

October 2022

PSNC Briefing 032/22: Pharmacy Quality Scheme – Asthma referrals

This PSNC Briefing provides contractors with guidance for the 2022/23 Pharmacy Quality Scheme (PQS) on meeting the following criteria, which are part of the Respiratory domain:

- Use of a spacer in patients aged 5-15 years.
- Personalised asthma action plans (PAAP); and
- Referrals for patients using three or more short-acting bronchodilator inhalers in six months.

Introduction

On 22nd September 2022, a new PQS was announced for the 2022/23 financial year as part of the [arrangements for the Community Pharmacy Contractual Framework \(CPCF\) in 2022/23 and 2023/24](#). Further details were then published on 5th October 2022 as a Drug Tariff Determination on the [NHS Business Services Authority's website](#). The new scheme has a declaration period between 9am on 6th February 2023 and 11.59pm on 3rd March 2023 (contractors can choose a date during this period to make a declaration). However, contractors have until the end of 31st March 2023 to complete all the gateway and domain requirements of the scheme.

One of the Scheme's domains is 'Respiratory' which requires contractors to meet five quality criteria, **three** of which are:

Use of a spacer in patients aged 5-15 years

Between 10th October 2022 and the day of the declaration, the pharmacy can evidence that they have:

- checked that all children aged 5 to 15 prescribed a press and breathe pressurised MDI for asthma have a spacer device, where appropriate, in line with [NICE TA38¹](#) and
- referred children aged 5 to 15 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 Mange Your Service (MYS) application:

- the total number of children aged 5 to 15 referred to a prescriber for a spacer device, where appropriate, in line with [NICE TA38¹](#) between 10th October 2022 and the day of the declaration.

Personalised Asthma Action Plans (PAAP)

By the end of 31st March 2023, the pharmacy can evidence that they have checked that all patients aged five years and above dispensed an inhaler for asthma between 10th October 2022 and the day of the declaration have a PAAP.

The pharmacy contractor must be able to show that pharmacy staff have referred all patients aged five years and above dispensed an inhaler for asthma between 10th October 2022 and the day of the declaration to an appropriate healthcare professional where this is not the case.

¹ <https://www.nice.org.uk/guidanceta38>

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

- the total number of patients aged five years and above with asthma referred for a PAAP between 10th October 2022 and the day of the declaration.

Referrals for patients using three or more short-acting bronchodilators inhalers without any corticosteroid inhaler in six months

By the day of the declaration, the pharmacy can show evidence that patients with asthma, for whom three or more short-acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a six-month period have, since the last review point, been referred to an appropriate healthcare professional for an asthma review.

The contractor will normally be referring the patient to their GP, GP practice based respiratory nurse specialist/asthma nurse or practice-based pharmacist for a routine appointment.

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

- the total number of patients with asthma, for whom three or more short-acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a six-month period and who were referred to an appropriate healthcare professional for an asthma review by the day of the declaration.

Contractors must meet all five 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; and
- Inhaler waste management.

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 £1,687.50) 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 2021/22 financial year.

Use of a spacer in patients aged 5-15 years

A press-and-breathe pressurised metered dose inhaler used with an appropriate spacer is recommended as the first choice of inhaler for use with inhaled corticosteroid medicines for asthma.¹

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) with a diagnosis of asthma should be offered self-management education which should include a written PAAP. It was also one of the key recommendations from the publication 'Why asthma still kills' (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

² <https://www.nice.org.uk/guidance/ng80>

³ <https://www.rcplondon.ac.uk/projects/outputs/why-asthma-still-kills>

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+Lung UK website](#).⁴

Referrals for patients using three or more short-acting bronchodilator inhalers without any corticosteroid inhaler in six months

A short-acting bronchodilator (reliever) is the first treatment step for patients diagnosed with asthma. The following medicines are classed as inhaled short-acting bronchodilators:

- short-acting Beta-2 agonists (SABAs) e.g. salbutamol and terbutaline; and
- short-acting muscarinic antagonists (SAMA) e.g. ipratropium bromide.

Beta-2 agonist tablets or syrup and theophyllines are also classed as short-acting bronchodilators, but for the purposes of the criterion, these medicines are not included.

