



Pharmacy Quality Payments

Gateway Criteria Guidance

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1 Executive summary

Building on the Five Year Forward View the NHS is introducing changes to the community pharmacy contractual arrangements to develop a more clinically focussed community pharmacy service that is better integrated with other parts of primary care.

2017/18 will see the introduction of a Community Pharmacy Quality Payments Scheme which will form part of the Community Pharmacy Contractual Framework from 1 December 2016 until 31 March 2018. Up to £75 million will be paid to community pharmacies for meeting a number of quality criteria. The Quality Payments Scheme will reward community pharmacies for delivering quality criteria in all three of the quality dimensions: Clinical Effectiveness, Patient Safety and Patient Experience.

The payment will depend on how many of the quality criteria the pharmacy achieves. The criteria have been weighted based on an assessment of the challenge of achievement and the benefit to patients from doing so.

For a pharmacy to become eligible for any payment under the Quality Payments Scheme it must first meet four gateway criteria. This guidance is intended to support community pharmacies and other stakeholders in their understanding of the requirements for achievement of the four gateway criteria.

The gateway criteria are:

- the contractor must be offering at the pharmacy Medicines Use Review (MUR) or New Medicine Service (NMS); or must be registered for NHS Urgent Medicine Supply Advanced Service Pilot; and
- the NHS Choices entry for the pharmacy must be up to date; and
- pharmacy staff at the pharmacy must be able to send and receive NHS mail (Note: For the April 2017 review, evidence of application for an NHSmail account by 1 February 2017 will be acceptable); and
- the pharmacy contractor must be able to demonstrate ongoing utilisation of the Electronic Prescription Service at the pharmacy premises.

This guidance also details some of the activity that NHS England is organising to support pharmacies in achieving the gateway criteria; by developing the NHS Choices Website to make it easier and clearer for pharmacies to update their NHS Choices entry; and making NHS.net email accounts more accessible.

2 Background

The NHS Five Year Forward View sets out a clear direction for the NHS, building on its strengths and rising to the challenges of the future. These include responding to changes in patients' health needs, expectations and personal preferences; rapid developments in treatment, technologies and care delivery; and transformational change through new models of care to improve patient outcomes.

There is general acceptance that there is real potential for far greater use of community pharmacy and pharmacists: in prevention of ill health; support for healthy living; support for self-care and long term conditions; medication reviews and as part of more integrated local care models. To achieve these aspirations, a more clinically focussed community pharmacy service is needed that is better integrated with other parts of primary care.

On the 20 October 2016 the Government announced a package of reforms following consultation with the Pharmaceutical Services Negotiating Committee (PSNC) and other key stakeholders, including patient and public representatives. The details of the announcement can be found [here](#)¹:

One of the key announcements in the reform package was the introduction of a Quality Payments Scheme that will be available for 2017/18. The single common definition of 'quality' encompasses three equally important parts:

- Care that is clinically effective;
- Care that is safe; and,
- Care that provides a positive experience for patients.

High quality care is only achieved when all three dimensions are present - not just one or two of them. The Quality Payments Scheme will reward community pharmacies for delivering quality criteria across all three dimensions of quality.

The Quality Payments Scheme will be funded from the overall community pharmacy contractual framework for 2017/18 of £2.592 billion. Up to £75 million will be paid out to community pharmacies dependent on them meeting a number of quality indicators. Details can be seen in the Drug Tariff [here](#)².

Quality payments will depend on how many of the quality criteria the contractor achieves. Pharmacies passing the gateway will receive a quality payment if they meet one or more of the criteria set out in Table 1 (below). The criteria have been weighted based on an assessment of the challenge of achievement and the benefit to patients from doing so with each criterion being allocated a number of 'points'.

There will be two review dates during the year, at which quality payments can be claimed:

- 28 April 2017 (for which payment is claimed at the end of April 2017); and

¹ <https://www.gov.uk/government/publications/community-pharmacy-reforms>

² <http://www.nhsbsa.nhs.uk/PrescriptionServices/924.aspx>

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- 24 November 2017 (for which payment is claimed at the end of November 2017).

