



January 2017

## PSNC Briefing 003/17: Quality Payments – How to become a Healthy Living Pharmacy Level 1

This PSNC Briefing provides an overview of how to achieve the Healthy Living Pharmacy (HLP) criterion of the Quality Payments (QP) Scheme. Further information on the QP Scheme can be found in [PSNC Briefing 067/16: Quality Payments – what pharmacy contractors need to do](#) ([tinyurl.com/067-16Quality](http://tinyurl.com/067-16Quality)).

### Introduction

The QP Scheme, being introduced into the Community Pharmacy Contractual Framework in 2017/18, includes a public health criterion ([tinyurl.com/QualityHLP](http://tinyurl.com/QualityHLP)):

*‘On the day of the review, the pharmacy is a Healthy Living Pharmacy level 1 (self-assessment)’*

There is one review point for this criterion:

- Friday 28th April 2017; **or**
- Friday 24th November 2017.

Since this QP criterion can only be claimed at one review point, community pharmacy contractors do not have to undertake this task by the April review point; it can be claimed at the November review point. Meeting this criterion is worth 20 points therefore £1,280 can be claimed in 2017/18 for achieving this criterion.

### What is a HLP?

HLP is an organisational development framework underpinned by three enablers of:

1. workforce development – a skilled team to pro-actively support and promote behaviour change, improving health and wellbeing;
2. premises that are fit for purpose; and
3. engagement with the local community, other health professionals (especially GPs), social care and public health professionals and local authorities.

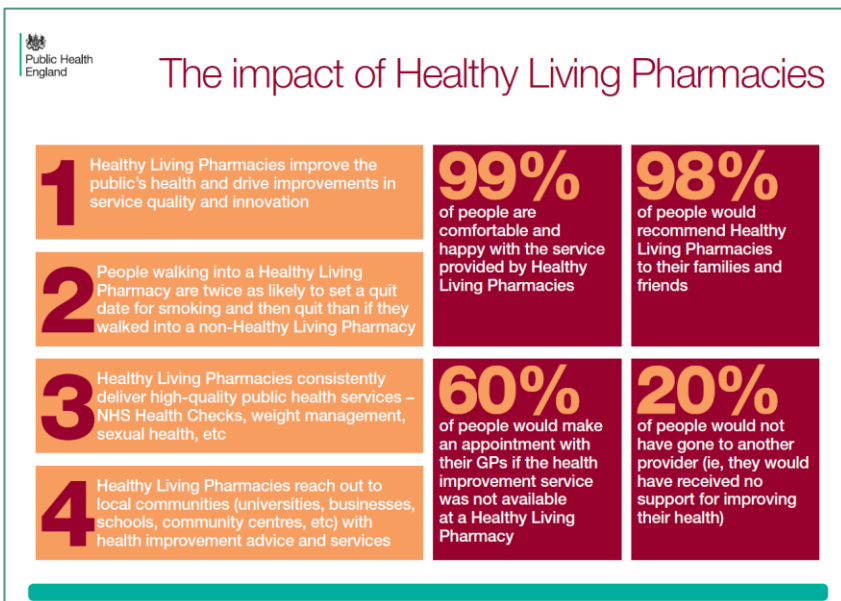
The HLP concept provides a framework for commissioning public health services through three levels of increasing complexity and required expertise with pharmacies aspiring to go from one level to the next.

There are three levels of service delivery within the HLP framework:

- **Level 1: Promotion** – Promoting health, wellbeing and self-care (in July 2016, Level 1 changed from a commissioner-led process to a profession-led self-assessment process) – **this is the level required to claim the QP criterion;**

- **Level 2: Prevention** – Providing services (commissioner-led); and
- **Level 3: Protection** – Providing treatment (commissioner-led).

Public Health England (PHE) has published the below infographics to illustrate the role of HLPs in the health and care system:



As of January 2016, there were over 2,100 pharmacies accredited and en route to becoming accredited HLPs and over 3,500 pharmacy staff qualified as Health Champions.

