



**Tameside and Glossop**  
Clinical Commissioning Group

## **Palliative Care Medicines Stock Holding**

### **SERVICE SPECIFICATION**

## Palliative Care Medicines Stock Holding

### Service Specification

#### 1. Background

The registered population of Tameside and Glossop is 249,334 patients registered across 37 General Practices.

The demand for specialist palliative care medicines can be urgent and/or unpredictable. In addition, community pharmacies do not generally hold a stock of all these medicines, which can lead to a shortfall in provision of medicines for patients who are terminally ill and/or receiving end of life care.

The Palliative Care Medicines Stock Holding Service is a locally commissioned service but in line with similar services employed across Greater Manchester. End of Life medicines to be provided from community pharmacies across Tameside and Glossop. These pharmacies will maintain an agreed stock of medicines used in the treatment of palliative care patients. The CCG agrees to reimburse pharmacies should any medicine be held beyond the expiry date and make a stock holding payment as indicated in this SLA.

#### 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	✓
Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	✓

#### Local defined outcomes

- 1.1. To reduce the incidence of delayed access to Palliative Care medication.
- 1.2. To ensure the public has access to palliative care medicines during both normal working hours, and evenings and weekends.
- 1.3. To support patients, carers and clinicians by providing them with up to date information and advice and referral to specialist palliative care, where appropriate.

#### 2. Service Scope

- 2.1 The pharmacy contractor must have a standard operating procedure (SOP) in place for this service. All staff involved in the provision of this service should ensure they are familiar with and adhere to the SOP.

**2.2** The SOP will include:

- List of agreed medicines (Appendix 2)
- Details of wholesalers – delivery/order times and contact details
- Contact details of other pharmacies providing the service (Appendix 1)
- Contact details for the commissioner lead
- Record of stock check
- Significant event reporting
- Any other relevant procedures to ensure health and safety and infection control procedures are maintained in line with any relevant guidelines

**2.3** The provider must ensure the regular or locum responsible pharmacist makes provision for this service when presented with a legal prescription for palliative care medicines.

**2.4** The provider will complete stock levels check, expiry dates regularly and once a month the PharmOutcomes EoL stock module. This will report stock unavailability to NHSE and the commissioner. NHSE will work with the wholesaler system to move stock around the regions to try and reduce stock shortage impact. The commissioner will review the EoL formulary on the basis of continued shortages.

**2.5** The pharmacy contractor will maintain a minimum stock level as specified in Appendix 2. This includes the medicines list to support management of palliative care patients in line with [GMMMG Palliative Care Pain and Symptom Control Guidelines for Adults](#). There will be allowances made for medicines issued and awaiting delivery from the wholesaler and where stock is unavailable due to manufacturing problems.

**2.6** Where the patient resides in a care home or nursing home the pharmacy contractor will provide a MAR chart for any medicines dispensed under this service.

**2.7** The commissioner will share all details of pharmacies that have agreed to provide this service (Appendix 1), together with contact details with all community pharmacies, all GP Practices, Out of Hours (OOH) services, NHS 111 and local palliative care teams in Tameside and Glossop.

**2.8** The commissioner has made available a dedicated phone use in End of Life supply situations. The provider will ensure all staff are aware of the dedicated phone and its use. The commissioner will share mobile numbers with prescribers across Tameside and Glossop with the emphasis made on that this is a dedicated number only to be used for End of Life situations. The provider should notify the commissioner if prescribers are utilising the End of Life direct number for other issues not related to End of Life. The provider must have the phone on during contractual opening hours.

**2.9** Where a medicine is unavailable, for whatever reason, the pharmacy will endeavour to identify an alternative point of supply for the patient or their representative in a timely manner. The pharmacy should contact another pharmacy holding the stock (Appendix 1) and signpost where necessary.

**2.10** Pharmacists will be available to offer professional advice to patients and carers on the medicines dispensed and their use within palliative care.

**2.11** The pharmacy must be able to demonstrate compliance with the NHS England Central Alerting System, including alerts and recalls.

**2.12** The pharmacist must be able to demonstrate ongoing CPD and may wish to undertake an update in palliative care through private study and attendance at relevant teaching sessions.

**2.13** All incidents involving controlled drugs should be reported to NHS England via the CD reporting tool (<https://www.cdreporting.co.uk/>).

**2.14** Any changes in pharmacy owner will be communicated to the commissioner lead.

**2.15** Pharmacies have been asked to participate in supply of EoL medicines due to location and opening hours. Changes in opening hours must be communicated to NHSE due to contractual requirements and also to the commissioner; Tameside and Glossop CCG as this may result in a review of service provision.

**2.16** If, for whatever reason, the provider ceases to provide the essential services under the pharmacy contractual framework then the provider will become ineligible to provide this locally commissioned service.

### **3. Population covered**

**3.1** Patients/representatives presenting a legal prescription for dispensing in a community pharmacy in Tameside and Glossop

### **4. Interdependencies with other services/providers**

**4.1** The provider will hold contact details of other local pharmacies providing the service, in order to identify an alternative point of supply where stock is not available.

