

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.	
Service	Coordination of Pharmaceutical Support Service in the Out of Hours Period
Commissioner Lead	Gemma Donovan
Provider Lead	Steve Foster
Period	1 st April 2017 to 31 st March 2018
Date of Review	31 st March 2018

1. Population Needs

1.1 National/local context and evidence base

There is a well-documented need for access to palliative care medicines in the out-of-hours (OOH) period where patients have a pharmaceutical need but there is a lack of pharmacy services for supply of medication. This service specification has been developed following a review of the palliative care access to medicines pathway in June 2015. Ensuring that this access is available support patients to die in their preferred place, free from pain and prevents unnecessary hospital admissions.

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

2.2 Local defined outcomes

Patients at the end of life dying in their preferred place, access to medicines for specialist palliative care services during the out of hours period and a reduction in unnecessary hospital admissions for patients at the end of life.

3. Scope

3.1 Aims and objectives of service

To enable access to medications used at the end of life during the out of hours period. This service specification relates to the coordination of this service to enable its delivery.

3.2 Service description/care pathway

3.2.1 Workforce

During the out of hours period, the coordinator will arrange for a community pharmacist within Sunderland CCG to be "on-call". The number of providers for the service will be decided by the coordinator. All pharmacists providing the service must have access and authorisation to open a pharmacy in the out-of-hours period. All providers must be located within the Sunderland CCG boundary.

The Service Coordinator will ensure that all are familiar with the requirements.

3.2.2 Care Pathway

Practitioners working with patients at the end of life during the OOH period will be able to contact the on-call community pharmacist to arrange for a community pharmacy to be opened for a prescription for urgent medications to be dispensed

Where the prescribing clinician generates a prescription at the patient's home address, an image of prescription will be sent to the pharmacist electronically by the prescriber via nhs.net in the first instance. The on-call pharmacist will evaluate the prescription upon receipt and notify the prescriber of any issues or problems as soon as possible. The on-call pharmacist will confirm with the prescriber an estimated time of delivery of medications to the patient's home.

Where the prescribing clinician generates a prescription remotely e.g. in an urgent care centre, the on-call pharmacist will need to arrange for the prescription to be collected and transported to the pharmacy for dispensing. The on-call pharmacist will evaluate the prescription upon receipt and notify the prescriber of any issues or problems as soon as possible. The on-call pharmacist will confirm with the prescriber an estimated time of delivery of medications to the patient's home.

Once a prescription has been received, the pharmacist will make their way to the pharmacy to dispense the medication (in advance of receiving the prescription where needed). The prescription should be dispensed in line with usual procedures and regulations.

The pharmacist should then arrange for the medication to be delivered to the patient's home (and the prescription collected where appropriate).

A diagrammatic version of the pathway can be found in appendix 1.

3.2.3 Records

A record will be made of supplies made using the service for remuneration and monitoring purposes. These will be made using the PharmOutcomes platform. The following will make up the data captured:

- Provider pharmacy
- Patient post code
- Date of call out
- Time of call out
- Items dispensed – Drug, quantity
- Requesting service – GP Surgery/ Out of Hours/ Palliative care nurses

- Time from call out to delivery
- Whether the taxi service was used or not
- Free text of any issues/ comments on service delivery

The product supplied to the patient is to be labelled in accordance with the requirements of the document, Medicines, Ethics and Practice, as published by The Royal Pharmaceutical Society and the relevant legal records should also be made.

3.2.4 Hours of Operation

This service will operate from 6pm to 9am during weekdays and from 6pm Fridays to 9am Monday to cover weekends. The service will also operate for the duration of bank holidays.

3.2.5 Premises

The service shall be delivered from facilities that ensure they support the confidentiality and dignity of the client (where available a consultation room is to be used to deliver the service).

All providers agree to retain the range and minimum stock levels required for the service, which can be found in appendix 2.

Each provider should also have facilities to destroy any expired unused controlled drugs items required for retention by the service.

Each provider should have appropriate indemnity insurance cover to allow for the delivery of this particular service.

3.2.6 Key Performance Indicators

- 100% complete dataset for each call-out
- 90% of call-outs resulting in transfer of medications to the patient within 2 hours of call being received

3.2.7 Evaluation

The service will be reviewed at least annually with feedback to the CCG and Local Pharmaceutical Committee using the following criteria:

- Number of call-outs, total and by each requesting service and pharmacy
- Number of each treatment supplied
- Costs of service
- Evaluation of service through professional networks using the service

3.2.8 Remuneration

Any pharmaceutical stock on the stock list (appendix 2) which goes out of date due to lack of use will be claimable from Sunderland CCG.

Sunderland CCG will pay pharmacist providers at the agreed rate for on-call services (appendix 3).

Use of a taxi service to support service provision will also be reimbursed by Sunderland CCG.

The service coordinator will be responsible for ensuring that pharmacists providing the on-call service have access to by a mobile phone which is capable of receiving phone calls from a re-directed number, accessing NHS.net email addresses and opening photo files. There will be monies available for handsets as a one-off purchase and ongoing monies for phone contracts to support this where required from Sunderland CCG.

