

Cannock Chase Clinical Commissioning Group
East Staffordshire Clinical Commissioning Group
North Staffordshire Clinical Commissioning Group
South East Staffordshire and Seisdon Peninsula Clinical Commissioning Group
Stafford and Surrounds Clinical Commissioning Group
Stoke-on-Trent Clinical Commissioning Group

Service Specification:

Community pharmacy optometry supply service (CPOSS)

August 2020

Service Specification - Community pharmacy optometry supply service (CPOSS) – Service Outline

1.0 Purpose

Community led minor eye condition schemes allow high street optometrists to advise and treat patients with minor eye conditions. This reduces the need for them to be referred to the GP or urgent eye clinics for treatment.

A Covid Urgent Eye Scheme (CUES) has been commissioned from optometrists in five of the Staffordshire Clinical Commissioning Groups (CCGs). These are Cannock Chase CCG; North Staffordshire CCG; South East Staffordshire & Seisdon Peninsula Clinical CCG; Stafford and Surrounds CCG and Stoke-on-Trent CCG (the commissioners).

The CPOSS pharmacy service is being commissioned by ***NHS England & NHS Improvement Midlands (the commissioners) on behalf of the Staffordshire group of CCGs*** and the service may be delivered from any community pharmacy in Staffordshire, including those in East Staffordshire, provided that the patient is eligible (as determined by their optometrist).

Caution: Pharmacists should be aware that optometrists in the East Staffordshire CCG area are not commissioned to deliver a minor eye condition scheme nor CUES scheme and so they should not refer patients to East Staffordshire optometrists for this service because East Staffs optometrists cannot deliver this service to their patients.

The pharmacy service will support patients purchasing over the counter (OTC) preparations or allow the pharmacy to dispense medication directly to a patient who presents with a signed order on the agreed form written by a registered optometrist. Patients may also be prescribed products on FP10 by an optometrist Independent Prescriber and the process for these prescriptions to be sent to the pharmacy is also outlined in this document.

The pharmacy service may be delivered from any community pharmacy in Staffordshire, including those in East Staffordshire, provided that the patient is eligible (as determined by their optometrist).

2.0 Contractual Period

This agreement is for the period 1st September 2020 – 31st March 2021.

3.0 Termination of the Scheme

Any pharmacy that has signed this Service Level Agreement and is participating in the scheme may terminate the agreement by giving written notice of their intention at least 28 days before cessation. No reason needs to be given for termination of the agreement.

The commissioners may terminate the scheme by giving written notice to all participating pharmacies and relevant Local Pharmaceutical Committees. A minimum of 28 days written notice will be provided.

If for whatever reason, the pharmacy does not fulfil its obligation to provide all Essential Services under the NHS Pharmacy Contractual Framework, the pharmacy will become ineligible to provide this Enhanced Service and the Service Level Agreement would be terminated with immediate effect.

The commissioners have a responsibility to ensure that all participating pharmacies deliver the scheme in accordance with the Service Level Agreement. If it is found that a Contractor fails to meet any of the obligations of this agreement, they will be notified in writing of the nature of the breach. Where the breach is not remedied within appropriate time-frames or the commissioner deems it is not capable of remedy, the commissioners will be entitled to terminate this agreement with immediate effect.

4.0 Obligations

The pharmacy will provide the service in accordance with the specification (Appendix 1).

The commissioners will administer the service in accordance with the specification (Appendix 1).

5.0 Payments

The commissioners will pay the following:

A professional service fee of £4 (exempt from VAT) will be paid for the supply of one item to an individual patient, if the signed order is for more than one item, the second and further items will be supplied and attract a professional service fee of £2.50. In addition, the pharmacy will be reimbursed at cost price (based on dm+d + VAT) for drugs included in the agreed Eye Care Formulary List.

The pharmacy will enter the service delivery information onto the PharmOutcomes system and invoices will be generated automatically. Claims should be entered onto the system within 24 hours of them taking place. Late claims more than three months in arrears will not be considered for payment.

