



Rhaglen Wybodeg Gofal Sylfaenol
Primary Care Informatics Programme

This is a notification sent out by the 'Primary Care Informatics Programme' (PCIP) to stakeholders of the national community pharmacy IM&T programme. Please disseminate to members of your organisation and within it, as appropriate.

COMMUNICATION / BRIEFING NOTE		DATE: 12 th April 2010
FROM: Gary Jones Programme Manager	TO: Chairman, CEO Community Pharmacy Wales (CPW)	STATUS: Complete
SUBJECT/MEETING: Amendment to Drug Tariff, Part VIA – May 2010 Edition		
PURPOSE OF NOTE: BRIEFING		X
BACKGROUND		
<p>The national IM&T programme board for community pharmacy in Wales directs the contractual and operational IM&T requirements arising, in the main, from the community pharmacy contractual framework (NHS Pharmaceutical Regulations 2005), but also the ICT 'foundation' projects required for integration of community pharmacy (as a profession) within the NHS Wales networked environment.</p> <p>This agenda includes a number of separate but sometimes co-related IM&T projects and workstreams, such as an Electronic Transfer of Prescriptions service for Wales and Electronic Transmission of Claims, plus enabling secure access to NHS Wales connectivity services, such as an appropriate NHS Wales Email solution.</p> <p>To support these requirements, IM&T allowance funding has been made available to Contractors through the Drug Tariff to support the IM&T agenda going forward.</p>		
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<p>In the forthcoming edition of the Drug Tariff, the Welsh Assembly Government (WAG) is making an amendment to Part VIA in respect of IM&T Allowances paid to Contractors in Wales.</p> <p>This impending change has already been discussed with CPW through the national IM&T board, as well as separately, and has received endorsement in principle, subject to advance notification with the Multiples.</p> <p>From 1st May 2010, sections 6.5 to 6.11 will reflect that the £200 per calendar month recurring payment will no longer be linked to <i>capability</i> to access the NHS Wales internal network. Instead, this payment will be re-aligned to <i>take-up</i> of</p>		

Phase 2 services, developed, directed or enabled by NHS Wales and the national IM&T programme board, in three separate releases:

- Release 1 will be the deployment/use of the NHS Wales Email service (or an approved alternative Email service) for defined NHS business purposes;
- Release 2 will be the deployment/use of a 2D-barcoded prescription service, once enabled by the system supplier responsible for the development;
- Release 3 will be the deployment/use of an Electronic Claims service, once enabled by the system supplier responsible for the development.

Each Release will have a Mandatory Deployment Timescale by which time Contractors will be obliged to deploy/use the service and a minimum of 3 months notice will be given to Contractors, through the Drug Tariff, once the service has been deployed or made available to Contractors in Wales.

NOTES

- Wales initially chose to align the recurring £200pcm payment to connectivity *capability* so that Contractors in Wales were not disadvantaged financially compared with their colleagues in England, due to the later establishment of the IM&T agenda in Wales than in England.
- From the time that 'connectivity' funding became available (from 1st January 2007), more Contractors in Wales have benefited from this recurring payment than Contractors in England, whereby this funding was released only when the contractor started using EPS/R1, available through phased implementation, some time later.
- The re-alignment of the recurring £200pcm funding will now give Contractors in Wales parity with their counterparts in England, in terms of what the recurring payment supports; i.e. patient-focused services such as NHS Email and 2DRx in Wales and EPS (including transmission of claims) in England.
- A Contractor in Wales who is not able to use any of these services through no fault of his/her own will not be disadvantaged, as the withdrawal of the £200pcm payment will **not** apply. However, Contractors are advised to check with their system supplier/Head Office on progress with the respective Phase 2 service developments.
- A 'Corporate' Contractor will be considered as the 'Head Office' of that organisation, rather than as a constituent branch of it. Therefore, any failure to deploy respective releases of services shown across its entire estate in Wales will affect the payments of all a Corporate's constituent branches.
- The requirements of Release 1 have already been discussed and satisfied following the CCA/NHS Wales meeting in December 2009, whereby certain members will utilise the NHS Wales Email service (locked-down) and others have/are providing separate branch-specific Email accounts,

'trusted' by NHS Wales for the purposes of read-only transmissions originated from NHS Wales.

- The NHS Email requirements as specified for corporates and independents respectively will be managed between NHS Wales, the CCA, its member organisations and BSC Contractor Services.

ACTION

- Please disseminate accordingly within your organisation;
- Please publish on your website for the attention of Contractors in Wales, who will also be receiving separate advance notification of this change from NHS Wales