



Collaborative Working 2018/19

Frequently asked questions

Q: Are the subjects included in the Collaborative Working Scheme for 2018/19 the same as for 2017/18?

A: No, the scheme has been extended for 2018/19 and includes additional subjects.

The topics for 2018/19 are:

1. Promotion and establishment of repeat dispensing/batch prescribing;
2. Improving the operation of repeat prescribing systems (other than - repeat dispensing/batch prescribing) with a particular focus on reducing waste;
3. Ensuring the benefits of NHS community pharmacy services including, but not limited to, the common ailment service and smoking cessation service to patients and the NHS are maximised;
4. Developing arrangements for maximising the uptake of influenza vaccination within the community;
5. Making arrangements for undertaking discharge medicines reviews particularly for patients discharged from hospital to a care home to which the pharmacy provides dispensing services and the GP provides the *General Medical Services care homes directed enhanced service*;
6. Discussing improving the use of medicines by residents in care homes
7. Developing a plan to improving prescribing safety linked to the prevalence of high risk medicines use indicators
8. Engaging in small group problem based learning activities coordinated by the Wales Centre for Pharmacy Professional Education (WCPPE)
9. Understanding and engaging in primary care cluster priorities through attendance at primary care cluster meetings.

Q: Is the payment still £250 for each visit claimed?

A: Contractors will be able to claim up to four payments each of £250 (£1,000 in total) and one payment of £500 will be payable to all contractors on the pharmaceutical list at 1 April 2018, who undertake collaborative working in one or more of the priority areas and satisfy the conditions.

Contractors can claim £250 for collaborative working in any of the first 8 priority areas listed as the answer to the previous question. A single payment of £500 can be claimed for collaborative working with primary care cluster priorities through attendance at primary care cluster meetings.

Q: I purchased the pharmacy after 1 April 2018, can I still take part and claim?

A:. Contractors included in the pharmaceutical list after 1 April 2018 will not be eligible to claim full payment other than where a contractor is included as a result of a change of ownership, in which case the contractor will be entitled to up to five payments less any made to the previous contractor.

Q: I am not currently commissioned to provide Common Ailments Service; can I still have a collaborative working meeting on this subject?

A: Yes, there is no reason why you cannot discuss this and inform the local GP practice (or other healthcare professional) of when you will receive roll-out and what will be included and discuss referral pathways in advance.

Q: Can I discuss other enhanced services that I provide as part of Collaborative Working?

A: The change in topics for 2018/19 mean that yes you can discuss any enhanced services you are commissioned to provide as part of the conversation and it makes sense to ensure that local healthcare professionals know about all the services you provide.

Q: The Pharmacy Manager isn't a pharmacist or Registered Technician can she/he still undertake the visit?

A; The Drug Tariff requirements state that it must be a pharmacist or pharmacy technician that undertakes the work; the pharmacy manager cannot carry out the visit on their own to claim payment however they could accompany a pharmacist or technician.

Q: I don't have a regular pharmacist; can locums carry out the visit?

A: Yes, the collaborative work can be undertaken by any pharmacist or pharmacy technician who regularly works in the pharmacy. Regularly is defined in the Drug Tariff entry as on two or more days each week for at least four weeks preceding and four weeks after the work is undertaken.

Q: I don't have a regular pharmacist; can my technician carry out all three visits?

A; No; at least two of the five* visits must be carried out by a pharmacist to be eligible to claim for any payment. Pharmacies who have only claimed for visits carried out by technicians will see monies reclaimed under Post Payment Verification. (* To claim the £500 payment for attending at Primary Care Cluster meetings this must be attended by a pharmacist)

Q: I don't have a regular pharmacist; can my technician attend a cluster meeting?

A: No; the Drug Tariff requirements are that to claim for attendance at primary care cluster meetings that this work must be undertaken by a pharmacist. Some Cluster meetings will still allow them to attend, but you would not be able to claim under the collaborative working scheme.

Q: How do I claim for a Collaborative Working visit?

A: The claim is made through NECAF

Q: What paperwork do I need to keep for a collaborative working visit? (What could be included in Post Payment Verification?)

A: Pharmacies should have a detailed report of each piece of collaborative working, 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 is maintained at the pharmacy for inspection by the local health board. CPW have produced a template report for this purpose

<http://www.cpwales.org.uk/getattachment/Services-and-commissioning/Collaborative-Working/new-Collaborative-Working-Visit-Report-Form-18-19.pdf.aspx?lang=en-GB>

Q: Do I need to meet with the GP?

A: No, your visit can be with any relevant member of the GP practice team e.g. contractors may wish to meet with the reception team to discuss referral for the Common Ailments Service, or the practice nurse to discuss flu vaccination. Meetings can also be with other healthcare professionals, including optometrists, district nurses, dentists etc.

Q: Do I need to meet in the GP premises?

A: No, the meeting can be anywhere, including in the community pharmacy.

Q: I met with my GP practice, but they would only give me 5-10 minutes of their time, does that count?

A: Yes, there is no requirement within the drug tariff for a specific “length of meeting” as long as you met the rest of the criteria, and can write a detailed report, then this meets the requirements.

Q: I am struggling to meet with my GP practice, what else can I do?

A: The wording in the Drug Tariff is to “improve collaborative working relationships with GPs and other healthcare professionals”, community pharmacy contractors can therefore look to arrange meetings with other healthcare professionals to discuss the topics e.g. the Common Ailments Services fits very closely with the Welsh Eye Care Service so contractors may wish to arrange meetings with their local optometrists, dentists may also wish to refer patients with oral thrush to the service.

Contractors may also wish to meet with District Nurses or Nurses in Nursing Homes to discuss the DMR service

Q: Do I need to have a 2nd pharmacist in for the day to be able to claim?

A: No; the fee can enable pharmacies to employ another pharmacist if required, but it is not one of the criteria to make a claim. Pharmacies may be able to attend meetings during lunchtimes etc that would not require additional pharmacist cover.

Q: Can I have a second meeting on the same topic?

A: Yes; as long as all the criteria can be met and it is a development on the initial meeting; an example of this could be when setting up Repeat Dispensing, a review meeting could be arranged for several months later to discuss implementation/ any issues etc.

Q: Is there a certain amount of time that should be left between each visit?

A; No; there is no time restrictions around the length of time between each visit.

Q: Is there a particular timeframe when flu should be discussed?

A; There are no particular restrictions, but ideally contractors should look to have discussions early with GP practices to see how they could improve uptake by working collaboratively during the 2018/19 flu season.

Q: Does the person I am meeting have to sign anything to confirm that we have met?

A: No; there is no requirement for this. Contractors are required to just complete a detailed action report following the meeting., including the names of those who were present.