SABAs are the preferred short-acting bronchodilator as they work more quickly and with fewer side effects than the alternatives. An inhaled SABA should therefore be prescribed as the first step for all patients with symptomatic asthma. Patients should not need to use their short-acting bronchodilator regularly, as good asthma control is associated with little or no need for them. Measures may need to be taken to improve asthma control if this is poor, such as referring the patient for an asthma review or providing an inhaler technique check.

Process

For contractors who claimed elements of these criteria previously as part of PQS 2021/22, a new review will be required. In addition, the pharmacy team's knowledge and understanding of the process to identify suitable patients should be reviewed. Methods used to identify 'at risk' patients for referral should be reviewed for effectiveness; however, it is up to the contractor how they choose to engage and implement regular surveillance of patients with asthma into their processes and procedures. [Annex A](#) and [Annex B](#) provide a suggested process for pharmacy teams to follow to incorporate these quality criteria into their daily practice. Contractors are advised to record any intervention and/or referrals made in the patient medication record (PMR).

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 robustly attempted to identify suitable patients and that they have processes in place for referral should they identify a patient who is suitable.

Please note, contractors are not required to supply a spacer device to the patient, but instead should make a referral to the patient's GP 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.

If a patient does not wish to be referred to their GP practice, 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

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.

⁴ <https://www.asthma.org.uk/advice/manage-your-asthma/action-plan/>

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

Data collection

Contractors may be required to provide evidence to NHS England to show that they have met the above quality criteria. A data collection form is provided in [Annex D](#), 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 NHS England to prevent a breach of patient confidentiality.

PharmOutcomes support

From 10th October 2022, contractors will be able to access an asthma referral service on [PharmOutcomes](#) for the 'Use of a spacer in patients aged 5-15 years' criterion, the 'Personalised Asthma Action Plans (PAAP)' criterion and the 'Referrals for patients using three or more short-acting bronchodilator inhalers with any corticosteroid inhaler in six months' criterion.

This asthma referral service is available free of charge to all contractors.

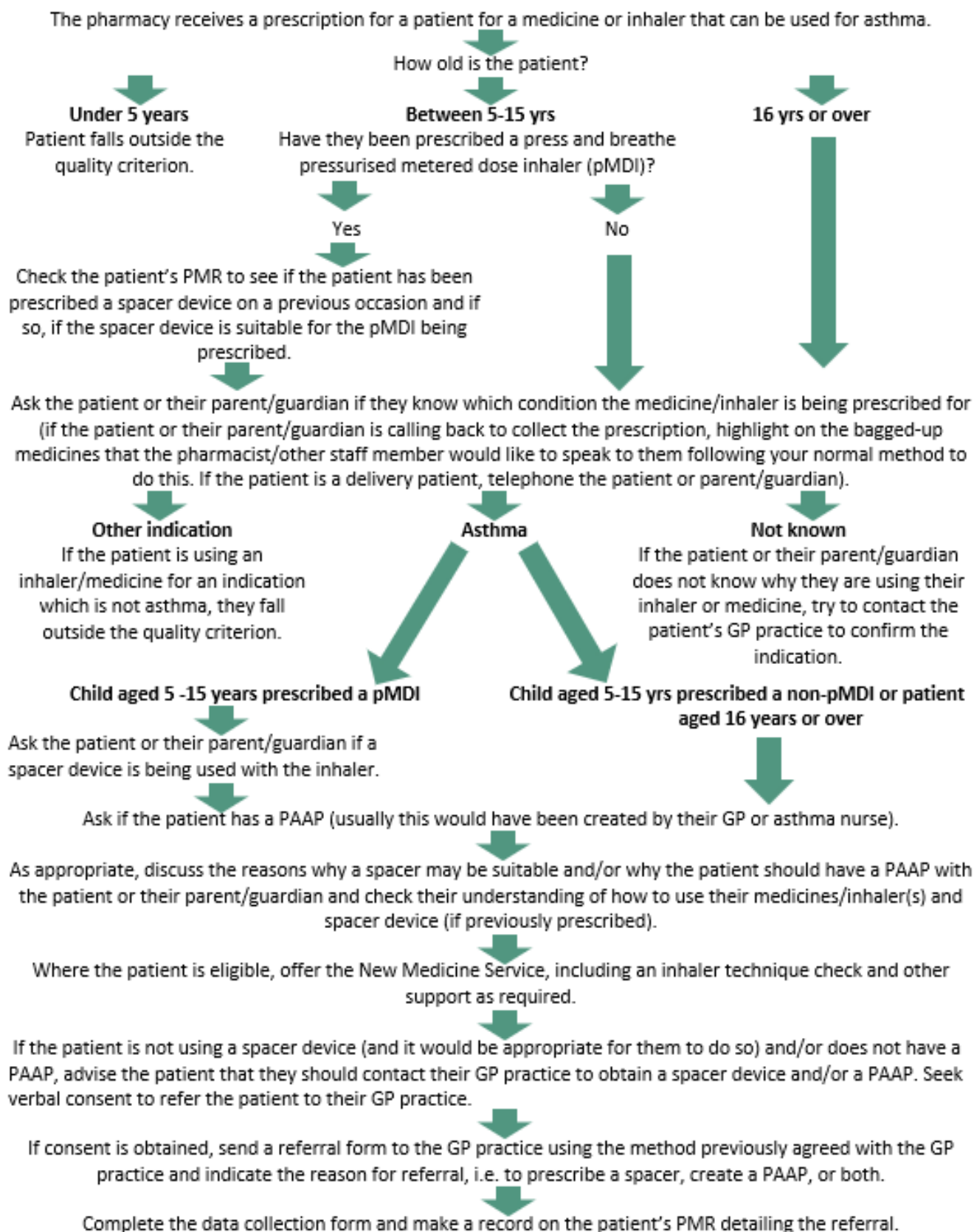
This service allows contractors to record patient details who have consented to be referred to their GP practice if they meet any of the criteria stated above, which is part of the Respiratory Domain.