**4.2** The commissioner will work closely with other community pharmacies, all GP practices, GMHSCP, Out of Hours providers and palliative care specialists as appropriate to ensure on-going effective EoL medicines provision.

### **5. Commissioner Responsibilities**

**5.1** The commissioner, or a Medicines Management Team member, may carry out spot checks of stock and documentation when necessary and where it is convenient to the pharmacy.

**5.2** The commissioner will improve awareness of specialist palliative care services and the availability of support and advice.

**5.3** The commissioner will promote the service to prescribers and other health and social care services across Tameside and Glossop

## **6. Quality Indicators**

- 6.1** The provider should review its SOP for this service on an annual basis and ensure all staff, including locums are aware of the SOP.
- 6.2** The provider makes provision for this service at all times during their contractual hours
- 6.3** The provider can demonstrate that pharmacists and staff involved in the provision of this service have undertaken CPD, appropriate to palliative care.
- 6.4** The provider completes the once a month PharmOutcomes stock report.
- 6.5** The provider must ensure all efforts have been exhausted to replenish stock to maintain a minimum stock level as outlined in Appendix 2

## **7. Information Governance**

- The Provider must have comprehensive information governance policy and procedures in place to include
- Appropriate information management and governance systems and processes to safeguard patient information and compliance with confidentiality and Data Protection laws/regulations and Confidentiality Codes of Practice (such as DOH code).
- This will need to be supported by appropriate training and contracts for all staff. All information must be secure in any form or media, such as paper or electronic system.
- Any exchange of personal/sensitive data must be to support the health need of the subject and via appropriate secure method/process;
- All staff must respect the confidentiality of any information relating to the Tameside and Glossop CCG, its staff or its patients;
- The service will ensure that all data processing is done in the European Economic area, or if not, that appropriate safeguards are in place, as required by the Data Protection Act;
- The Provider will be responsible for the secure storage of all records, including paper. At the end of the contract, these will be transferred to the Tameside and Glossop CCG, or successor organisation;
- The Provider must ensure records are held in adherence to the NHS defined retention periods.
- The Contractor and The Commissioner recognise that this service specification and/or associated recorded information may be subject to Freedom of Information requests (FOI). Each party shall comply with any such Freedom of Information requests received, in accordance with the Freedom of Information Act 2000 legal obligations.
- A copy of the service specification is to be kept by the service provider and available for reference by all staff.
- All data will remain the property of The Commissioner.
- Each participating contractor must have in place and follow a comprehensive confidentiality policy and comply with Caldicott / information governance Caldicott / Information Governance Lead / General Data Protection Regulation (GDPR)

## **8. Clinical Governance**

- The provider is expected to demonstrate robust clinical governance to ensure the safety, efficacy and a positive patient experience of the service is maintained.
- The Provider should have a robust incident reporting system with a greater proportion

- of no or low harm incidents reported to demonstrate staff awareness of patient safety.
- The provider will directly report any incidents relating to the service to the Commissioner and if serious to NHS England in line with the contractual framework requirements. In response to incidents or near-misses the Pharmacy will reflect on current practice and, if appropriate, implement changes to reduce the risk of a similar event and improving the quality of care provided.
  - The Provider must have in place arrangements for effecting change to continuously drive improvements and demonstrate that lessons learnt from such events have been shared throughout the organisation. The Provider is required to obtain an appropriate level of indemnity for clinical negligence based on the activities and services to be provided under the Contract that is in line with the local standards.
  - The Provider is required to have a detailed Clinical Governance policy in place and follow that.
  - The provider will effectively manage any complaints using the Community Pharmacy's own internal complaints procedures which must be consistent with the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009, as amended and manage any incidents in line with the requirements of the NHS Contractual Framework for Community Pharmacy.
  - The provider will inform the commissioner of any complaint relating to the service.

## **9. Equality and Diversity**

- 9.1.** All services should be equally accessible by all which includes making reasonable adjustments where appropriate. In terms of reducing inequalities service development should be guided by the most vulnerable in society. This includes those facing barriers posed by poverty, language, stigma and discrimination. Providers will be expected to comply with both the General and Specific Public Sector Equality Duties of the Equality Act 2010.

## **10. Payment**

- 10.1** An annual retainer of £500 will be paid in quarterly instalments made dependent upon the submission of a weekly stock report, made on a Thursday by the pharmacy to NHSE and the commissioner via PharmOutcomes.
- 10.2** The provider should invoice the commissioner via the Medicines Management Team no later than 14 days prior to the end of each quarter for £125 (Appendix 4). The commissioner will pay this amount dependent on whether the provider has met with the requirements of submission of a monthly stock report as highlighted in 10.1. No payments for the previous financial year will be processed by the commissioner, therefore, it is important that the provider should invoice in a timely manner.
- 10.3** Reimbursement will also be made for expired stock where reported on PharmOutcomes or where an item is removed from the formulary during the course of the contract. If requested, the provider should be able to provide evidence of the product expired.

