

September 2021

PSNC Briefing 039/21: Pharmacy Quality Scheme – Asthma referrals

This PSNC Briefing provides contractors with guidance for the 2021/22 Pharmacy Quality Scheme (PQS) on meeting the Personalised asthma action plans and promoting spacer device use in children prescribed pressurised metered dose inhalers (pMDIs) criterion, which is part of the Respiratory domain.

Introduction

In August 2021, a new PQS was announced for the 2021/22 financial year. The new scheme has a declaration period between 9am on 31st January 2022 and 11.59pm on 25th February 2022 (contractors can choose a date during this period to make a declaration) and funding of £75 million.

One of the Scheme's domains is 'Respiratory' which requires contractors to meet three quality criterion, **one** of which is:

Personalised asthma action plans and promoting spacer device use in children prescribed pressurised metered dose inhalers (pMDIs)

On the day of the declaration, the pharmacy contractor must have evidence that they have ensured that:

- all children aged 5 to 15 dispensed inhaled press and breathe pMDI for asthma have a spacer device, where appropriate, in line with NICE TA38; and
- all patients, 5 years and above with asthma have a personalised asthma action plan.

The pharmacy contractor must be able to show that pharmacy staff have referred patients with asthma to an appropriate healthcare professional where this is not the case.

When making a declaration for this criterion, the following information must be reported on the MYS application:

- the total number of children aged 5 to 15 that they have referred for a spacer device, where appropriate, in line with NICE TA38; and
- the total number of patients 5 years and above with asthma that they have referred to have a personalised asthma action plan.

Contractors have to meet all three quality criteria within the Respiratory domain to be eligible for a PQS payment in respect of that domain. The other two criteria which contractors must meet for the Respiratory domain are:

- Inhaler technique checks for patients prescribed a new inhaler with asthma or COPD during the COVID-19 pandemic, linked to the catch-up provisions within the New Medicine Service; and
- Return of unwanted and used inhalers criterion.

Further information on these criteria can be found on the [PSNC PQS hub page](#).

Meeting the Respiratory domain will earn 25 points (a minimum value of £1,693.75) for a band 4‡ pharmacy.

‡Most pharmacies will be in Band 4. This band is for pharmacies which dispensed an average prescription volume between 60,001-150,000 items annually in the 2020/21 financial year.

Use of a spacer device with pressurised metered dose inhalers for children aged 5-15 years

A pMDI and suitable spacer device is recommended as the first-line choice for the delivery of inhaled corticosteroids as part of regular planned daily therapy for children aged 5-15 years, with the aim of maximising benefits of preventive therapy in attaining good asthma control and minimising potential systemic absorption.¹

Please note, for previous Schemes, the requirement was to only refer patients aged 5-15 years for a spacer device if they were prescribed an inhaled corticosteroid; however, for the 2021/22 Scheme it is all pMDIs (including bronchodilators).

Personalised asthma action plans (PAAPs)

Guidance from the National Institute for Health and Care Excellence (NICE)² states that all adults, young people and children aged 5 and over (and/or their families or carers if appropriate) should be offered self-management education which should include a written personal asthma action plan (PAAP). It was also one of the key recommendations from the publication 'Why asthma still kills' by the National Review of Asthma Deaths which stated that all people with asthma should be provided with written guidance in the form of a PAAP that details their own triggers and current treatment, and specifies how to prevent relapse and when and how to seek help in an emergency.³

A PAAP tells the patient everything they need to know about looking after their asthma, including which medicines they should take each day, how to spot deteriorating symptoms and an asthma attack and what to do. Research shows that a patient using a PAAP means they are four times less likely to be admitted to hospital as a result of asthma. A template PAAP can be viewed on the Asthma UK website.⁴

Process

It is up to the contractor how they choose to engage and implement regular surveillance of patients with asthma into their processes and procedures, but **Annex A** contains a suggested process for pharmacy teams to follow to incorporate this quality criterion into their daily practice.

The tasks in the suggested process could be undertaken by any appropriately trained staff within the pharmacy team.