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 within PharmOutcomes).

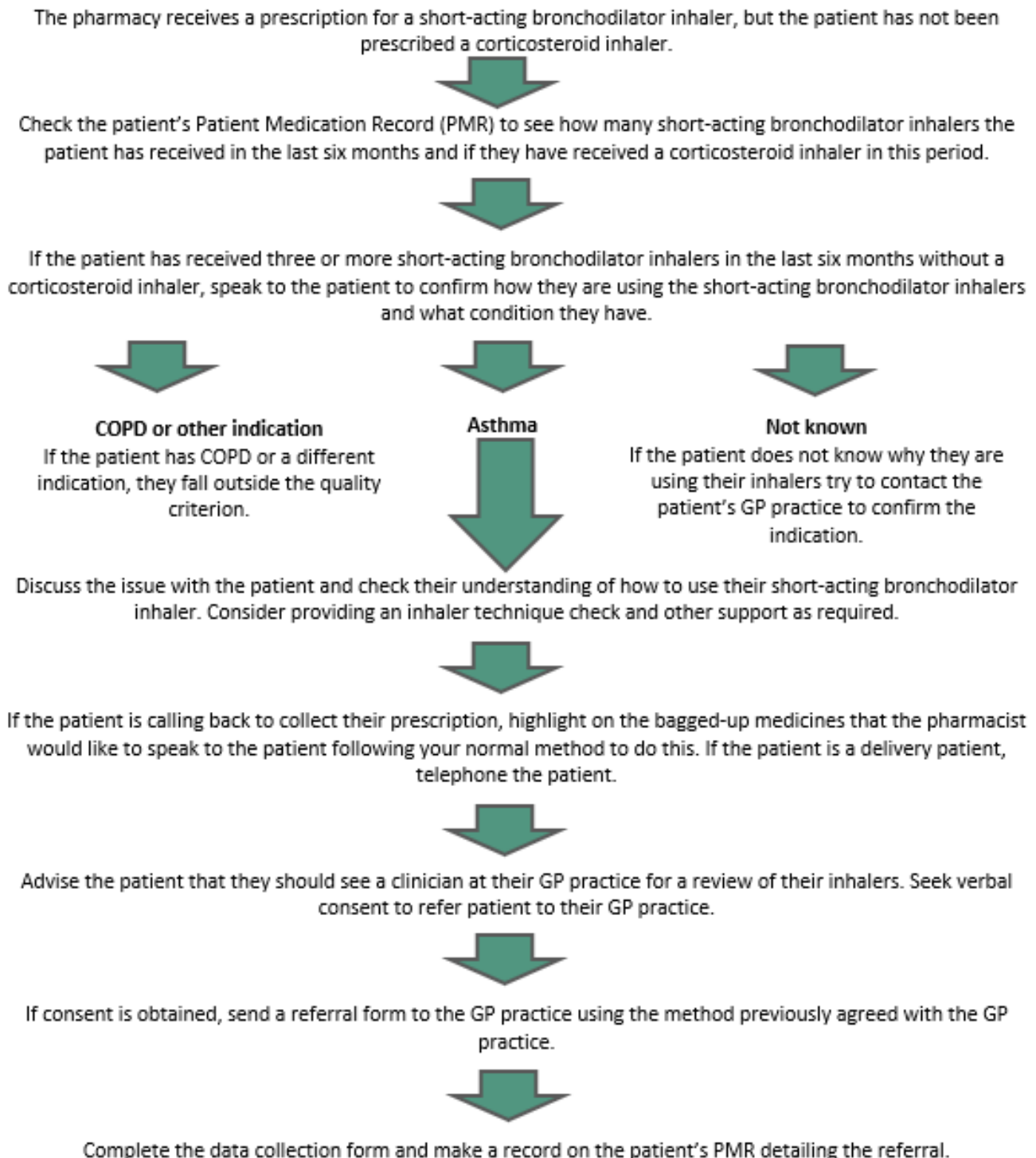
This service can be accessed by logging into PharmOutcomes, selecting 'Services'; and then the service is listed under the heading 'Quality criterion – Asthma referrals'.

