

DIGITAL CLINICAL EXCELLENCE



Industry Standards for online pharmacy

Providing consistency in quality and safety for digital prescribing

healthworks

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DiCE: Digital Clinical Excellence Network

Established in 2019 to drive digital clinical excellence and optimise quality and safety in digital healthcare.

Supporting clinical care improvement and safety in digital healthcare to develop excellence in digital care standards.

A collective clinical voice for the growing community of digital healthcare providers.

Three stakeholders:

- A leading-edge central facilitation team
- Network participants

Digital clinical service providers from across the UK, the participants are the senior clinical leaders from these organisations who ensure collective governance for DiCE

There is no commercial focus or activity within this network

- Statutory Organisations

Including Department of Health and Social Care 'DHSC', General Medical Council 'GMC', General Pharmaceutical Council 'GPhC', and Care Quality Commission 'CQC'

DiCE's work to date: **With Regulators**

Standards for pharmacy Professionals

All pharmacy professionals contribute to delivering and improving the health, safety and wellbeing of patients and the public. Professionalism and safe and effective practice are central to that role.



Purpose and justification of approach

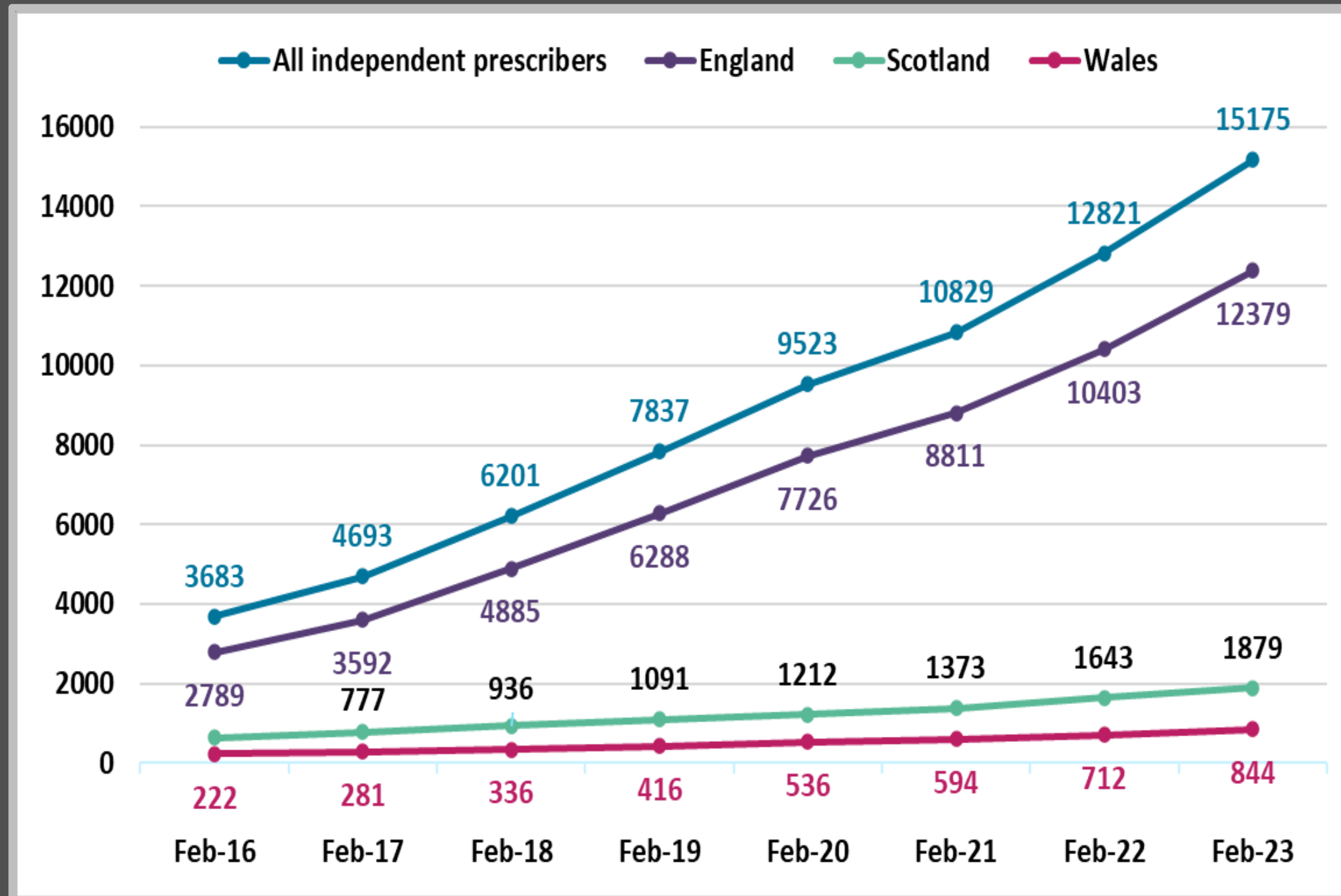
Developed through meetings between the DiCE network and GPhC.

