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| **Rationale of Checklist** | | | |
| This checklist will be completed by the LPC sub-committee for every new or recommissioned service specification sent to the LPC for comment/consultation. The response summary is completed after consultation and agreement by the sub-committee.  The Checklist contains the LPC 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.  The LPC’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. | | | |
| **Response summary feedback from the LPC** | | | |
| **NRT Voucher Service, IOW Public Health** | | | |
| The LPC has rated this service specification as Green based on the comments made below. Our recommended actions to further improve and rate the service green are:   1. Payment period for automatic claims should ideally be one month in arrears. 2. Reimbursement of NRT should also include 5% VAT. 3. As the remuneration fee for providing the service is low, we would expect the PharmOutcomes data entry to reflect this by being just quick and minimal information entry only. Time consuming entries are a barrier to participation. 4. Any audit participation required by the community pharmacies should be of a reasonable scale in proportion to the remuneration rate involved. | | | |
| **Time-line & Next Steps for the LPC** | | | |
| The LPC will publish this service participation rating to contractors on **15th November 2016.**  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 the LPC’s recommendation to its contractors. | | | |
| **Commissioners response to LPC feedback** | | | |
| Please enter response here, returning promptly to [richard.buxton@hampshirelpc.org.uk](mailto:richard.buxton@hampshirelpc.org.uk)   1. Agree to change to monthly cycle 2. Agree to add 5% VAT as requested 3. Confirmation of service delivery only – no other entry required 4. No audit participation from pharmacies required   **As a result of the agreed changes, this service has now moved from Amber to Green status.** | | | |
| **Point Covered** | | | **Action or Notes** |
|  | | **LPC Consultation** | |
| LPC Consulted? | | | Yes |
| LPC Consulted with sufficient time to comment? | | | Yes, but then only received service spec 2 days before service proposed to become active. However, not yet seen any communications for contractors. Go-live date of 1st November |
|  | | **Remuneration** | |
| Does remuneration include/cover set up costs, backfill, consumables etc..? | | | No set up costs.  Consumable costs covered at DMD database quoted prices + 5% VAT  Backfill costs for training not required |
| Does the payment structure use a system that is suitable for all contractors and are the payment terms acceptable? | | | Yes, PharmOutcomes.  Automated claims, paid monthly in arrears based on activity recorded on PharmOutcomes. |
| Where equipment is required who provides/calibrates/services this? If contractor, does remuneration sufficiently cover the cost of this? | | | No equipment required  Use of PharmOutcomes required to enter information. |
| Is remuneration fair? | | | Low, however fee is for supply & recording only.  Supply fee initially followed by two follow-up supply fees.  Additional reimbursement for the product supplied at the cost quoted on the DMD database + 5% VAT. |
|  | **Is/does the Service.....** | | |
| Sustainable? | | | Yes |
| Clinically sound and in line with appropriate National or local guidance? | | | Yes  DOH 1998 Smoking Kills  NICE 2006 Brief Interventions & Referral  NICE 2008 Smoking Cessation services in Primary Care  NICE 2010 How to stop smoking in pregnancy & following childbirth  DOH 2010 A smoke free future  DOH 2011 Tobacco Control Plan  NICE 2013 Smoking cessation in secondary care  IW Council Public Health Report 2013  IOW JSNA |
| Enhance patient care? | | | Yes |
| Have suitable monitoring arrangements and termination clauses? | | | Service will be continuously reviewed and audited by the Wellbeing Service. It is the Wellbeing advisors (Health Trainers) responsibility to document and maintain records and patient notes, which will include advice given, counselling and treatment received.  No termination clauses. |
| Enhance relationships with other HCPs? | | | Yes, good locally with the Public Health Wellbeing Service (Health Trainers) |
| Deliverable? | | | Yes.  Service will be available Monday to Friday 9am – 5pm (Sat & Sun dependent on pharmacy opening hours).  Patients present with valid ID and information matching that as supplied by the Health Trainer via PharmOutcomes.  Supply is pre-specified NRT to clients over 18 years of age, living on the Isle of Wight and referred by the Wellbeing advisor only.  Liaise with Wellbeing service regarding any potential issues arising from supply (contact details will be on PharmOutcomes) |
| Attractive enough for contractors to consider it worthwhile? | | | Yes |
| Have performance criteria that supports a quality service? | | | Yes  All patients are sent to community pharmacy for supply.  Referrals are responded to within 3 working days.  Communication between Wellbeing service & pharmacists. |
|  | **Service Delivery** | | |
| Are the performance measures reasonable and achievable? | | | N/A |
| Is the administration proportional to size or service and remuneration? | | | Yes |
| Are any reporting systems suitable to all contractors? | | | PharmOutcomes requires internet access. |
| Is the training required for the service reasonable? Consider accessibility to CPPE for non-pharmacist/technician staff. | | | Pharmacies must complete a self-declaration on PharmOutcomes confirming provision of the service.  No recommended additional training required. |
| Does record keeping or sharing of information requirements meet current IG regulations. | | | Yes, records of supply are digitally entered on PharmOutcomes. |
|  | **Miscellaneous Information** | | |
| Any other information specific to this service. | | |  |
| Suggested RAG Rating | | |  |