**10.4** The provider should invoice the commissioner for any reimbursements due as a result of 10.3 (Appendix 4)

**10.5** Payment for medication dispensed will be made through normal NHS Prescription Services arrangements.

**11. Termination of contract**

**11.1** The commissioner and the contractor should give 3 months’ notice of either party’s desire to terminate the service. Similarly the commissioner will give 3 months’ notice of any change to terms of service

**11.2** The service will be reviewed by the Commissioner annually.

**11.3** Where contractors stop providing this service, they should inform the Management Team immediately via Peter Howarth (07791020289) or Faisal Bokhari (07920471226) and endeavour to re-engage in the service as soon as possible

**12. Appendix 1 – Pharmacies holding stock**

Trading Name *100 hour pharmacy	Address of Contractor 1	Address of Contractor 2	Postcode	Telephone number	Opening Hours <i>(Please contact Pharmacy to ensure they are open)</i>
Lloyds Pharmacy*	Lord Sheldon Way	Ashton U Lyne	OL6 7UB	0161 343 2877	Mon: 07.00-23.00 Tues:07.00-23.00 Wed: 07.00-23.00 Thurs: 07.00-23.00 Fri: 07.00-23.00 Sat: 07.00-22.00 Sun: 11.00-17.00
Asda Pharmacy*	Cavendish Street	Ashton U Lyne	OL6 7DP	0161 342 6610	Mon: 08.00-23.00 Tues:07.00-23.00 Wed: 07.00-23.00 Thurs: 07.00-23.00 Fri: 07.00-23.00 Sat: 07.00-22.00 Sun: 10.30-16.30
Boots the Chemist*	Crown Point North Retail Park, Ashton road	Denton	M34 3LY	0161 336 0794	Mon: 08.00–00.00 Tue: 08.00–00.00 Wed: 08.00–00.00 Thurs: 08.00–00.00 Fri: 08.00–00.00 Sat: 08.00–22.00 Sun: 11.00–17.00
Tesco In-Store Pharmacy	Wren Nest Road	High Street West, Glossop	SK13 8HB	0345 677 9299	Mon: 08.00-20.00 Tue: 08.00-20.00 Wed: 08.00-20.00 Thurs: 08.00-20.00 Fri: 08.00-20.00 Sat: 08.00-20.00 Sun: 10.00-16.00
Tesco In-store Pharmacy*	Ashworth Lane	Hyde, Hattersley	SK14 6NT	0345 610 2904	Mon: 08.00-22.30 Tue: 06.30-22.30 Wed: 06.30-22.30 Thurs: 06.30-22.30 Fri: 06.30-22.30

					Sat: 06.30-22.00 Sun: 11.00-17.00
Tesco In-store Pharmacy*	Trinity Street	Stalybridge	SK15 2BJ	0345 677 9634	Mon: 08.00-22.30 Tue: 06.30-22.30 Wed: 06.30-22.30 Thurs: 06.30-22.30 Fri: 06.30-22.30 Sat: 06.30-22.00 Sun: 10.00-16.00

### 13. Appendix 2 – Palliative Care Drugs List

The drug list may be altered, based on the needs of the local population and changes in prescribing trends within palliative care. This will be subject to notice from the Commissioner and only follow consultation with palliative care providers.

<u>Drug</u>	<u>Strength</u>	<u>Quantity</u>
Morphine Injection	10mg	10 ampoules
Morphine Injection	15mg	10 ampoules
Morphine Injection	20mg	10 ampoules
Cyclizine Injection	50mg/ml	10 ampoules
Water for Injection	10ml	30 ampoules
Levomepromazine	25mg/ml	10 ampoules
Glycopyrronium Bromide	200mcg/ml	10 ampoules
Midazolam	10mg/2ml	10 ampoules
Sodium Chloride	0.9%/10ml	10 ampoules
Oxycodone Injection	10mg/1ml x 1ml amps	10 ampoules
Dexamethasone	3.3mg/ml	10 ampoules

### 14. Appendix 4 – Invoicing the commissioner

#### 14.1 Send an Electronic Invoice via Tradeshift

- By far the best way to send us your invoices is electronically via our E-Invoice partner Tradeshift. This helps the NHS meet their paperless invoice targets and improves the quality of information across the system.
- This service is free to use and either:



- Integrates your financial system with ours; giving you instant confirmation of submission and near real-time view of your invoices within your systems

Or

- Gives you web portal access to submit and track your invoices; with instant confirmation of submission and then 15 minute updates as to the location of the invoice within the system
- For more information and to register, please visit:  
<http://tradeshift.com/supplier/nhs-sbs/>

#### **14.2 Send a PDF Copy via Email**

- We have recently upgraded our inbound invoice solution and can now accept single Invoice PDFs by email. This email address is only used for processing invoices. Only emails received which meet the specified format will be processed. Emails which do not meet these criteria will be automatically deleted with notification.
- For information on how to do this please see our guidance online here:  
<https://www.sbs.nhs.uk/faq-fa-sub-inv-how-to-nhs-sbs>