

LOCAL ENHANCED SERVICE FOR THE PROVISION OF PALLIATIVE CARE COMMUNITY PHARMACY SERVICES IN NORMAL HOURS

Service Level Agreement (SLA) 01st April 2018 - 31st March 2019

| 1. | Introduction | 1 |
|-------|---|---|
| 2. | Signatures | |
| 3. | Aims and Objectives | 2 |
| 4. | Service Specification | 2 |
| 5. | Process - Pharmacy Contractors | 2 |
| 6. | Quality Indicators Pharmacy Contractors | |
| 7. | Quality Indicators CCG | 3 |
| 8. | Financial Details | 3 |
| 9. | Monitoring Arrangements | 4 |
| 10. | Termination of Contract | 4 |
| Appen | dix A - Palliative Care Drugs Scheme List of Drugs stocked. | |
| | idix B – Claim Form for Retainer | |
| | idix C – Claim for Reimbursement of Expired Stock | |

1. Introduction

This agreement set outs the framework for the dispensing of palliative care drugs during normal hours from a community pharmacy, and has been agreed with Community Pharmacy North Yorkshire (North Yorkshire LPC). The implementation, administration, monitoring and review of this agreement is the responsibility of NHS Scarborough and Ryedale Clinical Commissioning Group, or any organisation that takes over the functions of this CCG.

2. Signatures

This document constitutes the agreement between the pharmacy contractor and the CCG in regards to the above Service Level Agreement for the 12 months 1st April 2018 to 31st March 2019. We agree to abide by the conditions laid out in the agreement:

| Name of the Pharmacy | | | | | | |
|----------------------|---|--|--|--|--|--|
| contractor: | | | | | | |
| Name (please print) | Date | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| . , | Date | | | | | |
| • | | | | | | |
| Director of Nursing | 25/03/2018 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Name (please print) Name (please print) Sue Peckitt, Associate Director of Nursing | | | | | |

3. Aims and Objectives

3.1. This service aims to ensure that palliative care medicines are available during the participating pharmacy normal working hours.

4. Service Specification

- 4.1. Community Pharmacists owners or managers agree that their name be included in a list of names maintained by CCG and provided to all pharmacies, GPs, nurses and palliative care providers
- 4.2. The pharmacists included in this scheme will be contracted to hold a minimum stock of an agreed range of palliative care medicines as outlined in Appendix A, Part A 'Basic Level Provision'. This is the stock available from ALL participating pharmacies.
- 4.3. In addition to the basic level provision there will be TWO Pharmacies that will also hold the 'extended level provision' stock Appendix A, Part B. This pharmacy will be identified by the CCG and the details of this pharmacy will be communicated with all relevant parties.

5. Process - Pharmacy Contractors

5.1. The pharmacist will

- 5.1.1. In circumstances where they are unable to supply promptly the item(s) will direct the patient or carer to the nearest Enhanced Provider checking first that they have the supply in stock. They will also inform the CCG that they were unable to supply the medication.
- 5.1.2. Where requested, the pharmacist will provide advice to the health care professional regarding the prescribing or dosage of palliative care medicines that should be administered to a patient.
- 5.1.3. Agree to participate in any audit of the scheme as necessary to ensure stocks are available as stated.
- 5.1.4. Submit the dispensed prescription to the PPD in the normal way.
- 5.1.5. Ensure they are familiar with the local palliative care guidelines supplied by the CCG and will undertake any other training as appropriate to meet their own CPD needs.
- 5.1.6. Use his/her professional judgement and take sole responsibility for any supply made outside the specification set out in this service level agreement.

Local Enhanced SLA for Palliative Care Provision

6. Quality Indicators Pharmacy Contractors

- 6.1. The pharmacy contractor can demonstrate that pharmacists and staff involved in the provision of the service have undertaken CPD relevant to this service and are aware of and operate within local protocols. There is a CPPE distance learning course on Palliative Care that can be undertaken to assist in fulfilling this quality indicator.
- 6.2. The pharmacy contractor reviews its Standard Operating Procedures and the referral pathways for the service on an annual basis.

7. Quality Indicators CCG

- 7.1. The CCG will
 - 7.1.1. Ensure all pharmacies, GPs, nurses and palliative care providers within the locality are made aware of the pharmacies providing the Enhanced level of service.
 - 7.1.2. Supply local palliative care guidelines. Which are available via this link:

http://www.scarboroughryedaleccg.nhs.uk/your-health/end-of-life-care/

7.1.3. Undertake to reimburse the pharmacy at the cost for the stock of medicines included in the agreed Palliative Care stock list for those which have become time expired provided normal stock rotation procedures have been followed within the pharmacy. Stock will be reimbursed at either Drug Tariff Price/ dm&d browser price/ C&D price PLUS VAT.

