

# Changes to the Community Pharmacy Contractual Framework 2019/20



Community  
Pharmacy Wales  
Fferylliaeth  
Gymunedol Cymru

CONTRACTOR NEWS

This is to inform contractors that the details of the final requirements of the Community Pharmacy Contractual Framework for 2019/20 have now been confirmed by Welsh Government:

## **Collaborative Working Scheme**

There will be no substantive changes to the collaborative working scheme and the scheme will continue with £1500 being available for contractors to claim during 2019/20 as stated in Part VIIB of the Drug Tariff

## **Workforce Development**

Funding will be provided to support the development of another 20 Independent prescriber sites across Wales with funding for a further 50 community pharmacists to be trained as Independent Prescribers.

Pharmacy technician training opportunities will again be offered through HEIW, the exact details of this are still to be confirmed between HEIW, WG and CPW and will be communicated in the near future.

## **Enhanced Services Funding**

The individual LHB allocations for Enhanced services will again be ring-fenced and will be further increased in 2019/20. There will be separate ring-fenced funding for the IP pathfinder sites that are currently being developed.

## **Quality & Safety Scheme**

Contractors will receive a quarterly payment of £1250 for completion of specified activities as set out in the Drug Tariff Part VIIC (attached as Appendix One).

Changes to the Quality & Safety Scheme for 2019/20 compared to 2018/19 are:

- Requirement to complete a High Risk Medicines Survey on four occasions

- Requirement to review the pharmacy’s performance against the Safer Dispensing and Medicines optimisation indicators from data reported in 2018-19 and produce a plan
- Review the Community Pharmacy Safety Attitude Survey from 2017-18 and identify actions
- Complete the Community Pharmacy Safety Attitude Survey 2019/20
- Declare on the WP34 on a monthly basis the total number of days that the pharmacy was open and the number of days on which the Common Ailments Service was available
- There is no requirement to complete the Workforce Survey in 2019/20

All other requirements of the Quality & Safety Scheme are the same as those completed in 2018/19.

**Service Continuity**

A continuity payment will be introduced from 1 October 2019 and will be payable to pharmacies in which the common ailments service was available on at least 60% of the days on which the pharmacy was open in the relevant month.  
 (Contractors are advised to note that in 2020-2021 WG will increase the requirement).

**Common Ailments Service**

A new fee structure will be introduced in relation to the Common Ailments Service as of 1 October 2019 (as discussed at the Contractor events in February):

No. of Registrations	Annual Payment (£)
1-50	£940.50
51-100	£1881.00
101-150	£2821.50
151-200	£3762.00
201-250	£4702.50
251-300	£5643.00
301-350	£6583.50
351-400	£7524.00
401-450	£8464.60
451+	£8464.50 +£18.81/ patient above the threshold

**JUDY THOMAS**  
**DIRECTOR OF CONTRACTOR SERVICES**  
 20 March 2019

Part VIIC QUALITY AND SAFETY SCHEME (WALES)

**Purpose**

1. The intention of the quality and safety scheme in 2019-20 is to:

- Increase the whole community pharmacy teams' awareness of and capability in quality improvement methodology;
- Undertake an assessment of the safety culture in community pharmacies;
- Validate information about pharmacy services contained in the All Wales Pharmacy Database (AWPD);
- Measure the prevalence of high risk medicine use in community pharmacies; and
- Encourage pharmacies to take action to reduce the prevalence of high risk medicine use

2. A quarterly payment of £1,250 will be payable to each pharmacy on completion of each of the activities set in paragraphs 4 to 8 below at the specified times.

3. A maximum payment of £5,000 will be payable to each pharmacy completing each component of the quality and safety scheme. Any pharmacy contractor included in the pharmaceutical list after the time specified for completion of any component of the quality and safety scheme shall not be eligible for payment for that component.

**Focus of quality and safety scheme**

4. Improving Quality Together bronze level e-learning

4.1. All pharmacy employees involved in the provision of NHS pharmaceutical services at the pharmacy and will have completed the Community Pharmacy Improving Quality Together bronze level (IQT bronze) e-learning package. This must include any pharmacists, pharmacy technicians (including locums) or pharmacy employees involved in the provision of NHS pharmaceutical services who have not previously completed the e-learning package and who work regularly at the pharmacy (ie for a total of four or more weeks between 1 April 2019 and 31 March 2020).

4.2. In the case of pharmacies where fewer than ten employees are involved in the provision of NHS pharmaceutical services, all employees (including locums) must complete the e-learning package.

4.3. In the case of pharmacies where more than ten employees are involved in the provision of NHS pharmaceutical services, no fewer than ten must complete the e-learning package, this must include all pharmacists and pharmacy technicians (including locums).

4.4. The IQT bronze e-learning package will be provided by the Health Education Improvement Wales (HEIW) and the 1000 Lives Plus Improvement Service and available at <https://www.wcppe.org.uk/>.

4.5. Pharmacists and pharmacy technicians who work regularly at more than one pharmacy need only complete the e-learning once.