Payments will be entered on to the NHS BSA Local Payments Application and will appear on pharmacy contractors' monthly statement from the NHS BSA.

6.0 Standards

The service will be provided in accordance with the standards detailed in the specification (Appendix 1).

7.0 Complaints and incident reporting

Pharmacies will be expected to follow standard operating procedures for complaints that are in accordance with NHS policy.

Any significant incidents or issues that arise during provision of the scheme should be recorded as part of the pharmacy's clinical governance procedures and notified to the commissioners.

8.0 Dispute resolution

In the event that a Contractor disputes the decision by the commissioners to terminate the agreement on the grounds that the terms of the agreement have not been met and/or remedied within an appropriate time-frame, the Contractor shall make this known in writing without delay.

Upon receipt, local dispute resolution procedures will be followed in accordance with the Pharmaceutical Regulations 2013.

9.0 Patient Confidentiality, Data Protection, Freedom of Information and Transparency

The Parties acknowledge their respective obligations arising under the Freedom of Information Act 2000, Data Protection Act 1998, the Human Rights Act 1998, and under the common law duty of confidentiality, and must assist each other as necessary to enable each other to comply with these obligations. The Contractor must complete and publish an annual information governance assessment and must demonstrate satisfactory compliance as defined in the NHS Information Governance Toolkit (or any successor framework). General Data Protection Regulations (GDPR) are applicable to this contract upon the date of enforcement.

10.0 Indemnity

The Contractor shall maintain adequate insurance for public liability and professional indemnity against any claims which may arise out of the terms and conditions of this agreement.

Any litigation resulting from an accident or negligence on behalf of the Contractor is the responsibility of the Contractor who will meet the costs and any claims for compensation, at no cost to the commissioners.

11.0 Equity of Access, Equality and Non-Discrimination

The Parties must not discriminate between or against Service Users, Carers or Legal Guardians on the grounds of age, disability, gender reassignment, marriage or civil partnership, pregnancy or maternity, race, religion or belief, sex, sexual orientation, or any other non-medical characteristics, except as permitted by Law (Equality Act 2010).

The Contractor must provide appropriate assistance and make reasonable adjustments for Service Users, Carers and Legal Guardians who do not speak, read or write English or who have communication difficulties (including hearing, oral or learning impairments).

12.0 Governing Law and Jurisdiction

This Contract will be considered as a Contract made in England and will be subject to the laws of England. Subject to the provisions of Section 7 (Dispute Resolution), the Parties agree that the courts of England have exclusive jurisdiction to hear and settle any action, suit, proceedings or dispute in connection with this Contract (whether contractual or non-contractual in nature)

13.0 Completion of Signed Agreement

In order to participate in the scheme, each contractor must complete the signed agreement (Appendix 7), and return to the commissioner as indicated. Once received, the pharmacy will be accredited for the CPOSS Service module on PharmOutcomes, and delivery of the service can commence.

FOR BRANCHES OF MULTIPLE PHARMACY GROUPS, THIS AGREEMENT SHOULD BE COMPLETED BY AN AUTHORISED PERSON(S) AT HEAD OFFICE AND A COPY SENT TO EACH PARTICIPATING BRANCH FOR THEIR INFORMATION.

Appendix 1

Service Specification – Community pharmacy optometry supply service (CPOSS)

1.0 Service description

1.1 If presented with a signed order for a POM medication from the formulary list, the pharmacy shall dispense the items from the signed order in line with the relevant regulations. They will collect patient exemption signatures (Appendix 5) or for those not exempt from prescription charges they will collect an NHS levy for each item supplied via signed order (Appendix 5).

1.2 If the patient sees an optometrist who is an independent prescriber the patient may be prescribed a product on an FP10 and where this happens the optometrist should ring the pharmacy to inform them that they have written the prescription and a scanned copy will be sent via NHS mail. This should then be treated as an emergency supply at the request of the prescriber and the actual prescription will be sent to the pharmacy within 72 hours. See the flowchart in this SLA (Appendix 6)

1.3 If the patient has been advised to purchase an OTC product the pharmacy shall facilitate this and will not advise the patient to seek a prescription from their GP. The patient may have received a referral note from the optometrist to bring with them to the pharmacy.

