

End of Life Care Medication Provision in Barking and Dagenham, Havering and Redbridge

Community Pharmacy Service Specification

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Adapted from service specification provided by NHS Waltham Forest CCG

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SERVICE SPECIFICATION FOR THE AVAILABILITY OF END OF LIFE CARE (EoLC) MEDICATION

Introduction

The aim of this service is to ensure the availability of medication used for end of life care across the boroughs of Barking and Dagenham, Havering and Redbridge (BHR). The service is designed to improve access to these medicines for patients, carers and healthcare professionals when they are required, in order to ensure that there is no delay to treatment whilst also providing access and choice.

Background

An End of Life Care service requires specialist medicines that are not routinely available/stocked in all community pharmacies and this may cause delay in treatment for patients.

PLEASE NOTE: This service is commissioned as an emergency service to cover the COVID-19 pandemic. The service will be reviewed after 3 months, 6 months and 12 months to ensure that the service provides the adequate access needed to cope during the COVID-19 pandemic.

1. Document Purpose

- 1.1. This document sets out the service specification to cover the provision of medication used for End of Life Care (EoLC) service within community pharmacies.

2. Service Outline

- 2.1. This service will require the commissioned pharmacies to maintain the required stock of EoLC medication in line with the agreed list in **Appendix 1**.
- 2.2. Where requested, the pharmacist will provide advice to the healthcare professional regarding the prescribing or dosage of EoLC that should be administered to the patient.
- 2.3. The pharmacist will provide information and advice relating to the use of EoLC medicines to patients and carers.
- 2.4. Those commissioned pharmacies may opt in and have named pharmacist(s) who will provide an Out-Of-Hours (OOH) dispensing service for **EoLC medication ONLY** to the patients in Barking and Dagenham, Havering and Redbridge as outlined in Appendix 2. OOH is defined as the hours where none of the BHR commissioned pharmacies are open, which are:
 - Mon- Saturday 12am-7am
 - Sunday 12am - 9am
- 2.5. The pharmacy will accept patient's medicine returns for destruction from patients, carers or other healthcare professionals as per the NHS Community Pharmacy Contract: Essential Services Disposal of Unwanted Medicines. Please see Appendix 3 for the algorithm for other healthcare professionals for controlled drugs.

3. Aims and Intended Outcomes

- 3.1. To ensure that there is 24 hours 7 days a week availability of medicines for EoLC from community pharmacies across Barking and Dagenham, Havering and Redbridge. This will include the normal opening hours of the commissioned community pharmacy providing the service as well as any also commissioned for OOH call outs required for urgent dispensing of medication for EoLC.
- 3.2. To ensure that there is easy access to medicines for EoLC to provide patients with good symptom control and ensure that their symptom control is maintained.
- 3.3. Help prevent a crisis and emergency hospital attendance with the possibility of admission arising due to the lack of access to medication for EoLC
- 3.4. 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

4. Service Specification and Service Standards

- 4.1. The service provided will consist of a core element of EoLC medicines stock provision which all commissioned pharmacies will provide, the second part is an optional Out of Hours dispensing service.
- 4.2. All services undertaken in line with this specification will be provided by a practising pharmacist registered with the General Pharmaceutical Council.

EoLC stock provision

- 4.3. The pharmacy contractor shall maintain the required stock (range and quantity) of EoLC drugs against an agreed list of palliative care drugs (Appendix 1) which will be reviewed when necessary.
- 4.4. There must be named individual(s) who ensures that the stock is managed appropriately.
- 4.5. The pharmacy contractor shall dispense the items from the palliative care stock in response to NHS prescriptions presented to the pharmacy in line with the dispensing service of the NHS Community Pharmacy Contractual Framework.
- 4.6. The list in Appendix 1 identifies minimum stock levels that the pharmacy must stock and maintain. The contractor will identify where supply problems prevent compliance with this requirement and notify the BHR CCGs' Medicines Management Team, within **ONE working day** via:

E-mail: bhrmedicines.management@nhs.net (Please see Appendix 2 for the service pathway).

