**Community Pharmacy Assurance Framework (CPAF)**

**Paperwork Completion and Submission Guidance 2019/2020**

Please see our reminder of the documents that pharmacies are required to complete and submit to the Area Team and the timescales for doing this. The categories are split into Monthly, Annually, Quarterly and Adhoc.

**Please note that these submissions form part of your Terms of Service and failure to submit the requested documents by the deadlines provided may result in breach notices being issued or withholding of payments.**

Paperwork to be sent to the address below unless otherwise stated:

**(NHS England (West Midlands) Pharmacy Team, via email to:** [**England.pharmacypaymentswm@nhs.net**](mailto:England.pharmacypaymentswm@nhs.net)

Or via post to Pharmacy Team, NHS England, St Chads Court, 213 Hagley Road, Edgbaston, Birmingham, B16 9RG (It is advised that anything sent via the post is sent via **Recorded Delivery** and a record of the tracking details kept)

**Monthly Submissions**

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| **Document** | **Link to form/template/Further Information** |
| **Certificate of Analysis/Conformity**  **As from the 1st Dec 2015** (**COA)/ Conformity (COC) or invoice should be kept secure on file within the pharmacy.** (**Do not send them to NHS England West Midlands**) | Further information  <http://psnc.org.uk/wp-content/uploads/2013/07/Dispensing-Factsheet-Unlicensed-specials-and-imports.pdf> |

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| **Document** | **Link to form/template/Further Information** |
| **MUR Quarterly Reports**  Information relating to MURs completed during that quarter to ensure that the targets are being met.  To be completed quarterly and submitted no later than 10 working days from the last day of June, September, December and March. | **You are now required to submit quarterly submissions electronically to NHSBSA**  [**http://www.nhsbsa.nhs.uk/PrescriptionServices/5539.aspx**](http://www.nhsbsa.nhs.uk/PrescriptionServices/5539.aspx)  **For Further Information please see PSNC Website**  <http://psnc.org.uk/services-commissioning/advanced-services/murs/mur-record-keeping-and-data-requirements/>  **Please note that you are not required to submit “Nil” reports if you have not submitted any claims in that quarter** |
| **NMS Quarterly Reports**  Information relating to NMS’ undertaken for that quarter  To be completed quarterly and submitted no later than 10 working days from the last day of June, September, December and March. | **You are now required to submit quarterly submissions electronically to NHSBSA**  <http://www.nhsbsa.nhs.uk/PrescriptionServices/5539.aspx>  **For Further Information please see PSNC Website**  <http://psnc.org.uk/services-commissioning/advanced-services/nms/nms-data-requirements/>  **Please note that you are not required to submit “Nil” reports if you have not submitted any claims in that quarter** |

**Quarterly Submissions**

**Annual Submissions**

To be completed annually and submitted no later than 10 working days from the last day of March

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| **Document** | **Link to form/template/Further Information** |
| **Clinical Audit**  Each year pharmacies are required to carry out two audits as part of the Community Pharmacy Assurance Framework.  **Please note we do not accept audits on Owings**   1. clinical audit each year, the topic of which the pharmacy chooses   (Please keep supporting evidence with your Clinical Audit).   1. One nationally agreed audit to be undertaken by all pharmacies. You will be notified in due course of the topic of the national audit   **Copies of the full audit (including supporting information) must be retained on the pharmacy premises and be made available on request or during CPAF visit** | <http://psnc.org.uk/contract-it/essential-service-clinical-governance/clinical-audit/> |
| **Community Pharmacy Patient Questionnaire (CPPQ)**  **The results of the patient questionnaire must be published.**  The results of the survey, or as a minimum the areas identified as the greatest potential for improvement and the action being taken to improve the performance, along with the areas in which the pharmacy is performing strongly need to be sent to NHS England. The results need to be published and can be displayed in the pharmacy, published on NHS.UK or on the pharmacy website | <http://psnc.org.uk/contract-it/essential-service-clinical-governance/cppq/> |
| **Annual Complaints Report**  You need to complete and return a complaints report even if you have received no complaints.  **Please ensure that you include your FCode and note which annual period this covers on the form**. | Annual Reports – Summary of Complaints  <http://psnc.org.uk/contract-it/essential-service-clinical-governance/complaints/> |
| **Data Security and Protection Toolkit**  All pharmacies must complete and submit the Data Security and Protection Toolkit annually by 31st March each year. This will also need to be redone if a change of ownership takes place.  The Data Security and Protection Toolkit is an online self-assessment tool that allows organisations to measure their performance against the National Data Guardian’s 10 data security standards. All organisations that have access to NHS patient data and systems must use this toolkit to provide assurance that they are practising good data security and that personal information is handled correctly.  From 2018/19 the Data Security and Protection Toolkit has replaced the former NHS IG Toolkit. The NHS IG Toolkit website is still available to review previous years submissions.  Please note that if you are paying a company to submit on your behalf, please ensure that the work/evidence to support your submission is completed as this may be requested by NHS England. Failure to have the required evidence to support the submission may result in breach notices being issued. | DSPToolkit Site  <https://www.dsptoolkit.nhs.uk/>  Further information  <http://psnc.org.uk/contract-it/pharmacy-it/information-governance/> |