1.4 The pharmacist shall provide information and advice relating to the use of any items supplied to patients and carers where appropriate.

2.0 Aims and intended service outcomes

To improve access and choice for people with minor eye conditions who are seeking advice and treatment via the CPOSS Service.

Community led minor eye condition schemes allow high street optometrists to advise and treat patients with minor eye conditions. This reduces the need for them to be referred to the GP or urgent eye clinics for treatment.

Optometrists are able to supply any OTC (GSL or P) eye preparation during the course of their professional practice. The optometrist may recommend that the patient purchases an OTC (GSL or P) product from a community pharmacy and may supply a referral note for the patient to bring to the pharmacy with them.

The optometrist may also produce a signed order for a prescription only medicine (POM) for a limited number of eye preparations. A pharmacist may supply any such medicines directly to a patient under the care of a registered optometrist.

Signed orders are private transactions and patients would normally be liable for private charges. This CPOSS scheme allows pharmacies to provide medication ordered on a signed order to exempt patients free of charge. Those patients that pay for their NHS prescriptions will be subject to the standard NHS prescription charge.

Those optometrists who are independent prescribers will use the FP10 route described in the flowchart (appendix 6) rather than producing a signed order.

3.0 Service Outline

This section refers to the pharmacist. Suitably trained support staff may participate in the service process.

3.1 For items sold to the patient OTC they will provide the relevant advice on the use of the product

3.2 For POM supplied against a signed order, the pharmacist will dispense the medication(s) requested by the registered optometrist, undertaking the standard clinical and accuracy checks.

3.2 The pharmacist must maintain a record of the supply in their patient medical record and label any medication supplied in line with legal requirements.

3.3 The signed order should be kept for two years after supply.

3.4 For any POM products dispensed the pharmacist must make a record of the supply in the prescription-only register or equivalent electronic register.

3.5 Patients exempted from prescription charges should be asked to complete the declaration on the consultation record form.

3.6 Patients who pay for their prescriptions should be charge the standard prescription charge.

3.7 When a patient presents with a signed order and normally pays for their prescriptions, the pharmacy must provide any requested GSL or P product to the patient as a retail sale if this would be cheaper for the patient. The pharmacist should be satisfied that the product is being used for a OTC licensed condition. Where the pharmacist cannot confirm what condition is being treated or if the condition is outside of the OTC product licence the product should be provided against the original signed order and the relevant prescription charges paid/ exemption signed.

3.8 The pharmacy must have a system to check the person's eligibility for NHS prescription charge exemption and will collect NHS charges where appropriate. Where a patient does not have proof of exemption on them the pharmacist must use their professional discretion in deciding whether to provide the medication free of charge.

3.9 The pharmacist must counsel the patient on how to use their medication in the same way they would do for patient presenting with a prescription.

3.10 The pharmacy contractor must have a standard operating procedure in place for this service.

3.11 Only medication listed in appendix 2 and presented on a template signed order (Appendix 5) can be provided on this scheme. Appendix 2 may be subject to variation by the commissioner from time to time to allow for changes in the formulary and pharmacies will be notified of any changes.

3.12 The ophthalmic practitioner will comply with all current legislation and relevant professional guidance in directing the supply of medication from the community pharmacy following the consultation with the patient.

2.13 When the optometrist produces an FP10 for the patient the pharmacy will be notified by phone and the details sent to them securely via NHS mail (see appendix 6). The actual prescription will be sent to the pharmacy within 72 hours in order to comply with the legal requirements for emergency supplies at the request of the prescriber (this route is being used rather than giving the prescription to the patient in order to reduce the number of people touching the prescription before it arrives at the pharmacy during the Covid pandemic).

4.0 Patient Eligibility

The optometrist service is commissioned by five CCGs in the NHS England & Improvement Midlands area: Cannock Chase; North Staffordshire; South East Staffordshire and Seisdon Peninsular; Stafford and Surrounds; Stoke on Trent CCGs and can only be delivered by optometrists who practice in these CCG areas. The optometrists will therefore determine whether a patient is eligible for the service before including them in the CPOSS service. Patients can access this scheme at any participating Staffordshire pharmacy.

