

SCHEDULE 2 – THE SERVICES

A. Service Specifications

Mandatory headings 1 – 4. Mandatory but detail for local determination and agreement

Optional headings 5-7. Optional to use, detail for local determination and agreement.

All subheadings for local determination and agreement

Service Specification No.	CP-PALL
Service	Supply of Palliative Care Medicines through Community Pharmacy
Commissioner Lead	NHS Bury Clinical Commissioning Group
Period	1 April 2020 – 31 March 2021
Date of Review	October 2020

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1. Population Needs
<p>1.1 National/local context and evidence base</p> <p>The purpose of this service is for community pharmacies to stock and supply an agreed list of specialist medicines for use in palliative care to allow for an increase in patient care in the community.</p> <p>The purpose of this Locally Commissioned Service Specification is to:</p>

- Support the delivery of End of Life care in the community.
- To avoid distress and additional pressure on out of hours or urgent NHS services arising due to lack of access to medication.
- Equip the commissioner (NHS Bury CCG), service providers and practitioners (community pharmacists) with the necessary knowledge, service and implementation details to safely deliver this service.

2. Outcomes

2.1 NHS Outcomes Framework Domains & Indicators

Domain 1	Preventing people from dying prematurely	
Domain 2	Enhancing quality of life for people with long-term conditions	
Domain 3	Helping people to recover from episodes of ill-health or following injury	
Domain 4	Ensuring people have a positive experience of care	x
Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	

2.2 Local defined outcomes

Preventative Treatment, Reducing Complications

The access to a supply of palliative care medicines during usual opening hours of a pharmacy to allow for an increase in patient care out of hospital.

Reducing Health Inequalities

The scheme is available across Bury from community pharmacies registered on the scheme who commit to continue to provide the service for the full period of the contract.

More Effective Care

The number and location of pharmacies that have agreed to maintain the specialised list allows for a reasonable and prompt access to pharmaceutical care.

True Partnerships, Professionals, Patients and the Public

The community pharmacist is expected to work closely and communicate electronically where required with Primary Care Networks, Acute trusts, the Bury Local Care Organisation, palliative care service providers and patients' GPs.

Keeping Viable

The service is intended to contribute to a reduction in the waiting time for access to the specialist medicines and prevent a possible accident and emergency attendance or admission.

3. Scope

3.1 Aims and objectives of service

The aim of the service is to increase prompt access for patients who require specialist palliative care medicines and provide additional support to patients, carers and clinicians with advice and information.

3.2 Service description/care pathway

The service will be commissioned by the CCG for 1 year to provide the following:

- Agreement to stock a specific list of palliative care medicines to ensure prompt access and continuity of supply.
- Support service users, carer and clinicians providing them with up to date information and advice.
- Signposting to other sources of support and advice including the voluntary sector, where appropriate.

The pharmacy is to hold a specified list of medicines required to deliver this service. This list has been agreed by NHS palliative care service providers across Bury. The specialised list (Appendix 1) also includes the stock levels required in the pharmacy to deliver this service. Stock levels and the specialist list will be regularly reviewed, subject to the availability of new medicines and changes in practice or guidelines, by the community pharmacist and the primary care pharmacy team in conjunction with the palliative care teams.

The community pharmacy must keep a stock of the specialised medicines at all times, unless exceptional circumstances arise, at which point the pharmacy must immediately inform Bury CCG Medicines Optimisation Team via email to; buccg.burymot@nhs.net

3.3 Population covered

This service is available from a selected group of registered community pharmacies on the pharmaceutical list of Greater Manchester Health & Social Care Partnership who provide services to patients receiving palliative and end of life care.

3.4 Any acceptance and exclusion criteria and thresholds

Essential criteria

To be accepted onto the CCG's scheme pharmacies must be :

- Registered with the General Pharmaceutical Council.
- Meeting the core contractual obligations required by Greater Manchester Health & Social Care Partnership.

Desirable criteria

In addition, the following are considered desirable:

- Pharmacies with *extended opening hours.
- Pharmacies that are able to collect or receive prescriptions electronically and deliver medicines to patients' homes.
- Pharmacy staff to have completed or be willing to complete the CPPE palliative care open learning pack or CPD equivalent.

A patient, carer or representative may access the service by presenting or electronically sending the prescription to the participating community pharmacy.