Where no patients are identified for referral, the contractor will still be eligible for payment if they can evidence that they have been working to identify suitable patients and that they have a process in place for referral should they identify someone.

Please note, contractors are not required to supply a spacer device to the patient, but instead should make a referral to their general practice; however, if the patient or their parent/guardian wish to purchase it then this can be offered. Contractors are also not required to print or fill out a PAAP for a patient; they are only required to refer them to an appropriate healthcare professional.

¹ NICE TA38 - Inhaler devices for routine treatment of chronic asthma in older children (aged 5-15 years) (March 2002) <https://www.nice.org.uk/guidance/ta38>

² NICE NG80 – Asthma: diagnosis, monitoring and chronic asthma management (last updated March 2021) <https://www.nice.org.uk/guidance/ng80>

³ National Review of Asthma Deaths - Why asthma still kills (August 2015) <https://www.rcplondon.ac.uk/projects/outputs/why-asthma-still-kills>

⁴ Asthma UK – Your asthma action plan (accessed 10/08/21) <https://www.asthma.org.uk/advice/manage-your-asthma/action-plan/#>

If a patient does not wish to be referred to their GP or asthma nurse, the pharmacist should discuss with the patient the risks of not doing so and the benefits of attending an asthma review. In this case, the patient should not be continually referred for review.

Referral to an appropriate healthcare professional

The contractor will normally be referring the patient to their general practice. The healthcare professional to whom the patient is referred should be a professional who has undertaken specialist training in asthma. This may be the patient's GP, GP practice-based respiratory nurse specialist or 'asthma nurse'.

Since contractors will normally be referring patients to their GP practice, it may be useful for contractors to speak to local GP practices to inform them of the referral requirement and to hear what feedback they would like to receive or how they would like patients to be referred.

Where the notification to the GP practice is undertaken via hardcopy, the Community Pharmacy Referral Form ([Annex B](#)) can be used.

Data collection

Contractors may be required to provide evidence to NHS England and NHS Improvement (NHSE&I) to show that they have met the quality criterion. A data collection form is provided in [Annex C](#), which could be used to aid this process. Please note, if this form is used, the left-hand side of the form containing patient information should be hidden if it is shown to NHSE&I to prevent a breach of patient confidentiality.

