

vision

Developing the Community Pharmacy Contract

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Keeping you up to date Contract implementation progress

Funding Negotiations for 2009-10

Discussions on the financial package for 2009-10 have now started. The negotiations are being informed by the evidence available from the cost survey and the findings from the recent discount spot checks but government officials have also made clear to the negotiating team that they are operating under significant financial constraints. The continuing rise in the number of pharmacy contracts in Scotland has also been noted.

Efficiencies are being looked for throughout the NHS in Scotland and this pressure is making the negotiation process extremely difficult. An initial offer letter has been received which sets out the proposals from the Scottish Government (SG) for the full financial package it is willing to make available to pharmacy contractors. The package would be made up from:

- the global sum
- the level of retained purchase profit
- funding initiatives such as the temporary support package currently used to fund new public health services.

Officials have also asked that Community Pharmacy Scotland starts to explore with them measures to improve prescribing in primary care and achieve reductions in drug

wastage. Any savings generated from these measures would then be shared between the NHS and pharmacy contractors. SG has also asked that we give consideration to a two-year deal.

Future meetings

The next meeting is scheduled for the end of July. Once the negotiations on the financial envelope have been concluded, the next stage will be to move on to discussions on how it is to be paid out. At this stage we anticipate that many elements of the current arrangements will continue such as the transitional payments and the associated material change of circumstances payments but we will also be looking at whether it would be possible to move more contractors into transition. The amount paid out in 2008-09 for contractors not in transition was more than predicted. Overall spending within the financial envelope was also over budget by a small amount and that will need to be factored into the distribution arrangements for 2009-10.

More information will be made available to you as soon as possible and once all the negotiations have been concluded we will assess the best way to communicate this to you.

FOREWORD FROM MARTIN GREEN, CHAIRMAN



Dear Member,

CPS is currently locked in negotiation regarding our settlement for 2009/10 and against a backdrop of public sector financial control, these meetings are proving challenging. I would like to reassure you that the negotiating team has your best interest at the forefront of their minds and will strive to attain the best possible outcome for all contractors.

This update highlights that the very early stages of CMS have started and that eAMS is now rolled out across the country. We welcome any feedback you have on these services and how the software is facilitating, or not, their delivery. This is critical if they are to become the backbone of contractors' future activity.

I was particularly pleased to see the extremely high level of contractor engagement with last year's Contract Preparation Payment strands and this allowed all of the allocated money to be distributed. We are trying to secure similar funding for this coming year.

CPS has also been monitoring and contributing to professional developments within the pharmacy world this year. This has led us to produce a Pharmacy Operational Logbook to assist you to meet the statutory requirements that come into force from the 1st October. I hope you agree that this is another example of CPS focusing on member needs and adding value where it can to ensure the smooth running of our community pharmacies. ●

Martin Green, Chairman

Chronic Medication Service – Update

Community Pharmacy Scotland and the Scottish Government recently held a series of meetings to discuss the service specification for the Chronic Medication Service. When the service specification is agreed, negotiations on the remuneration for service provision and the care planning component will begin.

An early adopter phase for the Chronic Medication Service has commenced in Fife. Its aim is to ensure the GP and Pharmacy systems are able to communicate with each other using “live” patient data. Five GP surgeries and six Community Pharmacy contractors have agreed to take part. Currently five sites are live.

During this phase community pharmacists and general practitioners will seek out ten hypothyroidism patients and register them for the service before applying the following steps:

- Once registered the patient will be issued with a serial prescription for thyroxine for two months;
- The community pharmacist will then process the prescription using their CMS ePharmacy software;
- The software will send an electronic message to the GP surgery as each prescription instalment is dispensed;
- When all the dispensing episodes of the instalment prescription have been completed an end of treatment care summary will be sent to the GP practice.

The Scottish Government has recently released circular PCA (P) (2009) 9 which outlines funding available to contractors for installation of the software. Contractors who install it will receive a one off fee of £250, and a further £100 per month towards their infrastructure costs giving a total of £300 per month for infrastructure costs.

Community Pharmacy Scotland will provide further information on the implementation of the service in due course. ●

Public Health Service – an Update

The three new public health service patient services have now been operational since August 2008. The uptake of these services across Scotland has been exceptional, emphasising the excellent accessibility which patients enjoy to community pharmacy contractor services.

You are now providing over 5000 consultations for emergency hormonal contraception per month across Scotland.

Community Pharmacy contractors provided nearly half of NHS stop smoking services in Scotland in 2008. Data from the NHS smoking cessation service database for January - December 2008 revealed that nationally there were 50,121 quit attempts, with pharmacy services

supporting 44 per cent of these attempts.

