# Healthy Living Pharmacies Level 1 Self-Assessment Tool

In advance of your compliance visit please complete this self-assessment tool recording the evidence that will be made available at the visit and its location (portfolio of evidence, consultation room, counter display etc). This will ensure that the process is time efficient and there will be of minimum disruption to your customers and business.

[The Healthy Living Pharmacies Level 1 Quality Criteria](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/538638/HLP-quality-criteria-and-self-assessement-process.pdf) states that as part of your self-assessment process, you are required to compile a portfolio of evidence and cross-reference it with details about the types of evidence you must and could provide, please refer back to the Quality Criteria if you are unsure. Please note:

* You must cross-reference your portfolio and your complete self-assessment tool
* you must organise the portfolio in a logical way
* you must include at least one example of evidence for each criterion.
* you may use the same piece of evidence to support more than one criterion
* you can include hyperlinks to websites in your self-assessment tool, however please ensure that hard copies of these are included in your portfolio.

## General Details

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| Pharmacy Name and address: |  |
| Registered Professional Name: |  | Pharmacist - GPhC Number: |  |
| Date of completion: |  |  |

## Quality Criteria

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| **Quality Standards Criteria WORKFORCE DEVELOPMENT part 1** | **Evidence type and name (e.g. NHS Havering leaflet ‘Give up smoking for free’)** | **Evidence location (portfolio, consultation room, counter etc)** |
| **Public Health Needs** | * All pharmacy staff have an awareness of the local public health and pharmaceutical needs outlined in the Joint Strategic Needs Assessment (JSNA), Pharmaceutical Needs Assessment (PNA) and Health Profiles[[1]](#footnote-1) for their area including where and how to access them.

**Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy:*** Pharmacists and their teams are aware of the wider factors influencing health (including health literacy, socio-economic, ethnic and genetic factors) and the health needs of their local population and community[[2]](#footnote-2).
* The pharmacy team is aware of key national and local policies and strategies to improve and protect health and identifies and implements implications and opportunities for pharmacy[[3]](#footnote-3).
* Pharmacy initiatives are aligned with public health policy at local, national and global levels and support the implementation of strategic national and local delivery plans[[4]](#footnote-4).
* Pharmacists and their teams are aware of the groups and communities within their local population at most risk of experiencing health inequalities and take steps to assist them in accessing and delivering public health services to meet their needs[[5]](#footnote-5).
* Pharmacists and their teams seek opportunities to deliver public health services based on local public health need[[6]](#footnote-6).
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|  | **Quality Standards Criteria WORKFORCE DEVELOPMENT part 2** | **Evidence type and name (RSPH Level 2 Award certificate of staff)** | **Evidence location (portfolio, consultation room, counter etc)** |
| **Health and Wellbeing Ethos** | * All pharmacy staff understand the basic principles of health and wellbeing, and that every interaction is an opportunity for a health promoting intervention.
* At least **one** member of pharmacy staff (1 Full Time Equivalent) has completed the training and assessment of the Royal Society for Public Health (RSPH) Level 2 Award in Understanding Health Improvement and is therefore a Health Champion.

**Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy:**Pharmacists and their teams are confident and knowledgeable and provide health lifestyle* advice and information that is clear and consistent with national and/or local health messages[[7]](#footnote-7).
* Pharmacists and their teams seek opportunities to provide patients and the public with advice and information to enable people to look after their own and their family’s health and support self-care[[8]](#footnote-8).
* Advice provided by pharmacy staff is evidence-based wherever possible[[9]](#footnote-9).

Pharmacists and their teams deliver services which support self-care and enable people to take responsibility for their own and their family’s health[[10]](#footnote-10). | **Evidence of successful completion of training MUST be available and will be inspected if your pharmacy is visited** |  |

