

# The Community Pharmacy Contractual Framework 2019/20 to 2023/24

Simon Dukes
Chief Executive

#### **PSNC Digital CPCF Roadshow**



- Negotiations and political context
- Services
- Funding
- Access, technology and enablers
- Contractor support
- The future and your pharmacy





## Negotiations and the agreement: an overview

Simon Dukes
Chief Executive

#### Summary of the deal

PSNC PSNC

- A £13 billion investment in our sector
- Funding protected from further cuts
- Secures the future of community pharmacies in the NHS
- Sets out a clear vision for our services –
  in line with our asks in the CPFV
- Stability and certainty to enable reform



The Community Pharmacy Contractual Framework for 2019/20 to 2023/24: supporting delivery for the NHS Long Term Plan

Published 22 July 2019

#### Summary of the deal

PSNC PHARMACY

- Expansion of clinical services begins with the launch of the Community Pharmacist Consultation Service (CPCS)
- Taking on an entire cohort of patients with NHS 111 and GPs reliant on us
- This puts us at the heart of primary care
- Giving us leverage for the future



#### The PSNC Negotiating Team



- PSNC Negotiating Team is elected by the 31 members of the PSNC Committee and represents all parts of the sector
- At the heart of negotiations were the 11,600 community pharmacies
- At every step of the way, the Negotiating
  Team asked itself: "Is this in the best interests
  of community pharmacy contractors?"



#### **Negotiations: Political Context**



- This was not the deal that PSNC wanted
- We argued for further investment
- Highlighted rising costs, threats to viability and the impact of cost-saving tactics
- But Treasury was immoveable
- HM Government wants to commission a more efficient dispensing service from fewer pharmacies



#### **Negotiations: Political Context**



- Further cuts had been planned in 2018/19 and 2019/20
- NHSE&I Board paper released in June stated:

Material financial pressures that have been absorbed within the commissioner sector financial position for 2018/19 include ... the loss of the savings expected from DHSC's renegotiation of community pharmacy fees that DHSC did not secure."

- EP and MUR removal gave an easy mechanism
- Not a strong negotiating position



#### PSNC: Why did we accept the deal?



- To secure future funding for as long as possible from Treasury, who are seeking efficiencies
- Risk of retribution from walking away: funding cuts; services reduction; opening-up of market with remote dispensing to bypass pharmacies
- Time pressures and risks with an increasingly uncertain political environment
- We believe it was the best deal available





#### Changes to the CPCF service offering

Alastair Buxton
Director of NHS Services

# NHS Community Pharmacist Consultation Service



...relieving pressure on the wider NHS by connecting patients with community pharmacy, which should be their first port of call and can deliver a swift, convenient and effective service to meet their needs...

- National rollout from 29th October 2019
- Referrals to pharmacies from NHS 111
- Replaces NUMSAS and local DMIRS pilots



# NHS Community Pharmacist Consultation Service



- Follow up calls to no-show patients reduced to one (from three)
- Transitional payment of:
  - £900 if signed up by 1st December 2019; or
  - £600 by 15th January 2020
- You can now register via MYS
- Fee of £14 per completed consultation
- To pilot: expansion with referrals from GPs, NHS 111 online, Urgent Treatment Centres and possibly A&E



#### **Clinical Services: Prevention**



- Level 1 Healthy Living Pharmacy an essential requirement by 1st April 2020
- Hepatitis C testing to be introduced in 2019/20
  - open to people injecting drugs
  - probably commissioned as an Advanced service
  - time limited service
- Data capture for national public health campaigns
  - exploration of use of digital marketing assets



#### **Clinical Services: Prevention**



PhIF and PCN Testbed programme to test services:

- Detection of undiagnosed CVD
- POCT to support efforts to tackle AMR
- Stop smoking referrals from secondary care
- Vaccination and immunisation
- Routine monitoring of patients on repeat medication



#### **Clinical Services: Medicines Optimisation**



- Medicines reconciliation service to ensure changes in medication made in secondary care are implemented when patient discharged into the community
- Consider NMS expansion to include further conditions
- New service to improve access to palliative care medicines to be piloted



