

Service Level Agreement

between

the Provider (“the pharmacy”)

and

NHS England – North (Yorkshire & the Humber)

on behalf of

NHS North East Lincolnshire CCG

Table of Contents

TABLE OF CONTENTS	2
Section A: General Conditions to the Service Level Agreement for NHS North East Lincolnshire CCG Community Pharmacy Enhanced Services	4
A1. Introduction	4
A2. Signatures	4
A3. Period	5
A4. Termination	5
A5. Obligations	5
A6. Payments	6
A7. Standards	6
A8. Confidentiality	6
A9. Indemnity	6
SECTION B: SERVICE SPECIFICATIONS	7
Section B1: Service Specification – Minor Ailments Service	8
B1.1. Service description and background	8
B1.2. Criteria for participating within the Minor Ailments Scheme	8
B1.3. Transfer of Care	9
B1.4. Duties of Participating Community Pharmacies	9
B1.5. Referral Procedure	10
B1.6. Governance	10
B1.7. Payment arrangements	11
Section B2: Service Specification – Community Pharmacy Point of Dispensing Intervention Service	12
B2.1. Service description and background	12
B2.2. Aims and intended outcomes of the service	12
B2.3. Service specification	13
B2.4. Training, premises and other requirements	14
B2.5. Service availability	14
B2.6. Governance	14
B2.7. Payment arrangements	14
SECTION C: RESOURCES	15
Section C1: Minor Ailments Service	16
Resources	16
Appendix C1.1 Participating GP surgeries	16
Appendix C1.2 Paper record form (FPPHarm)	16
Appendix C1.3 GP referral form	16
Appendix C1.4 Gillick competence form	16
Appendix C1.5 Receptionists protocol	16
Appendix C1.6 Conditions flyer	16
Appendix C1.7 Clinical management guidance	16
Appendix C1.8 Formulary listing	16
Appendix C1.9 Record keeping guidance	16
Appendix C1.10 Condition monographs	16

Section C2: Community Pharmacy Point of Dispensing Intervention Service

Resources

[None at time of publication]

17

17

17

Reference Copy

Section A: General Conditions to the Service Level Agreement for NHS North East Lincolnshire CCG Community Pharmacy Enhanced Services

A1.Introduction

This agreement sets out the framework for the pharmacy to community pharmacy local enhanced services. The implementation, administration, monitoring and review of this agreement is the responsibility of NHS North East Lincolnshire CCG (Clinical Commissioning Group), or any organisation that takes over the functions of this CCG.

This agreement is between the pharmacy listed below

Trading as:	
Address:	
ODS code:	
Tel:	
Email:	

and

NHS England – North (Yorkshire and The Humber)

on behalf of

NHS North East Lincolnshire CCG

for the provision of the following services:



Service Name	Service specification	Provided by this pharmacy
Minor Ailments Service	Section B1	
Community Pharmacy Point of Dispensing Intervention Service	Section B2	

A2. Signatures

Signature on behalf of the Lloyds Pharmacies:

Signature	Name	Date
	GPhC No	

Signature on behalf of the Commissioner:

Signature	Name	Date
	Moira Dumma Director of Commissioning Operations	31/3/18
	Jon Swift Director of Finance	31/3/18

Please return to:

England.pharmacyreturns@nhs.net

or

Primary Care Team, NHS England, Ground Floor, Health House, Grange Park Lane, Willerby, HU10 6DT

A3. Period

This agreement is for the period **1st April 2018 - 31st March 2021**

A4. Termination

Three months' notice of termination must be given if the pharmacy wishes to terminate the agreement before the given end date.

Three months' notice of termination must be given if NHS England - North (Yorkshire and The Humber) wishes to terminate the agreement before the given end date.

NHS England - North (Yorkshire and The Humber) may suspend or terminate 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.

A5. Obligations

The pharmacy will provide the service(s) in accordance with the specification(s) set out in Section B.

NHS North East Lincolnshire CCG & NHS England Pharmacy SLA 2018 - 2021

NHS England - North (Yorkshire and The Humber) and NHS North East Lincolnshire CCG will provide the resources described as Section C on an internet link that will be accessible to the pharmacy and inform the pharmacy of this address and any updates to these resources when they happen. The pharmacy must ensure that it is using the most recent version of any Section C resources.

A6. Payments

NHS England - North (Yorkshire and The Humber) will pay the following:

Minor Ailments Service

Pharmacies will be paid monthly at a rate of £4.10 per consultation
Drug costs will be reimbursed at drug tariff/agreed cost prices plus VAT monthly.