### Key requirements that must be met before becoming a HLP Level 1

The following requirements must be met before a pharmacy can be registered as a HLP Level 1, therefore contractors should ensure that they meet the requirements before they start working their way through the quality criteria:

- the pharmacy has a consultation room which is compliant with the Advanced Services standards and is appropriate for the services on offer;

- in the past year, the pharmacy has participated in the provision of both Medicines Use Reviews (MURs) and the New Medicine Service (NMS), and has proactively engaged in health promoting conversations;
- in the past year, the pharmacy has participated in the provision of the NHS Community Pharmacy Seasonal Influenza Vaccination Advanced Service or has actively referred patients to other NHS providers of vaccinations;
- the pharmacy complies with the General Pharmaceutical Council's Standards for Registered Premises and Standards of Conduct, Ethics and Performance ([www.pharmacyregulation.org/standards](http://www.pharmacyregulation.org/standards)); and
- the pharmacy complies with the NHS Community Pharmacy Contractual Framework requirements ([psnc.org.uk/contract](http://psnc.org.uk/contract)).

## How to achieve HLP Level 1

In July 2016, the HLP Task Group of the Pharmacy and Public Health Forum ([tinyurl.com/Pharmacy-PublicHealthForum](http://tinyurl.com/Pharmacy-PublicHealthForum)) developed a new process for the implementation of Level 1 HLPs. The intention was to move from a totally commissioner-led HLP accreditation system to a profession-led self-assessment process for Level 1 HLPs, based on clear quality criteria and underpinned by a proportionate quality assurance (QA) process; PHE published a letter ([tinyurl.com/PHELetter](http://tinyurl.com/PHELetter)) explaining this in more detail.

PHE has published a self-assessment guide ([tinyurl.com/HLPLevel1](http://tinyurl.com/HLPLevel1)), which sets out the quality criteria that pharmacies must achieve to gain HLP Level 1 status and lists suggested evidence which can be used to demonstrate that the pharmacy meets the criteria. Pharmacy teams must be able to provide evidence of their behaviours and activities as well as the physical environment. A checklist of the 27 quality criteria which need to be met can be found in Appendix A.

PSNC has published a [HLP Level 1 Evidence Portfolio Workbook](#) (available at [psnc.org.uk/hlp](http://psnc.org.uk/hlp)) which pharmacy teams can use to guide them through the HLP quality criteria and assist them with recording their evidence to show they have reached HLP Level 1.

A flow chart detailing the process to follow to achieve HLP Level 1 can be found in Appendix B.

## PharmOutcomes support

If an LPC or a commissioner has a full PharmOutcomes ([pharmoutcomes.org.uk](http://pharmoutcomes.org.uk)) licence, they can make available a HLP Level 1 framework for contractors to access on PharmOutcomes. This framework will allow contractors to track their progress with achieving the HLP quality criteria. If contractors would like to consider using the framework, they should contact their LPC to see if this is available in their area.

More information on the use of PharmOutcomes can be found on the HLP page of the PSNC website ([psnc.org.uk/hlp](http://psnc.org.uk/hlp)).

## Training providers

There are several organisations that provide HLP training for pharmacy staff and those that PSNC has been made aware of are listed at: [psnc.org.uk/hlp](http://psnc.org.uk/hlp) (listing on the PSNC website **does not** constitute endorsement of the course or provider by PSNC).

Some LPCs are also arranging local HLP training for their contractors and may be exploring alternative avenues to fund training, for example, funding from Health Education England; contact your LPC ([lpc-online.org.uk/](http://lpc-online.org.uk/)) to see if they are organising any training or other support.

## Action once a contractor has met the requirements for HLP Level 1

PHE has appointed the Royal Society for Public Health (RSPH) as the organisation that will register pharmacies that have successfully completed the self-assessment process for Level 1 HLPs and to provide a quality assurance process. This appointment currently applies until the end of March 2017; an announcement on whether there will be a change in the registration and quality assurance process after that time is awaited from PHE.

Once a contractor has met all the requirements for HLP Level 1, they should use the self-assessment tool available on the RSPH website ([tinyurl.com/RSPHAoC](http://tinyurl.com/RSPHAoC)) to make notes on how they meet each criterion.