#### Clinical Services: Medicines Use Reviews



- MURs to be phased out as Structured Medication Reviews carried out by clinical pharmacists working within PCNs are introduced
- Contractors will be able to provide up to
  - 250 MURs during 2019/20 (max. 200 in H1)
  - 100 in 2020/21
- From H2 2019/20, 70% of MURs must be for patients taking high-risk meds or post-discharge



#### **Terms of Service**



- New Terms of Service requirements from 1st April 2020:
  - NHSmail
  - Summary Care Records access
  - NHS 111 Directory of Services
  - NHS.UK pharmacy profile updating
  - Pharmacy professionals are Level 2Safeguarding trained
- All pharmacies must be able to use EPS



#### **Quality: the Pharmacy Quality Scheme**



- QPS is re-named PQS
- Annual value of £75m
- Some quality criteria grouped into bundles for payment
- Can claim advance Aspiration payment of up to 70% of QPS earnings from 2018/19
  - Claim via MYS from 30th September to 1st November
  - Payment on 29th November



#### **PQS Gateway Criteria**



- 1. Offering Flu Vaccination Service and/or NMS
- 2. Active shared premises NHSmail mailbox, with two linked accounts
- 3. Update NHS website profile within a defined time period
- 4. Level 2 safeguarding status for 80% of pharmacy professionals





- Risk Management and Safety Composite Bundle (30 points, min. £1920)
  - CPPE Risk Management training and assessment
  - update the previous risk review and record risk minimisation actions taken
  - CPPE sepsis online training and assessment with risk mitigation and risk review entry
  - CPPE online training and assessment on LASA errors
  - New safety report including a focus on LASA errors





- Medicines Safety Audits complementing the GP QOF QI (25 points, min. £1600)
  - Lithium
  - Valproate
  - Repeat of the NSAIDs and gastro-protection audit

Asthma (5 points, min. £320)





- Primary Care Networks (12.5 points, min. £800; 10 points for pharmacy PCN leads)
  - demonstrate that pharmacies in a PCN area have agreed a collaborative approach to engaging with their PCN

 Digital enablers – NHS 111 DoS profile and SCR access (2.5 points, min. £160)



- Prevention Composite Bundle (25 points, min. £1600)
  - HLP level 1 (self-assessment)
  - all patient-facing staff are Dementia Friends
  - dementia friendly environment standards checklist
  - discussions with all people with diabetes re.
     annual foot and eye checks
  - reduction in volume of Sugar Sweetened
     Beverages sold by the pharmacy (10% or less)



## **Quality - PQS declaration and guidance**





- Declaration period:
   9am 3rd Feb 11.59pm 28th Feb 2020
- Payment on 1st April 2020
- PSNC Briefing 041/19 contains the most up to date information
- NHSE&I guidance now available
- PSNC webinar on 9th October
- Visit psnc.org.uk/PQS for more information



Services and Commissioning

September 2019

#### PSNC Briefing 041/19: The Pharmacy Quality Scheme 2019/20

In July 2019, a new Pharmacy Quality Scheme (PQS) was announced for the 2019/20 financial year; this scheme was formerly known as the Quality Payments Scheme (QPS). This PSNC Briefing is an updated version of PSNC Briefing 029/19 following further discussions between PSNC and NHS England and NHS Improvement (NHSEB), which provides updated and new information on the Scheme. The requirements of the PQS 2019/20 will also be published in the October 2019 Drug Tariff.

#### The review period

There will be no review point as there has been in previous schemes. Contractors will be required to make a declaration between 9am on 3rd February 2020 and 11.59pm on 28th February 2020 on the NHS Business Services Authority (NHSSBA) Manage Your Service (IMYS) application. Contractors will be required to declare that on the day of making their declaration, that they meet the gateway criteria and that they meet the domains they are claiming payment for (sexpect if they plan to meet the Sugar Sweetened Beverage (SSB) quality criterion by 31st March 2020).