3.5 Interdependence with other services/providers

The list of community pharmacies contracted to offer this service is to be made available to the following:

- GP Practices
- On-call out of hours service provider for GP Practices
- Community Palliative Care team including Macmillan Nurses and palliative care specialist doctors
- District Nursing staff
- Other community staff caring for palliative patients
- All other community pharmacies in the Primary Care Network and Bury footprint
- Accident and Emergency Departments of local NHS hospitals and community services including the Manchester Local Care Organisation
- NHS 111
- CCG Medicines Optimisation team

4. Applicable Service Standards

4.1 Applicable national standards (e.g. NICE)

Usual standards apply

4.2 Applicable standards set out in Guidance and/or issued by a competent body (e.g. Royal Colleges)

Usual standards apply

4.3 Applicable local standards

4.3.1 Record Keeping

The community pharmacist is responsible for completing the normal legal records for the dispensing of prescription only medicines and controlled drugs.

4.3.2 Information Collection

Stock take information is required to be collected on a monthly basis and reported to the CCG for audit purposes. The community pharmacist must also monitor the stock levels of the specialised medicines and ensure that sufficient stock is maintained.

Full records are to be maintained in such a way that the data and details are readily accessible for inspection if required.

4.3.3 Training and Accreditation

No specialist training or accreditation is required over and above the normal requirements for a pharmacist providing dispensing services. However; it is desirable for the community pharmacist to complete the CPPE open learning pack to support this service entitled 'Dealing with difficult discussions'.

<https://www.cppe.ac.uk/news/a?ID=306> Training schedules or relevant continuing professional development records should be made available to the commissioner on request.

The appropriate qualifications and registration with professional bodies for the service provided must be maintained and copies should be provided to the commissioner if requested.

4.3.4 Adverse Incidents

Accredited pharmacists should record all adverse incidents via their internal incident reporting system, and to the CCG medicines optimization team.

4.3.5 Governance

- The pharmacy contractor should ensure that only appropriately qualified staff, including locums, should provide the service to the required professional and ethical standards of care and treatment as to the dispensing of medicines and giving advice to patients. The community pharmacist is responsible for maintaining adequate staffing levels to provide the service and for maintaining their CPD (Continuing Professional Development).
- The pharmacy contractor must ensure that all staff, including locums, are aware of the service and understand the requirements of this specification.
- The contractor is required to comply with all relevant legislation and by the CCG and including. E.g. Royal Pharmaceutical Society
- The contractor will be compliant against all requirements in the relevant NHS data security and protection toolkit as per the provider's core contract with Greater Manchester Health & Social Care Partnership.
- The CCGs Medicines Optimisation team will undertake regular checks of stocks held by the contracted pharmacists.

4.3.6 Key Performance Indicators

The contractor will be performance managed against the following:

- The pharmacy is meeting their core contractual obligations with NHS England Area Team.
- Maintaining and supplying the agreed list of medicines at the required levels contained within the relevant formulary (appendix 1) at all times. Monthly stock reporting will be required to ensure delivery against this service specification.

5. Applicable quality requirements

5.1 Applicable quality requirements (See Schedule 4 Parts A-D)

The pharmacy contractor should ensure the following:

- All goods used in the performance of the agreement should be of a satisfactory quality and be fit for the purpose for which they are used;
- Standard operating procedures (SOP) should be reviewed by the pharmacy on an annual basis and the pharmacy should ensure that all staff are following the most current, up to date SOP for the service.
- The pharmacy has a complaints procedure for monitoring the services provided;
- The pharmacy will co-operate with any review of the client experience.

6. Complaints

6.1 Complaints

Complaints will be looked at individually to understand the circumstances surrounding the complaint.

7. Financial Details

Payments are made to the pharmacy contractor, one month in arrears following submissions, as per the following schedule:

The pharmacy will receive a one-off payment of £650 to enable the purchase of the drugs listed in Appendix 1. These are drugs which are often required for patients receiving palliative care but which are not normally stocked by community pharmacists. Individual

pharmacies are responsible for the initial purchase and re-stocking to the agreed level of the drugs listed in Appendix 1.

If the contract is terminated within the first 12 months, the CCG reserves the right to take back a proportion of the one-off payment above.

A retainer fee of £125 will be paid quarterly to every pharmacy that demonstrates, via reporting mechanisms on a monthly basis, that they have a full stock of required medication and where required the CCGs Medicines Optimisation team have undertaken a check of stocks held by the contracted pharmacists and found to be in line with the service specification.

A re-imburement by the CCG for expired medicines using the appropriate claim forms including evidence of batch number and expiry dates.

8. Signatures

The commissioner and contractor agree that the contractor shall provide the service in accordance with this service specification. In consideration of the service provision, the commissioner shall reimburse the pharmacy as in section 7.

On Behalf of the Pharmacy Contractor:

Signed:

Name:

Designation:

Date:

On Behalf of the Commissioner:

Signed:



Name:

Salina Callaghan

Designation:

Head of Medicines Optimisation

Date:

2.4.20

Appendix I:



Drugs list for
palliative care - March