



Tameside and Glossop
Clinical Commissioning Group

Palliative Care Medicines Stock Holding

SERVICE SPECIFICATION

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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 particularly during Covid 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 COVID and Non-COVID 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 & 3)
- 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 complete the PharmOutcomes EoL stock module at the commissioner required interval. This will vary between monthly to weekly dependant on current covid situation as advised by commissioners.

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 and 3. This includes the palliative care medicines list and additional medicines in line with COVID-19 related NICE guidance. 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.

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 PharmOutcomes stock report at the required regularity. This will vary between monthly to weekly dependant on current covid situation as advised by commissioners.

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 and 3

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 weekly stock report as highlighted in 10.1

- 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.
- 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 at 6 months (October 2020).
- 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

Next review: October 2020

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 |
| Adams Pharmacy* | 169 Mossley Road | Ashton U Lyne | OL6 6NE | 0161 339 8889 | Mon: 00.00-00.00 (Closed between 20.00-22.00) Tues: 00.00-00.00 (Closed between 20.00-22.00) Wed: 08.00 – 20.00 Thurs: 08.00 – 20.00 Fri: 08.00 – 20.00 Sat: 08.00 – 20.00 Sun: Closed |
| Penny Meadow Pharmacy* | 61 Penny Meadow | Ashton U Lyne | OL6 6HE | 0161 339 3211 | Mon: 06.00-23.00 Tues:06.00-23.00 Wed: 06.00-23.00 |

| | | | | | |
|--------------------------|--|---------------------------|----------|---------------|--|
| | | | | | Thurs: 06.00-23.00 Fri: 06.00-23.00 Sat: 07.00-22.00 Sun: Closed |
| 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 |
| Lloyds Pharmacy | Oldham St | Denton | M34 3SJ | 0161 320 5945 | 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 |
| Well | 53a Manchester Road | Denton | M34 2AF | 0161 336 2099 | Mon: 08.30-18.30 Tue: 08.30-18.30 Wed: 08.30-18.30 Thurs: 08.30-18.30 Fri: 08.30-18.30 Sat: 09.00-13.00 Sun: Closed |
| Tesco Pharmacy | Manchester Road | Droylsden | M43 6TQ | 0345 677 9214 | Mon:08.00-19.00 Tue: 08.00-19.00 Wed: 08.00-19.00 Thurs: 08.00-19.00 Fri: 08.00-19.00 Sat: 08.00-19.00 Sun: 10.00-16.00 |
| Well | 7 High Street West | Glossop | SK13 8AL | 01457 864 127 | Mon: 08.30-18.30 Tue: 08.30-18.30 Wed: 08.30-18.30 Thurs: 08.30-18.30 Fri: 08.30-18.30 Sat: 09.00-16.00 Sun: Closed |
| 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 |
| Well | 1 The Square | Hyde | SK14 2QR | 0161 368 4195 | Mon: 08.30-17.45 Tue: 08.30-17.45 Wed: 08.30-17.45 Thurs: 08.30-17.45 Fri: 08.30-17.45 Sat: 09.00-17.30 Sun: Closed |
| 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 |
| Adams Pharmacy* | Ground Floor, Stalybridge Resource Centre, 2 Waterloo Road | Stalybridge | SK15 2AU | 0161 303 2607 | Mon: 08.00-20.00 Tues: 00.00-20.00 Wed: 00.00 – 20.00 Thurs: 00.00 – 20.00 Fri: 08.00 – 20.00 Sat: 09.00 – 17.00 Sun: 16.00 – 21.00 |

13. Appendix 2 – Non-Covid 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 |

14. Appendix 3 – Covid 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 (no. of packs)</u> |
|---------------------------|-----------------|--------------------------------|
| Haloperidol tablets | 0.5mg | 2 x 28 |
| Haloperidol oral solution | 10mg/5ml | 2 x 100ml |

| | | |
|----------------------------------|--|---------------------|
| Haloperidol inj | 5mg/ml | 2 packs of 5 x 1ml |
| Cyclizine Injection | 50mg/ml | 10 ampoules |
| Water for Injection | 10ml | 30 ampoules |
| Sodium Chloride | 0.9%/10ml | 10 ampoules |
| Levomepromazine tablets | 25mg (quarter tab = 6.25mg). Supplied with tablet cutter if pharmacy unable to quarter. This will need to be labelled appropriately i.e. 'these tablets have already been quartered' | 1 x 84 |
| Levomepromazine inj | 25mg/ml | 2 packs of 10 x 1ml |
| Midazolam inj | 10mg/2ml | 2 packs of 10 x 2ml |
| Glycopyrronium bromide injection | 200 microgram/1ml | 2 packs of 10 x 1ml |
| Lorazepam tablets | 0.5mg | 2 x 28 |
| Lorazepam tablets | 1mg (Genus brand) | 2 x 28 |
| Paracetamol effervescent tabs | 500mg | 3 x 60 |
| Paracetamol suppositories | 500mg | 2 x 10 |
| Paracetamol oral susp | Any available strengths (120mg/250mg/500mg*) 500mg/5ml – Rosemont only | 4 x 200ml |
| Paracetamol tablets | 500mg | 5 x 100 |
| Hyoscine butylbromide inj | 20mg/ml | 2 packs of 10 x 1ml |
| Morphine solution | 10mg/5ml (Oramorph) | 1 x 500ml stock |
| Morphine sulphate injection | 10mg/ml, 15mg/ml, 20mg/ml | 2 packs of 10 x 1ml |
| Morphine Tablets | MR 5mg (MST) | 1 x 60 |
| Morphine Capsules | MR 10mg (Zomorph) | 1 x 60 |
| Oxycodone tablets | MR 10mg | 1 x 28 |
| Oxycodone tablets | MR 5mg | 1 x 28 |
| Oxycodone oral solution | 5mg/5ml | 1 x 250ml |
| Oxycodone injection | 10mg/1ml | 1 packs of 5 x 1ml |
| Codeine Linctus | 15mg/5ml | 3 x 200ml |
| Simple Linctus | | 3 x 200ml |

Please note as of May 2020, all pharmacies listed in section 12 of this specification are commissioned to stock these medicines.

15. Appendix 4 – Invoicing the commissioner

15.1 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/>

15.2 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>