#### NHS England and NHS Improvement guidance

NHSS&I will be publishing guidance to provide more information on the PQS 2019/20; this will be available on the NHS England website. PSNC will alert contractors once the guidance is published through our normal communication channels.

#### The gateway criteria

There are **four** gateway criteria which contractors must meet on the day of making their declaration for a PQS 2019/20 payment. As per previous declarations, passing the gateway criteria will not, in and of itself, earn a payment for the pharmacy.

1) Advanced service

On the day of the declaration, contractors must be offering at the pharmacy the New Medicine Service (NMS and/or the NHS community pharmacy seasonal influenza vaccination service.

If a contractor is declaring that they provide the Flu Vaccination Service and/or NMS at the pharmacy to meet this gateway criterion, they should ensure that either or both of these services are listed on their NHS.UK profile.

2) NHSmail

On the day of the declaration, pharmacy staff at the pharmacy must be able to send and receive NHSmail from their shared premises specific NHSmail account, which must have at least two live linked accounts.

Each pharmacy's designated mailbox owner can add and remove personal NHSmail addresses to or from a pharmacy's shared premises NHSmail account as required. If your pharmacy does not have a shared NHSmail account or two live linked accounts, SPMC's NHSmail page ontains further guidance.

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#### Services: in summary



- A new national service the CPCS from October 2019
- Positions pharmacies as healthy living centres: prevention and treating minor conditions
- Key role at the heart of the NHS
- Opportunity to prove our capabilities through the CPCS
- And to make case for further investment in that service as it expands





## **Funding**

Mike Dent
Director of Pharmacy Funding

#### Strategic view



- £13bn funding secured (£2.592bn a year plus PhIF)
  - Original Government plans were for cuts in 2018/19 and 2019/20
  - 'Up to' removed
  - Annual removes to balance funding, costs and activity
  - PhIF to fund pilot services which may, if successful, be commissioned nationally
- Work on costs and implications was pivotal
- Discussions will be held on possible new funding models



#### Strategic view



- Govt following agenda from letter of December 2015
  - Clinical role with closer integration
  - Efficiencies through greater use of technology
  - Clustering issue needs resolving
  - Work on costs and implications was pivotal
- Savings in cost of dispensing to free up funding and resources for value-added service delivery
  - Establishment Payments and MURs to be phased out by 2020/21
- Opportunity to tap into local funding (PCNs)



# Outline CPCF funding profile to 2023/24





| £ millions  | 2018/19<br>(Baseline) | 2019/20 | 2020/21 | 2021/22 | 2022/23 | 2023/24 |
|---|-----------------------|---------|---------|---------|---------|---------|
| Establishment Payments  | 164                   | 123     | 0       | 0       | 0       | 0       |
| Medicines Use Reviews (MUR)   | 94                    | 59      | 24      | 0       | 0       | 0       |
| Single Activity Fees (SAF)  | 1,315                 | 1,315   | 1,315   | 1,315   | 1,315   | 1,315   |
| Target Retained Medicine Margin   | 800                   | 800     | 800     | 800     | 800     | 800     |
| Other activity related payments   | 97                    | 97      | 97      | 97      | 97      | 97      |
| Pharmacy Quality Scheme (PQS)   | 75                    | 75      | 75      | 75      | 75      | 75      |
| Pharmacy Access Scheme (PhAS)   | 24                    | 24      | 24      | 24      | 24      | 24      |
| New Medicine Service (NMS)  | 23                    | 23      | 23      | 23      | 23      | 23      |
| NHS CPCS  | -                     | 4       | 9       | 13      | 16      | 19      |
| Hepatitis C screening   | -                     | 2       | 2       | 0       | 0       | 0       |
| Unallocated funding for future clinical services to include transition payments | -                     | 69      | 223     | 245     | 242     | 239     |
| Total Funding Profile   | 2,592                 | 2,592   | 2,592   | 2,592   | 2,592   | 2,592   |