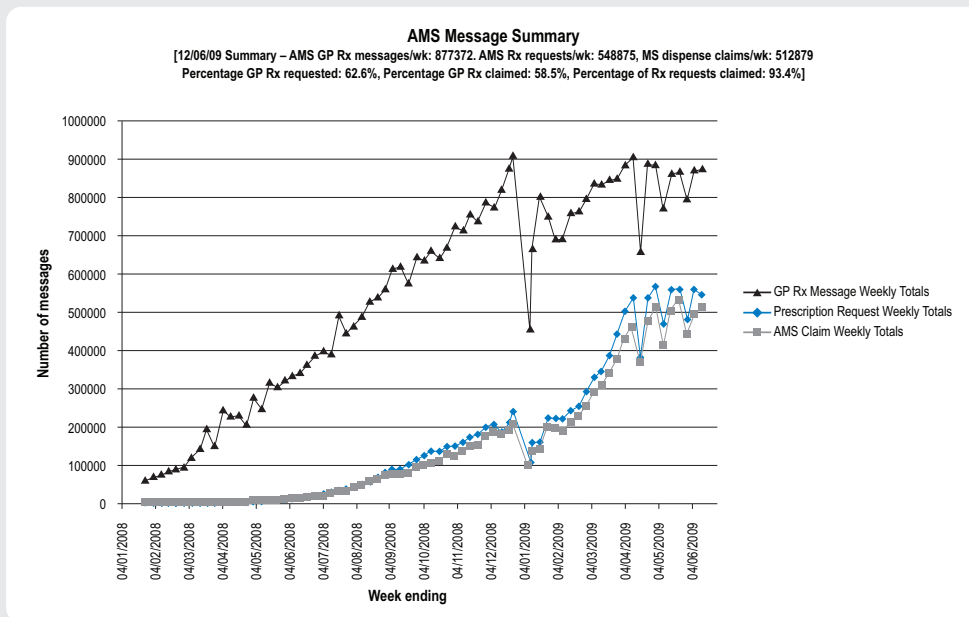
Current evidence shows that 25 per cent of smokers using a pharmacy service had quit at one month compared with 48 per cent using a non-pharmacy service. However, Community Pharmacy Scotland believes some of this discrepancy is related to the non-return of minimum dataset forms.

Contractors should ensure all minimum dataset forms are returned to Health Boards as quickly as possible upon completion.

A review of the patient PHS services is about to be undertaken by the Scottish Government and Community Pharmacy Scotland. Details of the outcome of this review will be released upon completion. ●

Acute Medication Service – Update

The incentive period (March-May) for Strand F has now come to a close. During the month of May you managed an average of 60% e-claims across Scotland.



We took many calls during the incentive period from contractors about problems they had come across. These included:

- non-functioning GP sites;
- substantial components of their business being related to instalment dispensing;
- barcodes identified that weren't long enough to be scanned.

At the end of May, Community Pharmacy Scotland sent a pro-forma to all contractors to collect information on these Strand F issues. A substantial number of contractors returned these forms and, using the data supplied, a report has been prepared and shared with SG to inform further discussion and negotiation. ●

Contract Preparation Payments 2008-9 Review

The 2008-9 Contract Preparation Payments programme has now been completed. Your engagement with the activities this year has been exceptionally good and the level of engagement seen has resulted in an increase of 40% in the total payments made to contractors during the year.

Strand	Descriptor	% Contractors Completing Activity	Payment Made
A	eAMS training and review of Standard Operating Procedures	90%	£1.969m
B	NES-Workforce Audit	97%	£1.05m
C	Minor Ailment Service Audit-Nov	100%	£540k
E	Minor Ailment Service Audit-Feb	92%	£498k
F	eAMS Incentivisation Payment 60%	63%	£689,400
	eAMS Incentivisation Payment 30%	16%	£84,600

An internal review of Contract Preparation Payments has been made and this review has suggested that Contract Preparation Payments should be rebadged as Quality, Evaluation and Development monies in recognition of the fact the contract is currently being delivered. In light of this review Community Pharmacy Scotland is also keen to ensure the programme for 2009-10 is once again supported by our Contractor Services Department and the payment mechanisms for contractors once activities are complete are streamlined where appropriate.

Decriminalisation of Single Dispensing Error Campaign

In light of the recent Elizabeth Lee case, where a single dispensing error led to the criminal prosecution of a pharmacist, we have undertaken to lobby all Scottish MPs on your behalf. Lobbying was done to encourage all MPs to sign Howard Stoaite's early day motion in the House of Parliament which calls for a change to the Medicines Act.

Community Pharmacy Scotland has also contacted Kenny MacAskill MSP, Cabinet Secretary for Justice, that he consider issuing guidance to the Procurator Fiscal via the Lord Advocate on why prosecution for a single dispensing error is not in the public interest. We will keep you informed on the progress of the campaign. ●



Minor Ailment Service – Developments

Community Pharmacy Scotland has been reviewing the Minor Ailment Service over the past few months. One issue identified by contractors during the review is the continual rejection of particular items on the Minor Ailment Service as they have been disallowed despite being non-blacklisted P or GSL items.

