

Performance Management of Community Pharmacy Providers

A CPGM Healthcare Ltd (CHL) Added Value Service for Commissioners of Community Pharmacy Services

Document Owner(s)

Community Pharmacy Greater Manchester Healthcare Ltd. (CHL)	alison@cpgmhealthcare.co.uk	0161 228 6163
---	-----------------------------	---------------

Contents

A CPGM Healthcare Ltd (CHL) Added Value Service for Commissioners of Community Pharmacy Services	1
Document Owner(s).....	1
1. Introduction	3
2. Locally Commissioned Community Pharmacy Services	3
3. Preparing to Commence Performance Management.....	4
4. CHL’s Performance Management Offer	4
4.1. Monthly Review & RAG Reporting.....	5
4.2. Annual Review & RAG Reporting	5
5. Post Payment Verification (PPV).....	6
5.1. Tier 1 PPV	6
5.2. Tier 2 PPV	6
6. Additional CHL services.....	7
Appendix 1: KPI Definition & Agreement Process	8
Appendix 2: Performance Management Process	9

1. Introduction

Performance management can be defined as a process whereby the intended and desirable outcomes of a service are increased by focusing on the performance of the individuals delivering the service.

Effective performance management promotes superior performance by clearly communicating expectations and establishing achievable benchmarks and targets. Key to success is the continuous monitoring and feedback to providers as well as sharing best practice, supporting those who are not performing to improve and then implementing the consequences of persistent poor performance such as decommissioning providers.

2. Locally Commissioned Community Pharmacy Services

Some locally commissioned community pharmacy services lend themselves to a full performance management approach, where electronic activity data can be analysed to define achievable Key Performance Indicators (KPIs) for community pharmacies in a service where the pharmacy team can proactively recruit patients into a service. In such services, an increase in service delivery will directly lead to an increase in positive patient outcomes and is therefore in the interests of the Commissioner.

Other locally commissioned community pharmacy services may not lend themselves to such proactive performance management but more to a post payment verification (PPV) approach.

Minor Ailments Service (MAS) may benefit from a level of performance management dependent upon Commissioner intentions. The benefits of such a service are around preventing patients from accessing more costly healthcare interventions by treating them in the pharmacy but care needs to be taken in the proactive recruitment of patients into a MAS service.

Please see the table below for a summary:

Services to benefit from a full Performance Management Approach	Services more appropriate for PPV & service delivery verification
Smoking Cessation – behavioural advice with/without NRT/Varenicline supply	NRT voucher/Varenicline PGD supply only
Alcohol Brief Intervention	Emergency Hormonal Contraception
Improving Inhaler Technique	Monitored Dosage Systems dispensing MAR service
Chlamydia & Gonorrhoea Screening	Chlamydia & Gonorrhoea Treatment
Hepatitis C Screening	Supervised consumption
Hypertension & Atrial Fibrillation Screening	Needle Exchange
NHS Health Checks	Palliative care – stockholding
Influenza Vaccination	Out of hours Minor Eye Conditions Service (MECS)
	Healthy Start Vitamin D provision
	Antiviral drugs - stockholding

Any service for which performance management is required must be recorded wholly on an IT platform e.g. PharmOutcomes to which CHL has access, in order to allow appropriate data collection, reporting and monitoring.

3. Preparing to Commence Performance Management

Before commencing the performance management process, there is a need to review all service-related documentation and activity data.

For live services, the Service Specification will be reviewed to identify outcomes, goals, quality standards and other measures which can be adapted to form part of the KPIs to allow effective Performance Management. Service uptake and activity data will also be reviewed to allow achievable and realistic KPIs to be agreed, based on actual delivery data.

CHL will:

- Conduct a service activity data analysis and prepare a proposal of KPIs for the service to be discussed and agreed with the Commissioner
- Update all service-related documentation to include the agreed KPIs with consent of the Commissioner
- Update the IT platform (e.g. PharmOutcomes) to include any additional data which may be required to be captured in line with agreed KPIs
- Conduct an impact assessment of the KPIs on community pharmacy providers and arrange additional training through GM Healthcare Academy as appropriate
- Communicate effectively with all community pharmacy providers regarding the new KPIs and the commencement of the Performance Management process
- Distribute and collate signed Service Specifications from community pharmacy providers

For services under development, it should be agreed prior to a Service Specification being developed that performance management is required. Target outcomes and quality standards should be included in the Service Specification and KPIs should be defined in line with these outcomes and standards. It is good practice to identify if there are similar services offered in other areas in order to identify if the KPIs adopted are realistic and achievable; however, there may need to be a review of KPIs once the service goes live and actual delivery data is available.

