

# HLP Evidence Portfolio Workbook



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If having read this PSNC HLP Evidence Portfolio Workbook and the information and resources on the PSNC website you have further queries about HLP or you require more information please contact <a href="mailto:Services.Team@psnc.org.uk">Services.Team@psnc.org.uk</a>.



### Introduction

Community pharmacy contractors must meet all the Healthy Living Pharmacy (HLP) requirements in the Terms of Service and associated regulations guidance.

The requirements outline what is required for achieving HLP status as part of the assessment of compliance process and set out the behaviours, activities and physical environment contractors must be able to evidence.

### **Evidence**

Contractors must be able to provide evidence for each of the requirements and may be required to make this available to NHS England and NHS Improvement (NHSE&I).

This Workbook aims to support contractors to work through each of the requirements and to collect evidence to show the pharmacy team has met the requirements to enable the pharmacy to become an HLP.

This Workbook contains suggested evidence for compliance, but where your pharmacy team has other forms of evidence that demonstrate the requirements, these can also be used, as appropriate. Contractors do not need to complete all the suggested evidence within the workbook; however, contractors should include at least one example of evidence for each of the requirements and contractors must be confident that the pharmacy meets the requirements and has evidence to support this. Contractors can use the same piece of evidence, if appropriate, to support more than one requirement.

If certain evidence is a requirement, it is stated as **REQUIRED** in the Workbook.

This Workbook is for an individual pharmacy. It cannot be used to complete a declaration of compliance for multiple pharmacies. Each pharmacy team must complete its own individual assessment.



# HLP flow chart – process to follow to become an HLP or maintain status as an HLP

Read through the HLP section in NHS England and NHS Improvement's Regulations Guidance



Work through PSNC's Healthy Living Pharmacy (HLP) Evidence Portfolio Workbook\* with members of the pharmacy team to identify which requirements the pharmacy already meets and complete the sections to evidence this.



Tick off the requirements on the HLP checklist\*\* (on pages 28-30 of the Workbook) when the pharmacy meets the criteria.



Continue to work through the Workbook\* collecting evidence to meet the requirements and ticking them off on the checklist to support tracking your progress.



When all requirements have been met, an assessment of compliance will need to be completed (available at: <a href="mailto:psnc.org.uk/hlp">psnc.org.uk/hlp</a>).



A pharmacy professional should complete Part 1 of the assessment of compliance if they have not used PSNC's Healthy Living Pharmacy (HLP) Evidence Portfolio Workbook\* to collate their evidence. This section asks you to state the evidence available in the pharmacy, which can be used to demonstrate



A pharmacy professional should complete Part 2 of the assessment of compliance which requires them to declare compliance with the HLP requirements.



The Assessment of compliance should be retained in the pharmacy. This does not need to be routinely submitted to NHS England and NHS Improvement. If the pharmacy was previously accredited as an HLP, they should also retain the signed and dated documentation that demonstrates that the pharmacy was previously accredited as an HLP.

<sup>\*</sup>Use of the PSNC HLP Evidence Portfolio Workbook is optional, contractors can choose another option to support them to meet the requirements of the Terms of Service.

<sup>\*\*</sup> The HLP checklist is also available as a standalone document in the resources section (available at: psnc.org.uk/hlp).



### **Workforce Development**

The aim of this section is to set out guidance to support the development of pharmacy staff, so they are well equipped to embrace the healthy living ethos and proactively promote health and wellbeing messages.

Public Health Needs	
Requirement	Suggested Evidence This lists only suggested evidence unless clearly stated as required
<ul> <li>All patient-facing pharmacy staff have an awareness of the public health and pharmaceutical needs of the population they serve.</li> <li>Contractors should consider the ways in which they engage with their local community, so they can seek to meet the needs of the local area and help address health inequalities, including targeting deprived</li> </ul>	<ul> <li>List of the website links to the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and/or Health Profiles for their area or correspondence about them or evidence of attendance at seminars or meetings on them.</li> <li>Copies of the relevant extracts of the JSNA, PNA and/or Health Profiles for their</li> </ul>
communities. This may include the use of virtual and digital communication, as well as provision of face-to-face public health services.	area as digital files or printed files (as these may be very bulky documents, printing the front page or web page is acceptable).
<ul> <li>DSPs will provide services to patients in a wider geographical area than that of most other pharmacies, so they will need to reflect on the broad health needs of their patients wherever they may live, rather than those</li> </ul>	List of pharmacy events in the local area or local/national campaigns showing direct links to the local public health and pharmaceutical needs.
living in a specific local area, for example by seeking information on the health profile of their patients when undertaking patient experience surveys or similar.	<ul> <li>Questions linked to health and wellbeing services have been included in the contractor's activities to assess patients' and the public's experience of their services.</li> </ul>

Table 1 can be used to list the website address of the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and/or <u>Health</u> Profiles for the area in which the pharmacy is located.

