

Scheme to provide CCG funding for practice pharmacist / pharmacy technician resource in Western Locality GP practices in 2017/18 (OPS Plus) v1.0 (Final)

Context

In recent years, all GP practices across NEW Devon CCG were offered up to 60p per registered patient under the CCG Optimising Prescribing Scheme (OPS) to pay practices for costs in delivering the CCG Medicines Optimisation Scheme. In 2015/16 Option 2 (OPS 2) was added to the scheme enabling practices to, as an alternative, utilise this funding to recruit pharmacy resource to deliver the agenda. In 2016/17 practices in the Western locality of the CCG were also offered to bid for the Western Additional Offer (WAO) - £85,000 of available resource for staff from the medicines optimisation programme budget.

Both OPS 2 and the WAO were introduced in recognition that some GP practices were unable to free up practice time to deliver the CCG medicines optimisation agenda under the original OPS arrangements.

In recognition of:

- The complexity of having both OPS and WAO schemes
- Further available resource from the programme budget for staff costs as a result of CCG vacancies
- Increased capacity issues within GP practices
- National strategy to better utilise the skills of pharmacists in GP practices
- The need to ensure that investment in prescribing represents best value and that opportunities to deliver efficiencies are realised

The CCG proposes to introduce OPS Plus for practices within the Western PDU of NEW Devon CCG.

Introduction

As in recent years, all NEW Devon CCG practices are offered up to 60p per registered patient under the CCG Optimising Prescribing Scheme(OPS) in 2017/18. Currently up to £211K is available for the OPS in the Western Locality. Practices can choose between

Option 1 which pays practices directly for costs in delivering the core CCG medicines optimisation work-plan; and

Option 2 which pays practices for practice pharmacist time in agreement for delivering the core CCG Medicines Optimisation work-plan.

Practices who wish to continue with the OPS scheme can do so. However, in the Western Locality, the CCG is offering enhanced funding to all GP practices as an alternative to the OPS. This enhanced offer (OPS Plus) makes available to Western Locality practices up to £1.20 per registered patient during 2017/18 towards funding practice pharmacist or pharmacy technician resource in GP practices. The funding is conditional on practices agreeing to deliver the core CCG Medicines Optimisation work-plan combined with a focus in a number of additional areas which will be agreed with practices. This could include areas such as repeat prescription systems and medicines reviews in specific groups of patients. In order to continue to receive 'OPS Plus' funding, practices will need to demonstrate continued satisfactory performance against a number of key performance indicators (KPIs).

The 'OPS Plus' offer replaces the Western Additional Offer (WAO) which was offered to Western GP practices in 2016/17 and offers an additional £126K pa more than was offered 2016/17 for the OPS and WAO (combined) in the Western Locality. For those practices currently receiving funding under the WAO, the CCG will work with these practices to agree a transition to the new OPS Plus scheme.

The 'OPS Plus' scheme offers a number of advantages over the WAO including:

- Simplified single claim process (OPS2 and WAO combined) without the need to submit a bid.
- Open to all practices
- Practices who currently employ pharmacists under the NHSE England 'Clinical Pharmacists in GP practices' can also receive 'OPS Plus' funding
- Can be used to fund both practice pharmacist and pharmacy technician resource

The CCG strongly supports a collaborative approach to 'OPS Plus' uptake from groups of practices. In particular, smaller GP practices are encouraged to collaborate with others to agree funding for a shared pharmacy resource working across a group of practices.