Point of Dispensing Intervention Service

A professional fee of **£4** will be paid for each point of dispensing intervention made. In addition to the professional fee a payment equivalent to 10% of the net ingredient cost of the product not dispensed will be made.

The pharmacy will enter the information onto the PharmOutcomes system by the 5th of each month and invoices will be generated automatically.

Payments will be made by BACS within 28 days of the submitted invoice and will appear on the FP34C statement under Local Services.

A7. Standards

The service(s) will be provided in accordance with the standards detailed in the specification(s) (Section B).

A8. Confidentiality

All parties shall adhere to the requirements of the Data Protection Act 1988 and the Freedom of Information Act 2000.

Any approaches by the media for comments or interviews must be referred to NHS England - North (Yorkshire and The Humber).

A9. Indemnity

The pharmacy 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 pharmacy is the responsibility of the pharmacy who will meet the costs and any claims for compensation, at no cost to NHS England - North (Yorkshire and The Humber).

Reference Copy

Section B1: Service Specification – Minor Ailments Service

B1.1 Service description and background

This service is commissioned as a local enhanced service under the powers given to NHS England by The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013 paragraph 14 (1) (j).

This service is available to all patients who are exempt from paying prescription charges. The patients must be registered with a GP practice located within the Clinical Commissioning Group. Patients are at liberty to refuse this service. Patients can receive advice and/or treatment under the Minor Ailments Scheme on the conditions listed in Appendix 6.

Patients who pay for their prescriptions should be referred to a pharmacy for advice and to purchase over the counter medicines in the usual way.

This service is a "stepping stone" towards the "Self-Care" approach to healthcare.

Only Community Pharmacies who are committed to making staff available to provide the service and who have completed the necessary training for the conditions listed in Appendix 6 will be included in the Minor Ailments Scheme.

B1.2 Criteria for participating within the Minor Ailments Scheme

Participating Pharmacies must provide all Essential Services within the Community Pharmacy Contract.

Participating Pharmacies must have a pharmacist on the premises whilst participating within the scheme.

All consultations must take place on the pharmacy premises and any medication prescribed must be supplied at the completion of this process.

Participating Pharmacies must have a private consultation area that meets the requirements in NHS Directions for Advanced Services.

Participating Pharmacies must have a qualified medicines counter assistant or member of staff who is qualified to NVQ 2 in Pharmaceutical Services and keeps their CPD up to date with regard to minor ailments.

Participating Pharmacists should keep their CPD on minor ailments up to date.

The pharmacy will enter the service delivery information onto a web based platform (PharmOutcomes).

Participating Pharmacies should have a designated, named lead member of staff who is responsible for making sure entries are completed accurately and on time on the PharmOutcomes platform.

B1.3 Transfer of Care

Patients presenting with one of the conditions listed in Appendix 6 at the GP surgery can be offered this service. Patients will also be able to self-refer into the scheme.

Patients presenting at a participating Community Pharmacy confirmed as being registered with a participating GP Practice will receive the level of care as laid out in this specification.

Patients wishing to access the service must present their NHS number. The first time a patient accesses the system they may not have their NHS number, in these circumstances patient consent to obtain the clients NHS number from their practice or the NHS spine must be sought. If the pharmacy is unable to obtain the patients NHS number, treatment should be declined and the client urged to seek medical care through their GP or the Pharmacy OTC route.

If the pharmacy is in any doubt of the patient's eligibility to receive the service they should advise the patient to seek medical care through normal GP or Pharmacy OTC routes.

B1.4 Duties of Participating Community Pharmacies

Patients should only be accepted into the service if the pharmacist can confirm the patient's identity, NHS number and have reasonable proof of registration with a participating GP Practice.

Patients must be present at the pharmacy to receive the service.

Patients are encouraged to use the same pharmacy all the time but are not obliged to do so.

Pharmacies should keep a detailed record of 'Minor Ailments' treatments on their PMR system. As part of the registration process patients will be required to give their NHS number.

All participating pharmacies will provide a professional consultation service for patients registered with participating GP practices who present with one or more of the specified conditions.

The Pharmacist or trained medicines counter assistant will assess the patient's condition.

The consultation will consist of:

- Patient assessment.
- Provision of advice.
- Provision of a medication (Only if necessary, from the agreed formulary and appropriate for the age of the client being treated: refer to the manufacturers product information leaflet).
- Clinical management will be in accordance with Clinical Knowledge Summaries
- <http://cks.nice.org.uk>
- Entering details onto the PMR.
- Completion of FPPharm (Pharmacists Prescription Appendix 2 or PharmOutcomes equivalent).