PharmOutcomes support

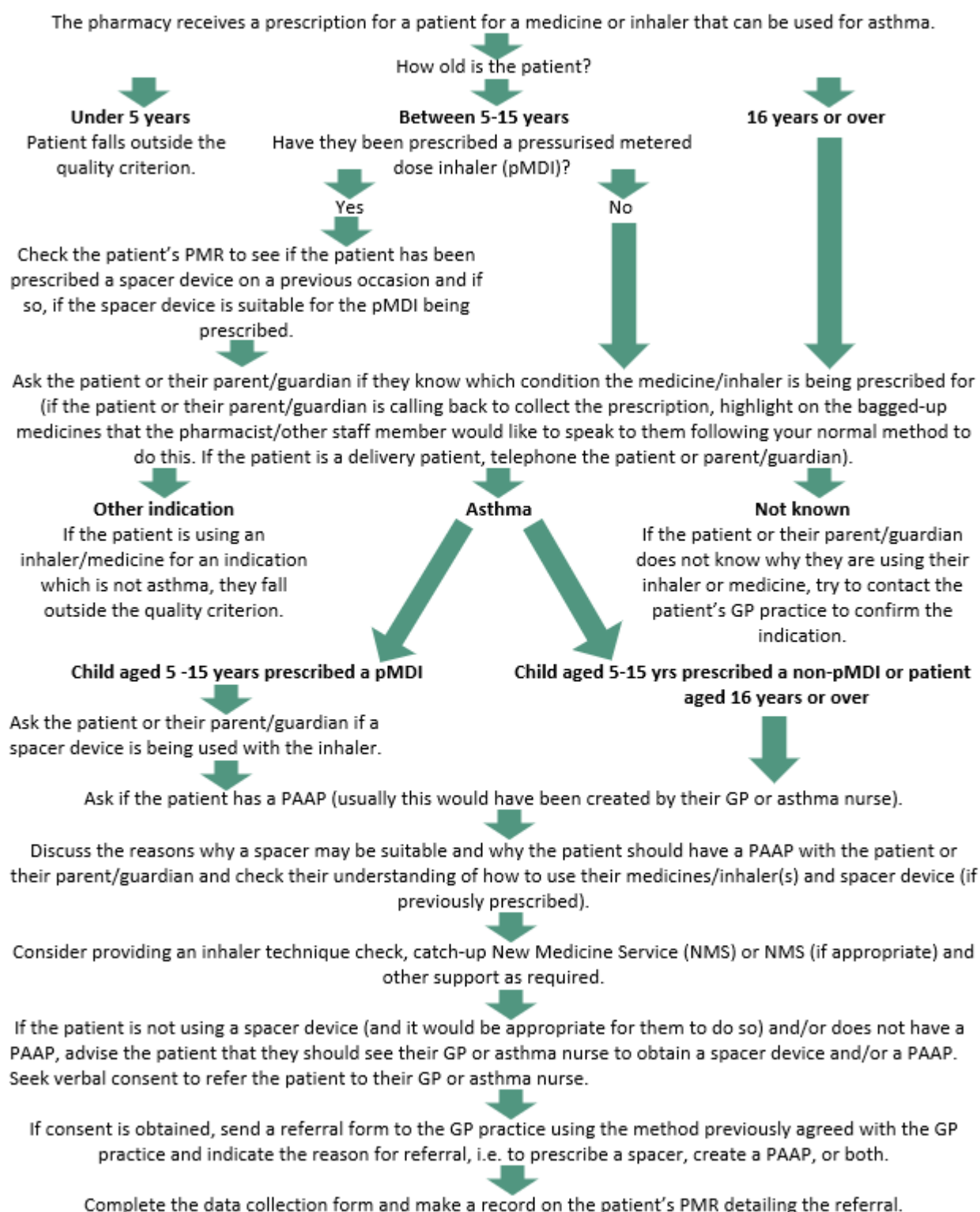
Contractors will be able to access support on [PharmOutcomes](#) for this quality criterion shortly. This support will be available to all contractors as PSNC has agreed to use their licence to provide access to the asthma referrals service on PharmOutcomes.

The PharmOutcomes tool will allow contractors to record patient details who have consented to be referred to their GP practice. When this data is saved on PharmOutcomes, a referral will automatically be sent to the patient's GP practice (if an NHSmail email address is held for that GP practice on PharmOutcomes).

Further details will be published through our normal communication channels when this is available.

If you have any queries on this PSNC Briefing or you require more information, please contact the PSNC Services Team at services.team@psnc.org.uk

Annex A – Suggested process for referral: for children aged 5-15 years who have been prescribed a pMDI for asthma without a spacer and/or patients aged 5 years and above who do not have a Personalised Asthma Action Plan (PAAP)



Annex B – Referral form

Community pharmacy referral form

Date	
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To (GP practice name)	
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Patient's name	
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Patient's address	
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Patient's DOB		NHS number (where known)	
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This patient with asthma has been identified as (tick all that apply):

- Not having been prescribed a spacer device for use with their pMDI (the patient is aged 5-15 years). ☐
- Not having a Personalised Asthma Action Plan. ☐

Consent has been obtained to notify you of this, as there may be a need for their asthma management to be reviewed.

Additional comments (e.g. actions taken following intervention such as inhaler technique check).

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Pharmacy name	
Address	
Telephone	

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Annex C – Data collection form

Patient bag label	Date of intervention	Date of referral	Reason for referral	GP practice	Action taken following the intervention, e.g. inhaler technique check, catch-up NMS, NMS
			Has not been prescribed a spacer device for a pMDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/>		
			Has not been prescribed a spacer device for a pMDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/>		
			Has not been prescribed a spacer device for a pMDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/>		
			Has not been prescribed a spacer device for a pMDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/>		

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