**Part 1** of the assessment of compliance should then be completed (available at [tinyurl.com/RSPHAoC](http://tinyurl.com/RSPHAoC)) which relates to the key requirements that the pharmacy must have in place before HLP Level 1 status can be granted and the HLP logo displayed. Pharmacy professionals must be able to indicate YES to all statements by ticking the appropriate boxes to be compliant (this web-based form must be completed by a registered pharmacy professional (pharmacist or pharmacy technician) in the pharmacy, who must provide their General Pharmaceutical Council registration number).

**Part 2** of the assessment of compliance should then be completed, which is the section of the framework that asks the pharmacy professional to state the evidence they possess in the pharmacy, which they can use to demonstrate compliance with the requirements. Evidence must be provided against all requirements.

**Part 3** requires the pharmacy professional to declare compliance with the HLP Level 1 quality criteria and to submit this electronically.

Once submitted, the form will be sent electronically to the RSPH and after receipt and review, a copy will be sent to the pharmacy email address that the pharmacy professional provided in Part 3. A copy of this email should be retained in the pharmacy so it is available for inspection.

RSPH will endeavour to contact contractors by mail or email within 10 working days after they have received the submitted online assessment of compliance form to confirm registration and provide the HLP logo and certificate.

The HLP logo and if possible, the certificate, should then be displayed in the pharmacy.

## Confirming registration

Contractors should be aware that when members of staff complete the RSPH Level 2 Award in Understanding Health Improvement course, which is provided by several national and local organisations, it may take a few weeks after completion of the assessment before staff members receive their certificate from the RSPH.

There is also a time delay, after completing the assessment of compliance on the RSPH website (RSPH will endeavour to contact contractors by mail or email within 10 working days) before registration is confirmed.

Contractors are therefore advised to consider these time frames when planning how long it will take to achieve HLP Level 1 to ensure these 'processing times' do not prevent contractors from achieving the Quality Payment criterion at the April 2017 or November 2017 review point.

## Quality assurance visits

The QA process, overseen by the RSPH, is intended to assure the public, commissioners, and other healthcare professionals that the HLP quality criteria are met consistently across the country.

Contractors may be required to provide evidence to the RSPH to show that they have met the HLP Level 1 criteria. Several HLP Level 1 pharmacies will be chosen at random to be visited by an examiner, working on behalf of the RSPH, to have their compliance of assessment document and supporting evidence verified.

If your pharmacy is selected for a QA visit, you will be notified in advance by the RSPH.

Further information about the QA process is available on the RSPH website ([www.rsph.org.uk/HLPL1](http://www.rsph.org.uk/HLPL1)).

### PSNC's advice

PSNC supports the concept of HLPs and is keen to see the number of HLPs increase across the country. However, introducing HLP Level 1 as part of the QP Scheme means that this process is an additional demand on contractors without additional funding being made available (the QP Scheme is funded from the overall community pharmacy funding budget of £2.592 billion).

PSNC therefore recommends contractors consider carefully the likely costs they will incur in becoming a HLP and maintaining their HLP status and compare this with the likely footfall, potential improved reputation and status within their community, and QP criterion payment as part of a careful assessment of whether it is sensible for them to seek to become a HLP.

Contractors should also bear in mind that the QP Scheme has only been confirmed from 2017/18 and its future after this is unknown. Therefore, any financial investment that contractors make to become a HLP is undertaken with an element of risk as there may be no QP criterion payment for being a HLP after 2017/18.

### PSNC resources to support contractors

- PSNC hlp Level 1 Evidence Portfolio Workbook (available at: [psnc.org.uk/hlp](http://psnc.org.uk/hlp)) – Available as a Word document or a PDF;
- HLP page on PSNC website which has further information, documents and links to various websites ([psnc.org.uk/hlp](http://psnc.org.uk/hlp)).

### Other PSNC resources – available soon

- Health promotion briefings (an Alcohol Awareness briefing is currently being finalised and we will continue to produce more of these briefings on public health topics); and
- Health promotion ideas web page (which will contain information on public health campaigns and resources which are available to support these public health topics).

### Other resources to support contractors

- Frequently asked questions can be found on the RSPH website ([www.rsph.org.uk/HLPL1](http://www.rsph.org.uk/HLPL1));
- The assessment of compliance can be found on the RSPH website ([tinyurl.com/RSPHAoC](http://tinyurl.com/RSPHAoC));
- PHE publish a quarterly e-newsletter to provide updates on national HLP development and share innovative practice from across the country. To sign up to receive future quarterly issues, email: [hlpnewsletter@phe.gov.uk](mailto:hlpnewsletter@phe.gov.uk).