Document	Website address to these documents for your area	Printed front page or web page of document*
JSNA	www.	
(PNA)	www.	
Health Profiles	www.	



\*As these may be very bulky documents, printing the front page or the web page is acceptable as evidence. It is advisable to keep these with this evidence portfolio workbook.

Table 2 can be used to list details of correspondence about the JSNA or PNA or to record details of seminars or meetings on them.

Date of event	Details of correspondence/event attended

Table 3 can be used to list pharmacy events in the local area or local/national campaigns showing direct links to the local public health and pharmaceutical needs.

Date of event	Details of event



Details of additional evidence collected:

Table 4 can be used to record questions linked to health and wellbeing services that have been added to the contractor's annual assessment of patient experience (e.g. Community Pharmacy Patient Questionnaire) so that the pharmacy responds to local needs.

Number	Questions added
able 5 can be used to record details of any other evidence collected.	



Requirement	Suggested Evidence This lists only suggested evidence unless clearly stated as required
<ul> <li>All patient-facing pharmacy staff understand the basic principles of health and wellbeing, and that every interaction is an opportunity for a health promoting intervention.</li> </ul>	Certificate(s) for the RSPH Level 2 Award in 'Understanding Health Improvement' by any pharmacy team members either displayed in the pharmacy or in the evidence portfolio. (REQUIRED)
<ul> <li>At least one member of the patient-facing pharmacy staff (one 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.</li> <li>Where a pharmacy has less than one full time equivalent patient-facing staff members, excluding the responsible pharmacist, at least one staff</li> </ul>	<ul> <li>Certificate(s) of any Health and Wellbeing Training completed by any pharmacy team members either displayed in the pharmacy or in the evidence portfolio.</li> <li>Minutes of pharmacy team meetings that show shared learning from the Health Champion(s) to the rest of the pharmacy team.</li> <li>Making Every Contact Count training records for all staff that provide health</li> </ul>
member should complete the training and assessment.  Health champion training and assessment may be undertaken through face to face or virtual (online) methods.  Where a Health Champion leaves the employment of the contractor and this means no trained Health Champion is in post, the contractor must put in place an action plan to recruit or train a staff member as a Health Champion within six months.	advice to patients and the public.

There are several national and local organisations that provide the RSPH Level 2 Award. Details of training providers can be found at: <a href="mailto:psnc.org.uk/hlp">psnc.org.uk/hlp</a> (listing on the PSNC) website **does not** constitute endorsement of the course or provider by PSNC).



Table 6 can be used to record details of any pharmacy team members who have completed the RSPH Level 2 Award in Understanding Health Improvement. It is a requirement to retain copies of certificates for the RSPH Level 2 Award in Understanding Health Improvement. It is advisable to keep these with the evidence portfolio workbook.

Member of staff's name	Date course completed

### Table 7 can be used to record details of any pharmacy team member who has completed any other Health and Wellbeing Training.

It would be advisable to also retain copies of certificates of attendance when available or supporting letters from the commissioner and to keep these with this evidence portfolio workbook.

Member of staff's name	Details of other Health and Wellbeing Training completed	Date course completed



Table 8 can be used to record whether minutes of pharmacy team meetings that show shared learning from the Health Champion(s) to the pharmacy team are available. If so, these should be kept with this evidence portfolio workbook.

Date of pharmacy team meeting	Minutes available that show shared learning from the Health Champion
	to the pharmacy team
Table 9 can be used to record details of any other evidence collected.	
Details of additional evidence collected:	



Team Leadership	
Requirement	Suggested Evidence This lists only suggested evidence unless clearly stated as required
<ul> <li>An appointed health and wellbeing leader from the pharmacy team has undergone leadership training internally or through an organisation that maps to/encompasses the domains defined in the guidance.</li> </ul>	<ul> <li>Certificate(s) or registration for any leadership training or equivalent completed by a pharmacist or the pharmacy manager either displayed in the pharmacy or in the evidence portfolio. (REQUIRED)</li> </ul>
Leadership training and assessment may be undertaken through face to face or virtual (online) methods.	<ul> <li>An HLP action plan developed by the pharmacy team leader and/or pharmacy team in the evidence portfolio.</li> </ul>
Where a health and wellbeing leader leaves the employment of the contractor and this means no trained health and wellbeing leader is in post, the contractor must put in place an action plan to recruit or train a staff member as a health and wellbeing leader within six months.	Written feedback of pharmacy team members on their team leader in the evidence portfolio.