Details of every consultation **must be** recorded on the PharmOutcomes platform and invoices will be generated automatically.

Children under 16 years of age, who self-refer without parental agreement, should be Gillick competent to receive this service (Appendix 4). If a client is not deemed Gillick competent then the client must be referred to a GP.

Normal rules of patient confidentiality apply.

The Pharmacist should ensure that the patient has completed and signed the FPPharm or PharmOutcomes 'Basic provision record' if they are exempt from paying and confirm this in the usual manner.

B1.5 Referral Procedure

General Referral Procedure - If a patient presents more than twice within any month with the same symptoms they should be referred to their surgery if clinically appropriate. If symptoms do not meet the criteria for a rapid referral the patient should be advised to make an appointment in the normal manner. The Pharmacy Referral Form should be completed and faxed to the practice (Appendix 3). (This can be downloaded from the PharmOutcomes platform)

Rapid Referral Procedure – If the patient presents with symptoms indicating the need for an immediate consultation with the GP, the pharmacist should contact the surgery and make an appointment for the patient within an appropriate time frame. The pharmacy should fax a copy of the Referral Form to the GP Practice immediately detailing the consultation and any treatments that have been prescribed for the patient's current condition under the scheme.

If the surgery is closed and/or the symptoms are sufficiently severe the patient should be advised to contact NHS 111 or attend a more appropriate urgent care service. If the pharmacist suspects that the patient and/or carer is abusing the scheme they should alert the patient's GP in the first instance. Continued abuse of the scheme should be escalated to NHS England and the CCG.

B1.6 Governance

Community Pharmacy contractor providers of this service will comply with the General Pharmaceutical Council standards of conduct, ethics and performance at all times. The pharmacy reviews its standard operating procedures and the referral pathways for the service on an annual basis.

The pharmacy can demonstrate that pharmacists involved in the provision of the service have undertaken continuing professional development (CPD) relevant to this service.

The pharmacy participates in any social service or NHS England - North (Yorkshire and The Humber) led audit of service provision.

The pharmacy co-operates with any social service or NHS England - North (Yorkshire and The Humber) led assessment of service user experience.

B1.7 Payment arrangements

Pharmacies and GP Practices will be expected to participate in monitoring and evaluation of the scheme to show:

Cost and volume of pharmacy interventions and indications treated.

Attitudinal surveys of Pharmacists and Patients.

The Pharmacy participates in any CCG organised audit of service provision.

The Pharmacy participates in any CCG organised patient survey.

Reference Copy

Section B2: Service Specification – Community Pharmacy Point of Dispensing Intervention Service

B2.1 Service description and background

This service is commissioned as a local enhanced service under the powers given to NHS England by The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013 paragraph 14 (1) (h) and (o).

Community Pharmacists will contribute to the reduction of prescribed unwanted medicines, which currently are wasted. This service will be undertaken at the point of dispensing. This will help to prevent patient's stockpiling of prescribed medicines and reduce inefficiencies in prescribing on FP10s. The service will inform GP repeat prescribing processes thus contributing to improved patient outcomes through harm reduction, reduced hospital admissions, and increased medicine concordance. It is expected that the service will encourage Pharmacists to carry out Medicine Use Reviews (MUR) with patients who they have identified as having issues with their prescribed medicines or processes around ordering repeat medicines.

The object of this scheme is to reduce the burden of waste medicines, which has far reaching implications both financially and in terms of harm and health outcomes for patients:

- To reduce the number of unwanted medicines dispensed and therefore wasted, by not dispensing items not required by the patient.
- To notify the prescriber when an item prescribed has not been dispensed.
- To promote, support and encourage good repeat / prescribing practices with patients and GP practices.
- To highlight under usage of medicines to the prescriber.
- To inform the prescriber whether the continued supply or non-supply of items would be considered clinically significant.
- To highlight prescribing inefficiencies to the prescriber.
- To reduce unnecessary prescribing costs.

B2.2 Aims and intended outcomes of the service

To reduce the number of unwanted medicines dispensed and therefore wasted, by not dispensing items not required by the patient.

To notify the prescriber when an item prescribed has not been dispensed.

To promote, support and encourage good repeat / prescribing practices with patients and GP practices.

To highlight under usage of medicines to the prescriber.

To inform the prescriber whether the continued supply or non-supply of items would be considered clinically significant.

To highlight prescribing inefficiencies to the prescriber.

To reduce unnecessary prescribing costs.