Please Note: East Staffordshire CCG is not part of the scheme but pharmacies in East Staffordshire may provide the service to patients from out of their area if the patient has a signed order or FP10 from a participating optometrist.

5.0 Training and Premises Requirements

5.1 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.

5.2 The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service are aware of and operate within local protocols.

5.3 A pharmacy must be fully compliant with their Essential Services before being commissioned to provide the service. If the pharmacy becomes non-compliant with their Essential Services the scheme may be withdrawn.

5.4 A pharmacy must be fully compliant with any local services/schemes which are supported by their Local Pharmaceutical Committee to provide the service.

6.0 Service availability

The service will be available to all patients presenting with a valid signed order throughout the pharmacy's opening hours.

7.0 Quality Standards

7.1 The pharmacy is making full use of any promotional material for the service where this is made available by the commissioner.

7.2 The pharmacy participates in any commissioner organised audit or post payment verification of service provision.

7.3 The pharmacy should co-operate with any commissioner-led assessment of patient experience.

7.4 The pharmacist ensures that clinical advice given is in line with national/local guidelines.

7.5 The pharmacist ensures that any patient incidents that occur are reported to the NPSA via the NRLS on-line reporting system.

7.6 The pharmacist ensures that the pharmacy has a complaints procedure in place that meets the NHS pharmaceutical contractual standards.

8.0 Claiming payment

8.1 The commissioner will provide access to PharmOutcomes for the recording of relevant service information for the purposes of audit and the claiming of payment.

8.2 Details of service payments can be found in the Service Outline on page 3 of this document. The payment is described in Section 5 on page 3.

Appendix 2

Minor eye conditions service formulary

Only products listed below maybe supplied under this scheme when prescribed via a signed order. See appendix 3 for information on prescribing rights of optometrists.

This scheme does not counteract the NHSE guidance for self-care and purchasing OTC products and the optometrist will advise patients to purchase a product where this falls within the product license. They may use an OTC referral form provided by the CCG.

Note that exemption from prescription charges does not automatically exempt a patient from the NHS OTC guidance and therefore pharmacists should not refer patients to a GP to request a prescription

For those patients needing a POM product (either because it is not available OTC or because they or their condition falls outside the OTC product license) an FP10 (if the optometrist is an independent prescriber) or a signed order will be provided to the patient and the recommended product may be listed by its generic or a branded name.

The GSL (general sales list) and Pharmacy (P) items are to be sold to the patient were appropriate.

Medication	Form	Strength	Quantity	GSL/P /POM
Chloramphenicol	Eye drops*	0.5%	10ml	P
Chloramphenicol	Eye ointment*	1%	4g	P
Fucithalamic	Eye drops	1%	5g	POM
Hypromellose	Eye drops	0.5%	10ml	P
Carbomer 980	Eye gel	0.2%	10g	P
Xailin Night	Eye ointment		5g	P
Antazoline and Xylometazoline (Otrivine-antistin)	Eye drops	0.5%/0.05%	10ml	GSL
Sodium cromoglicate	Eye drops	2%	10ml/13.5ml	P
Sodium Hyaluronate	Preservative Free	0.15%	10ml	P

*If the product has been prescribed on an FP10 or via signed order then a product licensed as POM should be supplied

Please note, for those patients who are contact lens wearers the optometrist should have already assessed their suitability to be treated with OTC products before referring them to you. This is not a blanket exemption from the product license guidelines but should be taken into consideration if the patient has just seen an optometrist.