**Adhoc Submissions**

These are links to forms that need to be completed when applicable

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| **Document** | **Link to form/template/Further Information** |
| **MUR - PREM 1 Form**  This form will need to be submitted prior to undertaking MURs on the premises. This will need to be resubmitted following any relocation or change of ownership. With each application the pharmacy will need to send the MUR Certificate for each pharmacist that will be undertaking MURs. If any additional pharmacists undertake MURs after the initial submission, you must send their MUR certificates to the AT. | PREM 1 Form  <http://psnc.org.uk/services-commissioning/advanced-services/murs/mur-premises-requirements/> |
| **MUR - PREM 2A Form**  This form will need to be submitted if you wish to undertake MUR off-site at alternative premises with a consultation area (e.g. a specific room in a local GP practice). Patient consent must be gained from the patient prior to application and the pharmacists MUR Certificate and recent Enhanced DBS Certificate submitted with the PREM 2A form | PREM 2A Form  <http://psnc.org.uk/services-commissioning/advanced-services/murs/mur-premises-requirements/> |
| **Document** | **Link to form/template/Further Information** |
| **MUR – PREM 2B Form**  This form will need to be submitted if you wish to undertake an MUR off-site in a patients home. Patient consent must be gained from the patient prior to application and the pharmacists MUR Certificate and recent Enhanced DBS Certificate submitted with the PREM 2B form. | PREM 2B Form  <http://psnc.org.uk/services-commissioning/advanced-services/murs/mur-premises-requirements/> |
| **MUR – PREM 2C Form**  This form will need to be submitted if you wish to undertake an MUR offsite in a specific premises or a category of premises for a category of patients (e.g. a care home for care home residents). Rather than an individual form for each patient, we will accept an Excel Spreadsheet of patients details including Patient Name, Address, Reason for Selection for an MUR and confirmation that you have gained consent. You will need to have gained consent from the patient for the MUR prior to the application being made | PREM 2C Form  <http://psnc.org.uk/services-commissioning/advanced-services/murs/mur-premises-requirements/> |
| **NMS Declaration Form**  Prior to providing NMS you must inform the AT of their intention to do so; | NMS Pharmacy Contractor Declaration Form.  <http://psnc.org.uk/services-commissioning/advanced-services/nms/notifying-nhs-england-prior-to-providing-the-nms/> |
| **Appliance Use Review (AUR) Application Form**  Before beginning to provide the service, you must notify the AT of their intention to provide the service and inform them whether the service will be provided at patients’ homes and / or at the pharmacy. The pharmacy contractor must also provide the AT the following information in relation to pharmacists or specialist nurses who are to provide AURs:   * Full name; * Documentary evidence of qualifications (i.e. education, training or experience in respect of the use of specified appliances); * Details of competency in respect of the use of specified appliances (i.e. details as appropriate of relevant clinical training and practice in respect of the use of specified appliances). | AUR Notification Form  <http://psnc.org.uk/services-commissioning/advanced-services/aurs/> |
| **Stoma Appliance Customisation (SAC) Application**  The pharmacy must notify the AT that it wishes to provide the service before beginning to provide the service | Form APPL02 – Stoma Customisation AT Notification  <http://psnc.org.uk/services-commissioning/advanced-services/sac/> |
| **ICO Data Protection**  All pharmacies must be registered with the Information Commissioners Office. Please submit your certificate when your pharmacy first opens and upon each renewal. Please note that this will need to be resubmitted following a change of ownership. As you are probably aware registration is a legal requirement and every organisation that processes personal information must register with the ICO unless they are exempt. Please provide the Area Team with your Z number and expiry date once registered. | <https://ico.org.uk/for-organisations/register/> |