GPhC insights from inspections of on-line pharmacy models; DiCE insights from best practice.

Many examples of where it is happening well, but too many incidences where it was not (mainly questionnaire-based models):

- Weak leadership and governance (including understanding of clinical governance requirements)
- Poor risk management with some clinical services being delivered as a transactional supply function
- Significant technology enabled models-not well understood by those working in them
- Lack of a whole systems professionals' view Increasing use of clinically inexperienced pharmacy professionals
- Limited public awareness and education about accessing services online
- Breakdown in practical application of professional and pharmacy standards

DiCE: Independent Pharmacy Prescribers



Standards: **What are the requirements?**

Standards for pharmacy Professionals

All pharmacy professionals contribute to delivering and improving the health, safety and wellbeing of patients and the public. Professionalism and safe and effective practice are central to that role.

Pharmacy professionals must:

1. provide person-centred care
2. work in partnership with others
3. communicate effectively
4. maintain, develop and use their professional knowledge and skills
5. use professional judgement
6. behave in a professional manner
7. respect and maintain the person's confidentiality and privacy
8. speak up when they have concerns or when things go wrong
9. demonstrate leadership

The standards for pharmacy organisations

The standards under each principle are the requirements that must be met when operating a registered pharmacy.

Principle 1: The governance arrangements safeguard the health, safety and wellbeing of patients and the public.

Principle 2: Staff are empowered and competent to safeguard the health, safety and wellbeing of patients and the public.

Principle 3: The environment and condition of the premises from which pharmacy services are provided, and any associated premises, safeguard the health, safety and wellbeing of patients and the public.

Principle 4: The way in which pharmacy services, including the management of medicines and medical devices, are delivered safeguards the health, safety and wellbeing of patients and the public.

Principle 5: The equipment and facilities used in the provision of pharmacy services safeguard the health, safety and wellbeing of patients and the public.

Standards: **What are the benefits?**



Organisations will be able to meet necessary statutory and regulatory requirements.

Organisations can identify and address the risks associated with their organisation.

Organisations work in a more efficient way as all their processes are aligned and understood by everyone. This increases productivity and efficiency, bringing internal costs down.

Clearly stated business objectives and the identification of new business opportunities.

By putting customers first, organisations can make sure they consistently meet customer needs and enhance customer satisfaction (increased business) and diminish complaints.



“Like a symphony: It takes a lot of people working together to develop a standard”



ISO's role is similar to that of a conductor, while the orchestra is made up of independent technical experts nominated by our members.

They begin the process with the development of a draft that meets a market need within a specific area. This is then shared for commenting and further discussion.

The voting process is the key to consensus. If that's achieved, then the draft is on its way to becoming an ISO standard. If agreement isn't reached, then the draft will be modified further and voted on again.

From first proposal to final publication, developing a standard usually takes about 3 years.

Key principles in ISO standard development:

- Respond to a need in the market
- Based on global expert opinion
- Developed through a multi-stakeholder process
- Based on a consensus

A close-up photograph of a conductor's hands. The conductor is wearing a dark suit jacket and a white shirt with a visible cuff. The right hand is raised, holding a thin, light-colored baton. The left hand is positioned below the right, with fingers spread in a gesturing motion. The background is a solid, dark grey or blue color.

Industry Standards for online pharmacy

A DiCE proposal

The Collaboration: Participants



The Digital Clinical Excellence Network

This forum for Digital Clinical Excellence 'DiCE', is a network whose aim it is to drive excellence and improve quality and safety in digital healthcare.

