

**Service Level Agreement for the provision of the  
Enhanced Service in Community Pharmacy**

**Urgent Repeat Medication Service under Patient Group Direction  
By Community Pharmacies**

**2019/2020**

**Introduction**

This Enhanced Service specification details the agreement between Provider (Community Pharmacies) and Commissioner (NHS England BGSW Area Team) for the provision of urgent repeat NHS prescribed medicines as determined within the current Patient Group Direction (PGD).

This provision is required when the patient is unable to obtain a prescription for further supplies in the normal way, i.e. the prescriber is unavailable, the surgery is closed or if an Out-of-Hours (OOH) system is in operation.

This 'Urgent Repeat Medicine Service' (URMS) is to be carried out within the Community Pharmacy setting. Remuneration will be claimed by the Provider from the Commissioner.

This Enhanced Service is available to Community Pharmacies who fulfil the service specification and who have expressed an interest to provide this service and have been accepted by the commissioning body as a service provider.

**Service Aims**

The overall aim of this enhanced service is to:

- To ensure timely access to medicines for all patients in urgent situations, where it is not practicable to obtain a prescription, i.e. during bank holidays, Out of Hours (OOHs) and when GP surgeries are closed.
- Reduce the burden of prescription requests for regular repeat medication received by Gloucestershire OOH Services, Emergency Services and the minor injury and illness units services.

**Financial Details**

Urgent Repeat Medicine Service (URMS) professional fee per consultation	£10
Fee per item of medicine supplied	£2
Reimbursement of medicine supplied based on the NHS dictionary of medicines and devices (dm+d). plus VAT	
NHS current charges apply and will be deducted from the final payment amount	

Reimbursement will only be made if a signed signature sheet has been submitted to the Commissioning Team and NHS Gloucestershire CCG. Payments for the service will be obtained by submitting claims using PharmOutcomes only. Failure to complete PharmOutcomes questions completely could result in non-payment. Claims will be paid quarterly. Payments for the service will be identified on the NHS Prescription Services statement as 'Local Scheme 10'. Late submissions may result in loss of payment.

## Contract Period

This enhanced service covers the Urgent Repeat Medication Service (URMS) under the current Patient Group Direction (PGD) (1<sup>st</sup> April 2019 - 31<sup>st</sup> March 2020 or update).

The commissioner may terminate or suspend this agreement forthwith if there are reasonable grounds for concern including, but not limited to, malpractice, negligence or fraud on the part of the pharmacy.

Any pharmacy providing the 'URMS' that does not wish to continue to do so, should put this in writing to the CCG. The provider wishing to terminate this agreement is asked to give three months written notice.

## Service Outline

Criteria	Statement	How evidenced
Service	<ul style="list-style-type: none"> <li>Ensure appropriate requests for urgent repeat medicines are supplied within the legal framework for 'Emergency Supplies' and are in accordance with the current Gloucestershire CCG Patient Group Direction (PGD).</li> <li>Under current emergency supply regulations a pharmacist can supply patients with up to thirty days supply (exceptions apply). The pharmacist has to make a charge for this service. This URMS scheme allows NHS exemptions to apply, providing equity of access across the county. NHS charges apply in the usual way.</li> <li>Where a patient would normally pay the NHS prescription charge, this fee should be collected by the community pharmacist providing the URMS in the usual way. This fee must be declared on PharmOutcomes and will be deducted from quarterly invoice payments by the commissioning body.</li> <li>All patients provided medication under the URMS PGD must sign a copy of the template regarding prescription charge exemption or proof of payment in the usual way (Appendix 2 template within PGD).</li> <li>Participating pharmacies must retain these forms as proof of prescription fee payment or exemption for at least two years from the date of supply.</li> <li>Pharmacist will supply urgent medicines requested by the patient which are currently being prescribed by the patients prescriber and are defined within the service PGD.</li> </ul>	The evidence of service provision will be through claims made using PharmOutcomes by the community pharmacy and the retained NHS fee payment or exemption forms signed by the patient. (Appendix 2 within the PGD)
Criteria	Statement	How evidenced
Service (continued)	<p><b>Urgent Repeat</b> supply is defined as regular, repeatable medicines required by the patient who would otherwise seek to obtain them from an Out-of-Hours (OOH) agency.</p> <p>The supplying pharmacist needs to be certain that the situation for the provision of URMS is appropriate. The service may be provided when the surgery is closed and/or prescriber unavailable. This applies to bank holidays and OOH situations</p> <ul style="list-style-type: none"> <li>The quantity of medicines provided may under normal circumstances be up to 30 days' supply, except in the case of CDs or analgesics. See PGD for details and exceptions.</li> <li>The medicines must be allowed on NHS prescription.</li> <li>Patient is registered with an NHS medical practitioner.</li> <li>Patient agrees to relevant clinical information being provided to the pharmacist and being notified to their GP.</li> </ul>	The evidence of service provision will be through claims by the community pharmacy and the retained NHS payment or exemption forms signed by the patient.