To reduce the non-payment of certain items, ISD and Community Pharmacy Scotland have created Part 7B for the Drug Tariff specifically for pricing items supplied on the Minor Ailment Service. Full details of the list were sent to all contractors with our June mailing. Any suggested additions are most welcome to ensure the list is as robust as possible.

Community Pharmacy Scotland's review of the Minor Ailment Service is nearing completion. The final outcome will require negotiation with the Scottish Government and is likely to be implemented in time for the abolition of prescription charges. As part of the review we have looked at how contractors' payments are currently being protected. We have found over the past year that registration numbers have largely recovered ensuring that many contractors are now being paid for actual numbers. If you are not in that position then you should consider your engagement with the service and any impact that changes in funding could have if you were to be paid for your actual registration rate. ●

Pandemic Flu

The recent outbreak and ongoing transmission of swine flu in some areas has led to an increased workload for the affected contractors. To date business as usual has remained in place. However, at this time it is important you ensure you have taken reasonable steps to ensure business

continuity in the event of an escalation. Contacting your NHS Board, GP surgeries and nearby pharmacies is a useful step to see what is expected of you during this period and fosters useful contacts in the event of you running into difficulty due to flu.

Community Pharmacy Scotland has begun negotiation with the Scottish Government on ensuring payments to contractors remain unaffected in the event

of swine flu causing the closure of your pharmacy. Negotiations are ongoing and Community Pharmacy Scotland is keen to ensure that no contractor is affected financially by closure.

Upon completion of discussions with the Scottish Government we expect a circular to be released to inform contractors of the outcome and details of the arrangements to be put in place. ●



NHS Pharmaceutical Services Regulations 2009 and Chronic Medication Service Directions

The NHS Pharmaceutical Services Regulations 2009 have now been approved by the Scottish Parliament and came into force on the 1st of July.

The regulations introduce a new duty on Health Boards to consult on applications to the Pharmaceutical List with the public (previously the Board had to consult with the local Health Council). It also introduces an obligation on you to keep appropriate records for at least seven years which must be made available for inspection on request by Scottish Ministers, the relevant Health Board or the Common Services Agency.

The regulations also introduce the provisions for the Chronic Medication Service (CMS). As part of the new core services available through community pharmacy, CMS will offer eligible patients an enhanced service from community pharmacists including medicines reviews and personalised, detailed pharmaceutical care plans. Recently released circular PCA P 2009 11 published the Chronic Medication directions which will be used as the framework for the service once introduced. ●

GPhC – Update

The UK Departments of Health recently released a briefing document on the progress towards the formation of the General Pharmaceutical Council (GPhC). The GPhC will act as the Regulator of pharmacists and pharmacy technicians from the spring of 2010. It will be led by a council of 14 members – 7 lay members and 7 health professional members with all members being appointed rather than elected. Mr Robert Nicholls CBE who has 40 years of experience of working in the NHS has been appointed as the GPhC Chair.

The briefing outlines current thinking from the GPhC on its role and responds to several challenges laid down by the motions passed at the special general meeting of RPSGB in May.

- The aim of the GPhC is to ensure that public health, safety and wellbeing are the main objectives of professionals delivering pharmacy services.
- The GPhC plans to create a single register for all pharmacists, pharmacy technicians and pharmacy premises. There will be no non-practising register.

- The GPhC has confirmed in the future, the titles 'pharmacist' and 'pharmacy technician' will be restricted to those on the relevant part of the register.
- The GPhC has identified that pharmacists or pharmacy technicians who are not patient facing (e.g. sign off PGDs, release batches of tablets) need to be registered.
- Continuing Professional Development (CPD) will be statutory for pharmacists and pharmacy technicians.
- The GPhC will publish new standards for pharmacy owners, superintendent pharmacists and premises; proficiency; conduct, ethics and performance; and CPD.

The briefing document can be accessed on our website, www.communitypharmacyscotland.org.uk

Community Pharmacy Scotland will ensure responses are made to the consultations from GPhC on any new standards once they are published. Further updates on any requirements you are expected to meet will be sent to you when appropriate. ●

The Responsible Pharmacist (RP) Regulations

The new Responsible Pharmacist regulations come into force on the 1st of October this year.

As part of the support for contractors prior to implementation of the regulations we sent out a Pharmacy Operational Logbook. This supports adherence to the recording requirements of the regulations.

We asked for feedback on the operational

logbook prior to preparation of the October logbook. Responses are already coming in and some of the most common questions/ comments are:

- "Do I need to do this every day?" Legally the record needs to be completed daily.
- "These books will take up excess space as records must be kept for 5 years?" We are developing an electronic Microsoft

Excel log which will minimise storage.

- "This is just added bureaucracy." The RP records are there to show the Regulator you have secured the safe and effective running of the pharmacy. By completing the log you can demonstrate that you have taken steps to minimise any risk to the public.

We are keen to hear more feedback during August on the log so please get in touch with us. ●



Community Pharmacy Scotland represents Scotland's 1209 pharmacy contractors. It negotiates on their behalf with the Scottish Government the terms of service and remuneration for contractors' NHS work.

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