



Clinical Community Pharmacy Service (CCPS) FAQ

Q: What is the CCPS?

A: The CCPS comprises of four services (Contraception Service (Bridging and Quick Start and Emergency Contraception), Seasonal Flu Vaccine, Common Ailments Service and Emergency Medication Supply). These existing services were moved into national commissioning as a package renamed the CCPS in 22-23 with the addition of Bridging and QuickStart Contraception from 1 April 2023. Engagement in the CCPS will qualify the pharmacy for the £12,700 per annum establishment payment for clinical services. The Single Service Specification for the CCPS services can be found [here](#).

Q: Establishment payments include delivery of clinical services - how do I access this and what services are included?

A: From April 2022 establishment payments will be split into 2 payments – 50% based on dispensing and 50% based on Clinical services. All pharmacies who sign up to the national directed CCPS service will qualify for the £12.7k per annum establishment (Clinical services) payment. The payment will be in monthly instalments for each month in which they are listed as providing the CCPS on AWPD.

Q: How do I deliver the CCPS?

A: To be commissioned to deliver CCPS pharmacies must be willing and able to deliver all four services included within it. This follows the training pathways currently established for service accreditation via NCSA, details of which can be found on the CPW website or on your WCPPE NCSA portal.

Q: How can I sign up to deliver the CCPS?

A: Contractors must fill in the premises listing form – which can be found [here](#). - and submit to shared services. They will not be eligible for establishment payments until the month following submission of the listing form.

Q: If a pharmacy doesn't want to provide Contraception or the flu service will I still be able to provide CAS?

A: No, from April 2022 it became an all-or-nothing service. You will only be able to provide any element if you have an accredited pharmacist, are signed up to the service and ready to provide every element of the CCPS i.e. all four services.

Q : What if I don't want to provide the Contraception service for religious beliefs?

A: Where a pharmacy contractor wishes to provide the CCPS but employs a pharmacist who has specific religious or personal beliefs about the provision of contraception, they are not precluded from providing the CCPS. The national service specification includes the following provision: "Pharmacists who choose not to supply Emergency Contraception for ethical reasons must treat the matter sensitively and advise the patient of an alternative source of supply available within the timeframe for emergency contraception to be effective." This means in circumstances where a pharmacy contractor is providing the CCPS but where the pharmacist employed has a religious or personal belief about the provision of contraception, the pharmacy contractor will be complying with the requirements of the CCPS, provided the pharmacist's practise is in accordance with the [General Pharmaceutical Council's guidance on religion, personal values and beliefs](#). In accordance with this guidance and the standards for pharmacy professionals, pharmacists have the right to practise in line with their religion, personal values or beliefs, as long as they act in accordance with equalities and human rights law and ensure person-centred care is not compromised. Pharmacists must not discriminate against a person based on their own religion, personal values or beliefs and should use their professional judgement when making decisions about what is clinically appropriate for the individual person. Importantly pharmacists must ensure that their beliefs do not obstruct someone's ability to act swiftly when faced with the possibility of an unplanned pregnancy. Further guidance from the RPS can be found here; <https://www.rpharms.com/resources/quick-reference-guides/oral-emergency-contraceptives-as-pharmacy-medicines#moral>

Q: Will newly qualified pharmacists be able to deliver all CCPS services as soon as they are qualified?

A: They will need to ensure they have completed NCSA and all other service requirements including access to choose pharmacy (DBS etc) as well as flu vaccination accreditation and training – including BLS requirements. Foundation pharmacists undergoing training in Wales with HEIW will have been encouraged to complete all training requirements during their foundation year.

Q: What are the changes to Basic Life Support training?

A: Annual Basic Life Support (BLS) training is a requirement for all those who wish to deliver vaccination, Sore Throat Test and Treat and Independent Prescribing Services. BLS Training comprises an annual Face to face session, with an associated e-learning module. HEIW will provide some courses in the first five months of each calendar year but private courses (including those provided via your employer) are eligible provided they are accredited by the British Resuscitation Council and meet UK Core Skills Training Framework standards for basic life support at Level 2. Courses must include both adult and child basic life support. There are many training providers who offer BLS training and

assessments, but only training that meets these standards and involves a face to face assessment of your competence carrying out BLS is acceptable.

Q: Why is BLS now an annual requirement?

A: As more clinical services become available through community pharmacy, the potential need to perform BLS may also increase. The decision to move to annual BLS aligns community pharmacy with other NHS clinical staff in requiring annual face to face assessment of competence.

Q: How can I ensure I don't miss out on HEIW provided annual BLS refresher training in the future?

A: HEIW will put on annual refresher training, including both face to face and online learning, in the first few months of 2023. Please check the CPW newsletter and HEIW website for updates. If HEIW don't have any dates or locations that are suitable for you, please get in touch with HEIW initially to ask if they are aware of any spaces on existing training dates, if this is not successful then contact your local health board community pharmacy lead who may be able to make representations to HEIW. Please be aware that the majority of training sessions will be on Sundays as this is the most cost-effective to hire the external trainers.

Q: Are there any requirements on levels of service delivery for CCPS?

A: For 23/24, as in 22/23 the only requirement is to have availability of the service, however in subsequent years it is expected that there will be minimum criteria for delivery and CCPS should be always available during a pharmacy's opening hours except where the LHB is notified otherwise. There is a requirement for pharmacy to sign up to provide all services, so contractors should not state (for example) "I am not providing flu this year" as by stating that they could potentially be considered as not providing CCPS.

Q: We would like to create our own promotional material for Clinical services e.g. CAS, can we do this?

A: As stated in the specification, any contractors wishing to create materials should have approval on any proofs they produce to protect the integrity of the messaging.

Contractors should share designs with Welsh Government (Pharmacyand.PrescribingBranch@gov.wales) and their HB for approval prior to publishing. In addition, material would need to be bilingual/comply with Welsh Language standards and can request translation from their LHB to support. Materials must also state that the service is funded by NHS Wales

Q: What is the new Service Availability Tool on NECAF and it it's completion mandatory?

A: Contractors, and their teams, are strongly encouraged to report the availability (or otherwise) 1 of the EMS, EC, and CAS components of the

service (including sore throat test and treat) via the national Service Availability Tool on each day that the pharmacy is open. The response from the availability tool will be used to inform other pharmacies/ GP practices/ OOH and 111 in relation to services available for referring patients. LHBS state that data submission on the tool will not be used for continuity payment purposes – as they understand that may encourage contractors to report availability inaccurately.

Q: What does “availability” mean in relation to the Service Availability Tool?

A: In this context, ‘available’ means that the pharmacy are able to receive referrals from other providers, or can provide the service to a walk-in patient within a reasonable timeframe