The total number of points that each contractor can qualify for over the two reviews is 100. However, three of the quality criteria (which account for 45 of the available points) only need to be achieved once, and therefore can only be claimed once over the two review dates.

Table 1 sets out the quality criteria, the frequency with which the criteria need to be demonstrated and the number of points allocated to each of the criteria. Each point will be worth a minimum of £64 and a maximum of £128 depending on how many pharmacies qualify for quality payments.

Table 1

Domain	Criteria	Number of review points at which it can be claimed	Points at any one review point	Total points over the two review points
Patient Safety	Written safety report at premises level available for inspection at review point, covering analysis of incidents and incident patterns (taken from an ongoing log), evidence of sharing learning locally and nationally, and actions taken in response to national patient safety alerts.	One	20	20
Patient Safety	On the day of the review 80% of registered pharmacy professionals working at the pharmacy have achieved level 2 safeguarding status for children and vulnerable adults in the last two years	Two	5	10
Patient Experience	On the day of the review, the results of the Community Pharmacy Patient Questionnaire from the last 12 months is publicly available on the pharmacy's NHS Choices page	One	5	5
Public health	On the day of the review, the pharmacy is a Healthy Living Pharmacy level 1 (self-assessment)	One	20	20
Digital	On the day of the first review, the pharmacy can demonstrate a total increase in access to Summary Care Records between 1 December 2016 and 28th April 2017 in comparison to the previous 5 months; and on the day of the second review, the pharmacy can demonstrate a total increase to access to Summary Care Records	Two	5	10

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Domain	Criteria	Number of review points at which it can be claimed	Points at any one review point	Total points over the two review points
	between 1 May 2017 and 24th November in comparison to the previous 7 months.			
Digital	On the day of the review, the pharmacy's NHS111 Directory of Services entry is up to date.	Two	2.5	5
Clinical Effectiveness	On the day of the review, the pharmacy can show evidence of asthma patients, for whom more than 6 short acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period, are referred to an appropriate health care professional for an asthma review.	Two	10	20
Workforce	On the day of the review, 80% of all pharmacy staff working in patient facing roles are trained 'Dementia Friends'	Two	5	10
			total number of points across the two reviews	100

In order to receive payment, pharmacies will need to make a declaration to the NHS Business Services Authority at each review date. The process for making this declaration has still to be finalised, this will be publicised ahead of the first review date.

It is expected that any additional work and data collection required to gather and collate evidence for the Quality Payments Scheme will improve the quality of pharmaceutical services provided to patients as a stepping stone to a more clinically focussed community pharmacy service. The points available are tailored to reflect the level of work that will be required to meet that quality criterion. Any investment that pharmacies make to meet any of the gateway or quality standards is undertaken at their own risk.

For a contractor to become eligible for the Quality Payments Scheme it must meet four gateway criteria. This document aims to provide further guidance to contractors on meeting those gateway criteria.

To qualify for payments, pharmacies will have to meet four gateway criteria:

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- the contractor must be offering at the pharmacy Medicines Use Review (MUR) or New Medicine Service (NMS); or must be registered for NHS Urgent Medicine Supply Advanced Service (NUMSAS) Pilot; and
- the NHS Choices entry for the pharmacy must be up to date; and
- pharmacy staff at the pharmacy must be able to send and receive NHS mail (Note : For the April 2017 Review, evidence of application for an NHSmail account by 1 February 2017 will be acceptable – see section 3.3.2); and
- the pharmacy contractor must be able to demonstrate ongoing use of the Electronic Prescription Service at the pharmacy premises.

Simply passing the gateway criteria will not, earn a quality payment for the contractor. Contractors passing the gateway will receive a quality payment if they also achieve one or more of the quality criteria; the level of payments will depend on how many of the quality criteria the pharmacy achieves

Further guidance will be made available to support contractors with the Quality Payments Scheme. This guidance has been written to assist contractors to gather and collate the evidence for achieving the gateway criteria under the terms of the Quality Payments Scheme. Evidence of such achievement may be required by NHS England to support a contractor's declaration of eligibility for any payment under the Quality Payments Scheme.

