

## Healthy Living Pharmacy Pathfinder sites

### Background

NHS Portsmouth developed and implemented the Healthy Living Pharmacy (HLP) concept during 2009/10 and has since seen quality and productivity improvements in community pharmacy services. With around 50% of the contractors in Portsmouth having now received the HLP Quality Mark, the public are enjoying better access to health and wellbeing services including stop smoking, alcohol interventions, emergency hormonal contraception, Chlamydia screening, NHS health checks and targeted respiratory Medicine Use Reviews.

The interim outcomes achieved in Portsmouth (September 2010) have impressed many and interest in the concept and the way it is being implemented has attracted interest across the UK. The initiative has interested government officials with mentions in *NHS 2010 - 2015: from Good to Great. Preventative, People-centred, Productive* and the White Paper, *Healthy lives, Healthy people: our strategy for public health in England*.

In the last six months, Heart of Birmingham, Southampton and the Isle of Wight have also launched HLP and expect their first quality-marked pharmacies from autumn 2011.

In parallel to the local work in Portsmouth, research has been undertaken by the Universities of Portsmouth and Wolverhampton to underpin, with evidence, the development of a national HLP framework. This framework was ratified by the Public Health Leadership Forum (for pharmacy) in January 2010.

### Healthy Living Pharmacy roll-out

As the National Pharmacy Bodies (Company Chemists Association (CCA), National Pharmacy Association (NPA), Pharmaceutical Services Negotiating Committee (PSNC) and Royal Pharmaceutical Society (RPS)) working together with the Department of Health and the Centre for Pharmacy Postgraduate Education (CPPE), we support the increasing role that community pharmacy can play in delivering high quality health and wellbeing services and believe that HLP is one way that this can be achieved. Following the success in Portsmouth, our aim is to roll out HLP in other geographical areas to strengthen the evidence base for the concept. There has never been a more important time for community pharmacy to demonstrate the value that it adds. It is critical that further evidence of HLP delivery in a non-Hampshire setting is gathered to influence national policy and provide contractors and their teams with confidence that this approach can make a difference. A key question must be answered, is this concept replicable in other areas?

We met earlier this year to agree how we would work together and agree the way forward. We have agreed to support the development of HLP pathfinders and want at least 100 community pharmacies to become HLPs over the next 12 months to provide robust data which will be independently evaluated. To enable this work to move ahead, we have commissioned Deborah Evans as project lead for four days per month until November 2011. Deborah will work with members of the pathfinder support group which includes senior representatives from CCA, CPPE, DH, NPA, PCNS and RPS.<sup>1</sup> This work is being sponsored by the Chief executives of the organisations.

One of the first jobs for the group is to recruit pathfinder sites across England. This document outlines the requirements, benefits and process for potential pathfinders and we welcome joint applications from Local Pharmaceutical Committees and their commissioners. As a pathfinder, you will play an important role in the future direction of community pharmacy.

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<sup>1</sup> Omar Shakoor (CCA), Chris Cutts (CPPE), Gul Root (DH), Leyla Hancock (NPA), Barbara Parsons (PSNC) and Catherine Duggan (RPS).

## **Benefits of implementing Healthy Living Pharmacy**

Based on the experience in Portsmouth, we believe there are a number of benefits to implementing HLP including:

- Improvements in quality and productivity
- Ability to demonstrate to future commissioners what community pharmacy can deliver which may lead to continued commissioning of services or more services being commissioned
- Increase public awareness of community pharmacy health and wellbeing services
- Display a logo that can be recognised by the public and demonstrate that community pharmacy is joined-up in an area
- Engage and motivate community pharmacy teams to deliver proactive health and wellbeing interventions and improved performance in service delivery
- Improve involvement and engagement of the pharmacy team including developing a Healthy Living Champion
- Access to materials developed by NHS Portsmouth (<http://tiny.cc/hlp>)
- Enhanced engagement with other healthcare professionals
- A commissioning framework that highlights community pharmacy's role in public health interventions for new commissioners such as Local Authorities

## **Benefits of becoming a Pathfinder**

In return for becoming an HLP pathfinder site, you will enjoy a number of potential benefits in addition to those above:

- Backing of the national pharmacy organisations – CCA, CPPE, PSNC, NPA and RPS
- Be part of a successful and high profile innovative initiative; continue the success shown by Portsmouth to shape the potential future for community pharmacy
- Play an important role in the collection of data and evidence to influence national policy
- Opportunity to be highlighted as a leader
- Advice on implementation from the pathfinder support group
- An opportunity for community pharmacies to collect evidence and demonstrate effectiveness to future local commissioners
- Receive support for implementation:
  - An online implementation resource pack which would include a template prospectus, outline framework for level 1, quality criteria, hints and tips, an outline implementation flowchart; toolkit would be jointly-badged and accessed from all participating organisations
  - Access to the HLP Logo developed and used by NHS Portsmouth (PCTs may chose to use their own local logo)
  - Access to the *For Everybody* campaign developed and used by NHS Portsmouth and branding guidelines to support this
  - Signposting to RSPH Level 2 Health Improvement Award training and Healthy Living Champion training
- A list of outcome measures (necessary and optional)
- Mechanism for collecting and processing data; independent evaluation

- Signposting to training and support for pathfinder sites
- Facilitated pathfinder shared learning – meetings/virtual network/teleconferences; support from peers
- Additional support for local public health events from CPPE
- Access to pathfinder quarterly masterclasses to share ideas and learning
- Access to the leaders of the supporting organisations; this may be support at launch meetings face-to-face or video (dates/resource depending)

### **General principles for selecting pathfinder sites**

1. There will be no specific requirements concerning demography or geography although prospective pathfinder sites should provide details of their health challenges and any differentiators that may help us reach a decision
2. A pathfinder site is expected to be based on a geographical area rather than a single provider or provider organisation
3. The pathfinder site has flexibility around which of their local areas have the potential to become HLPs; we recommend that all pharmacies in the local area have the opportunity to become HLPs
4. The pathfinder site has flexibility around which services are commissioned and the service level agreements for each service to fit local public health needs and existing services. The HLP framework should however be adopted in principle including the enablers of workforce development, engagement with others and premises (i.e. Quality Criteria – see end of this document)
5. A site may choose to implement Healthy Living Pharmacy but not become a pathfinder. These sites will have access to the resources made available by NHS Portsmouth but will not have the other benefits associated with being a pathfinder
6. NHS Portsmouth will be part of the pathfinder network to ensure that they can continue to share their learning and take on new ideas as the initiative is extended to other areas

### **Process for selecting Pathfinders**

The process for selecting pathfinders includes the following steps:

1. Complete the attached Expression of Interest and Pre-Qualification Questionnaire forms including a declaration of commitment; this needs to be received by 8<sup>th</sup> July 2011
2. After the closing date for applications, the Pathfinder Support group will review and select the successful areas. This will take place by 22<sup>nd</sup> July 2011
3. Sites will be advised by 5<sup>th</sup> August 2011 as to whether they have been successful or not in their request to become a pathfinder site. Feedback will be provided.
4. A press release will be issued concerning the successful sites by 5<sup>th</sup> August 2011.

# Healthy Living Pharmacy Pathfinder Site

## Expression of Interest Form

This form, together with the pre-qualification questionnaire needs to be completed and sent to Barbara Parsons at PSNC by 8<sup>th</sup> July 2011 ([Barbara.Parsons@psnc.org.uk](mailto:Barbara.Parsons@psnc.org.uk)).

**Name and address of Local Pharmaceutical Committee:**

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**Name and address of Primary Care Trust/Commissioner:**

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We wish to participate in the Healthy Living Pharmacy Pathfinder initiative

We confirm that we will participate in the service elements below, covered in more detail in the pathfinder criteria questionnaire, and adhere to the terms listed:

	Tick
The pathfinder support runs until 31st March 2012 and commences on 1 <sup>st</sup> September 2011. It is subject to termination as in the points below.	<input type="checkbox"/>
The site (LPC/commissioner) will ensure that the necessary data is provided within the timescales required to enable Healthy Living Pharmacy outcomes to be evaluated.	<input type="checkbox"/>
The pharmacies participating will remain compliant with all the essential services under the Community Pharmacy Contractual Framework as part of this agreement.	<input type="checkbox"/>
The agreement may be suspended pending the outcome of any investigation into alleged fraud.	<input type="checkbox"/>

Point of contact for the development of Healthy Living Pharmacy: .....