Table 10 can be used to record details of pharmacy staff that have completed leadership training. At least one member of pharmacy staff is REQUIRED to complete this training.

It is a requirement to retain copies of certificates for the leadership training. It is advisable to keep these with this Workbook.

Member of staff's name	Details of leadership training completed	Date course completed



# Table 11 can be used as a template action plan. This can be accessed as a standalone document at: psnc.org.uk/hlp

Key area	Objective and Action Points	To be done by (whom)	By when
Engage everyone in the pharmacy team so that they understand what Healthy Living Pharmacy is about			
Agree what difference you all want to make to your local community: identify two or three keys health areas relevant for the community that you will get involved with			
Identify who in the team will develop as a Health Champion and enrol on the relevant training			
Ensure that the pharmacist or manager has undertaken the appropriate leadership development			
Review your pharmacy's performance against the HLP requirements identifying where you meet them and			



where you need to do more work; put together speciaction plan	fic			
Table 12 can be used to record whether written	feedback of pharmacy team members	on their team leader is	available. If so, these	should be kept with
this Workbook.				
Pharmacy team members	Feedback available			
Table 13 can be used to record details of any other	er evidence collected.			
Details of additional evidence collected:				



Communication		
Requirement	Suggested Evidence This lists only suggested evidence unless clearly stated as required	
<ul> <li>All patient-facing pharmacy staff can use the NHS website and other appropriate public health information sources, e.g. PHE Resource Centre, when providing advice on health issues and where appropriate;</li> <li>The patient-facing pharmacy staff are friendly, welcoming and sensitive to the need for privacy for different individuals seeking advice including respecting people's values and beliefs;</li> <li>The patient-facing pharmacy staff routinely explain who they are, wear a name badge and inform people about the information and/or services on offer;</li> <li>All patient-facing pharmacy staff receive training on how to approach people to discuss difficult or sensitive public health issues;</li> <li>All patient-facing 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; and</li> <li>When communicating with patients and the public and offering advice on difficult or sensitive issues, contractors and staff need to consider how they offer and maintain patient privacy. The approach taken may differ between contractors depending on the physical structure of the pharmacy, whether they provide services via remote means (e.g. DSPs must have the ability to undertake phone and video consultations. For brick and mortar pharmacies, while there is no requirement to provide video consultations, offering this type of consultation is encouraged), the local population they serve, and other factors.</li> </ul>	<ul> <li>Making Every Contact Count training records for all staff that provide health advice to patients and the public.</li> <li>Very Brief Advice training records for staff to support Stop smoking services.</li> <li>Health Education England E-learning modules e.g. All Our Health</li> <li>Briefing notes for health promotion events that include top tips to engage people. Notes should include a briefing record to capture the names, signatures and dates of participating staff.</li> <li>Dementia Friends Training / briefing</li> </ul>	



# Table 14 can be used to record details of members of staff who can use the NHS website (www.nhs.uk).

Member of staff's name	Can use the NHS website



Table 15 can be used to record details of pharmacy staff that have completed customer service training, unconscious bias training, equality and diversity training, have become a Dementia Friend, etc. or instead it may be appropriate to signpost to the training log for the pharmacy.

It would be advisable to also retain copies of certificates when pharmacy team members have completed training and keep these with this Workbook.

Member of staff's name	Details of training completed	Date course completed

Table 16 can be used to record details of any other evidence collected.

Details of additional evidence collected:



### **Engagement**

This enabler outlines the requirements for contractors to support patients where they require advice, treatment and/or support.