| **Pre-Registration Training Grant Application**  As of 1st April 2017 NHS England Pharmacy Team (West Midlands) have been processing the Pre-Registration Grant Application Forms for pharmacies in the West Midlands area.  The Pre-Registration Training Grant is currently set at £18,440 per year and payment is made by NHSBSA in arrears.  Further details about the training grant is set out in Part XIII of the Drug Tariff.  If Pharmacy Contractors would like to apply for Pre-Registration Training Grant please email the Pre-Reg Funding Application form to NHS England together with*:* ·         Pre-Registration Grant Application Form must be signed by the Tutor for the trainee. *·* Pre-Registration Training Records (not to be confused with Training plan).  The Pre-Registration student will have a copy of this from the GPhC, there may be delays with GPhC sending training records out to trainees. To avoid any delays of processing applications, please forward the email from GPhC sent to the trainee confirming approval to start their pre-registration training with a start and end date. Please note that we can only process the application on the understanding the Contractor will send us the training records when received or confirm the exact end date in writing via email to[*england.pharmacypaymentswm@nhs.net*](mailto:england.pharmacypaymentswm@nhs.net) *·* If you do not hear from NHS England Pharmacy Team within a month of sending the Pre-Registration Training Grant Application Form, then please do contact us on 0113 825 5273/1686  **We would encourage all Contractors to submit their claims for the pre-registration trainee grant at the beginning of the training period to avoid any delays with payment (in line with Drug Tariff).   The grant will be paid monthly in arrears.**  Payment can be made to any contractor that has taken on a trainee up until the point that the trainee has sat and failed two registration exams. Payment for trainees to undertake 6 months supervision after failing the exam twice will not be paid.  **Please note if the training ceases at any point, contractors are required to notify us immediately** [***england.pharmacypaymentswm@nhs.net***](mailto:england.pharmacypaymentswm@nhs.net) | Pre-Reg Funding Application Form  <http://psnc.org.uk/funding-and-statistics/funding-distribution/pre-registration-training-grant/>  Drug Tarrif  <http://www.drugtariff.nhsbsa.nhs.uk/> |
| **Document** | **Link to form/template/Further Information** |
| **Closures During Contracted Hours**  At any time that a pharmacy is unable to open during contracted hours, you must notify the AT as soon as practically possible/ E.g Pharmacist late/power failure/vandalism to: [England.pharmacypaymentswm@nhs.net](mailto:England.pharmacypaymentswm@nhs.net) | Annex 6 – Unplanned Temporary Suspension Of Services  <https://www.england.nhs.uk/wp-content/uploads/2013/07/opn-hrs-annex6.docx> |
| **Repeat Dispensing**  Please send copies of training certificates for Repeat Dispensing for all pharmacists including locums | Further Information  <https://www.cppe.ac.uk/services/repeat-dispensing?ByTheme=true&theme=27&ID=28>  <http://psnc.org.uk/services-commissioning/essential-services/repeat-dispensing/> |
| **Opening Hours/ Changes to Core/Supplementary Hours**  All Applications for changes to Core Hours and notifications to change Supplementary Hours are to be submitted to: [england.pharmacypaymentswm@nhs.net](mailto:england.pharmacypaymentswm@nhs.net) | Further Information  <http://psnc.org.uk/contract-it/pharmacy-regulation/opening-hours/> |

**“Pharmacy Contractors” please sign up to “NHS Networks” Pharmacy Information Service - West Midlands for all the latest news and info on pharmacy from the Local Office .  This is the platform the Local Office is using to communicate with contractors: To Join:**

 Log onto  NHS Networks:  [http://www.networks.nhs.uk/@@register](http://www.networks.nhs.uk/%40%40register):  search on “NHS networks” in Google or your usual search engine.

Join: click “join in” (under NHS logo at top of page) and register your full name and email address.

You should accept the terms and conditions and click on” sign up”  You should then receive an email from NHS Networks that will allow you password protected access.

Access: when you have access to NHS Networks please log in and use the Search option to find the Pharmacy Information Service – West Midlands. You can use the down arrow by all content to refine your search to find networks. Now click on this network.

Now you need to apply to join this specific network using the “apply to join” button (it’s a small button below the grey bar at the top of the page)

Applying to join generates an email to Michelle Deenah who will confirm your membership by return.