- 4.7. The identified range and quantity of medicines are **in addition** to any demand requirement arising from the pharmacy's normal within hours dispensing service.

Out of Hours Provision

- 4.8. Those commissioned pharmacies that provide stocks of EoLC medicines may opt in and have named pharmacist(s) who will provide an Out-Of-Hours (OOH) dispensing service for **EoLC medication ONLY** to the patients in Barking and Dagenham, Havering and Redbridge as outlined in Appendix 2 . OOH is defined as the hours where none of the BHR commissioned pharmacies are open, which are:
- Mon- Saturday 12am-7am
 - Sunday 12am - 9am
- 4.9. Pharmacies that opt in to provide the OOH part of the service must supply contact details of name pharmacist(s) who will be providing this service.

General

- 4.10. The pharmacy contractor must operate this service for their full opening hours and OOH where they have opted to provide this as per the algorithm in Appendix 2.
- 4.11. The pharmacy contractor must maintain appropriate records for the pharmacy and BHR CCGs to cover ordering, receipt, batch number, expiry date checks and audits to meet legal and BHR CCGs' requirements and ensure effective, ongoing service delivery.
- 4.12. The pharmacy contractor will have and will update specific Standard Operating Procedures (SOP) to meet all of these service requirements and reflect changes in practice or guidelines where appropriate.
- 4.13. The pharmacy contractor will ensure that pharmacists and staff involved in the provision of the service have received the appropriate training and can deliver the service for the full contracted and voluntarily extended opening hours as well as have a SOP for when the pharmacist is called OOH.
- 4.14. In circumstances where the pharmacy is unable to supply the item(s) on demand, they will direct/signpost the patient, carer or healthcare professional to the nearest pharmacy provider of EoLC medication checking first that they have the required item(s) in stock as per Appendix 2.
- 4.15. In circumstances where the pharmacy is unable to supply the item(s) on demand, they will inform the prescriber of the issue with providing the medication to the patient or carer as per Appendix 2.
- 4.16. The pharmacy contractor shall notify BHR CCGs' Medicines Management team of any changes to the contact details of the pharmacy manager and/or lead pharmacist(s) for this service.
- 4.17. The pharmacy contractor will accept controlled drugs and other medication for

destruction as per the Good Practice Guidance in Appendix 3.

4.18. The pharmacy must maintain their current core and supplementary hours.

5. Service description for OOH access for medication for EoLC

- 5.1. If an OOH health provider (GP out of hours service, NELFT community teams, St Francis Crisis support team) needs urgent access to EoLC medicines for a patient they will contact one of the commissioned OOH pharmacists.
- 5.2. If the pharmacist receives such a call and is unable to attend the pharmacy then the OOH health provider will contact the next pharmacist on the list until a pharmacist is available.
- 5.3. On first contact the OOH health provider would supply the OOH pharmacist with the following patient details as follows:
 - ✓ Patient name and address
 - ✓ Patient telephone number
 - ✓ Date of birth
 - ✓ Name of drug(s) prescribed, quantity and doses where applicable
 - ✓ Patient prescription charge exemption (if applicable)
 - ✓ Name and contact details of the prescriber for any queries
 - ✓ Details of who will be presenting the prescription to the pharmacy
- 5.4. The OOH pharmacist would agree to attend the pharmacy to dispense the prescription provided by the OOH health provider and advise on a suitable time for someone to attend the pharmacy.
- 5.5. The OOH health provider will request patient's representative or carer to travel to the pharmacy out of hours. If a patient's representative or carer is unable to travel to the pharmacy out of hours, for whatever reason, then alternative arrangements should be made which may include the possibility of prescriber or healthcare representative taking the prescription from the patient's house to the community pharmacy and returning the dispensed medication to the patient.
- 5.6. The pharmacist must be able to provide the medication within 2 to 3 hours in response to an out of hours call.