See Appendix 1 KPI Definition & Agreement

4. CHL's Performance Management Offer

CHL will review service activity data and prepare a monthly KPI report which summarises each community pharmacy's performance against the KPIs agreed and is shared with the Commissioner and any other relevant stakeholders, at the Commissioner's request.

CHL will identify the top and bottom performers each month and contact each pharmacy in order to identify best practice and to troubleshoot or identify barriers to service delivery.

CHL will create and share with community pharmacy providers a monthly newsletter which summarises best practice hints and tips and includes the KPI report if agreed by the Commissioner; preferably not anonymised in order to encourage healthy competition between providers.

A grace period of 3 months from commencement of performance management is recommended prior to any sanctions being placed on poor performers.

4.1. Monthly Review & RAG Reporting

After the 3-month grace period, the monthly KPI report will be RAG-rated where Red, Amber and Green ratings are proposed by CHL, agreed by the Commissioner and are bespoke to each particular service.

e.g. For a service with 4 KPIs, each of equal value to the Commissioner the following ratings and associated actions for community pharmacy providers would apply:

Monthly RAG Rating	Interpretation	Action	Follow Up
Green	all KPIs achieved	Pharmacies are recognised for good performance	N/A
Amber	some KPIs achieved, and performance is improved vs. last month	Pharmacies are contacted by phone to discuss issues & barriers to service delivery, share best practice, appoint mentor from Green-rated pharmacy (if appropriate) and set an action plan to address performance gap	Check in call after 4 weeks to ensure completion of plan
Red	No KPIs achieved OR some KPIs achieved but performance has declined vs. last month	Pharmacies are visited to discuss issues & barriers to service delivery, share best practice, appoint mentor from Green-rated pharmacy (if appropriate) and set an action plan to address performance gap. Identify if additional training is needed and signpost as appropriate	Check in call after 2 weeks to ensure completion of plan. Give warning letter if appropriate

If KPIs have different values to the Commissioner, weightings can be applied to represent the value in the overall RAG rating.

4.2. Annual Review & RAG Reporting

CHL will conduct an annual service review to assess a full 12 months' service provision from all community pharmacy providers.

An annual RAG rating will be applied to each community pharmacy provider, based on each month's performance as follows, with the associated actions for community pharmacy providers:

Annual RAG Rating	Interpretation	Action	Follow Up
Green	8 or more Green months & no Red months	Pharmacies are recognised for good performance	N/A
Amber	Everything else	Commence monthly support calls	Monthly support calls
Red	3 consecutive red months or 6 or more red months	De-commission service	Update commissioner & all records

CHL will summarise the annual activity and produce a report for the Commissioner and any other relevant stakeholders, at the Commissioner's request.

CHL recommends at least an annual Contract Review Meeting to discuss all aspects of service delivery and reporting.

5. Post Payment Verification (PPV)

Commissioners of community pharmacy services have a duty to assure themselves of the quality and probity of activity provided under the locally agreed service specification.

CHL can provide support to commissioners with this quality assurance by offering a standardised Post Payment Verification (PPV) process.

PPV aims to identify any issues related to the claiming of payment for locally commissioned services and to highlight issues to the commissioner who will then facilitate resolution of those issues with the individual contractor.

Where common issues are identified, advice will be provided to all contractors by CHL on how such issues can be avoided in the future.

All PPV audits delivered by CHL will be completed by a GPhC registered pharmacist.

5.1. Tier 1 PPV

Tier 1 PPV audit will include a sample of pharmacies in the locality where 3 month's data will be reviewed and analysed.

Service Delivery Review
To be defined from service specification

The criteria above will be reviewed and updated following the first round of PPV should any additional requirements be identified.

A report will be prepared and shared with the commissioner following the PPV audit. The report can be shared electronically or presented at a review meeting to allow further discussion as appropriate.

Tier 1 PPV will take place annually.

5.2. Tier 2 PPV

In addition to the Tier 1 PPV audit, a Tier 2 PPV audit will also include a clinical review of 3 months' worth of data.

Any issues which are identified as a result may result in a visit to the pharmacy to review with Responsible Pharmacist as a peer to peer discussion.

Clinical Review
To be defined from service specification

Also, may include:

1. Consultation room check
2. Staff knowledge and understanding of the service
3. Copies of Declaration of Competence for all staff on duty

A report will be prepared, shared and presented at a review meeting with the commissioner to allow further discussion.