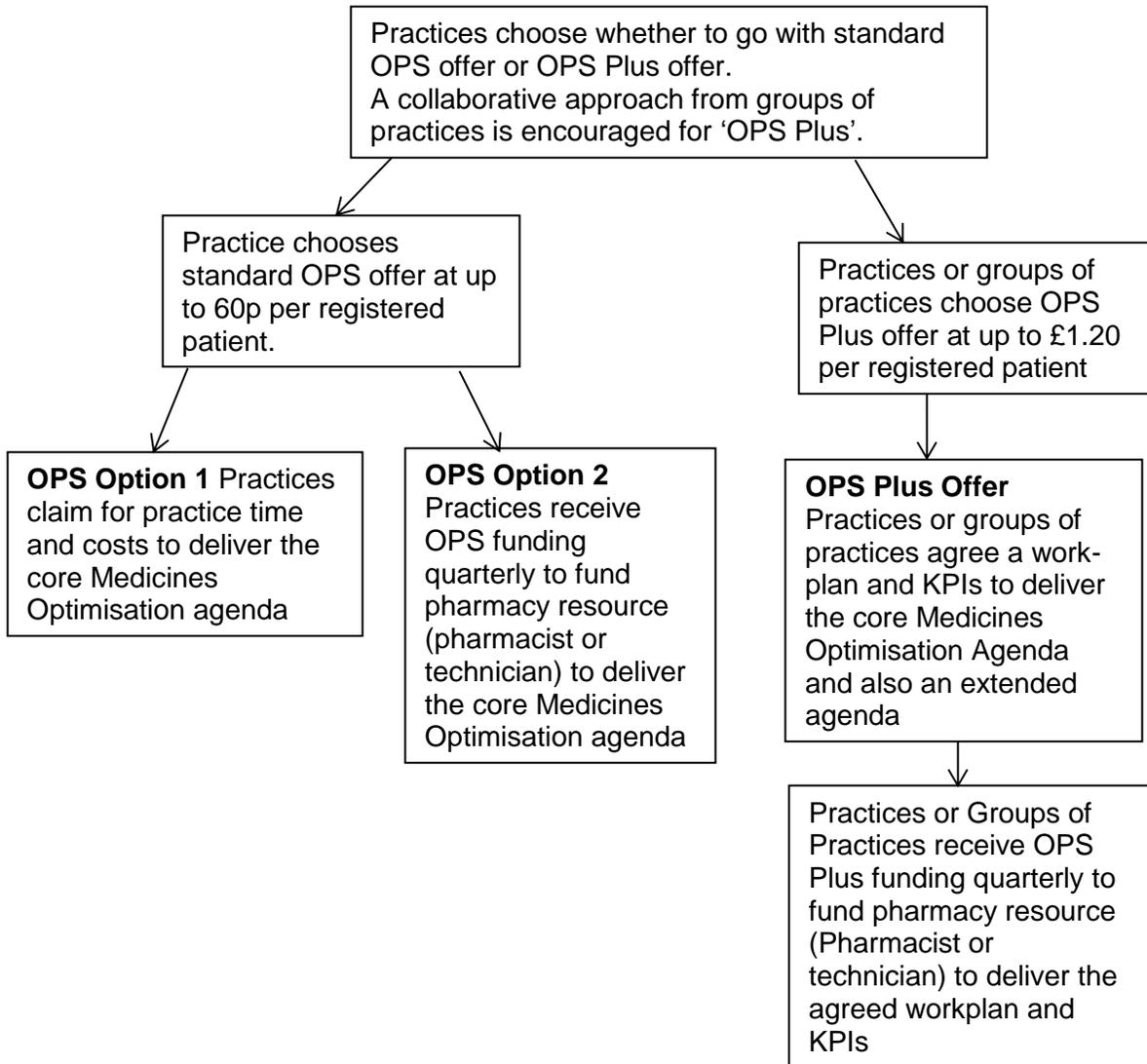
Outline of the OPS Plus Scheme

- A summary of the 'OPS Plus' scheme is detailed in the algorithm in Appendix A
- Practices will be contacted by the Medicines Optimisation Team at the start of 2017/18 to discuss whether practices wish to continue with the existing OPS offer or take up the 'OPS Plus' offer.