3 Gateway Criteria

3.1 Provision of at least one specified advanced service

Under the NHS Community Pharmacy Contractual Framework community pharmacies in England can provide three tiers of services commissioned by NHS England:

- Essential services - commissioned by NHS England and must be provided by all contractors
- Advanced Services - commissioned by NHS England which can be provided by all contractors once accreditation requirements have been met
- Enhanced Services - commissioned by NHS England locally in response to the needs of the local population.

Community pharmacies must be satisfactorily complying with their obligations under Schedule 4 to the Pharmaceutical Services Regulations (terms of service of NHS pharmacists) in respect of the provision of essential services and in respect of an acceptable system of clinical governance to be able to deliver any advanced service.

As of the 1 December 2016 the following advanced services will be commissioned from community pharmacies in England:

- Medicines Use Review
- Prescription Intervention Service
- New Medicine Service
- Stoma Customisation
- Appliance Use Review
- Community Pharmacy Seasonal Influenza Advanced Service

- NHS Urgent Medicine Supply Advanced Service (NUMSAS) pilot scheme.

Details of the advanced services available from community pharmacies in England are available in the Drug Tariff which can be accessed [here](#):

However to meet the specified advance service gateway criterion, a contractor must be offering at the pharmacy Medicines Use Review (MUR) or New Medicine Service (NMS); or must be registered for NHS Urgent Medicine Supply Advanced Service Pilot.

The contractor will need to be able to demonstrate, when they make their review date declaration, that they are offering at the pharmacy MUR or NMS; or that the pharmacy is registered for the NUMSAS Pilot.

Offering the MUR service or NMS service could be evidenced by claims for payments made by contractors for these advanced services in the period leading up to that review point declaration. Where such claims have not been received by the NHSBSA, contractors may need to decide how else they will be able to evidence the offering of these advanced services should they be asked to do so by NHS England.

Registering to provide NUMSAS will be accepted as evidence of offering this advanced service. Details of how to register for NUMSAS are available [here](#)³ Section 3.3.2 gives details of the roll out of NHSmail accounts to support the NUMSAS pilot; further guidance will be issued to community pharmacies in January.

Therefore, community pharmacies applying for the quality payment will need to ensure that, before they make any review date declaration that they can demonstrate that they are offering at the pharmacy Medicines Use Review (MUR) or New Medicine Service (NMS); or that they are registered to provide the NHS Urgent Medicine Supply Advanced Service (NUMSAS) pilot.

3.2 NHS Choices entry up to date

NHS Choices (www.nhs.uk) was launched in 2007 and is the official website of the National Health Service in England. It is designed to meet the requirements of those with health or care needs, either directly (e.g. patient or service user) or indirectly (e.g. carer).

With over 48 million visits per month, it has become the UK's biggest health website accounting for a quarter of all health-related web traffic. It strives to be a world-leading, multi-channel service for everyone engaging with the NHS and social care.

Information, advice or data about health and care providers is made accessible by NHS Choices for the benefits of users, who are the patients and other users of NHS services. This includes details of how to access health and care services in order to make interactions with health and care services as easy as possible.

Each community pharmacy in England has its own entry on the NHS Choices website. However this entry is only useful to NHS Choices users if the information it

³ www.nhsbsa.nhs.uk/UMS

contains is correct and up to date. Hence having an up to date and correct entry on the NHS Choices website is a gateway requirement for the Quality Payments Scheme.

Generally the pharmacy profile allows users to view opening times, information on services and facilities, staff information and whether a pharmacy offers the Electronic Prescription Service (EPS). It also provides users with a comprehensive directory in one place, searchable by postcode, name or address. Distance selling pharmacies have a different profile; further guidance will be issued on how the NHS Choices gateway guidance will apply to these pharmacies.