If having read this PSNC Briefing and the information and resources on the PSNC website you have further queries about HLP or you require more information please contact [Zainab Al-Kharsan, Service Development Pharmacist](mailto:Zainab.Al-Kharsan@psnc.org.uk).

## Appendix A: HLP Level 1 checklist

### Workforce development

Public health needs		Completed
1.	All pharmacy staff have an awareness of the local public health and pharmaceutical needs outlined in the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and Health Profiles for their area including where and how to access them.	<input type="checkbox"/>
<b>Health and Wellbeing Ethos</b>		
2.	All pharmacy staff understand the basic principles of health and wellbeing, and that every interaction is an opportunity for a health promoting intervention.	<input type="checkbox"/>
3.	At least one member of pharmacy staff (1 Full Time Equivalent) has completed the training and assessment of the Royal Society for Public Health (RSPH) Level 2 Award in Understanding Health Improvement and is therefore a Health Champion.	<input type="checkbox"/>
<b>Team leadership</b>		
4.	An individual from the pharmacy team has undergone leadership training internally or through an organisation that maps to/encompasses the following domains: <ul style="list-style-type: none"> <li><b>Inspiring a shared purpose</b> – Valuing a service ethos, curious about how to improve services and care, behaving in a way that reflects the principles and values of the organisation;</li> <li><b>Sharing the vision</b> – Communicating a compelling and credible vision of the future in a way that makes it feel achievable and exciting;</li> <li><b>Engaging the team</b> – Involving individuals and demonstrating that their contributions and ideas are valued and important for delivering outcomes and continuous improvements to the service;</li> <li><b>Developing capability</b> – Building capability to enable people to meet future challenges, using a range of experiences as a vehicle for individual and organisational learning, acting as a role model for personal development; and</li> <li><b>Influencing for results</b> – Deciding how to have a positive impact on other people, building relationships to recognise other people’s passions and concerns, using interpersonal and organisational understanding to persuade and build collaboration.</li> </ul>	<input type="checkbox"/>
5.	There is a clear leader within the team who is responsible for creating an ethos of proactive health and wellbeing within the pharmacy.	<input type="checkbox"/>
6.	There is effective leadership within the team that encourages the best use of team members’ skills and creates an environment that supports and mentors other team members.	<input type="checkbox"/>
7.	The leader, jointly with the pharmacy team, has developed an action plan on achieving Level 1 HLP.	<input type="checkbox"/>
<b>Communication</b>		
8.	All pharmacy staff can use NHS choices, the local public health information and pharmaceutical needs information, bearing in mind the findings of, e.g. PNAs and JSNAs such as location of services, when providing advice on health issues when appropriate.	<input type="checkbox"/>
9.	The pharmacy team is friendly, welcoming and sensitive to the need for privacy for different individuals seeking advice including respecting people’s values and beliefs.	<input type="checkbox"/>
10.	The pharmacy team routinely explain who they are, wear a name badge and inform people about the information and/or services on offer.	<input type="checkbox"/>



11.	All pharmacy staff receive training on how to approach people to discuss difficult or sensitive public health issues.	<input type="checkbox"/>
12.	All pharmacy staff are able to provide brief health and wellbeing advice (2-3 minutes) and have an awareness that the person may need additional support for behavioural change.	<input type="checkbox"/>