The service coordinator fees are outlines in Appendix 4.

3.2.9 Governance arrangements

The on-call pharmacist can only be contacted by a healthcare professional. Contacts directly from patients or the public will not be accepted.

Contact details of the referrer will be made available in all circumstances to allow the on-call pharmacist to verify the identity of the referrer.

Provider pharmacists will be provided with relevant contact details to enable service delivery.

Providers should have a standard operating procedures which cover service provision including:

- Dispensing from a digital image of a prescription, ensuring that original prescription is obtained by the pharmacy prior to transfer to the patient either on delivery or by arranging for a taxi to collect the prescription from the point of generation and transfer to the pharmacy
- Delivery of medicines

3.2.10 The role of the Service Coordinator

The Service Coordinator will be responsible for the following:

- Acting as the point of contacts for the pharmaceutical support service in the out of hours period
- Organisation of rotas to fulfil the delivery of the pharmaceutical support service in the out of hours period
- Ensuring that the external phone number for the service is directed to the correct pharmacist for the duration of their duty period
- Ensuring that data entered onto PharmOutcomes is of high quality to allow for the generation of reports by NHS Sunderland CCG
- Reviewing the list of medicines held by providers (appendix 2) on an at least annual basis and notify NHS Sunderland CCG of any required updates, however this may be completed sooner if issues arise such as difficulties with drug availability
- Providing on-call pharmacists with accurate information relating to opening hours and services which are interdependent with this service (see 3.5)
- Maintenance of the standard operating procedure that covers the care pathway for the pharmaceutical support service in the out of hours period with at least an annual review of this procedure to ensure that the contents remain appropriate (see 3.2.2)
- Handling of any complaints against the service (see 3.2.11)
- Coordinating payment to contractors providing the pharmaceutical support service

3.2.11 Complaints

- The Service Coordinator is required to have a system in place for handling complaints.
- The Service Coordinator is required to ensure patients are informed they have the right of complaint to the CCG. All information shall be provided to the patient in order for them to access the Sunderland CCG complaints procedure.

3.3 Population covered

Any patient at the end of life requiring urgent access to medications in the out of hours period.

3.4 Any acceptance and exclusion criteria and thresholds

Referrals can only be accepted from healthcare professionals working within Sunderland CCG.

3.5 Interdependence with other services/providers

The existence of this service will be advertised to other relevant NHS services within Sunderland CCG including:

- Palliative care specialist services

- GP OOH services
- City Hospital Sunderland NHS Foundation Trust
- District nursing services

4. Applicable Service Standards

4.1 Applicable national standards (eg NICE)

Service providers will comply with all relevant documents and policies including those listed below:

- General Pharmaceutical Council (GPhC) Standards
- Health and Social Care Act 2008
- The Equality Act 2010
- The NHS Outcomes Framework 2015/2016
- NICE Guidelines Quality Standards
- Guidance and Requirements on health and safety including: moving and handling, fire and safety, resuscitation and infection control

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

None.

4.3 Applicable local standards

It is suggested that pharmacist providers are knowledgeable about medications used at the end of life by completing training or relevant CPD in this area.

The pharmacy will have a system for collecting data on adverse incidents, which should be aligned to the relevant guidance. In primary care, adverse incidents should include, but are not limited to, incidents relating to:

- Death occurring in the premises;
- Patient complaint;
- Prescribing-related events;
- Other medical;
- Other administrative; and
- Other incidents.

The pharmacy must put in place appropriate governance and security for the IM&T systems to safeguard patient information.

The pharmacy must ensure that the IM&T Systems and processes comply with statutory obligations for the management and operation of IM&T within the NHS, including, but not exclusively:

- Common law duty of confidence;
- Data Protection Act 1998;
- Access to Health Records Act 1990;
- Freedom of Information Act 2000;
- Computer Misuse Act 1990; and
- Health and Social Care Act 2001

The pharmacy will meet prevailing national standards and follow appropriate NHS good practice guidelines for information governance and security, including, but not exclusively NHS Confidentiality Code of Practice.

5. Applicable quality requirements and CQUIN goals

5.1 Applicable Quality Requirements (See Schedule 4 Parts [A-D])

None.

5.2 Applicable CQUIN goals (See Schedule 4 Part [E])
None.

6. Location of Provider Premises

The Provider's Premises are located at:

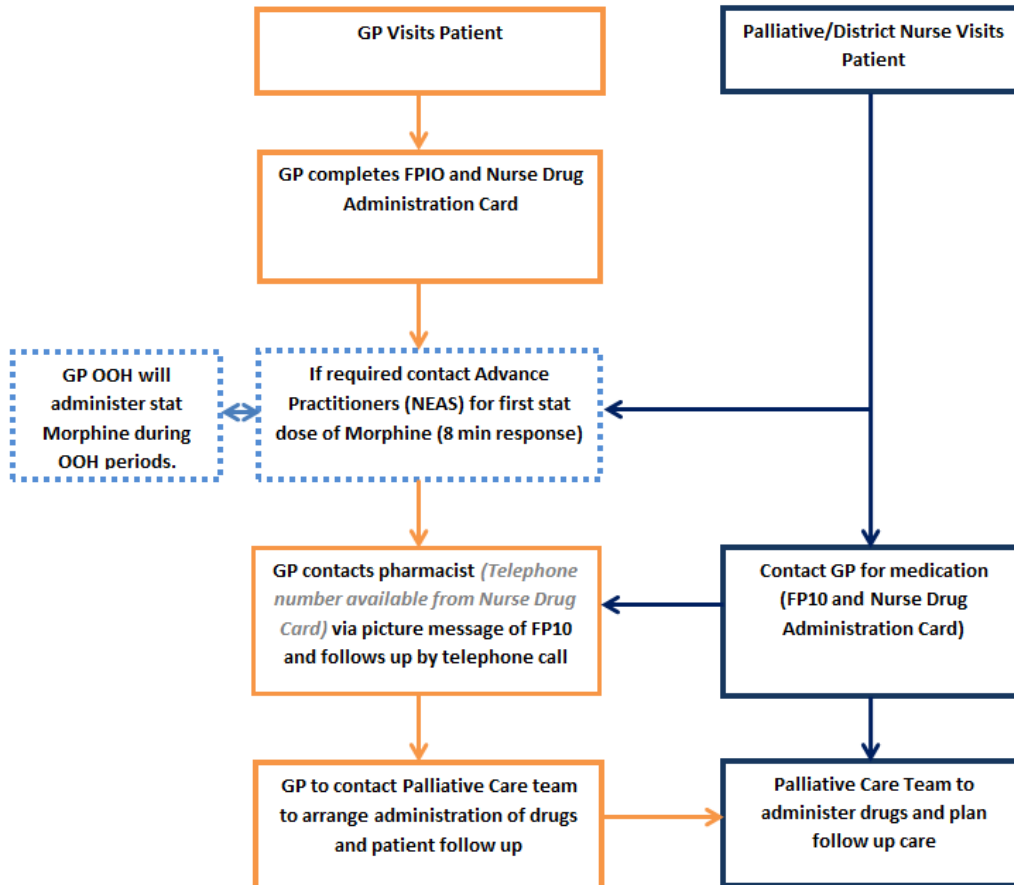
7. Individual Service User Placement

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Appendix 1

Palliative Care Nurse / GP

Standard Operating Procedure for 24/7 Urgent Access to Medications for Palliative Patients



Revised Palliative Care Drugs List

Drug	Minimum Stock Level (ampoules) On-call providers	Minimum Stock Level (ampoules) In-hours providers
Alfentanil injection 1mg/2ml	40	20
Cyclizine 50mg/1ml amps	40	20
Dexamethasone 4mg/1ml amps	40	20
Haloperidol 5mg/1ml amps	40	20
Hyocine butylbromide 20mg/1ml amps	40	20
Hyoscine hydrobromide injection 400mcg/ml	40	20
Levomepromazine 25mg/1ml amps	40	20
Metoclopramide 10mg/2ml amps	40	20
Midazolam 10mg/2ml amps	40	20
Morphine sulphate 10mg/1ml amps	40	20
Morphine sulphate 30mg/1ml amps	10	10
Oxycodone 10mg/1ml amp	40	20
Oxycodone 20mg/2ml amp	10	10
Water for injection 10ml	40	20

Appendix 3

Finance -

Pharmaceutical Support Service in the Out of Hours Period

Fees

On agreeing the terms of this service with the CCG for the 2 months commencing 1st April 2017 pharmacists will receive:-

- A payment of £150 per half week of cover provided (Mon 6pm – Fri 6pm or Fri 6pm – Mon 9am)
- plus**
- A payment of £200 per call-out

Taxi charges

Reimbursement will be made available for use of taxis to perform the following journeys as necessary:

- Collection of prescription from where it has been generated e.g. urgent care hub and taken to the pharmacy
- Delivery of a pharmacist and/or medication to the patients' home and back to the pharmacy

Out-of-date drugs

Reimbursement will be made for medicines which expire whilst the contract is providing the service. They will be reimbursed at the Drug Tariff rate or other standard NHS charge though the NHS Dictionary of Medicines and Devices.

Payment Method

Payments will be made by the CCG to the contactor through completion of the relevant information on the PharmOutcomes platform. Invoices will be retrieved from PharmOutcomes on the 6th of the month and processed for payment.

Payments for the service will be made by BACS to the participating contractor.

Appendix 4

Finance -

Coordination of the Pharmaceutical Support Service in the Out of Hours Period

Fees

On agreeing the terms of this service with the CCG from 1st April 2017 the service coordinator will receive:-

- A payment of £750 per annum

Payment Method

An invoice should be raised with the purchase order number: 611161/52161003/00000/PHRMCY

This should be sent for the attention of the Medicines Optimisation Team to:

NHS Sunderland Clinical Commissioning Group
00P L415 Payables
Phoenix House
Topcliffe Lane
Wakefield
West Yorkshire
WF3 1WE

Payments for the service will be made by BACS to the service coordinator.