B2.3 Service specification

The pharmacy will at the point of handing out a completed prescription to a patient (or their representative where the patient has consented to the representative acting in this capacity) discuss with the patient the contents of the completed prescription and whether each item as dispensed is required by the patient.

Where, as a result of the discussion described above, an item that has been ordered on the prescription is identified as not being required by the patient, the pharmacy will, at the discretion of the pharmacist, make an intervention to not dispense the item.

When the pharmacist makes such an intervention they will make a record of the intervention on PharmOutcomes that captures the following information:

- The name and address of the patient
- The name and practice of the prescriber
- The date of the intervention
- The name, strength (if required), form and quantity of the item that the intervention has been made on
- The reason, as reported by the patient, that item was prescribed but is no longer required.
- Any action that the pharmacist has taken to prevent that item from being unnecessarily prescribed in the future

When the pharmacist makes an intervention as described above, they will notify the patient's GP that they have made that intervention and the reason why the item was not required. (This will be normally be done automatically by the PharmOutcomes system, but may sometime require the pharmacy to post the notification).

When the pharmacist makes an intervention, that in their discretion may be clinically significant to the patients continuing treatment, they will deliver a Medicines Use Review to support the patients' safe use of the prescribed medicines.

Where a pharmacy makes an intervention they should check the patient history on PharmOutcomes to see if the patient has received a similar intervention in the previous period of treatment for the same item. If there has been a previous intervention the pharmacy should record this in the PharmOutcomes record and if appropriate, deliver a Medicines Use Review to the patient.

Where a pharmacy makes an intervention, on an item that is prescribed on a paper prescription form, they shall score through the item so as to make it illegible.

Where a pharmacy makes an intervention, on an item that is prescribed through the Electronic Prescription Service, they endorse the item as Not Dispensed (ND) on the Electronic Prescription Service claim.

The pharmacy staff will ensure that the service is explained to the patient at the outset. This explanation will include the reasoning for the service. They must re-assure any patient anxious about having an item not dispensed this time and that it does not mean it has been automatically removed from the repeat prescription.

B2.4 Training, premises and other requirements

All participating pharmacies will provide a professional consultation area for patients who request it. Pharmacists should ensure full patient confidentiality, and compliance with data protection requirements. Service is only open to pharmacies that are able to provide an intervention MUR.

The pharmacy contractor must have a standard operating procedure (SOP) for this service. All support staff must ensure they are familiar with all aspects of the scheme before commencing the service.

B2.5 Service availability

The pharmacy contractor should seek to ensure that the service is available throughout the pharmacy's opening hours. To encourage ease of access to the service it should be offered across a range of times including where possible Saturdays and Sundays.

B2.6 Governance

Community Pharmacy contractor providers of this service will comply with the General Pharmaceutical Council standards of conduct, ethics and performance at all times.

The pharmacy reviews its standard operating procedures and the referral pathways for the service on an annual basis.

The pharmacy can demonstrate that pharmacists involved in the provision of the service have undertaken continuing professional development (CPD) relevant to this service.

The pharmacy participates in any social service or NHS England - North (Yorkshire and The Humber) led audit of service provision.

The pharmacy co-operates with any social service or NHS England - North (Yorkshire and The Humber) led assessment of service user experience.

B2.7 Payment arrangements

Community Pharmacy Humber will provide access to a PharmOutcomes platform for the recording of relevant service information for the purposes of audit and the claiming of payment.

Section C: Resources

Reference Copy

Section C1: Minor Ailments Service

Resources

The section C resources for this service are listed below. Any future resources will be updated at this web address:

<https://communitypharmacyhumber.co.uk/services-by-area/north-east-lincolnshire/nhs-england-service-level-agreements-nhs-nel-ccg/>

In the event of any dispute, the version of the resources published this address will be the deemed the version in use.

- Appendix C1.1 Participating GP surgeries**
- Appendix C1.2 Paper record form (FPPharm)**
- Appendix C1.3 GP referral form**
- Appendix C1.4 Gillick competence form**
- Appendix C1.5 Receptionists protocol**
- Appendix C1.6 Conditions flyer**
- Appendix C1.7 Clinical management guidance**
- Appendix C1.8 Formulary listing**
- Appendix C1.9 Record keeping guidance**
- Appendix C1.10 Condition monographs**

Section C2: Community Pharmacy Point of Dispensing Intervention Service

Resources

The section C resources for this service are listed below. Any future resources will be updated at this web address:

<https://communitypharmacyhumber.co.uk/services-by-area/north-east-lincolnshire/nhs-england-service-level-agreements-nhs-nel-ccg/>

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[None at time of publication]

Reference Copy