Created in March 2019, it provides a collective clinical voice for the growing community of digital healthcare providers.



Association of Independent Multiple Pharmacies

A membership organisation representing for community pharmacies with multiple branches.

The vision: to be the sector leader in representing and supporting independent contractors with multiple pharmacies.



National Pharmacy Association

The representative voice of independent community pharmacies across the UK and a leading provider of services to the entire sector.

Supporting independent community pharmacies to succeed professionally and commercially for the benefit of their patients.



The Company Chemists' Association

The trade association for large pharmacy operators in England, Scotland and Wales.

The vision is that everyone, everywhere, can benefit from world class healthcare and wellbeing services provided by their community pharmacy..

The Collaboration: Participants continued



Royal Pharmaceutical Society

The professional membership body for pharmacists and pharmacy.

Putting pharmacy at the forefront of healthcare.

Vision: to become the world leader in the safe and effective use of medicines.



The Pharmacists' Defence Association

All pharmacy professionals contribute to delivering and improving the health, safety and wellbeing of patients and the public.

Professionalism and safe and effective practice are central to that role.



Pharmaceutical Services Negotiating Committee

Promoting and supporting the interests of all NHS community pharmacies in England.

We are recognised by the Secretary of State for Health and Social Care as the body that represents NHS pharmacy contractors.

A close-up photograph of a person's hands writing in a spiral notebook with a black pen. The person is wearing a light-colored, patterned shirt. The background is slightly blurred, showing a wooden desk and other papers.

A 2-year collaboration

Standards typically a 2-3 year project

2 years: Apr 2023 – Mar 2025 (publication)

One engagement event per month (comprising):

- 1 introductory plenary (launch meeting)
- 20 on-line meetings
- 3 in-person review summits (approx. at 6 month intervals)
- 1 in-person sign off event – towards the end of the second year

Mid-point strategy review in March 2024

Participation fees in two equal instalments



A typical month

Meeting preparation / coordination

Meeting: online 1 hour ; in person ½ day

Outputs collated, curated into an initial draft (editor)

Draft content reviewed / referenced (PHD students)

Draft content circulated to participants for review

Comments / variations incorporated

The review process repeated (if necessary)

The 'chapter' finalised



Method and Content

What is a standard? Modern authoritative opinion alongside the evidence base? Set by regulator?

Distilled wisdom of people with expertise in on-line pharmacy provision who know the needs of the organisations they represent?

Level of detail. Principles of practice and/or disease specific prescribing?

Develop a service that meets 'customer' expectations?

Linked to government policy, legal considerations, indemnity?

Limitations of current system e.g. universal access to records.



Publication & launch

Guidelines (internal use only)

- Technical report made available to all participants
- Not for onward publication (without group permission)
- The basis for online standards and audit

Report (external, published)

- An abridged report of the key themes
- Socialised widely by all participants
- Launch event (House of Lords likely)
- Sponsored (case studies x10, TBA)



Likely costs (£000s)

Set up	9.0
Monthly interim meetings	28.8
Quarterly contact and review plenaries	16.2
Deep-dives	13.5
Concluding plenary - confirm core themes	3.6
First content draft	31.5
Create final version / proof /design & sign off	9.0
Prepare/ promote/ deliver launch event	4.5
<u>Total overhead</u>	<u>116.1</u>
Specialist writer / editor	7.2
Proofing / expert review	1.2
Design	5.0
Legal review	10.0
HoL's reception	3.5
<u>Total direct cost</u>	<u>26.9</u>
<u>Total budget costs</u>	<u>143.0</u>

Potential income (to cover costs, £000s)

Options to consider



DiCE members

- Large Co: £10K, 5 members 50.0
 - Small Co: £5K, 10 members 50.0
- Both split 50/50 years 1&2

Total DiCE members 100.0

Pharma participation – ‘during’

- Premium (strong engagement), £25K, 5 companies 125.0
- Standard (light engagement), £10K, 5 companies 50.0

Total pharma (during) 175.0

Pharma participation – publication sponsorship

- Premium (overall), £40K, 1 company 40.0
- Standard (case studies), £10K, 10 companies 100.0

Total pharma (publishing) 140.0

Partner participation

- Individual agreement on contributions ?

Total partner ?

WHO

WHEN

WHERE

HOW

WHY

WHAT

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