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 – Suggested process for referral: for patients using three or more short-acting bronchodilator inhalers in six months



Annex C – Referral form

Community pharmacy referral form

Date	█
------	---

To (GP practice name)	█
-----------------------	---

Patient's name	█
----------------	---

Patient's address	█
-------------------	---

Patient's DOB	█	NHS number (where known)	█
---------------	---	--------------------------	---

This patient with asthma has been identified as (tick all that apply):

<ul style="list-style-type: none"> Not having been prescribed a spacer device for use with their press and breathe pressurised MDI (the patient is aged 5-15 years). 	<input type="checkbox"/>
<ul style="list-style-type: none"> Not having a Personalised Asthma Action Plan. 	<input type="checkbox"/>
<ul style="list-style-type: none"> Having been prescribed 3 or more short-acting bronchodilator inhalers without any corticosteroid inhaler within a six-month period. 	<input type="checkbox"/>

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).

█

Pharmacy name	█
---------------	---

Address	█
---------	---

Telephone	█
-----------	---

CONFIDENTIAL

Annex D – 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, NMS
			Has not been prescribed a spacer device for use with a press and breathe pressurised MDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/> Has been prescribed three or more short-acting bronchodilator inhalers without any corticosteroid inhaler within a six-month period <input type="checkbox"/>		
			Has not been prescribed a spacer device for use with a press and breathe pressurised MDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/> Has been prescribed three or more short-acting bronchodilator inhalers without any corticosteroid inhaler within a six-month period <input type="checkbox"/>		
			Has not been prescribed a spacer device for use with a press and breathe pressurised MDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/> Has been prescribed three or more short-acting bronchodilator inhalers without any corticosteroid inhaler within a six-month period <input type="checkbox"/>		
			Has not been prescribed a spacer device for use with a press and breathe pressurised MDI (the patient is aged 5-15 years) <input type="checkbox"/> Does not have a Personalised Asthma Action Plan <input type="checkbox"/> Has been prescribed three or more short-acting bronchodilator inhalers without any corticosteroid inhaler within a six-month period <input type="checkbox"/>		
			Totals		

CONFIDENTIAL