Community Engagement		
Requirement	Suggested Evidence This lists only suggested evidence unless clearly stated as required	
<ul> <li>Proactively engage with patients and the public using the pharmacy, to offer them advice, support and signposting to other providers of services in the community;</li> </ul>	Standard Operating Procedure for health promoting interventions & staff training log.	
<ul> <li>Encourage charities and other providers to work with the pharmacy for delivery of key health messages;</li> </ul>	<ul> <li>Photographs annotated with dates of the pharmacy team engaging with the public (with appropriate consent).</li> </ul>	
• Direct patients and the public to health and wellbeing providers and resources appropriate to their needs, where this is necessary (e.g. specialist clinics, Smoking Cessation, Drug and Alcohol Services, Health	<ul> <li>Case studies and photographs (with appropriate consent) of outreach work (e.g. roadshows attended).</li> </ul>	
Trainer Service, weight management services, mental health services, community exercise groups).	<ul> <li>List of community health and wellbeing resources readily available in the pharmacy.</li> </ul>	
<ul> <li>Contractors must also undertake a community engagement exercise at least once per financial year on the promotion of healthy living, which</li> </ul>	A local health and wellbeing notice board prominently displayed in the pharmacy.	
involves:  o actively working in collaboration with other organisations to deliver	A signposting folder including a signposting log.	
<ul> <li>pharmacy outreach and any locally commissioned services; and</li> <li>taking prevention and health promotion services beyond the pharmacy premises. Pharmacy outreach may be face to face and take services to people where they live or spend time or may be virtual</li> </ul>	<ul> <li>A list of appropriate health and social care providers (e.g. specialist clinics, Smoking Cessation, Drug and Alcohol Services, weight management services, mental health services and sexual health clinics).</li> </ul>	
events.	<ul> <li>DSPs could collate a list of both local and national health and social care providers to direct patients to, where they have enquiries or need to provide healthy living</li> </ul>	
<ul> <li>When contractors and staff work in collaboration with other community organisations to undertake pharmacy outreach and any commissioned services, the contractor and the other organisation must undertake a risk assessment prior to the outreach activity to ensure that any activities are undertaken in a safe and culturally competent way.</li> </ul>	support including Smoking Cessation, Drug and Alcohol Services, weight management services, mental health services, sexual health clinics and Health Trainer Services.	



Photographs of pharmacy teams engaging with the public can be found in (it would be advisable to keep these with this evidence portfolio workbook):		
Details of case studies and photographs of local outreach work (e.g. roadshows attended) can be found in (it would be advisable to keep these with this evidence portfolio workbook):		
ily available in tl	the pharmacy.	
YES	□ NO	
YES	□ NO	
	roadshows atte	roadshows attended) can be found in (it would be advisable to keep these with this



The local authority website is (please add website address):

	Name of public health campaign
1.	
2.	
3.	
1.	
5.	
5.	
able	19 can be used to record details of any other evidence collected.
	19 can be used to record details of any other evidence collected.  Is of evidence collected:

If yes, this signposting folder can be found: .....



Commissioner name	Organisation name	Email address	Phone number

It is advisable to retain any correspondence for public health services and to keep these with this evidence portfolio workbook.

### **Premises Requirements**

Contractors should aim to create a health promoting environment that is reflected by the premises, as well as in the actions and attitudes of the pharmacy staff.



### Health promoting environment **Suggested Evidence** Requirement This lists only suggested evidence unless clearly stated as required It is clear to the public that free, confidential advice on their health and • Photographs of pharmacy and consultation area. wellbeing can be accessed; List of leaflets or promotional material used in the Health Promotion Zone. For pharmacies which are visited by patients and the public, the pharmacy Including consideration of barriers to access, e.g. material in different languages has a dedicated Health Promotion Zone, of sufficient prominence, that to reflect the local population, easy read material etc. contains up-to-date professional health and wellbeing information that meets the needs of the population they serve; and Other formats for the health and wellbeing information may include: a **DSPs** must have a website for use by patients and the public accessing touchscreen, plasma screen, books, DVDs, leaflets, promotional displays, their services, which has an interactive page on their website clearly demonstration models, etc. promoted to any user of the website when they first access it, which Data from the contractor's assessment of patient experience. provides public access to a reasonable range of up to date materials that promote healthy lifestyles, by addressing a reasonable range of health Record of Health Promotion Zone being checked by a member of the pharmacy issues. DSPs must be compliant with this requirement from 1st April staff at least once monthly and updated and restocked appropriately. 2021. • A local health and wellbeing notice board prominently displayed. • DSPs - screenshots of online content on their website's health and wellbeing promotion section, and records of the content being checked on a monthly basis and the dates when updates are made. If health and wellbeing advice is also included in any apps the pharmacy makes available to patients, screenshots of this could also be retained as evidence. Additionally, where healthy living advice is provided in emails sent to patients, copies of these could also be retained as evidence of meeting the requirements.