Up-to-date service and opening times information are important to support service signposting from other pages of NHS Choices where patients and carers can access information about medical conditions and symptoms. This supports the NHS Choices service with its aim of providing patients with the right information about self-care and where services can be accessed to reduce avoidable contacts in GPs and urgent care services.

Each contractor is able to update their entry profile through the NHS Choices Provider Information Management System (PIMS). Guidance on how to do this will be provided in January 2017 as well as information about signing up to use NHS Choices, if this has not been done previously.

3.2.1 Review Date Support

To support the scheme's two review dates of April and November, NHS Choices will, from 7 February 2017, provide each contractor with the option to either amend their NHS Choices entry profile, or to validate the entry as being as accurate and up to date, in a manner which will create a record which will act as evidence to NHS England that these actions have been undertaken.

By each review date, the contractor will need to amend or validate three parts of their profile:

- Opening hours
- the facilities the pharmacy provides e.g. consulting room, parking etc.: and
- the services the pharmacy provides.

All three parts will need to have been amended or validated for the contractor to have met the requirement to update their NHS Choices profile.

NHS Choices will maintain a record of when each contractor last updated its NHS Choices profile from **7 February 2017** until the first review date; and then again from **11 September 2017** until the second review date in November 2017. This record will then be provided to NHS England regional teams to enable them to confirm which community pharmacies have achieved this gateway criteria for the Quality Payments Scheme when reviewing contractors' declarations.

Any inaccuracies between a contractor's NHS Choices profile and their contractual opening hours, facilities and the services provided is the responsibility of the contractor. As this is a gateway criterion, an inaccurate NHS Choices profile may then jeopardise the entire payment claimed for under the Quality Payments Scheme.

Contractors' claiming a quality payment will need to ensure that before they make any declaration they have amended or validated the three parts of their NHS Choices profile **after** 7 February 2017 for the first review period and **after** 11 September 2017 for the second review period.

3.2.2 Community Pharmacies with multiple branches

Community Pharmacies with multiple branches will need to decide whether to complete the review of NHS Choices profiles at head office or branch level. Each profile is specific to that branch and when a profile is edited or validated; staff will need to ensure that the branch details submitted are accurate for that particular branch at the time of completion. Any inaccuracies that result from editing by head offices and local pharmacy teams will be the responsibility of the contractor. As described in 3.2.1 as this is a gateway criterion an inaccurate NHS Choices profile may jeopardise the entire payment claimed for under the Quality Payments Scheme.

3.2.3 Automating the NHS Choices profile update process

An Application Programming Interface (API) is available to automate the process of updating profile information on NHS Choices. This will be useful for community pharmacies with multiple profiles to manage. Rather than using the NHS Choices PIMS to enter the information, pharmacies can use the API to connect their IT systems to NHS Choices to create an automated way of updating their profile information saving time and ensuring that their information, on NHS Choices is always up-to-date. Pharmacies can make changes to the editable fields listed above using the API.

For further information on using the API, please email the NHS Choices Service Desk (nhschoicesservicedesk@nhs.net) requesting a call back from the Syndication team. Please add 'Pharmacy Organisation API' in the subject field of the email; please include one contact per organisation.

3.3 Ability for staff to send and receive NHSmail

Both the Quality Payments Scheme and the pilot for the NUMSAS require pharmacies to have NHSmail. To facilitate access to NHSmail for contractors a phased roll out is planned and will be coordinated by NHS England pharmacy contract local teams.

A registration process for community pharmacies requiring NHSmail will begin in January 2017. Further details will be made available through local NHS England pharmacy contract local teams.

In December 2016 an interim process is being tested for NHSmail allocation prioritising pharmacies where NHS England has decided to roll out the NUMSAS pilot first.

The pharmacies located within these areas will be contacted by NHS England to invite them to register for NHSmail with details about how to do this. The five CCG areas are:

- Brighton & Hove

- Guildford & Waverley
- Fylde Coast (Blackpool and Fylde & Wyre)
- Nottingham City
- Cambridgeshire & Peterborough.