Conditions with the NHS England guidance and exemptions

Illness	Conjunctivitis
	<p>Treatment is not usually needed for conjunctivitis as the symptoms usually clear within a week. There are several self-care measures that may help with symptoms. If treatment is needed, then treatment is dependent on the cause:</p> <ul style="list-style-type: none"> • In severe bacterial cases, antibiotic eye drops and eye ointments can be used to clear the infection. • Irritant conjunctivitis will clear up as soon as whatever is causing it is removed. • Allergic conjunctivitis can usually be treated with anti-allergy medications such as eye drops and antihistamines. The substance that caused the allergy should be avoided.
Advice to patients	Treatments for conjunctivitis can be purchased over the counter however almost half of all simple cases of conjunctivitis clear up within ten days without any treatment.
Exceptions	Red flag symptoms
Examples of medicines available to purchase OTC	<ul style="list-style-type: none"> • Chloramphenicol 0.5% eye drops (Pharmacy only P) or Chloramphenicol 1% eye ointment (Pharmacy only P) • Sodium cromoglicate eye drops (Pharmacy only P)
OTC restrictions	<ul style="list-style-type: none"> • Children under 2 years • Pregnancy • Breastfeeding

Illness	Dryeyes/sore tired eyes
	<p>Dry eye syndrome, or dry eye disease, is a common condition that occurs when the eyes do not make enough tears, or the tears evaporate too quickly. Most cases of sore tired eyes resolve themselves.</p>
Advice to patients	<p>Patients should be encouraged to manage both dry eyes and sore eyes by implementing some self-care measures such as good eyelid hygiene and avoidance of environmental factors alongside treatment.</p> <p>Mild to moderate cases of dry eye syndrome or sore tired eyes can usually be treated using lubricant eye treatments that consist of a range of drops, gels and ointments that can be easily be purchased over the counter.</p>
Exceptions	Pre-existing long term conditions affecting the eyes.
Examples of medicines available to purchase OTC	<ul style="list-style-type: none"> • Lubricant eye treatments include hypromellose 0.3% (Pharmacy only P) and carbomer (Pharmacy only P) <p>Brands include:</p> <ul style="list-style-type: none"> • GelTears® ,Optrex® Sore Eyes Drops , Xailin Night ® ,Tears Naturale® Eye Drops ,Viscotears® Eye Gel
OTC restrictions	<ul style="list-style-type: none"> • Pregnancy and breastfeeding

Legalities

The following information is included to give the background to the ways in which optometrists may order items for their patients.

The Human Medicines Regulations 2012, schedule 17 exemptions allow registered optometrists to obtain / order certain POMs by a signed order. Pharmacists working in registered pharmacies can then provide this medication directly to a patient. Pharmacists supplying medication from a signed order should ensure the medication is labelled accordingly as a dispensed medicinal product, a patient information leaflet is supplied and an appropriate record is made in the POM register.

POMs which can legally be prescribed by all registered optometrists:

- Eye drops or eye ointments that are POMs by reason only that they contain:
 - Mafenide propionate;
 - Not more than 30% sulphacetamide sodium;
 - Sulphafurazole diethanolamine equivalent to not more than 4%
 - sulphafurazole;
- Eye drops that are POMs by reason only that they contain no more than 0.5% chloramphenicol;
- Eye ointments that are POMs by reason only that they contain no more than 1% chloramphenicol;
- POMs because they contain any of the following:
 - Cyclopentolate hydrochloride
 - Fusidic acid
 - Tropicamide

Legally a signed order is not required to provide a GSL or P medicine for a patient under the care of a registered optometrist.

If an optometrist is an Independent Prescriber they are able to write an NHS prescription for any licensed medicine (except for controlled drugs or medicines for parenteral administration) for conditions affecting the eye, and the tissues surrounding the eye, within their recognised area of expertise and competence, which can be dispensed by a community pharmacy.

The pharmacy team can confirm the optometrist's registration by checking with the General Optical Council www.optical.org.

Appendix 4

Key counselling points for eye preparations

All patients receiving medication through this scheme should be counselled on how to use their eye preparation. Contact lens wearers should be advised not to wear their lenses during treatment, in accordance with the optometrists advice.