6. Training Requirements for EoLC

- 6.1. Any pharmacist, including locums, who will be involved with the service must undertake learning from the CPPE theLearningpharmacy.com - Palliative care <https://www.cppe.ac.uk/programmes/?t=TLP-E-06&evid=44628>
- 6.2. Any pharmacist, including locums, who will be involved with the service must submit copies of the certificate of the CPPE assessment to the BHR CCGs' Medicines Management Team via email bhrmedicines.management@nhs.net

7. Quality and Clinical Governance Standards

- 7.1. The pharmacy contractor must comply with all the requirements of the Essential services of the NHS Community Pharmacy Contractual Framework.

- 7.2. The pharmacy contractor must provide BHR CCGs with a premises specific e-mail address which is accessed by the pharmacy at least once a day during opening hours.
- 7.3. The pharmacy contractor shall ensure that pharmacists and staff involved in the provision of the service are appropriately trained, are aware of and operate within local procedures and guidelines.
- 7.4. The pharmacy contractor shall ensure that any paperwork relating to the service, local procedures and guidelines issued by BHR CCGs are easily accessible within the pharmacy. This will include appropriate local End of Life guidelines and a list of participating pharmacies.
- 7.5. The pharmacy contractor will be required to undertake clinical audits relating to the service where required by BHR CCGs.
- 7.6. The pharmacy contractor will have a system in place to investigate incidents and will report any incidents related to the service to BHR CCGs' Medicines Management team.
- 7.7. The pharmacy contractor will undertake Significant Event Analysis of incidents relating to the service and demonstrate learning from incidents where required by BHR CCGs.
- 7.8. The pharmacy contractor must report to BHR CCGs any items that are unable to be dispensed on-demand and inform BHR CCGs how the incident has been resolved.

8. Monitoring Requirements

- 8.1. At the contract review, BHR CCGs may sample check the availability of the agreed formulary drugs, and contractors may be required to make appropriate documents available for inspection.
- 8.2. At any time, BHR CCGs may request information on any audit the pharmacy has completed.
- 8.3. The pharmacy will demonstrate standard operating procedures and monitoring processes as part of any general contract monitoring undertaken by BHR CCGs.
- 8.4. If at any time, agreed formulary drugs are not available or are out of date, and there is no evidence of a recent supply (within the previous working day) then the maintenance payment will be withheld.

9. Professional Indemnity Insurance

- 9.1. The pharmacists providing the service shall maintain insurance in respect of public liability and personal indemnity against any claims, whatsoever which may arise out of the terms, conditions and obligations of this agreement.