3.3.1 Phased roll out

To support the national implementation of NUMSAS and the Quality Payments Scheme a phased roll out of NHSmail is planned.

We aim to have all pharmacies in England that request an account set up with NHSmail by April 2017. Having an NHSmail account will enable secure transmission of patient information between NHS organisations to support integration of community pharmacy teams with other members of the healthcare team. These accounts will also enable a pharmacy to register to provide the NUMSAS; and give pharmacy contractor's access to NHSmail should they wish to apply for the Quality Payments Scheme.

NHSmail will be rolled out in the following phases:

January 2017	February 2017	March 2017
East of England	South East Coast	London
North East	Midlands	Yorkshire and The Humber
North West	South West	South Central and Thames Valley
		Wessex and the Isle of Wight

3.3.2 Key points

The following key points are to be noted:

- A national roll out for community pharmacies requesting NHSmail is being planned for a phased implementation from January 2017 to March 2017
- Registration for NHSmail will start from January 2017. Further guidance on how to register will be issued ahead of this date
- Existing local NHS administrators for NHSmail will advise contractors that they will not issue new NHSmail account from 1 December 2016 but that contractors will need to register for the national process. Details about the national process will be available in January 2017
- A shared NHSmail mailbox will be allocated to each pharmacy and up to three personal email accounts. In order to access a pharmacy shared NHSmail mailbox, individual user accounts are required to be pointed to the shared mailbox for the pharmacy. This allows users to work collaboratively, whilst ensuring that passwords and user data is not shared with multiple users
- Contractors should consider locum pharmacists and weekend staff who may need to access the shared NHSmail mailbox.
- Priority will be given to those pharmacies registering to deliver NUMSAS although all pharmacies in England will be provided with the opportunity to set up an account

- If a pharmacy has registered for NHSmail by 1 February 2017 but has not been set up with an account by 1 April 2017 then this gateway criteria will be assumed to have been met
- A requirement for being provided with the shared NHSmail mailbox is that the pharmacy is meeting the requirements of their terms of service in relation to Information Governance
- Further guidance will be provided to contractors in January 2017 about the process for NHSmail registration.

3.4 Ongoing utilisation of the Electronic Prescription Service

EPS enables prescribers - such as GPs and practice nurses - to send prescriptions electronically to a dispenser (such as a pharmacy) of the patient's choice. This makes the prescribing and dispensing process more efficient and convenient for patients and staff.

There are a number of reasons why community pharmacies are being encouraged to utilise the EPS:

- Less sorting and less paper to send to NHS Prescription Services
- Reduced need to enter prescription information
- Reduced prescription queries
- Improved patient satisfaction
- No need for a prescription collection service
- Improved stock control.

3.4.1 Evidence of ongoing EPS Utilisation

To meet the gateway criteria of the ongoing utilisation of the EPS at the pharmacy premises contractors must:

1. Have EPS Release 2 enabled

If your pharmacy does not already have EPS Release 2 enabled, and you wish to enable your pharmacy to receive and process EPS Release 2 prescriptions, you must contact your system supplier to order a system upgrade, contact NHS England for dispensing tokens and your local Registration Authority for smart cards.

2. Ongoing nomination

Carry out ongoing nomination of patients who are suitable for the service and who have chosen to nominate your pharmacy. You should ensure that the national nomination guidance is followed at all times.

3. Appropriately endorse and claim for EPS Release 2 prescriptions each month.

Guidance is available from your system supplier and on the EPS website for [endorsement and claim messages](#)⁴ and [month end and reimbursement](#)⁵.

4

<http://webarchive.nationalarchives.gov.uk/20160921135209/http://systems.digital.nhs.uk/eps/dispensing/endors>

4 Further Guidance

Further guidance will be published to provide support to community pharmacies to help them gather supporting evidence to make declarations to the NHSBSA and claim Quality Payments.

Pharmacies may be asked for this evidence to demonstrate that they have achieved the required gateway and Quality criteria to receive payments under the terms of the Quality Payments Scheme as detailed in the Drug Tariff.