it must be  the trading name rather than the registered company name (unless  these are the same)  - Check the telephone number and website URL on their entry  - Check the provision of EPS is correctly indicated on their entry  - Email the NHSBSA Provider Assurance Team: [nhsbsa.pharmacysupport@nhs.net](mailto:nhsbsa.pharmacysupport@nhs.net), including ‘QPSFEBREVIEW’ and  the pharmacy ODS code in the subject line, and confirming in the  body of the email that the current information is correct or providing  the correct information DSPs will need to send their email to the NHSBSA Provider Assurance Team between 00:00 on 3 December 2018 and 23:59 on 15 February 2019.  DSP is not listed on the NHS website (formerly known as NHS Choices):  DSPs that are not listed on the NHS website should email the NHSBSA Provider Assurance Team: [nhsbsa.pharmacysupport@nhs.net](mailto:nhsbsa.pharmacysupport@nhs.net)  (including ‘UNABLETOVERIFYPROFILE’ in the subject line) with the following information:  - Pharmacy name (trading name)  - ODS code  - Address  - Telephone number  - Website URL  - EPS enabled (Yes/No)  DSPs will need to send their email to the NHSBSA Provider Assurance Team between 00:00 on 3 December 2018 and 23:59 on 15 February 2019. Once this information has been received by the NHSBSA Provider Assurance Team this will count as passing the gateway criterion. |
| **Gateway Criteria 3**  CPPQ  *Non-DSP* | On the day of the review, were the results of your last completed Community Pharmacy Patient Questionnaire publicly available on your pharmacy’s NHS website (formerly known as NHS Choices) entry? |
| *DSP* | On the day of the review, were the results of your last completed Community Pharmacy Patient Questionnaire publicly available on your pharmacy’s website, and had the NHSBSA Provider Assurance Team been notified?  Once a DSP has published their latest CPPQ results on their website they must notify the NHSBSA Provider Assurance Team,  [nhsbsa.pharmacysupport@nhs.net](mailto:nhsbsa.pharmacysupport@nhs.net), by sending a link of the page on which the CPPQ results are published and including ‘CPPQFEB’ and the pharmacy ODS code in the subject line of the email. |
| **Gateway Criteria 4**  NHSmail | On the day of the review, were staff at the pharmacy able to send and  receive NHSmail from their shared premises NHSmail account, and were there at least two live (active) linked accounts to this shared account?  Any problems or maintenance issues with pharmacy NHSmail accounts can be dealt with via the helpdesk: [pharmacyadmin@nhs.net](mailto:pharmacyadmin@nhs.net). |
| **Gateway Criteria 5**  WES | On the day of the review, had the NHS Digital Warranted Environment Specification (WES) and/or your System Supplier(s) been consulted and the contractor therefore assured themselves, and could demonstrate, that all their operating system and browser versions currently in use in the pharmacy to link to NHS Digital systems such as the Electronic Prescription Service and Summary Care Record, comply with the WES; and are therefore supported by NHS Digital for connectivity to NHS Spine systems? |
| **Quality Criteria 1**  Written  Safety Report | On the day of the review, did the pharmacy have a written patient safety report at premises level and has uploaded any LASA incident reports to the NRLS and has kept a record for confirmation of this activity at the pharmacy premises or within any  electronic reporting system used by the contractor?  The written report should:  - Be available for inspection at the premises at the review point  - Have been updated since 29 June 2018 (where claimed before)  - Cover analysis of incidents and incident patterns (taken from an  ongoing log)  - Have evidence of sharing learning locally and nationally, and actions  taken in response to national patient safety alerts  Demonstrably, the pharmacy contractor:  - Actively identifies and manages the risks at premises level associated  with specified look-alike sound-alike errors (LASA) identified from the  National Reporting and Learning System (NRLS)  - Has put in place actions to prevent these, for example physical  separation, staff awareness raising, visual warnings, tags or labels on  shelving, fatigue reduction strategies, enhanced checking procedures  for these medicines  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. |
| **Quality Criteria 2**  CPPE Risk  Management Training | On the day of the review, had 80% of all registered pharmacy professionals working at the pharmacy satisfactorily completed the CPPE Risk Management training and was there  an example of a risk review that the pharmacy team at the premises (available for inspection) have drawn up for a risk in the pharmacy that has been identified and prioritised with identified risk minimisation actions that the pharmacy team is taking?  Who is a pharmacy professional?  This requirement covers all pharmacy professionals registered with the General Pharmaceutical Council (pharmacists and pharmacy technicians) working in the pharmacy.  Each registered pharmacy professional working in the pharmacy on the  review date count as one, if they worked any part of the day at the pharmacy. |
| **Quality Criteria 3**  Non-Steroidal Anti-Inflammatory Drugs and Gastro-Protection Audit | On the day of the review, had your pharmacy completed the audit of non-steroidal anti-inflammatory drugs and gastro-protection for patients 65 or over?  For patients 65 or over, the pharmacy should have:  - Notified the patient’s GP where professional concerns were identified  - Shared their anonymised data with NHS England  - Incorporated the learning of the audit into future practice |
| **Quality Criteria 4**  Healthy Living Pharmacy Level 1 and CPPE Children’s Oral Health Training | On the day of the review, was your pharmacy a Healthy Living Pharmacy level 1 (self-assessment), and had 80% of the pharmacy staff that provide healthcare advice to the public successfully completed the CPPE children’s oral health training assessment?  Which pharmacy staff does this apply to?  Pharmacy staff within a patient facing role should include:  ● Registered pharmacy professionals  ● Pre-registration graduates  ● Everyone working in the dispensary  ● Medicine counter assistants  Each patient-facing member of staff working in the pharmacy on the review date count as one, if they have worked any part of the day for the pharmacy. |
| **Quality Criteria 5**  NHS 111 Directory of services | On the day of the review, was the pharmacy’s NHS 111 Directory of Service entry up to date, including the following bank holiday opening hours: Friday 19 April 2019, Sunday 21 April 2019, Monday 22 April 2019, Monday 6 May 2019 and Monday 27 May 2019?  Contractors are required to have confirmed and/or amended their DoS details to ensure that they are current and accurate for this review date. This should have been done by using the DoS Profile Updater. |
| **Quality Criteria 6**  Referral for Asthma Review | On the day of the review, was the pharmacy able to show evidence that  relevant asthma patients (see below) were referred for an asthma review?   * Asthma patients for whom more than 6 short-acting bronchodilator inhalers were dispensed, without any corticosteroid inhalers, within a 6-month period, should have (since 28 June 2018) been referred to an appropriate healthcare professional for an asthma review. * All children aged 5-15 prescribed an inhaled corticosteroid for asthma have a spacer device where appropriate in line with NICE TA38 and have a personalised asthma action plan. Refer to an appropriate healthcare professional where this is not the case.   No patients were identified for referral:  Where no patients are identified for referral, the contractor will still be eligible for payment if they can provide evidence that they:  - Have been working to identify suitable patients  - Have a process in place for referral should they identify someone  If this is the case, the contractor should select “Yes” |
| **Quality Criteria 7**  Dementia Friends | On the day of the review, were 80% of pharmacy staff working in patient facing roles Dementia Friends (Alzheimer’s Society)?  Which pharmacy staff does this apply to?  Pharmacy staff within a patient facing role should include:  - Registered pharmacy professionals  - Pre-registration graduates  - Everyone working in the dispensary  - Medicine counter assistants  - Delivery drivers delivering pharmacy related products  Each patient-facing member of staff working in the pharmacy on the review date count as one, if they have worked any part of the day for the pharmacy. |