10. EoLC medication scheme payment schedule

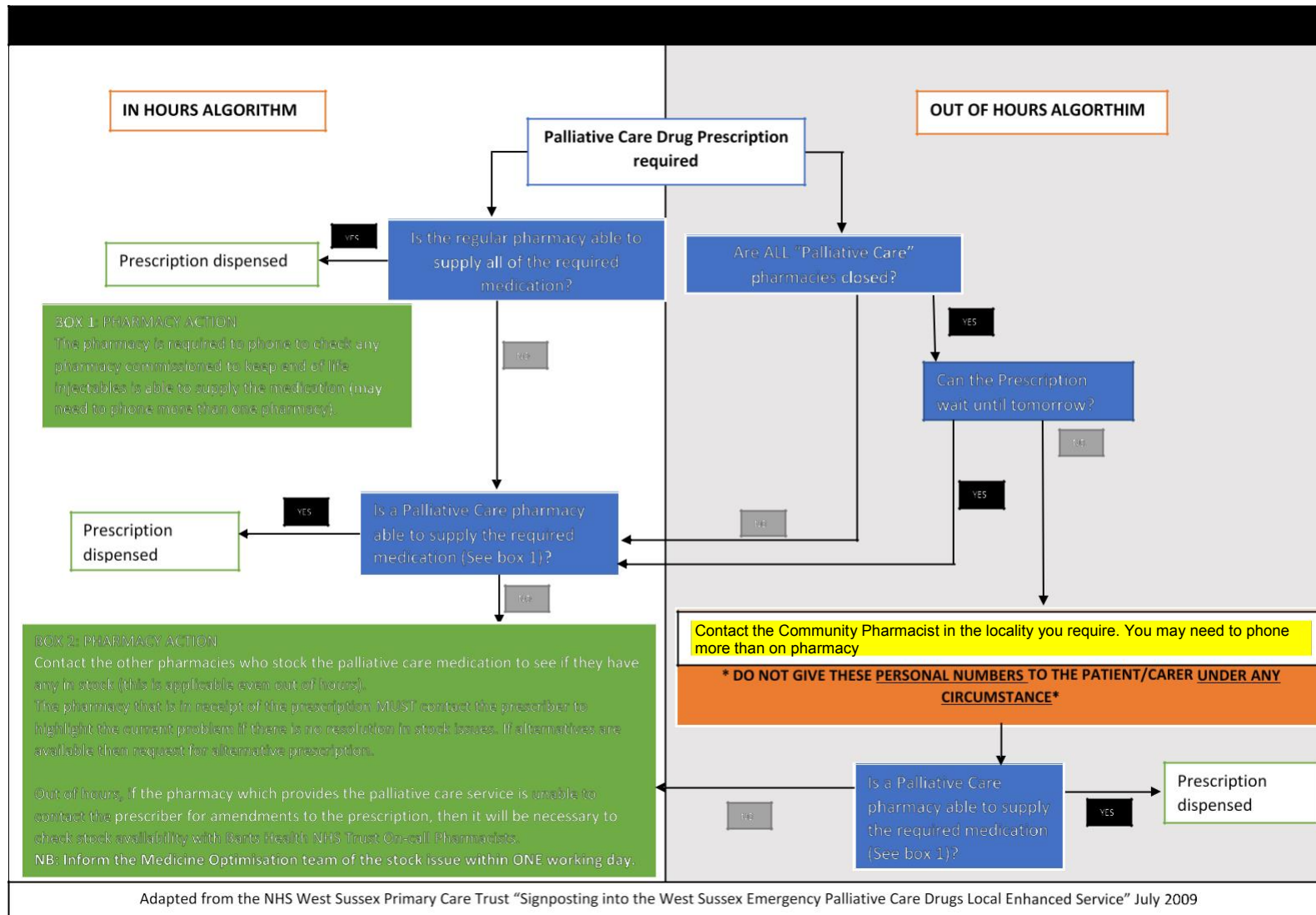
- 10.1. BHR CCGs will reimburse the contractor for initial stock on the submission of an invoice and the Memorandum of Understanding agreement. The agreed price of £1,831.41 for items listed in Appendix 1 will be paid regardless of actual price paid. Prices will be taken from the April 20 edition of the national Drug Tariff and if not included, the equivalent dm+d list price.
- 10.2. The pharmacy contractor will receive, on an annual basis, a fee of £250 to help support the pharmacy with any administration costs and training associated with the service. The fee will be paid on the submission of the Memorandum of Understanding and submission of an invoice.
- 10.3. The pharmacist contractor will receive £200 per call out to provide an out-of-hours service to dispense urgent end of life medicines to BHR patients.
- 10.4. Drugs dispensed on FP10 will be reimbursed through usual NHS BSA methods and as such this will fund replacement of stock. It is envisaged by BHR CCGs that controlled drugs identified within Appendix 1 of this document, will not significantly increase the overall pharmacy's controlled drugs storage requirements for the majority of contractors.
- 10.5. Record Keeping

BHR CCGs is responsible for maintaining a list of pharmacies and informing the OOH providers, GPs and the community teams of these pharmacists.