Email address: .....

Telephone number: .....

Signed .....

Date .....

## Pre-Qualification Questionnaire for pathfinder sites

A pathfinder must be prepared to provide information to satisfy the following criteria. Please provide the answers to the following questions so that we can assess your suitability as a pathfinder site:

Requirement	Details
<p>1. Commissioner commitment to support HLP until April 2012 minimum</p>	<p>a) Who is the local commissioner of pharmacy services?</p> <p>b) What agreement have they given to implement HLP?</p> <p>c) Name of board level sponsor:</p> <p>d) Name of commissioner lead for HLP:</p> <p>e) Has the commissioner defined the services that HLPs will need to deliver at level 1 HLP?</p> <p>f) Has the commissioner committed to supporting HLP and the services commissioned through to April 2012?</p> <p>g) What funding, if any, has the commissioner committed to HLP implementation (outside of service payment)?</p> <p>h) Will the commissioner put the resource behind awarding the quality mark to HLPs and on-going monitoring?</p> <p>i) What is emerging in your local area regarding commissioning of health and wellbeing services?</p>
<p>2. LPC support and leadership</p>	<p>a) Name of LPC:</p> <p>b) Name of LPC member lead for HLP:</p> <p>c) What commitment has the LPC given to supporting HLP?</p> <p>d) What funding, if any, has the LPC committed to HLP implementation?</p> <p>e) How will the LPC support ongoing implementation of HLP?</p> <p>f) What other pharmacy networks might support these activities in your area e.g. LLPs, LPF?</p>
<p>3. An HLP implementation plan including identified funding to support the enablers and public communications campaign</p>	<p>a) Is there an HLP implementation plan outlining activities, responsibilities and timings?</p> <p>b) Has an engagement event(s) to involve local contractors and their teams been planned and if so, on what date?</p> <p>c) Has a training provider been identified for RSPH Level 2 Health Improvement Award for Healthy Living Champions?</p>

	<ul style="list-style-type: none"> <li>d) If so, who is the provider and when will this go ahead?</li> <li>e) Has a training provider been identified for pharmacy leadership development?</li> <li>f) If so, who is the provider and when will this go ahead?</li> <li>g) Have you identified a stakeholder group and if so, who does this include (role required not name)?</li> <li>h) Is there a plan for public communication?</li> <li>i) If so, what does this involve (brief outline)?</li> <li>j) Who is the communication lead supporting the project?</li> <li>k) What other plans do you have that would be useful for us to know about?</li> <li>l) Will you be prepared to provide the Pathfinder Support group with an update on progress against your action plan every quarter?</li> </ul>
<p>4. A minimum of 2 enhanced services should be commissioned from potential HLPs so that a range of services can be provided</p>	<ul style="list-style-type: none"> <li>a) Which locally enhanced services will be a requirement of level 1 HLP?</li> <li>b) Are you defining a specific number of MURs/targeted MURs as part of level 1 HLP? If so, provide details?</li> <li>c) Are these commissioned from all contractors in the area?</li> <li>d) If not, how do you expect to manage this?</li> <li>e) Have you defined services at level 2 HLP?</li> <li>f) Would you be happy to share the Service Level Agreements and fee paid (not essential)?</li> <li>g) What other requirements will pharmacies have to demonstrate to achieve their HLP quality mark?</li> </ul>
<p>5. Provide specific data to ensure consistency in evaluation using the data collection methodology and mechanism agreed by the Pathfinder Support Group</p>	<p>NB: final details will be made available as soon as possible but are still in development; the group aims to keep the measures consistent, outcome-focussed and simple</p> <ul style="list-style-type: none"> <li>a) How do contractors provide evidence currently of delivery of locally enhanced services?</li> <li>b) What data collection methods are being used in your area to collate data on pharmacy services?</li> <li>c) We require pathfinders to provide data of service delivery using a data collection platform and mechanism yet to be decided. Would your area be prepared, in principle, to provide the relevant data as required?</li> </ul>