Photographs of the pharmacy and consultation area can be found in (it would be advisable to keep these with this evidence portfolio workbook):		
Table 21 can be used to list the leaflets or promotional materials used in the Health Promotion Zone.		
Name of leaflet or promotional materials used in the Health Promotional Zone		



Our annual assessment of patient experience (e.g. CPPQ) results can be found:		
	ecord when the Health Promotion Zone has been checked by a member of the pharmacy staff and restocked d be done at least once monthly).	
<b>Date Health Promotion</b>	Member of staff's name who completed the check and restocked the Health Promotion Zone	
Zone was checked and		
restocked appropriately		
Table 23 can be used to r	ecord details of any other evidence collected.	
Details of evidence collect	ted:	



### **Consultation room**

For pharmacies other than Distance Selling Pharmacies (DSPs):

Does the pharmacy have a consultation room that meets the minimum requirements set out in the Terms of Service?

The requirements for the consultation room are that it is:

- clearly designated as a room for confidential conversations, for example a sign is attached to the door to the room saying Consultation room;
- distinct from the general public areas of the pharmacy premises; and
- a room where both the person receiving the service and the person providing it can be seated together and communicate confidentially.

YES NO

If no, contractors who have not previously installed a consultation room will need to develop and implement a plan to do so. If the contractor is unable to do this due to the size of the premises, refer to the guidance listed under **Small pharmacies**.

If the pharmacy is included in a pharmaceutical list on 1st January 2021, but no Advanced services were provided at or from the pharmacy during 2020, the contractor will have until 1st April 2023 to install a consultation room within their pharmacy.

Contractors who open new pharmacy premises on or after 1st January 2021 will need to have a consultation room from the first day they open for business.

### **Small pharmacies**



Where a contractor believes that their pharmacy is too small for a consultation room, they will need to complete and submit a request to their NHSE&I regional team (NHSE&I will publish a form on which to make this request). NHSE&I will consider the information provided by the contractor and where it is of the opinion that the pharmacy is too small for a consultation room, it will confirm this with the contractor.

Has a request been submitted to NHSE&I?	YES	□ NO
Did NHSE&I agree the pharmacy was too small to include a consultation room?	YES	□ NO
Contractors are advised to keep a copy of any NHSE&I decision confirming that the conformation on the premises. Where NHSE&I agrees the pharmacy is too small to include a consultable place at the pharmacy which enable staff and patients to communicate confidentially by <b>teleph</b>	ition room, the	e contractor must then ensure that they put arrangements in
Arrangement made to allow staff and patients to communicate confidentially by telephone	e or another live	e audio link <u>and</u> a live video link? YES NO
Where NHSE&I are of the opinion that the pharmacy is <b>not</b> too small for a consultation room, th room.	e contractor wil	l be advised of this and they will need to install a consultation
Distance Selling Pharmacies (DSPs)  DSPs must ensure that there are arrangements in place at the pharmacy which enable staff audio link and a live video link.	f and patients	to communicate confidentially by telephone or another live
Arrangement made to allow staff and patients to communicate confidentially by telephone	e or another live	e audio link <u>and</u> a live video link? YES NO
DSPs can choose to install a consultation room at their pharmacy to allow the provision of Enhance of the Terms of Service.	inced and Advai	nced services on the premises, but this is not a requirement



Sustainability			
Requirement	Suggested Evidence This lists only suggested evidence unless clearly stated as required		
The pharmacy contributes to a sustainable environment and this is reflected in the way they operate their business (e.g. using recyclable).	Photographs of recycling bins, paper disposal system, etc.		
materials).  Contractors could also consider highlighting to patients the	Screenshots of websites and online materials		
environmental benefit of returning used inhalers to the pharmacy for safe disposal via the disposal of unwanted medicines service.	Waste transfer notes		

Photos of the recycling bins, paper disposal syster	n, etc. can be found in (it would be advisable to keep these	e with this evidence portfolio workbook):

Table 27 can be used to record details of any other evidence collected.