8. Financial Details

- 8.1. A £50 per annum retainer fee will be paid to the pharmacy contractor participating within the scheme.
- 8.2. For the period 1st April 2018 31st March 2019 the CCG will pay £50 to the participating pharmacies.
- 8.3. The retainer will be paid automatically on completion of data added to PharmOutcomes regarding confirmation of batch numbers and expiry date of all the required stock as detailed in Appendix A. Pharmacists are also requested to email a copy of the completed Appendix B to the CCG Lead Pharmacist via xxxxxxxxxx.
- 8.4. The pharmacy contractor is required to order the stock in specifically for the palliative care scheme and provide batch numbers and expiry dates to the CCG for each item. Complete and submit via PharmOutcomes at the start of the service.

8.5. For any date expired stock the pharmacist will submit a claim form (Appendix C) giving details of the items expired, for the attention of ????

.

9. Monitoring Arrangements

- 9.1. The CCG will periodically monitor the stock levels held by pharmacies.
- 9.2. The CCG will also monitor any claims for date expired stock.

10. Termination of Contract

10.1. This agreement will run for a period of 12 months, from 1st April 2018 to 31 March 2019. However during this period, it may be terminated by either party by giving three month written notice.

Appendix A - Palliative Care Drugs Scheme List of Drugs stocked

a) Available from <u>ALL</u> Participating Pharmacies 'Basic Level Provision'

| Drug | Prices (as per Drug Tariff March 2018) |
|---|--|
| Morphine sulfate 10mg/1ml solution for injection | 10 amps = £9.36 |
| ampoules 2 boxes of 10 amps | |
| Morphine sulfate 30mg/1ml solution for injection | 10 amps £11.49 |
| ampoules | |
| 1 box of 10 amps | |
| Oxycodone 10mg/1ml solution for injection ampoules | 5 amps = £8.00 |
| 2 Boxes of 5 amps | |
| Midazolam 10mg/2ml solution for injection ampoules | 10 amps = £5.84 |
| 1 box of 10 amps | |
| Metoclopramide 10mg/2ml solution for injection | 10 amps = £3.30 |
| ampoules | |
| 1 box of 10 amps | |
| Cyclizine 50mg/1ml solution for injection ampoules | 5 amps = £13.54 |
| 3 boxes of 5 amps | |
| Haloperidol 5mg/1ml solution for injection ampoules | 10 amps = £35.00 |
| 1 box of 10 amps | |
| Levomepromazine 25mg/1ml solution for injection | 10 amps = £20.13 |
| ampoules | |
| 1 box of 10 amps | |
| Hyoscine butylbromide 20 mg/mL | 10 amps = £2.92 |
| 2 box of 10 amps | |

b) Available ONLY from ONE Participating Pharmacy 'Extended Level Provision'

| Drug | Prices (as per Drug Tariff March 2018) | |
|--|--|--|
| Alfentanil 1mg/2ml solution for injection ampoules | 10 amps = £5.95 | |
| 1 box of 10 amps | | |
| Dexamethasone 3.3mg/1ml solution for injection | 10 amps = £11.00 | |
| ampoules | | |
| 1 box of 10 amps | | |
| Phenobarbital 200mg/1ml solution for injection | 10 amps = £76.96 | |
| ampoules | | |
| 1 box of 10 amps | | |

c) Diluents

For information only:

| Available ONLY from York District Foundation Trust | | |
|--|--|--|
| Clonazepam 1mg/mL injection (Unlicensed) | | |

Claim for Retainer Fee

Palliative Care Provision

Retainer Fee of £50 – period 1st April 2018 to 31st March 2019 Name of Pharmacy: Contractor Code: Name of Pharmacist to Contact: Telephone number: **Email address:** I claim £50 retainer fee for the provision of the above enhanced service for a period of 12 months, as detailed above, and understand that confirmation of this claim may be sought or investigated by the NHS Counter Fraud unit. This form should be emailed to: harriet.buck@nhs.net An email will be accepted in lieu of a signature. By completing and emailing this form you are agreeing to the terms of the SLA - Local Enhanced SLA for Palliative Care Provision. Office Use Only: Date Received:

Acknowledged By:

Claim Authorised:

Date:

Date:

Appendix C

Claim Authorised:

Claim for Reimbursement of Expired Stock for the Palliative Care Provision Service

| This form should b Palliative Care Stock Scarborough Town F Yorkshire, YO11 2H0 | , CCG Lead Pharma Iall - York House, St | | • |
|--|--|--|---|
| Name of Pharmacy | y: | | |
| Contractor Code: | | | |
| Name of Pharmaci | st to Contact: | | |
| Telephone number | r . | | |
| Email address: | | | |
| Details of Expired Stock | Batch Number | Expiry Date | Amount Payable |
| | | | £ |
| | | | £ |
| | | | £ |
| | | | £ |
| | | Total Claim* | £ |
| I understand that if prosecution or civil | if I provide false or proceedings. I unde | nation given on this for misleading information rstand that the inform ccurity Management S | on I may be liable t ation on this form ma |
| Signature: | Name: | | Date: |
| Pharmacy's e-mail addre | ss: | | |
| Office Use Only: | | | |
| Acknowledged By: | | | Date: |

Local Enhanced SLA for Palliative Care Provision