Below are the key counselling points:

Eye drops

- Wash hands thoroughly
- Tilt head backward
- Gently grasp lower outer eyelid just below the lashes and pull the eyelid away from the eye
- Place the dropper directly over the eye (without touching the eye) by looking directly at it
- Just before squeezing the bottle gently to apply a drop, look upwards
- After applying a single drop, look downwards for several seconds
- Release the eyelid slowly
- Keep eye closed for one to two minutes
- With a finger, gently press over the opening of the tear duct in the inner corner of the eye
- Blot excess liquid from around the eye
- Repeat in the other eye if necessary

Eye Ointment

- Wash hands thoroughly
- Tilt head backward
- Gently grasp lower outer eyelid just below the lashes and pull the eyelid away
- from the eye
- Place the ointment directly over the eye (without touching the eye) by looking
- directly at it
- Gently squeeze the ointment and with a sweeping motion, insert 1 to 2 cm of
- ointment inside the lower lid
- Release the eyelid slowly
- Keep eye closed for one to two minutes
- Blot excess ointment from around the eye
- Repeat in the other eye if necessary

Appendix 5. Copy of the signed order template

To be completed for patient's who are exempt from NHS prescription charges

Patient Name..... Date Of Birth.....

The patient does not pay because:

- A is 60 years of age or over or is under 16 years of age
- B is 16, 17 or 18 and in full-time education
- D has a valid maternity exemption certificate
- E has a valid medical exemption certificate
- F has a valid prescription prepayment certificate
- G has a prescription exemption certificate issued by Ministry of Defence
- L has a HC2 (full help) certificate
- H entitled to Income Support or Income-related Employment and Support Allowance
- K entitled to income based jobseeker's allowance
- M has a Tax Credit Exemption Certificate
- S has a Pension Credit Guarantee (including partners)
- U entitled to Universal Credit and meets the criteria

The information I have given is correct and complete and I confirm proper entitlement to exemption

I am the patient I am the patient's representative

To be completed by the Patient/patients representative

I received (insert number) medicine(s) from this pharmacy

Signed: Date:

Was evidence of exemption seen? Yes No

Community Pharmacy Optometry Supply Service (CPOSS)



Cannock Chase CCG
 North Staffordshire CCG
 South East Staffordshire & Seisdon Peninsula CCG
 Stafford and Surrounds CCG
 Stoke-on-Trent CCG

Practice Name.....

Practice Address..... Practice Phone Number.....

To the Pharmacist.
 Please supply to:
 Patient Name Patient Date of Birth

Patient address.....

