

Pharmacy Access Scheme Reviews: Frequently Asked Questions

The Pharmacy Access Scheme is intended to provide additional funds to pharmacies that are located a mile or more from another pharmacy, and dispense fewer than 109,012 items in 2015/16. Detailed information on the Pharmacy Access Scheme was published by the Department of Health on the 20th October and can be found at the following

link: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/561497/Pharmacy_access_scheme_A.pdf

The reviews process for the Pharmacy Access Scheme is designed to allow for consideration of extenuating circumstances which may mean that access is not being protected in the way intended by the scheme. Details of this process and of the cases which may be eligible review can be found at the link above. This document provides additional information, following questions from contractors.

1. What is the position for those opening after 1 September 2016?

Eligibility has been calculated using the pharmaceutical list as at 1 September 2016. Pharmacies that opened after 1 September 2016 are not eligible for PhAS.

2. Pharmacies that are the largest by dispensing volume (above 109,012 items per year) are excluded from the scheme. What reporting period is used to assess whether a pharmacy has dispensed more or less than this volume? What if a full reporting year of dispensing data is not available?

The period we look at is the 12 months to 31 March 2016.

For pharmacies that opened mid-year, there will be less than 12 months' worth of dispensing data; and we use what data there is available instead. So, for example, if a pharmacy opened in October 2015 (open for 6 months in 2015/16) and dispensed 60,000 items, it will not be ruled out via the volume threshold even though this is the equivalent of 120,000 items over the full year. This is because we don't want to disadvantage pharmacies that opened in 15/16 as we cannot be certain that they will go over the volume threshold (because of

different distribution of items dispensed over the year). However, to ensure that it is consistent with pharmacies that receive the PhAS, their payments will be capped to 109,012, were those pharmacies to go over the volume threshold.

If a pharmacy opened between 1 April and 1 September 2016, we will have no data available for the assessment of the number of items dispensed in the full year 2015/16. Therefore, a calculation will be made based on dispensing between April 2016 and August 2016, and then uplifted (pro-rata) accordingly.

As more dispensing data becomes available, the PhAS payment will be recalculated and adjusted as necessary. In the case that these pharmacies go on to dispense more than 109,012 items, pharmacy payments will be capped at that level (meaning that the PhAS payment received will not continue to increase).

3. How is the distance between pharmacies calculated?

Location data is taken from the NHS England pharmaceutical list as of 1st September which is published on the BSA website <http://www.nhsbsa.nhs.uk/PrescriptionServices/5827.aspx>

Distance calculations use the Ordnance Survey (OS) Open Road Network. The methodology used is consistent with data used in Department for Transport analysis for calculating journey time statistics <https://www.gov.uk/government/publications/journey-time-statistics-guidance>.

The OS Open Road Network Data provides a consistent and comparable method, with as little geographical variation as possible – to ensure a fair application of the distance calculations across the country. For this reason, the Pharmacy Access Scheme will not consider alternative methodologies for calculating distances between pharmacies.

4. When I look at the distance on Google Maps, it is different to the distance calculated by the DH. Why?

There are a number of differences between Google Maps data and Ordnance Survey Open Road Network data. Google Maps does not use the OS Open Road Network and therefore a direct comparison cannot be made.

Google maps data is dynamic; the information is updated constantly by new data where available. Thus, the quality of Google Maps data will vary based on how good satellite, aerial, and street imagery is for a particular location. Because of this process, there is a higher degree of variation across the country; and this is why the Ordnance Survey Data is the more appropriate data for the PhAS, to ensure a fair and consistent approach for all contractors.

Ordnance Survey Open Road network data provides a static, consistent and comparable approach to distances between pharmacies, making it reasonable for a scheme applying one approach nationally, as it will minimise regional inconsistencies.

It is possible that the reason that contractors are finding different results on Google Maps is that the postcode or address information that we used to calculate distances was incorrect. We have taken careful steps to verify this data, and carried out a data matching exercise to match pharmacy location data across four sources, BSA payments data, NHS England local team lists, PSNC's Pharmacy List and the Royal Mail Postcode Address database. This exercise verified the large majority of the data we held, and for pharmacies where we could not cross match location data across all four sources, we then verified the data with NHS England local teams, in some cases contacting the pharmacies directly.

If there are errors in the data, despite this careful checking process, then contractors can raise these via the reviews process.

5. Are footpaths taken into account when calculating distances?

Footpaths are taken into account where they are present on the Ordnance Survey Open Road Network. This includes roadside pavements, and excludes footpaths and private road on estates. In many cases people may be able to walk to pharmacies faster than indicated in the data using private estate roads, but these are of variable quality and may be subject to access restrictions and may not be passable at all times, so only public roads have been included. This is the most consistent and comparable way to measure distance across the country.

6. Will you be publishing a list of the top 20 most deprived LSOAs and information so that contractors can check if they are in one of these areas?

This information is available via the DCLG website at <http://imd-by-postcode.opendatacommunities.org/>

7. Will any example cases be given to guide those considering making a review or any guidance made available?

Examples of the information sought and examples of cases are described in the application form. This is available at <http://www.nhsbsa.nhs.uk/PrescriptionServices/5827.aspx>

8. What is the position for pharmacies receiving PhAS payments that move during the duration of the scheme?

The Pharmacy Access Scheme eligibility criteria are tied to the location of the pharmacy, and for that reason pharmacies would lose eligibility to the PhAS were they to permanently relocate. Exceptions will be considered for pharmacies that have to make temporary arrangements as per Regulation 29 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 .

9. Can a pharmacy contractor make more than one application to be reviewed for eligibility to receive PhAS funding?

NHS England expects that those wishing to apply for a review make just ONE application which covers all of the reasons for applying for a review to determine whether the pharmacy premises are eligible for payment from the PhAS. As such, NHS England will not consider multiple or subsequent applications from the same pharmacy **UNLESS** the subsequent application pertains to a physical feature anomaly that has arisen since the date of the original application (as set out on page 1 of the application form).

10. What is the deadline for requesting a review for eligibility to receive PhAS funding?

The DH guidance stated 'Applications for reviews will need to be made within three months of the start of the scheme (1 December 2016).' Therefore, requests for a review received after midnight on 28 February will not be considered. (The only exception to this is applications for review that relate to a physical feature anomaly - such as a collapsed bridge increasing the road distance to the nearest pharmacy - that has arisen after 28 February 2017 and where the review has been requested within three months of the physical feature anomaly occurring.