	<p>d) What potential barriers or issues do you see in collating the data?</p> <p>e) How do you think these can be reduced?</p>
<p>6. A Healthy Living Champion (HLC) is a requirement of all HLPs (Royal Society of Public Health Level 2 Health Improvement Award)</p>	<p>a) How many HLCs do you plan to have in your area (minimum of one per pharmacy)?</p> <p>b) How will support be given to HLCs throughout HLP implementation?</p> <p>c) Will your HLCs link into a local Health trainer service?</p>
<p>7. HLPs should as a minimum, satisfy the Quality Criteria recommended by the HLP National Reference Group</p>	<p>a) Do you plan to use the Quality Criteria (as developed by the National Reference Group) as part of the HLP Quality Mark requirements?</p> <p>b) Will you be prepared to provide feedback on the quality criteria as part of the on-going and final evaluation?</p> <p>c) Are you considering amending these criteria to include anything else? If so, please provide a brief outline of what these might be.</p>
<p>8. Pathfinder sites should plan to award their first HLPs by end March 2012</p>	<p>a) When do you expect to have awarded your first HLPs with their quality mark?</p> <p>b) How many HLPs are you expecting to have by end March 2012?</p> <p>c) How many contractors are there in your area?</p>
<p>9. Health challenges and any other information</p>	<p>a) What are the top five issues faced by your area that you believe HLP might help to address?</p> <p>b) Briefly describe the demography of your area</p> <p>c) Briefly describe anything that we might find of interest concerning your area that will contribute positively to the development of HLP</p>

# Healthy Living Pharmacy: Quality Criteria

## Introduction

This self-assessment is designed to help you and the accrediting body understand whether you have met the Healthy Living Pharmacy (HLP) quality criteria for the environment you have created. This, together with other service specific criteria will help commissioners decide whether your pharmacy can be accredited as a Healthy Living Pharmacy. The evidence you put together will help towards you receiving your Healthy Living Pharmacy 'quality mark'.

These quality criteria cover the environment, staff attitudes and training, information provision and engagement with others through joined up working. These are not listed in any priority order; all are equally important.

The General Pharmaceutical Council sets standards for the safe and effective practice of pharmacy from pharmacy premises. These are the core standards that all retail pharmacies must meet. These quality criteria support a pharmacy in meeting their professional requirements when delivering healthy living services.

The HLP quality criteria will, in time, incorporate additional criteria where it is relevant for HLP levels 2 and 3.

## How to assess yourself

- This assessment is for an individual pharmacy. It is not appropriate to complete a single form for a number of pharmacies within a group, as the status may be very different in each location.
- Read the quality criteria and, together with members of your team, decide which level you are achieving.
- You may be required to provide evidence in each of the categories.
- Where you do not meet the requirements for HLP Level 1, think about what you need to do to achieve the criteria.
- The criteria for staff relate to those individuals working within the scope of the pharmacy business, they do not apply to staff working in larger stores who do not interface in the health aspects of the business.



### Quality Criteria

**Getting there / Meets HLP:** The following describes the different levels of service delivery that form the self-assessment

**Getting there:** Some arrangements are in place and the pharmacy is moving towards achieving the criteria. If arrangements are not in place, there is a robust action plan to achieve the criteria.

**Meets HLP:** Arrangements are in place that meets all criteria and overall the service is working at that level of provision.

## Workforce Development

The aim is ensure that, irrespective of premises, the pharmacy staff demonstrate that they embrace the healthy living ethos.

### 1. Staff attitude, skills, values and training

- All pharmacy staff understand the basic principles of health and wellbeing
- All pharmacy staff have an understanding of public health needs in their area
- Members of staff receive training on issues of confidentiality and consent issues relevant to the member of the public receiving the service
- The team are friendly, welcoming and sensitive to the need for privacy for different individuals seeking advice and health services
- Members of the pharmacy team are able to communicate effectively and sensitively when recruiting members of the public to health and wellbeing services or providing them with advice
- The team recognise the need for equality and diversity; providing a person-centred approach
- The team understand that every interaction is an opportunity for a health intervention
- There is a clear leader within the team who is responsible for creating an ethos of proactive health and wellbeing within the pharmacy
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	Getting there	Meets HLP
<b>Public Health needs</b>	The team leader has an awareness of the local public health needs outlined in the Joint Strategic Needs Assessment and there are plans to make other members of the team aware. There are plans to provide all members of the team with training on the basic principles of health and wellbeing	All staff have an awareness of the local public health needs outlined in the Joint Strategic Needs Assessment. They have been trained in the basic principles of health and wellbeing and are able to advise the public proactively
<b>Privacy</b>	Staff, including Medicine Counter Assistants (MCAs) are trained in confidentiality and are sensitive to the needs of members of the public being offered a health and wellbeing service e.g. weight management, sexual health, stop smoking; but these are not always acted upon	Staff, including MCAs are trained in confidentiality and are sensitive to the needs of members of the public being offered a health and wellbeing service e.g. weight management, sexual health, stop smoking, alcohol advice
<b>Fraser Guidelines</b>	Fraser guidelines are understood by some staff and assessment is sometimes part of routine practice	Fraser guidelines are understood by all appropriate staff and assessment of the individual is a routine part of practice
<b>Service awareness</b>	The staff explain which services are available but this is reactive rather than proactive and not always explained as NHS and/or private services	The staff are proactive in explaining the NHS and/or private services that are available from the pharmacy