5. Prevalence of high risk medicines use

5.1. The pharmacy will provide information on the number of patients whose prescriptions were dispensed in the pharmacy where the conditions in 5.2 are met in line with the schedule at 5.3

5.2. See tables below

Safer Dispensing Indicators:

Indicator	Description of conditions
1. Warfarin and INR monitoring	1. Number of patients dispensed a prescription for warfarin AND 2. Whose latest INR result is not recorded in the pharmacy's Patient Medication Record (PMR) system
2. Dosing instructions for methotrexate	1. Number of patients dispensed a prescription for methotrexate AND 2. The prescription contains no or non-specific directions for use (e.g. "to be taken as directed")
3. Verapamil in combination with beta-blockers	1. Number of patients dispensed a prescription for verapamil AND 2. Who are also dispensed a prescription for a beta-blocker
4. Use of valproate in girls and women of childbearing potential (1)	1. Number of patients dispensed a prescription for sodium valproate or valproic acid AND 2. Who are female AND 3. Who are aged between 13 and 45
5. Use of valproate in girls and women of childbearing potential (2)	Of the patients identified in number 4, the number who have been provided the patient information booklet available at: <a href="https://www.medicines.org.uk/emc/rmm/421/Document">https://www.medicines.org.uk/emc/rmm/421/Document</a>

Medicines Optimisation Indicators:

Indicator	Description of conditions
6. Over 65s prescribed an antipsychotic medicine	1. Numbers of patients dispensed prescriptions for antipsychotic medicine AND 2. where the patient is aged 65 or over
7. Warfarin and oral NSAIDs	1. Number of patients dispensed a prescription for warfarin AND 2. Who are also dispensed a prescription for an oral Non-Steroidal Anti-Inflammatory Drug (NSAID)
8. NSAIDs in combination with aspirin or clopidogrel without gastroprotection	1. Number of patients dispensed a prescription for an NSAID AND 2. Who are dispensed a prescription for aspirin or clopidogrel AND 3. Who are not dispensed a prescription for suitable gastroprotection (PPI or H2 antagonist) AND 4. are aged 65 or over
9. Excessive use of short acting bronchodilators in asthma	1. Number of patients who have been dispensed prescriptions or received emergency supplies (combined total) of more than 6 inhaled short acting beta agonists in the previous 6 months AND 2. Who have not been prescribed an inhaled corticosteroid in the previous 6 months

5.3 Schedule for Data Collection:

Submission date	Period to which data relates	Indicators
Between 1 and 31 May 2019	April 2019	1 to 5
Between 1 and 31 August 2019	July 2019	6 to 9
Between 1 and 30 November 2019	October 2019	1 to 5
Between 1 February and 28 February 2020	January 2020	6 to 9

5.4. By 30 June 2019, the pharmacy shall, using data reported in 2018-19, review its performance against the Safer Dispensing and Medicines Optimisation indicators in the table at 5.2 and produce a plan to reduce the prevalence of high risk medicines use amongst users of the pharmacy. The plan will include:

- Action to identify and make an appropriate clinical intervention with patients meeting the criteria in table 5.2; and
- Details of mitigating actions the pharmacy will put in place to reduce the number of patients meeting the criteria in table 5.2 in future

5.5. A detailed report, which may be in an electronic format and must include: the date and time of meeting; the names and affiliations of the attendees; a summary of the main points of discussion; any actions agreed; and the current status of those actions shall be maintained at the pharmacy for inspection by the local health board.

## 6. Assessment of Safety Culture

6.1. By 30 September 2019, staff within the pharmacy will have discussed the results of the 2017-18 Community Pharmacy Safety Attitudes Survey and identified actions to improve the safety culture within the pharmacy.

6.2. Between 1 October and 31 December 2019, pharmacy employees and locums involved in the provision of NHS pharmaceutical services at the pharmacy will complete the Community Pharmacy Safety Attitudes Survey.

6.3. The Safety Attitudes Survey will be provided by the NHS Wales Informatics Service (NWIS).

6.4. In the case of pharmacies where fewer than ten employees are involved in the provision of NHS pharmaceutical services, all employees (including locums) must complete the survey.

6.5. In the case of pharmacies where more than ten employees are involved in the provision of NHS pharmaceutical services, no fewer than ten must complete the survey, this must include all pharmacists and pharmacy technicians (including locums) who work regularly at the pharmacy (i.e. for a total of ten or more days between 1 October 2019 and 31 March 2020).

6.6. Pharmacists and pharmacy technicians who work regularly at more than one pharmacy must complete a survey relating to each pharmacy at which they work regularly.

## 7. Validation of the All Wales Pharmacy Database

7.1. Before 31 March 2020, the responsible pharmacist of the pharmacy will review the information about the pharmacy contained in the All Wales Pharmacy Database maintained by the NHS Wales Shared Services Partnership.

7.2. The All Wales Pharmacy Database will be opened for review from mid January 2020 details of the validation exercise will be communicated by the NHS Wales Shared Services Partnership.

## 8. Service Continuity

8.1. From April 1, the pharmacy shall declare, on the WP34 for the relevant month, the total number of days the pharmacy was open (including part days) and the number of days on which the services at 8.3 were available from the pharmacy in the relevant month.

8.2. For the purposes of this section 'available' means the service could be accessed for the entire opening hours of the pharmacy on the relevant day.

8.3. The Common Ailment Service