Details of additional evidence collected:		



# **HLP** checklist

Workforce development

Publ	ic health needs	Completed
1a.	All pharmacy staff have an <b>awareness of the local public health and pharmaceutical needs</b> outlined in the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and Health Profiles for the area the serve including where and how to access them.	
1b.	<b>For DSPs only</b> : As DSPs will provide services to patients in a wider geographical area than that of most other pharmacies, they will need to reflect on the broad health needs of their patients wherever they may live, rather than those living in a specific local area, for example by seeking information on the health profile of their patients when undertaking patient experience surveys or similar, or using the health profiles reflecting a broader area.	
Heal	th and Wellbeing Ethos	
2.	All pharmacy staff <b>understand the basic principles of health and wellbeing</b> , and that every interaction is an opportunity for a health promoting intervention.	
3.	At least <b>one</b> 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 <b>Understanding Health Improvement</b> and is therefore a Health Champion.	
Tear	n leadership	
4.	<ul> <li>An individual from the pharmacy team has undergone leadership training internally or through an organisation that maps to/encompasses the following domains:         <ul> <li>Inspiring a shared purpose – 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>Sharing the vision – Communicating a compelling and credible vision of the future in a way that makes it feel achievable and exciting;</li> <li>Engaging the team – Involving individuals and demonstrating that their contributions and ideas are valued and important for delivering outcomes and continuous improvements to the service;</li> <li>Developing capability – 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>Influencing for results – 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> </li> </ul>	
Com	munication	
5.	All patient-facing pharmacy staff can use the NHS website and other appropriate public health information sources, e.g. PHE Resource Centre, when providing advice on health issues and where appropriate, bearing in mind the findings of e.g. PNAs and JSNAs such as location of services, when providing advice on health issues when appropriate.	
6.	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.	



7.	The pharmacy team routinely explain who they are, wear a name badge and inform people about the information and/or services on offer.	
8.	All pharmacy staff receive training on how to approach people to discuss difficult or sensitive public health issues.	
9.	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.	

# Engagement

Com	munity engagement	Completed
10.	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.	
11	The pharmacy encourages local charities and other providers to work with the pharmacy for delivery of key health messages/displays where appropriate.	
12.	The pharmacy team is aware of appropriate health and wellbeing providers and resources in their community and is able to direct patients and the public to theses to meet their needs where this is necessary (e.g. specialist clinics, Smoking Cessation, Drug and Alcohol Services, Health Trainer Service, weight management services, mental health services, community exercise groups etc).	
13.	The pharmacy team actively work in collaboration with other organisations to deliver pharmacy outreach and any locally commissioned services.	
14.	The pharmacy team take prevention and health promotion services beyond the pharmacy premises. Pharmacy outreach may be face to face and take services to people where they live or spend time or may be virtual events.	

# **Premises Requirements**

He	alth promoting environment	Completed
15	It is clear to the public that free, confidential advice on their health and wellbeing can be accessed.	
16	<ul> <li>For pharmacies which are visited by patients and the public, the pharmacy has a dedicated Health Promotion Zone, that:</li> <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>	
16	For DSPs only - DSPs must have a website for use by patients and the public accessing their services, which has an interactive page on their website clearly promoted to any user of	



	the website when they first access it, which provides public access to a reasonable range of up to date materials that promote healthy lifestyles, by addressing a reasonable range of health issues. <b>DSPs must be compliant with this requirement from 1st April 2021</b>	
17a.	The pharmacy has a consultation room which meets the minimum NHSE&I's approved particulars for premises, or will have fitted a consultation room (if they do not currently have one) by 1st January 2021.	
17b.	For DSPs or some small sized pharmacies  There are arrangements in place at their premises which enable a person performing pharmaceutical services to communicate confidentially with a person accessing pharmaceutical services:  a) by telephone or another live audio link; and b) via a live video link.	
17c	For pharmacies that do not provide Advanced Services  Where a pharmacy has not provided any Advanced services at or from the premises during 2020, they will be exempt from the requirement to have a consultation room on the premises until 1st April 2023, after which they will also be required to have one in place.	
Susta	inability	
18.	The pharmacy contributes to a sustainable environment and this is reflected in the way they operate their business (e.g. using recyclable materials).	



### **Declaration of compliance\***

Pharmacist name:		
Pharmacist GPhC number:		
I declare that		
Pharmacy name:		
Pharmacy address:		
Pharmacy GPhC number:		
Complies with the requirements set out in this document for attaining HLP level 1 status and possesses the evidence and items declared above. I understand that a false declaration may affect my GPhC registration.		
Pharmacist signature:		
Date:		

This declaration, once signed, must be retained securely in the pharmacy and should be available for inspection by:

- The Pharmacy Owner
- GPhC inspectors
- NHS England and NHS Improvement

It is recommended that compliance against these requirements is reviewed by the contractor at least every 3 years.

\*Completion Part 1 of the assessment of compliance, as seen in the standalone document, is only required if the contractor has not used PSNC's Healthy Living Pharmacy (HLP) Evidence Portfolio Workbook to collate their evidence.