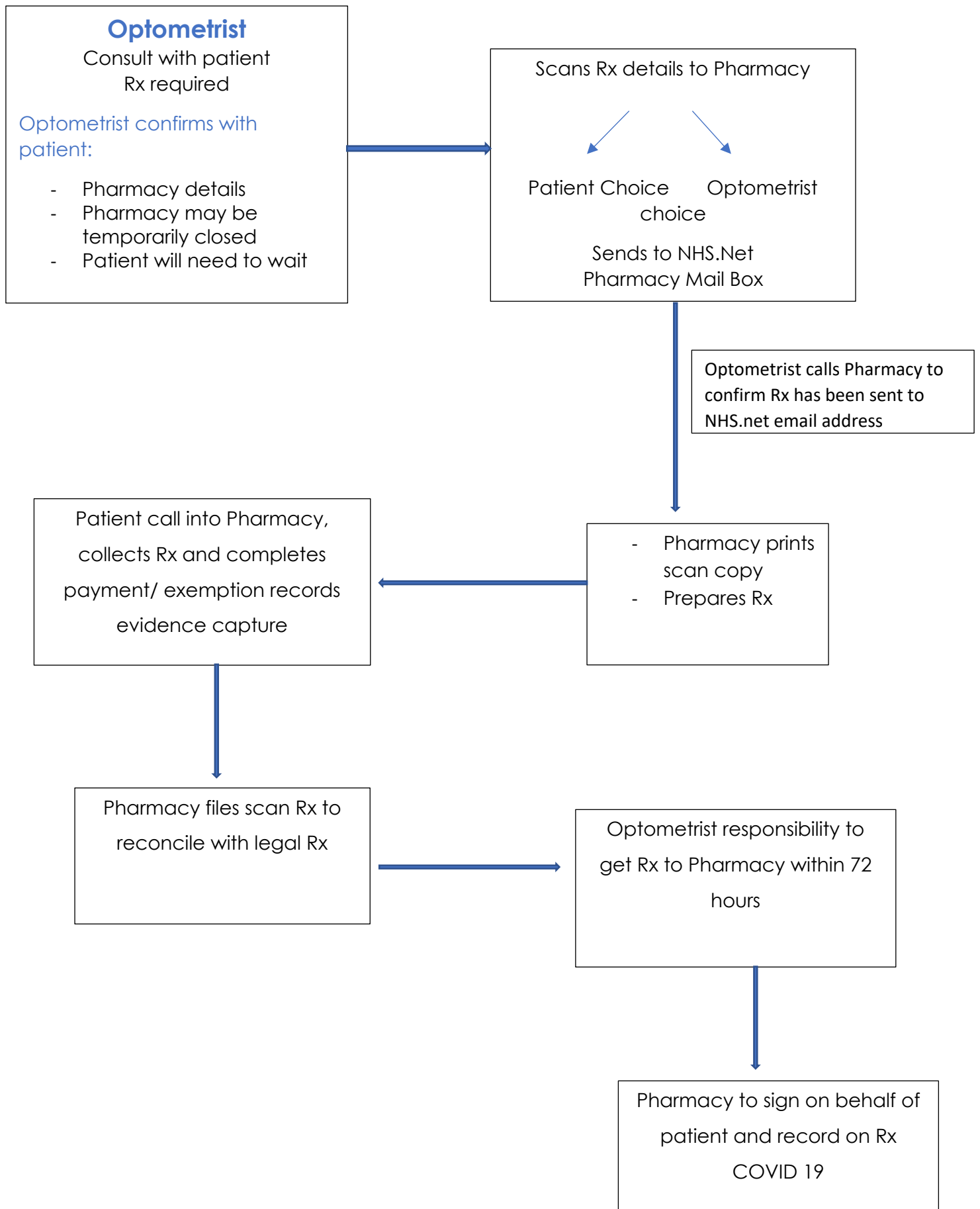
Preparation Required:

Optometrist Signature Date

Practitioner GOC No

Written Order in accordance with Section 5 of Schedule 5, article 11(1)(a) of Statutory Instrument 1997 No 1830 as amended by Section 8 of Statutory Instrument 2005 No. 76

Appendix 6. Flow Chart to show prescription journey where optometrist writes an FP10





EYE SERVICE – Commissioned with optometrists in Five STAFFORDSHIRE CCGs Cannock Chase
Clinical Commissioning Group; North Staffordshire Clinical Commissioning Group; South East Staffordshire and Seisdon Peninsula Clinical
Commissioning Group; Stafford and Surrounds Clinical Commissioning Group; Stoke-on-Trent Clinical Commissioning Group
Any pharmacy in Staffordshire may sign up to the pharmacy service:

CPOSS SIGNED AGREEMENT

****FOR BRANCHES OF MULTIPLE PHARMACY GROUPS, THIS AGREEMENT SHOULD BE COMPLETED BY AN
AUTHORISED PERSON(S) AT HEAD OFFICE**

On behalf of (Pharmacy Name and Address)

.....
.....

Contractor Code (F Code).....

I have read and understood the terms in this service specification and agree to provide the standard of service specified.

Signature.....

Print name.....

Designation.....

Date.....

*If signing on behalf of several branches, please attach the list of branches to this form to confirm their participation in the service.

On behalf of NHS England & NHS Improvement Midlands (Staffordshire and Shropshire Area), I commission the above pharmacy to provide the service detailed in this service specification for the CPOSS Service

Signature (on behalf of NHSE&I):

Print name: Rebecca Woods

Designation: Head of Primary Care – NHSE&I Midlands

Date:

Please return a signed copy of this form by email to a.pickard@nhs.net and in order to gain access to the PharmOutcomes module you must also send a copy to services@southstaffslpc.co.uk