## Engagement

Community engagement		Completed
13.	The pharmacy team proactively engages with patients and the public in the pharmacy, to offer them advice, support and signposting to other providers of services in the community where applicable.	<input type="checkbox"/>
14.	The pharmacy team actively works in collaboration with other community organisations (e.g. schools, care homes, local events, charities) to deliver pharmacy outreach and or services.	<input type="checkbox"/>
15.	The pharmacy team is aware of health and wellbeing resources available in the community to direct the public/patients to (e.g. support groups, community exercise groups).	<input type="checkbox"/>
16.	The pharmacy encourages local charities and other providers to work with the pharmacy for delivery of key health messages/displays where appropriate.	<input type="checkbox"/>
17.	The pharmacy team is aware of appropriate health and social care providers in their community (e.g. specialist clinics, Healthwatch, Smoking Cessation, Drug and Alcohol Services, Health Trainer Service), which Local Authorities could provide information about.	<input type="checkbox"/>
Commissioner engagement		
18.	The HLP lead is aware of the local commissioners for public health services, which may include Local Authority, NHS England, Clinical Commissioning Group, etc.	<input type="checkbox"/>
19.	The pharmacy team is aware of the commissioner contacts if seeking to submit bids for public health services.	<input type="checkbox"/>

## Environment

Health promoting environment		
20.	It is clear to the public that free, confidential advice on their health and wellbeing can be accessed.	<input type="checkbox"/>
21.	The pharmacy has a dedicated Health Promotion Zone, that: <ul style="list-style-type: none"> <li>Is clearly marked and accessible;</li> <li>Has a professional appearance; and</li> <li>Is appropriately equipped with up-to-date professional health and wellbeing information that meets the local public health needs as suggested in the JSNA/PNA, Annual Report of the Director of Public Health or after discussion with commissioners/public health professionals.</li> </ul>	<input type="checkbox"/>
22.	The health and wellbeing information available appeals to a wide range of the public including men and women, young people, smokers, people with long term conditions, learning difficulties and older people. Where the community includes a significant ethnic minority group, then their needs must be accommodated.	<input type="checkbox"/>
23.	All materials should be generic and not promoting a specific brand over another, which can be seen as endorsement or promotional.	<input type="checkbox"/>
24.	The Health Promotion Zone resources should be updated at least every two months to ensure information provided is relevant, up-to-date and appropriate.	<input type="checkbox"/>
25.	Once accredited, the HLP logo is displayed in prominent places.	<input type="checkbox"/>

Data collection		
26.	Procedures are in place to ensure emails are checked regularly and that they are appropriately secure. Internet access enabled for accessing locally and nationally recognised websites.	<input type="checkbox"/>
Sustainability		
27.	The pharmacy contributes to a sustainable environment and this is reflected in the way they operate their business (e.g. using recyclable materials).	<input type="checkbox"/>



## Appendix B: Flow chart detailing the process for HLP Level 1

Read through PHE's quality criteria (available at: [tinyurl.com/HLPLevel1](https://tinyurl.com/HLPLevel1))



Work through PSNC's HLP Level 1 Evidence Portfolio Workbook with members of the pharmacy team to identify which quality criteria the pharmacy already meets and complete the sections to evidence this \*



Tick the quality criteria off on the checklist (on page 5-6) of the Workbook or on the PharmOutcomes framework (if available to you) when the pharmacy meets the criteria \*



Continue to work through the Workbook collecting evidence to meet the quality criteria and ticking them off on the checklist or the PharmOutcomes framework (if available to you) \*



When all 27 quality criteria have been met, use the RSPH self-assessment tool (available at: [tinyurl.com/RSPHAoC](https://tinyurl.com/RSPHAoC)) to make notes on how the pharmacy team meet each criterion



A pharmacy professional should complete Part 1 of the assessment of compliance at: [tinyurl.com/RSPHAoC](https://tinyurl.com/RSPHAoC) which relates to key requirements that the pharmacy must have in place before HLP Level 1 status can be granted



A pharmacy professional should complete Part 2 of the assessment of compliance which is the section of the framework that asks to state the evidence they possess in the pharmacy; which they can use to demonstrate compliance with the requirements



Complete Part 3 which requires the pharmacy professional to declare compliance with the HLP Level 1 quality criteria and to submit this electronically



Once submitted, a copy of the completed form will be sent to the pharmacy email address that the pharmacy professional provided in Part 3. A copy of this email should be retained in the pharmacy so it is available for inspection



RSPH will then review the submitted information and will endeavour to contact contractors by mail or email within 10 working days after they have received an online assessment of compliance form to confirm registration and provide the HLP logo and certificate

\*Use of the PSNC HLP Level 1 Evidence Portfolio Workbook or PharmOutcomes is optional, contractors can choose another option to support them to meet the 27 quality criteria.