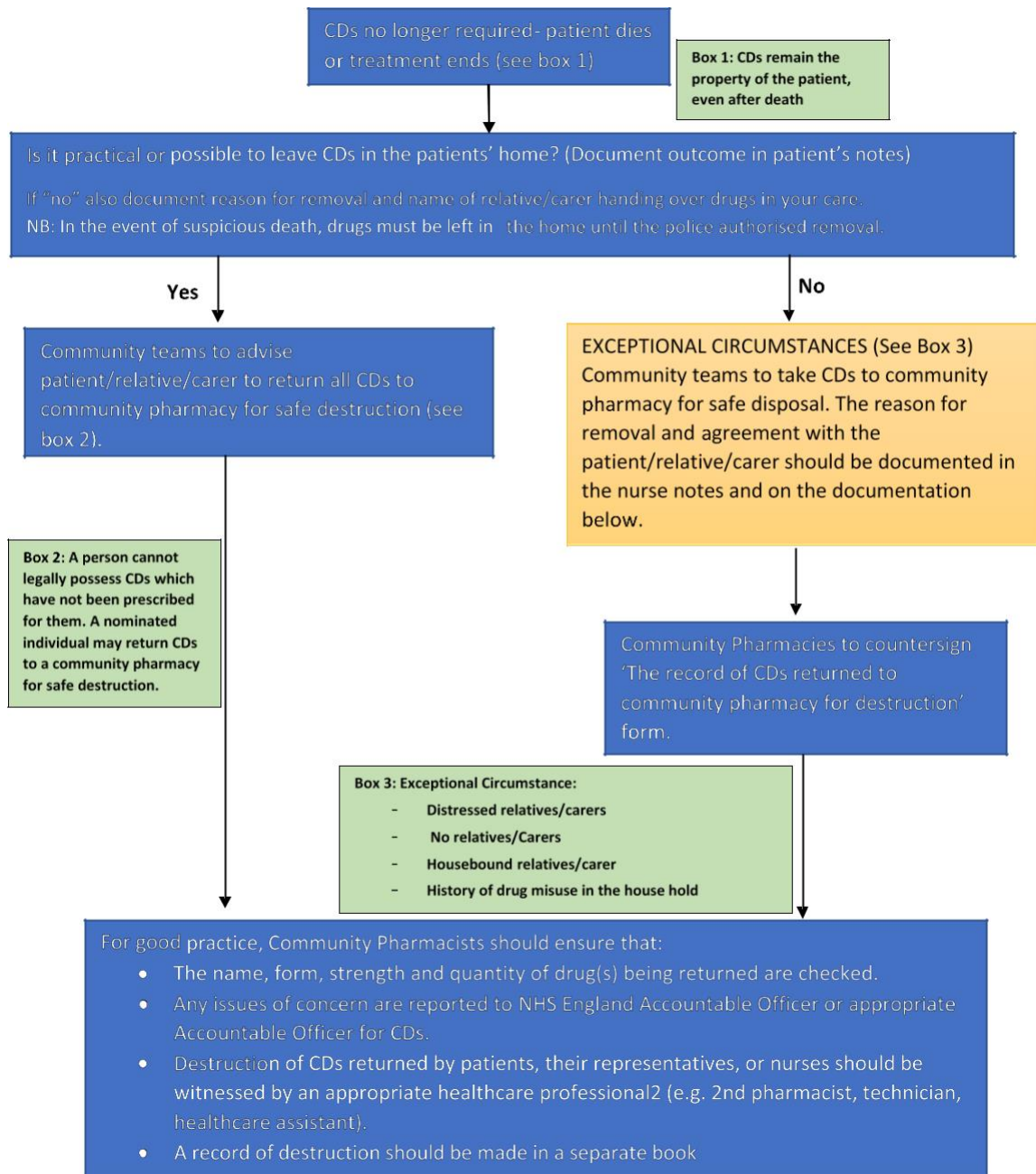
11. Declaration

Service level agreements with BHR CCGs must be signed for each individual pharmacy wishing to supply EoLC medicines through this scheme. It is the contractor's responsibility to ensure that every pharmacy that supplies EoLC medicines understands the terms of this agreement.

Appendix 2: Community Pharmacy Palliative Care and End of Life Care Prescription Algorithm



Good Practice Guidance regarding CD disposal/destruction for community teams



Additional Information

If you are unknown to the community pharmacy, s/he may ask for a form of Identification including NHS ID Badge.

Adapted from the Guy's and St. Thomas' NHS Foundation Trust Community Health Service Flyer *Controlled Drugs (CDs): Guidance regarding CD disposal/ destruction for community nurses and community pharmacists*. August 2011