	<ul style="list-style-type: none"> <li>• Patients may self-refer or be triaged /directed by OOH, A&amp;E or minor injuries and illness unit (MIIU) services.</li> <li>• Community Pharmacy contractor providers of this service will comply with the General Pharmaceutical Council <a href="#">Standards for Pharmacy Professionals</a> at all times.</li> <li>• The requirement to interview the patient directly prior to a supply being made will usually be a requirement, however, this may be removed in the case of an announcement of a pandemic or imminent pandemic (WHO level 6). This will be notified to the pharmacy by commissioning body.</li> <li>• The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service are aware of and operates within local protocols.</li> <li>• If the pharmacy does not have stock of the requested medicine, but the supply is considered to be appropriate under the URMS PGD it must contact the nearest pharmacy providing the URMS service (with consent from patient), and NOT refer patient to, or back to, OOH services.</li> <li>• If the request for medicine falls outside of the PGD schedules, the patient should be fast tracked to the OOH service with a telephone call, using the referral form within the PGD.</li> <li>• Usual safeguarding requirements apply to this service.</li> <li>• The pharmacist will be required to sign to confirm that they have read and understood the PGD for URMS and this SLA including appendices.</li> <li>• Provide a confidential consultation area to ensure privacy during a consultation</li> <li>• Ensure that monitoring forms are completed accurately and sent (posted or securely faxed) in a timely manner (within 7 days) to the patients GP.</li> <li>• Payment claims will be submitted as outlined in the PGD every quarter via PharmOutcomes</li> </ul>	
--	--	--

Criteria	Statement	How evidenced
Training	<ul style="list-style-type: none"> <li>• The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.</li> <li>• Pharmacists must complete the CPPE pack on Patient Group Directions if not already experienced with working to PGD. (Ideally within one month)</li> </ul>	Copy of CPPE PGD certificate to be sent to the Commissioning Team at Gloucestershire CCG
Record keeping	<ul style="list-style-type: none"> <li>• The pharmacy will complete the URM medicine supply record sheet (Appendix 2 PGD ) for each patient request, and return relevant copies to patient's GP within 7 days of the supply (post or secure fax).</li> <li>• A copy of the medicine supply record must be retained by the pharmacy and it will serve as a record of supply. This may be a paper or electronic copy and removes the requirement to make a second entry into the private prescription book.</li> <li>• All medicine supply records must be retained for a minimum of two years from the date of supply</li> <li>• PGDs will be signed by all pharmacists operating the service and a group copy sent to the Commissioning Team at Gloucestershire CCG.</li> </ul>	Signed copies of PGD sent to the Commissioning Team at Gloucestershire CCG

	<ul style="list-style-type: none"> <li>Individual pharmacists working under the PGD and the Clinical Governance Lead should all keep fully signed copies for their files (as per instructions within the PGD document)</li> </ul>	
Quality indicators	<ul style="list-style-type: none"> <li>The pharmacy will have a standard operating procedure (SOP) for dispensing urgent repeat medicines under the scheme.</li> <li>The pharmacy co-operates with any locally agreed NHS England or CCG Commissioning Team led assessment of service user experience.</li> <li>The pharmacy co-operates with any audit, (up to one) of the service in addition to the two specified audits in the community pharmacy contractual framework.</li> </ul>	Copy of SOP to be made available to the Commissioning Team on request.