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| **Rationale of Checklist** | | | |  |
| This checklist will be completed by the CPSC sub-committee for every new or recommissioned service specification sent to CPSC for comment/consultation. The response summary is completed after consultation and agreement by the sub-committee.  The Checklist contains the CPSC sub-committee’s comments/recommendations for any requested changes to the proposed/draft service specification in order to achieve / improve further the green rating. It will be sent to the service commissioner for consideration of amendments ideally prior to go-live of the service.  CPSC’s purpose is to work positively with commissioners to ensure high quality outcomes from the service, which are both professionally and commercially viable for contractor participation. | | | |  |
| **Service and Commissioner** | | | |  |
| Minor Ailments Enhanced Service  Portsmouth CCG | | | |  |
| **Response summary feedback from CPSC** | | | |  |
|  | | | |  |
| CPSC has rated this service specification as GREEN based on the comments made below. Our recommended actions to further improve the service are:   1. As the IT platform is PharmOutcomes, can the payments be made monthly rather than quarterly. 2. The commissioner to provide details of relevant referral points. | | | |  |
| **Time-line & Next Steps for CPSC** | | | |  |
| CPSC will publish this service participation rating to contractors in **10 days’ time.**  Publication of this recommendation will be via individual email and posting on our website.  Commissioners are asked to please respond promptly with feedback / proposed changes so that they can be included within CPSC’s recommendation to its contractors. | | | |  |
| **Commissioners response to CPSC feedback** | | | |  |
| Please enter response here, returning promptly to [alison.freemantle@cpsc.org.uk](mailto:alison.freemantle@cpsc.org.uk) | | | |  |
| **Point Covered** | | | **Action or Notes** |  |
|  | | **CPSC Consultation** | |  |
| CPSC Consulted? | | | Yes |  |
| CPSC Consulted with sufficient time to comment? | | | Yes |  |
|  | | **Remuneration** | |  |
| Does remuneration include/cover set up costs, backfill, consumables etc..? | | | No set up costs for this service. |  |
| Does the payment structure use a system that is suitable for all contractors and are the payment terms acceptable? | | | Yes  PharmOutcomes used for invoicing and data collection.  Payments are made quarterly. |  |
| Where equipment is required who provides/calibrates/services this? If contractor, does remuneration sufficiently cover the cost of this? | | | No equipment required for service delivery. |  |
| Is remuneration fair? | | | Consultation fee and drug cost (+VAT) renumeration.  Reduced consultation fee for patients accessing service from CPCS. |  |
|  | **Is/does the Service.....** | | |  |
| Sustainable? | | | Yes |  |
| Start/ end date | | | 1/4/2020 - 31/3/2022  2 years |  |
| Clinically sound and in line with appropriate National or local guidance? | | | Yes  The service is available to any Portsmouth resident that is:   * Registered at a registered Portsmouth CCG GP practice or resident in Portsmouth postcodes PO1 to PO6 * The patient or their dependent children are on low income:   + HC2 Charges Certificate   + Income Support (IS)   + Income-related Employment and Support Allowance (ESA)   + Income-based Jobseeker’s Allowance (JSA)   + Universal Credit (UC)   + NHS Tax Credit Exemption Certificate   + Pension Credit Guarantee Credit (PCGC)   AND suffering one of the included minor ailments.  Inclusion and exclusion criteria are individual to the condition being treated and can be found in the protocols. |  |
| Enhance patient care? | | | Yes |  |
| Have suitable monitoring arrangements and termination clauses? | | | The commissioner may terminate or suspend the service if there are reasonable grounds for concern.  The commissioner may assess service using service user experience.  The commissioner will review with the pharmacy any complaints, near misses or serious incidents. |  |
| Enhance relationships with other HCPs? | | | Yes, reduces burden of unnecessary GP surgery appointments for minor ailments.  Encourages people to use community pharmacy first for minor ailments.  Surgeries are able to signpost patients to community pharmacy. |  |
| Deliverable? | | | Yes |  |
| Attractive enough for contractors to consider it worthwhile? | | | Yes |  |
| Have performance criteria that supports a quality service? | | | Pharmacy must have:   * Any appropriate health promotion material provided by CCG * Annually reviewed SOP   The pharmacy must participate in an annual CCG led audit of the service, content of to be agreed with LPC. |  |
|  | **Service Delivery** | | |  |
| Are the performance measures reasonable and achievable? | | | No performance measures documented |  |
| Is the administration proportional to size or service and remuneration? | | | Yes |  |
| Are any reporting systems suitable to all contractors? | | | Yes  PharmOutcomes |  |
| Is the training required for the service reasonable? Consider accessibility to CPPE for non-pharmacist/technician staff. | | | Recommended training:  CPPE Common clinical conditions & minor ailments  Local training guide on PharmOutcomes  Be able to show ongoing CPD. |  |
| Does record keeping or sharing of information requirements meet current IG regulations. | | | Yes  All records are kept on PharmOutcomes. |  |
|  | **Miscellaneous Information** | | |  |
| Any other information specific to this service. | | | Protocols for conditions covered by the scheme are on PharmOutcomes.  Local formulary. |  |
| Suggested RAG Rating | | |  |  |