<b>Staff role</b>	Staff sometimes explain who they are, the services on offer and provide advice on health and wellbeing when asked. The public are sometimes directed to another member of the team when appropriate. There is some evidence of continuing professional development but this is not clearly on view to the public	Staff routinely explain who they are and the services on offer. They are proactive in offering advice on health and wellbeing, making the most of every interaction. The public are directed to the most appropriate member of the team. Individuals wear name badges. The public are confident that they can trust the service and advice received.
<b>Raising difficult issues</b>	Staff understand that they should approach members of the public sensitively to discuss public health issues but have not yet completed training	Staff receive training on how to approach member of the public to discuss difficult public health issues, provide advice and recruit into health and wellbeing services e.g. sexual health services, weight management, stop smoking
<b>Behavioural change</b>	Staff are able to make some brief interventions but do not yet understand the need to support behavioural change	Staff are able to make brief health interventions and have an awareness that the member of the public may need additional support for behavioural change. In this instance they are able to either provide this support or signpost appropriately
<b>Pharmacist availability</b>	The pharmacist proactively engages with the public on prescription interventions. The pharmacist tends to be more reactive than proactive with respect to public health advice	The pharmacist is highly visible to the public and readily engages in proactive public health advice. The operational processes allow for this and layout may be considered to facilitate more open access
<b>Leadership</b>	The business has identified a leader who has yet to complete or implement any leadership development.	There is a 'can do' attitude within the pharmacy team and this is driven through effective leadership. A member of the team proactively demonstrates leadership capabilities and is likely to have undertaken some leadership development. The leader provides a vision for the pharmacy, has jointly developed an action plan and is a positive role model

## Engagement

The aim is to demonstrate that the pharmacy team are active in their local community; engaging with the public, healthcare professionals and commissioners.

### 2. Joined up working

- The pharmacy is an active member of the local community and understands how to respond to their local needs
- The pharmacy team are an integral part of local healthcare delivery and engage with other healthcare professionals
- The pharmacy team understands the need to deliver consistent services as part of their commitment to commissioners and leads on integrated health and wellbeing initiatives

	Getting there	Meets HLP
<b>Understand local needs</b>	The patient survey has been developed to include questions linked to public health and wellbeing services but is only used annually and the results do not influence the services offered locally	The patient survey has been developed to include questions linked to public health and wellbeing services so that the pharmacy responds to local needs. The survey is proactively marketed and used to engage the public in developing services to meet their needs
<b>Engagement with GP practice</b>	The pharmacy team has good operational engagement with the practice so that repeat prescriptions are managed effectively and issues are resolved quickly	The pharmacy team clinically engages with the local GP practices and appropriate members of the team to ensure that there are formalised referral protocols and follow up protocols. Where the GP practice is reluctant to engage, the pharmacy is able to demonstrate what they have done to approach their local practice. There may be involvement in the development of local patient care pathways and the role of the pharmacy is defined within these
<b>Signposting</b>	The pharmacy team have developed signposting resources beyond those provided by local commissioners. Relevant referral happens as appropriate	Members of the pharmacy team proactively signpost and/or directly refer patients into appropriate services, notifying the GP when necessary and in accordance with local agreements
<b>Other providers</b>	The pharmacy team link into other service providers and groups on an ad hoc basis	The pharmacy team are aware of and link into other appropriate groups depending on the services commissioned and level of HLP e.g. DAAT team, alcohol groups, specialist clinics, Health Trainer service, local authorities and social services, local patient support groups, LINK, etc.

