

Community Pharmacy Assurance Framework process 2019/20

Community pharmacies across England will be asked to complete the CPAF screening questionnaire as part of the updated Community Pharmacy Assurance Framework.

Please note that the CPAF screening questionnaire was updated in 2018 and this CPAF screening survey again includes the two questions focusing on safeguarding and pharmacy audits, that replaced the questions on owings and prescribed medicines advice that have been retired and no longer need to be answered.

The results of this screening questionnaire, **along with other locally held information** such as any concerns that have been identified previously by regional teams, the Provider Assurance team or from other NHSBSA data, will help NHS England local teams to identify which pharmacies should be considered for a contract monitoring visit and asked to complete the full CPAF questionnaire.

The process in the table below describes two sets of visits and factors to take into account as part of the overall assurance process. The table below includes further detail on:

- Follow up visits to a selection of pharmacies to validate the answers given in the screening questionnaire.
- Consideration and process to be followed to identify those pharmacies where a comprehensive contract monitoring visit is required.

It is anticipated that a total of 3-5% of pharmacies in a region will be visited throughout the course of the year. This will include those visited to validate their self-assessments **and** those who are visited following completion of the full CPAF questionnaire.

June 19	All pharmacies to be asked to complete the CPAF screening questionnaire by the BSA. The questionnaire will be available for all pharmacies to complete from: Monday 3 June 2019 until Sunday 30 June 2019
July 19	Results of screening questionnaire to be made available on NHSBSA portal
July / Aug 19	Regional teams to analyse CPAF screening questionnaire responses
Sept / Oct 19	<p>Visits to validate answers given to the screening questionnaire:</p> <p>Arrange to visit 1-2% of pharmacies in Sept / Oct to validate the answers they have given to the screening questionnaire.</p> <p>This selection of pharmacies should include some who have scored 3s for all questions in the screening questionnaire and some who have scored a mixture of 2s and 3s.</p> <p>These visits should be low key follow up visits where evidence can be verified and pharmacies are given an opportunity to showcase added value and any local initiatives undertaken. This will help regional teams to observe areas of good practice and also to identify any situation where the answers are inconsistent with the evidence available. If inconsistent answers are</p>

	<p>found to have been provided, these pharmacies may be considered for completing the full CPAF.</p> <p>The superintendent's offices of multiples should be informed if any of their pharmacies are to be visited.</p>
Oct 19	<p>Full CPAF pre-visit questionnaire and visits</p> <p>Decide which pharmacies will be asked to complete the full CPAF questionnaire (1-3% of the pharmacies in the region – but see note below*). The principle is that these are the pharmacies that may be visited, but there will be some who you decide not to visit following their more in depth response.</p> <p>Prioritise those who will be asked to complete the full questionnaire taking into account the following factors and sources of information:</p> <ul style="list-style-type: none"> • Non completion of CPAF screening questionnaire (mandatory selection factor – but see note below*) • CPAF screening questionnaire response – overall score less than 2 or where a contractor has scored Level 1 or below for more than three questions • Pharmacies identified through the part 1 verification process above as not having the evidence to support their CPAF screening returns • Any new pharmacies which have been included in the relevant pharmaceutical list since June of the previous financial year (excluding those that relocated during the intervening period or those already visited) that have not already been visited • Organisational changes should be considered, including changes of ownership, those where there has been a share purchase or a change in superintendent pharmacist • Concerns relating to patient safety, complaints, adverse NHS Choices comments and other miscellaneous concerns (irrespective of the score for the screening questionnaire) that have been identified previously by regional teams, the Provider Assurance team or from other NHSBSA data; • Poor communication and responses to requests for information • Outliers in terms of numbers of unplanned closures reported • Issues identified in relation to compliance with core and supplementary opening hours • Outliers in terms of out of pocket expenses • Pharmacies identified as low priority for a visit in the previous year's assurance programme <p>In principle, the pharmacies who will be asked to complete the full CPAF questionnaire will be those who the team intend to visit – approximately 1-3% of the total pharmacies in the region. Therefore, the number selected should reflect that total. For example:</p> <p>In one area previously, of 500 pharmacies in the area 10 (2%) selected for a screening questionnaire validation visit 15 (3%) selected for a monitoring visit and asked to complete the CPAF pre-visit questionnaire</p>

	<p>Of those 15, three questionnaires returned providing sufficient assurance that a visit is not deemed necessary, therefore 12 visits carried out.</p> <p>* If there are a high number of pharmacies in an area that did not complete the screening questionnaire, there may be a higher proportion asked to complete the full CPAF questionnaire. Regional teams should take into account past performance and reasons for non-completion where known. In some exceptional cases, a decision may be taken not to ask the pharmacy to complete the full questionnaire. For example where a pharmacy that is usually responsive and known to be compliant is forthcoming with a valid reason for not having completed the screening questionnaire.</p>
Oct/Nov 19	<p>Having identified the pharmacies –</p> <ul style="list-style-type: none"> • Provide the list to the NHSBSA (nhsbsa.help@nhs.net) no later than 11 October 2019 • Send a letter to the pharmacy informing them that they will be asked to complete the full CPAF questionnaire and that the request and link will be sent to them by the NHSBSA • Inform the superintendent's office of multiple pharmacies if any of their branches have been asked to complete the questionnaire • Inform the LPCs that selected pharmacies have been asked to complete the questionnaire, but do not identify the pharmacies • The questionnaire will be available for selected pharmacies to complete from Thursday 31 October – 1 December 2019. PDFs of completed questionnaires will be emailed to local offices on a weekly basis throughout November as they are completed • The full set of completed questionnaires will be available on the NHSBSA portal during December. <p>A PDF of the full CPAF questionnaire will be published on the NHS BSA website for all pharmacies to access who wish to use it for training or self-assurance purposes.</p>
Dec 19	<p>Make a final decision about which pharmacies will be visited and make arrangements for those visits to take place from January to March 2020.</p>
Jan to March 20	<p>Undertake visits based on the full CPAF responses or in cases where the pharmacy has not completed the CPAF questionnaire.</p>