#### **October Drug Tariff**



- Many aspects remain unchanged e.g. SAF, NMS, PhAS etc.
- PQS Aspiration payment can be claimed to ease cashflow (for contractors who participated in QPS 2018/19)
- PQS Payment end March / early April
- CPCS fee will be set at £14.00
- Serious Shortage Protocol (SSP) fee will be set at £5.35



#### October Drug Tariff – Transitional Payments



- Unallocated funding distributed using Transitional Payments
- £10m set aside as a contingency for SSP payments and c. £9m for CPCS participation payments
- Balance (c. £50m) via monthly Transitional Payments in H2 2019/20 and 2020/21



# **Transitional Payments levels**



| Number of items per month from 1st October 2019 | Monthly Transitional Payment from 1st October 2019 |  |  |  |
|---|--|--|--|--|
| 0 – 2500  | £100.00  |  |  |  |
| 2501 – 5000                                     | £700.00  |  |  |  |
| 5001 – 19167                                    | £780.00  |  |  |  |
| 19168+  | £833.33  |  |  |  |

#### **Reimbursement Changes**



- PSNC and Government are committed to improving the current reimbursement arrangements
- This will cover Category M, Category A, discount deduction etc.
- Public consultation closed on 17th September
- Detailed discussions will start in Autumn





#### Access, technology and enablers

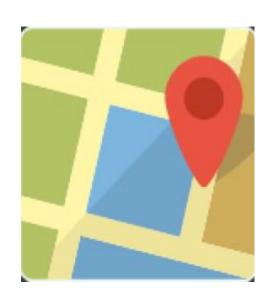
Gordon Hockey

Director of Operations and Support

### Pharmacy Access Scheme (PhAS)



- 2019/20 will continue with current criteria and funding (£24m per annum)
- From April 2020 a revised scheme will be introduced – further details later this year
- From April 2021 an updated and improved scheme will be introduced
- Aims will be:
  - protect access, cost efficient, reasonably simple, not unduly administrative, responsive



#### Consolidation and administrative burden



- Government still believes there are 'more pharmacies in some places than may be necessary'
- Want to strengthen the protections offered to pharmacies wishing to consolidate
- Also will look to remove unnecessary administrative requirements



## **Enabling change**



- Technology is "primarily an opportunity, not a threat; it is also an inevitability";
   "dispensing to become more efficient to free pharmacists up to provide new services"
- Government will pursue legislative change to allow all pharmacies to benefit from hub and spoke dispensing
- Agree with PSNC models to benefit the whole sector fairly



## **Enabling change**



- Exploring greater use of original pack dispensing to support automation
- Proposing legislative changes that allow better use of skill mix and enable clinical integration of pharmacists
- Exploring the impact of changes to funding and fee structures, including for different types of prescription



## **Enabling change**



- 2020/21 revised terms of service to reflect the different way in which people use and access online services
- Government will continue to protect patients' freedom to choose which community pharmacy dispenses their prescriptions





#### Contractor support

Zoe Long

**Director of Communications and Public Affairs** 

#### Ongoing work on the CPCF



- Discussions to settle:
  - Hepatitis C testing service specification
- Implementation group providing CPCS service support and guidance
- PSNC response to public consultation on reimbursement reforms



#### Initial briefings and guidance

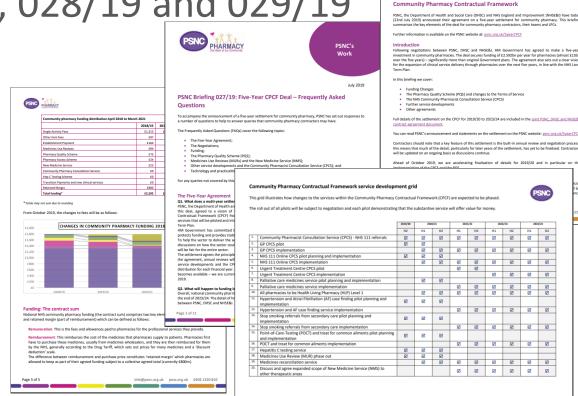




PSNC Briefing 026/19: A Summary of the Five-Year Deal on the

PSNC's

- Joint deal document: PSNC, DHSC and NHSE&I
- PSNC Briefings 026/19, 027/19, 028/19 and 029/19
  - Summary of the deal
  - Frequently Asked Questions
  - Information on funding
  - The Pharmacy Quality Scheme
- Service development grid
   See psnc.org.uk/5yearCPCF