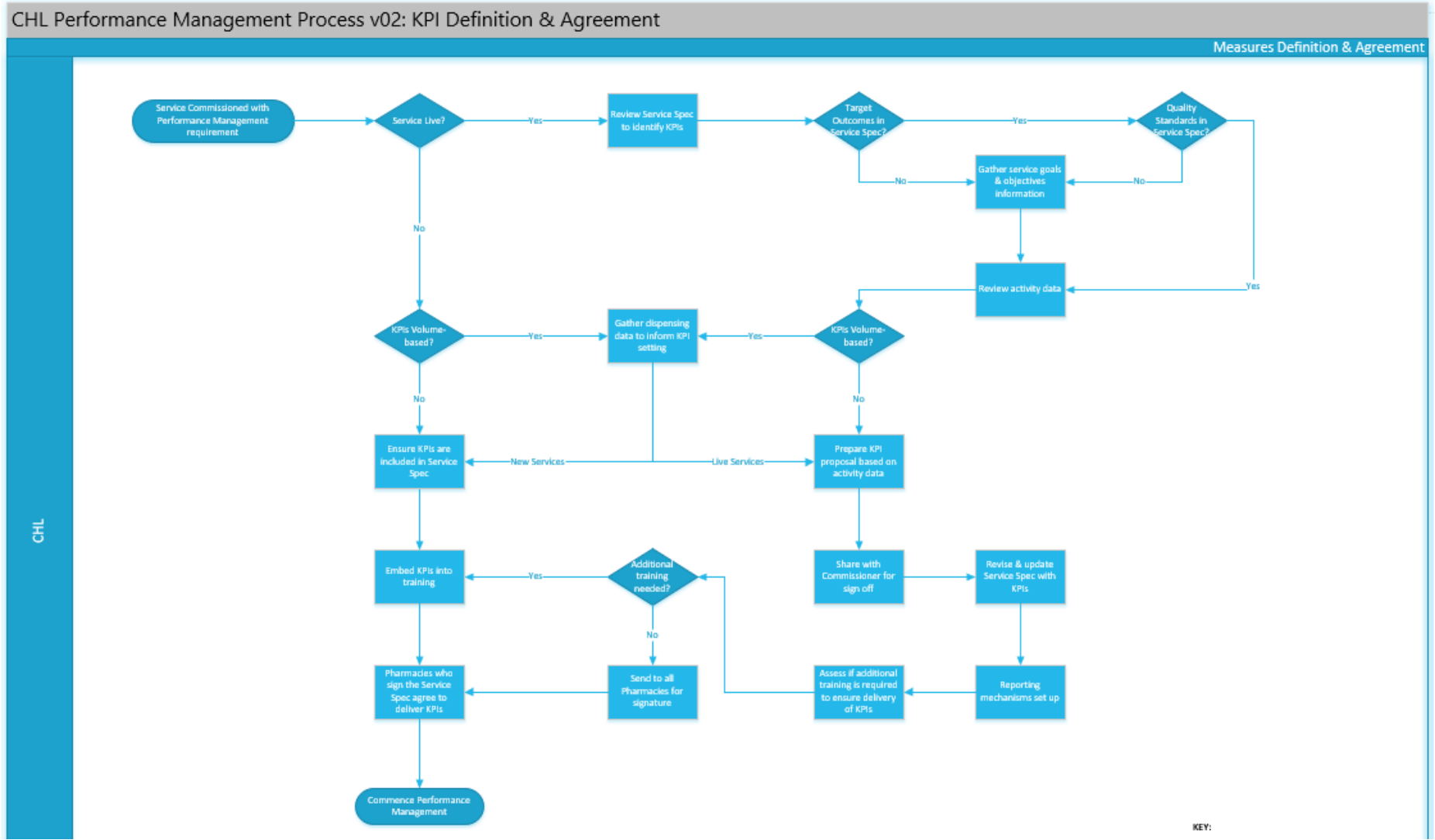
Tier 2 PPV will take place annually.

6. Additional CHL services

CHL can offer a number of additional interventions which may benefit a Commissioner and support with delivering outcomes and providing reassurance of community pharmacy contractors compliance to Service Specification and SLA:

- Expression of Interest (EOI) Process end to end for service expansion or rationalisation; based on criteria set by the Commissioner
- Post Payment Verification – quarterly or annually dependent upon need
- Audit – ad hoc based on Commissioner requirements
- Patient feedback and Patient experience surveys
- Community Pharmacy feedback surveys

Appendix 1: KPI Definition & Agreement Process



Appendix 2: Performance Management Process

