

SERVICE SPECIFICATION – COMMUNITY PHARMACY HOME DELIVERY SERVICE DURING THE COVID-19 PANDEMIC

1. Background

A Home Delivery Service during the COVID-19 Pandemic is being commissioned from community pharmacy to deliver prescribed items to specified, eligible patients who, due to their medical condition, should not present in the pharmacy and where no other person is able to collect the item from the pharmacy and deliver it to the patient.

2. Aims and intended service outcomes

The aim of this service is to ensure that eligible patients during the COVID-19 pandemic who do not have a family member, friend or carer or volunteer who can collect and deliver their prescription medicines on their behalf, can have their medicines delivered in a manner which keeps both them and pharmacy staff safe from COVID-19.

3. Service description

The Community Pharmacy Home Delivery Service during the COVID-19 pandemic ('the service') is a Core service commissioned under the Community Pharmacy Contract Framework.

In line with the DoH policy, patient eligibility is defined as those patients who are deemed to be clinically extremely vulnerable should they become infected with the COVID-19 virus. The full list of eligible patient groups is set out at Annex A.

The service should be provided in line with the following professional standards and guidance issued by the Pharmaceutical Society of Northern Ireland:

- Professional standards and guidance for the sale and supply of medicines (March 2016)¹
- Supplementary Guidance for Pharmacists in Northern Ireland on the Provision of Prescription Collection and/or Delivery Services (March 2016)²

This service does not replace any existing delivery services that a pharmacy contractor provides under normal circumstances.

The service should be provided to all eligible patients at no cost to the patient.

¹ https://www.psni.org.uk/wp-content/uploads/2012/09/standards_on_sale_and_supply_of_medicines-revised1mAR2016.pdf

² <https://www.psni.org.uk/wp-content/uploads/2012/09/PSNISUPPGUIDANCEONCOLLECTIONANDDELIVERY1Mar2016.pdf>

The service will begin on 1st September 2020. The service will remain in place until a date specified by HSCB. In the first instance it will run until 31st March 2021.

4. Service outline

4.1 Patient eligibility

4.1.1 Patients **who meet** the eligible patient criteria should be encouraged in the first instance to arrange for their medicines to be collected from the pharmacy and then delivered by family, friends or a carer.

4.1.2 Where a patient does not identify themselves, but the nature of the prescription leads the pharmacy team to consider that the patient may fulfil the criteria as detailed in Annex A, they should enquire of the patient if they have been received communication/advice from their General Practice. Where they have, they should enquire if the patient has anyone who they can ask to collect their medicines for them as in paragraph 4.1.1.

4.2 Governance arrangements

4.2.1 When providing medicines via the delivery service the pharmacist still has a professional responsibility to ensure that patients or their carers know how to use the medication safely, effectively and appropriately and to check that they are not experiencing adverse effects or compliance difficulties.

4.2.2 The community pharmacy contractor must ensure that:

- on each occasion the delivery service is provided the pharmacist uses their professional judgement to determine whether direct face-to-face contact with the patient or their carer is necessary.
- the pharmacist obtains consent from the patient to provide the delivery service, confirms consent on each occasion, as appropriate, and maintains appropriate records of requests for the service. A privacy notice should be made available to patients – a template³ is available that can be amended to suit the individual pharmacy's requirements.
- the delivery mechanism used:
 - enables the medicine to be delivered securely and promptly to the intended recipient with any necessary information to enable safe and effective use of his medicine;
 - provides for any special security/storage requirements of the medicine;
 - incorporates a verifiable audit trail for the medicine from the point at which it leaves the pharmacy to the point at which it is received by the patient or their carer, or returned to the pharmacy in the event of a delivery failure;

³ <http://www.hscbusiness.hscni.net/services/3153.htm>

- safeguards confidential information about the medication that a patient is taking.

4.2.3 The pharmacy contractor must have a standard operating procedure (SOP) in place for this service, which includes procedures to ensure health and safety and infection control procedures are maintained in line with any relevant guidelines. All staff involved in the provision of this service should be competent to do so, and should ensure they are familiar with and adhere to the SOP.

4.2.4 The delivery service must be provided in line with any Public Health Agency or professional guidance.

4.2.5 The pharmacy contractor is required to report any patient safety incidents related to the service in line with the HSCB procedure for reporting adverse incidents and near misses.⁴

4.2.6 Where it is noted by delivery drivers that patients may be having difficulty or require further assistance the pharmacist should consider whether it may be appropriate to signpost to additional support e.g. Voluntary organisations.

4.2.7 A sub-contracting arrangement may be established with Community and Voluntary Organisations and where partnership working is in place to support medicines delivery. Deliveries made by volunteer organisations should be done in accordance with a relevant Standard Operating Procedure.⁵

5. Service availability

5.1 The pharmacy contractor should seek to ensure that the service is available throughout the pharmacy's contracted opening hours.

5.2 The pharmacy contractor must ensure the service is accessible, appropriate and sensitive to the needs of all service users. No eligible patient should be excluded or experience particular difficulty in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion or belief, political opinion, gender reassignment, marriage or civil partnership status, pregnancy or maternity, or age.

5.3 The pharmacist should use their clinical judgement, based on the information presented to them, to take into account the clinical need of the patient and pharmacy workload capacity to determine the urgency with which the prescription item(s) should be delivered.

⁴ <http://www.medicinesgovernance.hscni.net/primary-care/community-pharmacy/community-pharmacy-incidentsnear-misses/>

⁵ <http://www.hscbusiness.hscni.net/pdf/Home%20delivery%20%20SOP%20for%20CVS%200520.pdf>

6. Records and data sharing

6.1 The pharmacy contractor must maintain appropriate records to ensure effective ongoing service provision and to support post-payment verification. This should include, as a minimum, details of the eligible patients to whom a delivery was made under this service and the dates of deliveries.

7. Remuneration and reimbursement

Remuneration for the service has been agreed as part of additional funding available to community pharmacies as a result of the Covid-19 pandemic and will be based on all pharmacies providing the delivery service for the remainder of the financial year.

Where the HSCB identifies failure to comply with the requirements of this service specification, the HSCB reserves the right to recover all, or part of, this funding via an adjustment to the pharmacy's BSO payment account.

ANNEX A: ELIGIBLE PATIENTS FOR THE COMMUNITY PHARMACY HOME DELIVERY SERVICE

Patients eligible for the service are those defined as being extremely vulnerable should they become infected with Covid-19. (This has previously been referred to as “the shielded group” although shielding for these patients has been paused for now.)

This definition may be subject to change; you will be advised of any changes which will also be published online at:

<https://www.nidirect.gov.uk/campaigns/coronavirus-covid-19>

Patients should have been notified via a letter, sent out by their general practice or hospital consultant, and will be asked to contact their pharmacy if they need to have their prescriptions delivered.

The delivery service must be provided to the following groups of patients:

- Solid organ transplant recipients
- People with specific cancers:
 - People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer.
 - People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment.
 - People having immunotherapy or other continuing antibody treatments for cancer.
 - People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.
 - People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.
- People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD.
- People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
- People on immunosuppression therapies sufficient to significantly increase risk of infection.
- People who are pregnant with significant congenital heart disease.

Pharmacy contractors should be aware that GPs have the ability to remove or add patients to the list of those deemed most vulnerable as their clinical condition changes. Should any such changes occur during the pandemic period GP practices will contact the patient's regular community pharmacy directly to confirm any changes in eligibility within the listed criteria.