## **Further Support for Contractors**



- CPCS draft service specification, template SOP, toolkit and webinar
- New website page on PQS: psnc.org.uk/PQS
- Resources for asthma and diabetes quality criteria
- Guide to HLP accreditation
- New CPCF News category on website
- Inbox for queries: cpcf@psnc.org.uk







- New email: the CPCF Checklist
- Highlights actions that contractors need to take now
- Topics such as signing up for the MYS service and achieving HLP accreditation
- The Checklist will walk you through the changes and new services, signposting to detailed resources and training webinars
- Sign up now psnc.org.uk/email





#### **CPCF Checklist**

Friday 2nd August 2019

PSNC is working to provide as much information and as many resources as possible to help community pharmacy teams to understand the details of the new Community Pharmacy Contractual Framework (CPCF) agreement as they are finalised in the ongoing negotiations.

This email is one of a series of recommended actions for community pharmacy contractors to help you to get ready for the introduction of all elements of the five-year CPCF. There is a lot to do and details will be coming out in stages, so this email series will help guide you through the process and highlight all of the resources and support available to you.

#### 1. Watch our webinar and register for a roadshow event

Two great ways to familiarise yourself with the details of the five-year CPCF agreement are to watch our contractor webinar and to register for one of our roadshow events.

#### Contractor webinar

You can now view an on-demand recording of our webinar to learn about the terms of the new CPCF agreement for 2019/20 to 2023/24 and what it will mean for your pharmacy. The PSNC policy team also answered questions from viewers during the webinar.

#### **Upcoming Support for Contractors**



- PQS webinar to follow soon
- Information on the Hep C testing service
- Working closely with LPCs and the other pharmacy organisations
- Look out for CPD opportunities from Health Education England/PhIF



#### **Contacting PSNC**



- All guidance will be posted on psnc.org.uk
- Sign up for emails at: psnc.org.uk/email
- Follow @PSNCNews on twitter
- For queries on the CPCF contact:
  - Queries: cpcf@psnc.org.ukor 0203 122 0810
  - PSNC Regional Representatives
  - PSNC Chief Executive:chiefexec@psnc.org.uk





# The Future and Your Pharmacy

PSNC Chief Executive
Simon Dukes

# Challenges and change



- Difficult financial situation and huge challenges ahead: we will continue to fight your corner
- Through annual reviews (which we secured) we will stress costs and manageability
- As currently configured, the deal means
   major changes for all pharmacy businesses



# What does this mean for your businesses?



- The deal guarantees a future for those up for change
- Specific challenges will be around:
  - dispensing efficiencies
  - freeing up pharmacists' time
  - wider use of clinical workforce
  - branch viability and consolidations
  - coming together locally in PCNs
  - working closer with GPs



#### **Next steps for PSNC**



- Continuing to emphasise the case for contractors' costs
- Working to support you with immediate elements – PQS and CPCS
- Providing direct contractor and LPC support
- Negotiating for 2020/21: PhAS changes, funding and CPCS extension
- Keeping you informed of progress



#### **Conclusions**



- First step: read the deal document
- The deal gives us a future, at the heart of the NHS
- We have the chance to add value as a clinical services provider
- And to integrate better within primary care via PCNs
- Giving us leverage for the future



#### Q&A





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#### **Reflections:**



- The changes over the next five years will not be easy
- All pharmacies under pressure
- But we have a way forward
- There are signs that the Government is moving in our direction



#### **Conclusions**



- We now have a clear vision for our future – set out in deal document
- It is critical that we deliver
- This means major changes for all pharmacy businesses
- A chance to put ourselves at the heart of primary care
- Offering clinical support to the NHS
- Giving us leverage for the future



#### **Contact Information**





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