<b>Commissioner's needs</b>	The pharmacy team knows who is commissioning the service and sometimes but not always delivers against service expectations; reporting back may be beyond timelines agreed	The pharmacy team has a good understanding of their commissioners' priorities and knows who to contact, consistently delivers against service expectations and reports back within timelines specified. The pharmacy establishes links with their local public health team and understands the role the Local Pharmaceutical Committee have to represent their interests locally when services are commissioned
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## Environment

The aim is to provide an environment that embraces the ethos of a Healthy Living Pharmacy, including an atmosphere created by premises as well as staff attitudes and actions. The environment can also contribute to ensuring confidentiality for service users.

### 3. Professional environment

- The 'professional' environment reflects the impression and ethos of a healthy living pharmacy to the public e.g. the appearance and dress of the staff and premises
- A healthy living pharmacy takes its responsibility to contribute to a sustainable environment seriously and this is reflected in the way they operate their business
- It is clear to the public that free, confidential advice on public health and wellbeing can be accessed

	<b>Getting there</b>	<b>Meets HLP</b>
<b>Appearance</b>	The pharmacy and consultation area are clean and uncluttered; although the merchandise does not necessarily reflect a healthcare environment	The pharmacy and consultation area are clean, uncluttered and the merchandise and environment reflect a professional healthcare and healthy living environment e.g. products for sale, health promotion materials, etc
<b>Equipment and paperwork</b>	There is an attempt to ensure that all equipment and paperwork necessary for service delivery is available but this is not consistent	The equipment and paperwork necessary for service delivery is always available within the consultation room together with health and wellbeing material relevant for the service
<b>Awareness of private consultation area</b>	The consultation room is clearly indicated to the public but has simple signage that does not highlight the presence of a private and confidential area; the doors may be transparent	The consultation area is prominent and it is clear to the public that they can access this area to have private conversations with a healthcare professional. The windows and doors allow for privacy e.g. blinds/opaque glass

<b>Sustainable development</b>	There is a clear plan for the pharmacy to contribute to a sustainable environment, with room for improvement	The pharmacy recycles their business waste in a responsible way. HLPs encourage people to be active outdoors and undertakes its business in a way that minimises the impact on the environment e.g. energy saving light bulbs, sensor lighting, energy efficient equipment such as fridges, timers, low emission vehicles for delivery, using fewer plastic bags, etc.
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#### 4. Information environment

- The pharmacy gives the public a clear impression that health and wellbeing advice and services are readily available
- There are appropriate materials readily available for members of the public on health and wellbeing. This information is refreshed and checked regularly to ensure that it is current and relevant
- The information available appeals to a wide range of the public including men and women, young people, smokers, people with long term conditions, learning difficulties and older people. Where the community includes a significant ethnic minority group, then their needs must be accommodated
- There is a clearly marked and accessible health promotion zone

	<b>Getting there</b>	<b>Meets HLP</b>
<b>Promoting a healthy living environment</b>	Some attempts have been made to promote a healthy living environment e.g. posters and leaflets	The pharmacy environment is clean, welcoming and gives the impression that health and well being services and advice can be accessed readily. Once accredited, the HLP logo is displayed in prominent places and the HLP services that are available to support health and wellbeing are clearly identified.
<b>Health promotion zone</b>	Some materials available in an area but this is not clearly identified for the public	There is a dedicated health promotion zone clearly marked and accessible to the public. This may include a touch-screen, plasma screen, books, DVDs, leaflets, promotional displays etc. The information available is likely to be issued by recognised bodies and not promotional
<b>Resources available</b>	Appropriate reading materials are available although these may not be up to date or relevant to local needs and priorities	There is a good display of health and wellbeing resource and this appeals to a wide range of the local public including the groups above and ethnicity is accommodated where appropriate. Resources are checked every month. This may include access to touch-screen displays by the public. Some of the resources are relevant to locally available services and there may be a local health and wellbeing notice board
<b>IT connectivity</b>	There is a computer in the consultation room but this is not networked to the PMR	IT system in the consultation room with access to the internet and networked into PMR system