- Practices or groups of practices who wish to take up the 'OPS Plus' offer will meet with Medicines Optimisation Team to agree a work-plan and KPIs which the practice(s) will deliver with the support of the funded practice pharmacist or pharmacy technician resource.
- Practice costs for practice pharmacist and pharmacy technician resource will be reimbursed quarterly in arrears. Invoices submitted at the end of each quarter by the 7th of the following month will be made during that month.
- 'OPS Plus' arrangements become operational at the point of engagement of pharmacy or pharmacy technician resource and we would encourage practices to continue to claim OPS payments under Option 1 until it becomes operational to ensure that the practice has access to available OPS funding in-year.
- If the 'OPS Plus' delivery is stopped or suspended e.g. because of recruitment issues, practices can revert back to the standard OPS offer for the unclaimed proportion of the OPS component of OPS Plus.
- Payment for OPS Plus is for a 12 month period and payment will be pro-rata for shorter periods of time.
- Engagement arrangements could include sessional employment under 'contract for services' arrangements (as for locums), secondment from another provider or employment (current or new). In entering in to such arrangements, practices should be mindful of the impact of employment and VAT legislation and advice sought if necessary.
- Practices will be responsible for recruitment of practice pharmacists / pharmacy technicians but the Medicines Optimisation Team may be able to advise practices about possible recruitment opportunities or signpost to other provider organisations.
- Medicines Optimisation Team engagement and support will be offered to all practice pharmacists and pharmacy technicians within the limits of team capacity. This will include quarterly half day support sessions with the Medicines Optimisation Team which we would expect to be attended.

Appendix A

Summary for practices of the processes for the 'OPS Plus' offer in the Western PDU in 2017/18



* Direct medicines optimisation support in practices will be provided for the standard OPS offer within the limits of available capacity.

* Practice or groups of practices going for the OPS Plus offer will receive less direct medicines optimisation delivery support but engagement would continue to enable the practice to provide assurance of the delivery of an agreed workplan and KPIs.

* Pharmacist or pharmacy technician engagement by practices could include sessional employment (e.g. contract for services) or secondment from a third party provider organisation as well as direct employment.

Appendix B

Principles around setting and managing KPIs for practices/ practice groups taking up the Western PDU OPS Plus offer in 2017/18

Summary of principles

1. Practices can use OPS Plus funded pharmacist / technician resource to deliver KPIs directly or utilise other practice capacity to deliver KPIs freeing up use of the pharmacist / technician within the practice in an alternative way. This could include areas of GMS delivery e.g. medicines reconciliation, medicines queries and liaison with community pharmacies for example regarding out of stock medicines.
2. The KPIs agreed with individual practices / practices groups should reflect the opportunity to make savings and improve patient care within practices.
3. KPIs are divided into two groups:
 - Primary KPIs - Core medicines optimisation areas of savings delivery and quality focus in 2017/18. This will include simple switches, and review areas (e.g. respiratory, high dose opioid prescribing) similar to those offered under the OPS in previous years.
 - Secondary KPIs - Additional areas of focus which practices can agree to deliver. These areas will be more project based e.g. Care Home reviews and will require practice involvement to choose areas of focus and co-design delivery.
4. There is an expectation that practices will prioritise delivery of agreed Primary KPIs with the aim of completing within 3 months of taking up the OPS Plus scheme and that this will be followed by delivery of agreed secondary KPIs.
5. The CCG will provide practice and / or practice group performance data on KPIs
6. In situations where the potential workload exceeds capacity offered under OPS Plus, the Medicines Optimisation Team will work with practices to agree and deliver a prioritised work-plan and associated KPIs.
7. Where practices fail to deliver agreed KPIs within an agreed timescale, the CCG will discuss with practices to agree a revised delivery plan to achieve KPIs in a timely manner. Persistent non-delivery of agreed KPIs will result in the OPS Plus offer being withdrawn after a period of notice (in line with terms agreed with the LMC for Local Enhanced Services)

8. Practices / practice groups taking up OPS Plus should nominate an accountable clinical and managerial lead to liaise with the Medicines Optimisation Team on all aspects of KPI delivery.
9. In the event of a formal disagreement, the Head of Medicines Optimisation will constitute a panel consisting of CCG and LMC representation, in equal numbers, in order to agree a resolution.

Version History

Version	Date Issued	Brief Summary of Change	Owner's Name
0.1 Draft	16 th January 2017	Initial Draft	Paul Manson
0.2 Draft	17 th January	Amended following comment KV and JW	Paul Manson
0.3 Draft	20 th January	Further changes following internal discussion	Paul Manson
0.4 Draft	9 th March 2017	Additions following discussion at Negotiations committee on 24/02/17 and Western LMC committee on 7/03/17	Jo Watson
0.5	14 th March 2017	Minor formatting changes identified by LMC	Paul Manson
1.0 Final	30 th March 2017	Clarification of appeals process added as requested by LMC	Paul Manson

