

Dear Colleague

## COMMUNITY PHARMACY CONTRACT: INFRASTRUCTURE SUPPORT – STAFF TRAINING

### Purpose

1. This circular provides NHS Boards and community pharmacy contractors with details of the financial support being made available for staff training for the period 1 December 2017 – 31 March 2018.

### Detail

2. Circular PCA(P)(2017)11, issued in October 2017, set out the details of financial support for staff training available to community pharmacy contractors for courses undertaken/completed in 2017 up until 30 November 2017. It advised that a separate circular would be issued for the 1 December 2017 – 31 March 2018 period and so the arrangements are stated below.

3. Funding for staff training will be met from the centrally held Pharmaceutical Services line.

4. The courses for which support funding is available are:

- Pharmacy Services Level 2: NVQ/SVQ;
- Pharmacy Services Level 3: NVQ/SVQ;
- Accredited Checking Technician: NPA Accuracy in Dispensing Training Module or equivalent; and
- SQA Professional Development Award (PDA) in Final Accuracy Checking by Pharmacy Technicians

23 January 2018

### Addresses

#### For action

Chief Executives, NHS Boards

#### For information

Chief Executive, NHS NSS  
Director of Practitioner  
Services, NHS NSS  
NHS Directors of Pharmacy

### Enquiries on staff training to:

Anne Watson  
NES Pharmacy  
2 Central Quay  
89 Hydepark Street  
GLASGOW  
G3 8BW

Tel: **0141 223 1608**

Email:

[pharmacy@nes.scot.nhs.uk](mailto:pharmacy@nes.scot.nhs.uk)

### General enquiries to:

Elaine Muirhead  
Pharmacy & Medicines  
Division  
1<sup>st</sup> Floor East Rear  
St Andrew's House  
EDINBURGH  
EH1 3DG

Tel: 0131-244-3433

Fax: 0131-244-2326

Email:

[elaine.muirhead@gov.scot](mailto:elaine.muirhead@gov.scot)

[www.gov.scot](http://www.gov.scot)

## Claims

5. Each contractor, i.e. each community pharmacy, will be able to claim £800 as a contribution towards their costs in putting a permanent member of their staff through one or more of the courses listed above. No more than £800 per contractor is payable and claims must be submitted by the date detailed in paragraph 8 below.

6. The claim and payment process will be managed by NHS Education for Scotland (NES) Pharmacy with resources available with immediate effect.

7. Payment will be made on submission of evidence that a member of the claimant/contractor's staff is about to commence, has commenced or has completed a listed course during the period 1 December 2017 – 31 March 2018. Eligible evidence will be one or more of the following documents:

- Copy invoice of the cost of the training course;
- Letter of registration to the course signed by the training provider; or
- Copy certificate of course completion.

8. Claims should be submitted, on the form attached at **Annex A** together with the required documentation, to Anne Watson, NES (see address details on the form) by **Friday 6 April 2018**.

## Action

9. **NHS Boards are asked to:**

- **Copy this circular and Annex to all community pharmacy contractors on their pharmaceutical lists;**
- **Note the financial arrangements set out above.**

10. **Community pharmacy contractors are asked to:**

- **Note the content of this circular and where they wish to claim support funding, to do so using the form attached as Annex A and in accordance with paragraphs 5-8 above.**

Yours sincerely



Rose Marie Parr  
Deputy Director Pharmacy & Medicines  
Chief Pharmaceutical Officer

**PCS INFRASTRUCTURE DEVELOPMENT FUND  
STAFF TRAINING – FINANCIAL SUPPORT CLAIM FORM FOR COURSES  
UNDERTAKEN 31 DECEMBER 2017 - 31 MARCH 2018**

Contractor PSD Code:.....

Contractor Name & Address:.....  
.....

Name of Staff Member:.....

Name of Course Provider:.....

Course Title:.....

Course Start Date:.....

Course Completion Date (if applicable):.....

**COUNTER FRAUD DECLARATION**

**Declaration**

**I declare** that the information I have provided is correct and complete.

**I understand** that, if I knowingly provide false information, this may result in disciplinary action and I may be liable for prosecution and civil recovery proceedings.

**I agree** to co-operate fully with all payment verification procedures.

**I agree** that any overpayments identified through the post payment verification procedure may be recovered at a future date by the Common Services Agency for the Scottish Health Service.

**Please give us your consent to share, disclose or obtain information**

The Common Services Agency may occasionally share information provided on this form with Health Boards, official training providers and any other relevant organisations. We will share information for the purposes of payment verification, and the prevention, detection and investigation of crime.

Do you have **written consent** from contractors named on this claim form **agreeing to share relevant information** for these purposes? Please indicate by circling YES or NO:

**YES**

**NO**

**Signature agreeing to Declaration and consent to share, disclose or obtain information:**

Signature:.....

Name (in capitals):.....

Company Position:.....

Date:.....

Completed forms should be **returned by Friday 6th April 2018** with the required documentation to:

**Anne Watson,  
NES Pharmacy,  
2 Central Quay  
89 Hydepark Street,  
GLASGOW, G3 8BW.**