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|  | **Quality Standards Criteria WORKFORCE DEVELOPMENT part 3** | **Evidence type and name (leadership training proof)** | **Evidence location (portfolio, consultation room, counter etc)** |
| **Team Leadership** | * An individual from the pharmacy team has undergone leadership training internally or through an organisation that maps to/encompasses the following domains[[11]](#footnote-11):
	+ **Inspiring a shared purpose** – Valuing a service ethos, curious about how to improve services and care, behaving in a way that reflects the principles and values of the organisation.
	+ **Sharing the vision** – Communicating a compelling and credible vision of the future in a way that makes it feel achievable and exciting.
	+ **Engaging the team –** Involving individuals and demonstrating that their contributions and ideas are valued and important for delivering outcomes and continuous improvements to the service.
	+ **Developing capability –** Building capability to enable people to meet future challenges, using a range of experiences as a vehicle for individual and organisational learning, acting as a role model for personal development.
	+ **Influencing for results** – Deciding how to have a positive impact on other people, building relationships to recognise other people’s passions and concerns, using interpersonal and organisational understanding to persuade and build collaboration.
* There is a clear leader within the team who is responsible for creating an ethos of proactive health and wellbeing within the pharmacy.
* There is effective leadership within the team that encourages the best use of team members’ skills and creates an environment that supports and mentors other team members.

The leader, jointly with the pharmacy team, has developed an action plan on achieving Level 1 HLP. | **Evidence of successful completion of training MUST be available and will be inspected if your pharmacy is visited**  |  |

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|  | **Quality Standards Criteria WORKFORCE DEVELOPMENT part 4** | **Evidence type and name (e.g. customer feedback mechanisms)** | **Evidence location**  |
|  | **Communication*** All pharmacy staff can use NHS choices, the local public health information and pharmaceutical needs information, bearing in mind the findings of e.g. PNAs and JSNAS such as location of services, when providing advice on health issues when appropriate.
* The pharmacy team is friendly, welcoming and sensitive to the need for privacy for different individuals seeking advice including respecting people’s values and beliefs.
* The pharmacy team routinely explain who they are, wear a name badge and inform people about the information and/or services on offer.
* All pharmacy staff receive training on how to approach people to discuss difficult or sensitive public health issues.
* All pharmacy staff are able to provide brief health and wellbeing advice (2-3 minutes) and have an awareness that the person may need additional support for behavioural change.

**Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy:*** Pharmacists and their teams communicate and signpost public health advice and information in a clear, non-judgemental and consistent way[[12]](#footnote-12).
* Pharmacists and their teams provide non-judgemental support to improve health literacy and access to health related information to enable people to set their own health goals to achieve better population health outcomes[[13]](#footnote-13).
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|  | **Quality Standards Criteria ENGAGEMENT part 1** | **Evidence type and name (e.g. list of signposting services details)** | **Evidence location**  |
| **Community Engagement** | * The pharmacy team proactively engages with patients and the public in the pharmacy, to offer them advice, support and signposting to other providers of services in the community where applicable.
* The pharmacy team actively works in collaboration with other community organisations (e.g. schools, care homes, local events, charities) to deliver pharmacy outreach and or services.
* The pharmacy team is aware of health and wellbeing resources available in the community to direct the public/patients to (e.g. support groups, community exercise groups).
* The pharmacy encourages local charities and other providers to work with the pharmacy for delivery of key health messages/displays where appropriate.
* The pharmacy team is aware of appropriate health and social care providers in their community (e.g. specialist clinics, Healthwatch, Smoking Cessation, Drug and Alcohol Services, Health Trainer Service), which Local Authorities could provide information about.

**Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy:*** Pharmacists and their teams work in partnership with other practitioners and agencies to provide evidence-based advice and information to improve the health and wellbeing of their local communities and improve health literacy[[14]](#footnote-14).
* Pharmacists and their teams take the lead to engage effectively with a range of different audiences and stakeholders through written communications and face-to-face interaction to ensure collaborative working in health[[15]](#footnote-15).
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|  | **Quality Standards Criteria ENGAGEMENT part 2** | **Evidence type and name (e.g. Information about local commissioners with contact details)** | **Evidence location**  |
| **Commissioner Engagement** | * The HLP lead is aware of the local commissioners for public health services, which may include Local Authority, NHS England, Clinical Commissioning Group, etc.
* The pharmacy team is aware of the commissioner contacts if seeking to submit bids for public health services.
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|  | **Quality Standards Criteria ENVIRONMENT part 1** | **Evidence type and name (e.g. photographic evidence of clearly marked Health Promotion Zone)** | **Evidence location**  |
| **Health Promoting Environment** | * It is clear to the public that free, confidential advice on their health and wellbeing can be accessed.
* The pharmacy has a dedicated **Health Promotion Zone**, that:
* Is clearly marked and accessible,
* Has a professional appearance and
* Is appropriately equipped with up-to-date professional health and wellbeing information that meets the local public health needs as suggested in the JSNA/PSNA, Annual Report of the Director of Public Health or after discussion with commissioners/public health professionals.
* The health and wellbeing information available appeals to a wide range of the public including men and women, young people, smokers, people with long term conditions, learning difficulties and older people. Where the community includes a significant ethnic minority group, then their needs must be accommodated.
* All materials should be generic and not promoting a specific brand over another, which can be seen as endorsement or promotional.
* The Health Promotion Zone resources should be updated at least every two months to ensure information provided is relevant, up-to-date and appropriate.
* Once accredited, the HLP logo is displayed in prominent places.

**Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy:*** Information about the availability of pharmacy public health services is readily available to patients and the public[[16]](#footnote-16).
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|  | **Quality Standards Criteria ENVIRONMENT part 2** | **Evidence type and name (e.g. Copy of data collection processes and procedures)** | **Evidence location**  |
| **Data Collection** | * Procedures are in place to ensure emails are checked regularly and that they are appropriately secure. Internet access enabled for accessing locally and nationally recognised websites.

**Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy:*** Where data are collected in pharmacy settings, staff have access to computers, software and the internet to be able to carry out data collection effectively[[17]](#footnote-17).
* Where data are collected in pharmacy settings, this is relevant for the purpose that it is collected and supports pharmacy gaining a better understanding of both individual and population health needs[[18]](#footnote-18).
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|  | **Quality Standards Criteria ENVIRONMENT part 3** | **Evidence type and name**  | **Evidence location**  |
| **Sustainability** | * The pharmacy contributes to a sustainable environment and this is reflected in the way they operate their business (e.g. using recyclable materials).
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| Any additional points of which it would be helpful for the examiner to be aware? |
| Completed by: | Date: |

1. Health Profiles: Public Health Observatories: [www.healthprofiles.info/](http://www.healthprofiles.info/) [↑](#footnote-ref-1)
2. Standard 4.2 Health Improvement – Communication. Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy: <http://www.rpharms.com/unsecure-support-resources/professional-standards-for-public-health.asp> [↑](#footnote-ref-2)
3. Standard 7.2 Policy and Strategy Development and Implementation – Interpreting and applying. Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy: <http://www.rpharms.com/unsecure-support-resources/professional-standards-for-public-health.asp> [↑](#footnote-ref-3)
4. Standard 7.2 Policy and Strategy Development and Implementation – Interpreting and applying. Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy: <http://www.rpharms.com/unsecure-support-resources/professional-standards-for-public-health.asp> [↑](#footnote-ref-4)
5. Standard 4.3 Health Improvement – Service delivery. Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy: <http://www.rpharms.com/unsecure-support-resources/professional-standards-for-public-health.asp> [↑](#footnote-ref-5)
6. Standard 4.3 Health Improvement – Service delivery. Royal Pharmaceutical Society Professional Standards for Public Health Practice for Pharmacy: <http://www.rpharms.com/unsecure-support-resources/professional-standards-for-public-health.asp> [↑](#footnote-ref-6)
7. Standard 4.1 Health Improvement – Advice and information. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-7)
8. Standard 3.1 Assessing the evidence of effectiveness of health and healthcare interventions, programmes and services – Pharmacy Advice. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-8)
9. Standard 4.1 Health Improvement – Advice and information. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-9)
10. Standard 4.3 Health Improvement – Service delivery. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-10)
11. Royal Pharmaceutical Society – Leadership Development Framework: <http://www.rpharms.com/support-pdfs/rps---leadership-development-framework-january-2015.pdf> [↑](#footnote-ref-11)
12. Standard 4.2 Health Improvement – Communication. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-12)
13. Standard 4.1 Health Improvement – Advice and information. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-13)
14. Standard 4.1 Health Improvement – Advice and information. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-14)
15. Standard 8.1 Strategic leadership and collaborative working for health – Leadership. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-15)
16. Standard 6.2 Health and social service quality – Reliability. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-16)
17. Standard 1.1 Surveillance and assessment of the population’s health and wellbeing – Accuracy. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-17)
18. Standard 1.2 Surveillance and assessment of the population’s health and wellbeing – Relevance. Royal Pharmaceutical Society Leadership Competency Framework for Pharmacy Professionals: <http://www.rpharms.com/pressreleases-pdfs/1445---rps-lcf-document---final.pdf> [↑](#footnote-ref-18)