

## Section B6: Service Specification – Community Pharmacy Emergency Supply Service

### B6.1. 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) (u).

In an emergency, a pharmacist can supply prescription only medicines (POMs) to a patient (who has previously been prescribed the requested POM) without a prescription at the request of a patient. This emergency supply is not an NHS service and patients may therefore be asked to pay the cost of the medicine. This can lead to some patients seeking supplies or emergency prescriptions from urgent or emergency care providers or placing extra demand on GP appointments. When demand is high it may not be practical to obtain a prescription in a timely way to meet immediate need.

The Community Pharmacy Emergency Supply Service allows the emergency supply of a patient's medicine at NHS expense in order to reduce the number of patients contacting urgent and emergency care providers. This may include both prescription only and other medicines usually obtained on prescription by the patient from their GP. The emergency supply provisions permit the supply of sufficient quantities of most prescription only medicines for up to 30 days treatment, **this service specification allows for up to 7 days treatment only**. Exceptions apply for inhalers and creams / ointments, where a manufacturer's pack can be supplied. Schedule 1, 2 or 3 controlled drugs (except phenobarbitone or phenobarbitone sodium for epilepsy) cannot be supplied in an emergency. Quantities of other medicines should be in line with this.

During a pandemic situation, a pharmacist may make an emergency supply against a request by a patient's representative; at all other times the request must be made directly by the patient.

The purpose of the Community Pharmacy Emergency Supply Service is to ensure that patients can access an urgent supply of their regular prescription medicines where they are unable to obtain a prescription before they need to take their next dose. The service may be needed because the patient has run out of a medicine, or because they have lost or damaged their medicines, or because they have left home without them. The aim of this service is to relieve pressure on urgent and emergency care services and general practitioner appointments at times of high demand.

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This service may be commissioned using the provisions within the Human Medicines Regulations 2012 which allow pharmacists to make emergency supplies, subject to certain conditions.

The pharmacist will at the request of a patient (or in pandemic situations, a representative of a patient), assess whether there is an urgent need for their medicine, in circumstances where it is impracticable for the patient to obtain a prescription before the next dose is due. If an emergency supply is necessary, the pharmacist shall make a supply, in accordance with the Human Medicines Regulations 2012 maintaining a record of the supply and labelling the container appropriately.

A record of the supply will additionally be made on PharmOutcomes. A copy of the record will be sent to the patient's general practitioner automatically by PharmOutcomes unless requested to print

## **B6.2. Aims and intended outcomes of the service**

To ensure timely access to medicines for all patients in emergency situations, where it is not practicable to obtain a prescription.

To ensure equity of access to the emergency supply provision irrespective of the patient's ability to pay.

## **B6.3. Service specification**

This service is available for only patients registered with a General Practice within the Clinical Commissioning Group (CCG).

The pharmacist will:

- Interview the patient (or, in a pandemic only, the patient's representative) to identify the medicines needed and to establish the nature of the emergency;
- Examine the patient medication record to establish whether the patient's last course of the medicine was obtained from that pharmacy against a prescription;
- The pharmacy should take reasonable measures to ascertain the appropriateness of making a supply, including, where appropriate the use of Summary Care Record, contacting the last supplying pharmacy or the prescriber; and
- Where appropriate, advise the patient or his representative on the importance of ordering prescriptions in a timely manner.
- The pharmacist will at his/her discretion, make the supply in accordance with the requirements of the Human Medicines Regulations 2012. **This service specification allows for up to 7 days treatment only.** Exceptions apply for inhalers and creams / ointments, where a manufacturer's pack can be supplied. Schedule 1, 2 or 3 controlled drugs (except phenobarbitone or phenobarbitone sodium for epilepsy) cannot be supplied in an emergency. Quantities of other medicines should be in line with this.

The pharmacy will maintain a record:

- of the emergency supply, setting out the name and address of the patient, the prescription only medicine supplied, the date of the supply and the nature of the emergency in accordance with the Human Medicines Regulations 2012;
- of the consultation and any medicine that is supplied in the patient medication record;
- of the consultation and any medicine that is supplied the paperwork/IT system provided by the commissioner. This record will be used for the recording of

relevant service information for the purposes of audit and the claiming of payment. Patient consent will need to be given for this data sharing

- One copy of this record in will be sent to the patient's general practitioner for information (this will normally be done by PharmOutcomes automatically) Patient consent will need to be given for this data sharing.
- A prescription charge should be collected unless the patient is exempt in accordance with the NHS Charges for Drugs and Appliances Regulations. Where a prescription charge is paid a patient must sign a declaration. A prescription refund and receipt form as approved by the Secretary of State must be provided if the patient requests it. Any prescription charges collected from patients will be deducted from the sum payable to the pharmacy.
- If a patient is exempt from paying a prescription charge in accordance with the NHS Charges for Drugs and Appliances Regulations, evidence of entitlement to exemption should be provided by the patient for the pharmacy to check and the patient must make a declaration of entitlement. Where a claim to exemption has been made but is not substantiated, the charge should be recovered from the patient by the commissioner.
- The pharmacy contractor must have a standard operating procedure in place for this service.
- Locally agreed referral pathways will be put in place and will be followed where the pharmacy is not able to make an urgently required supply of a prescription only medicine.

#### **B6.4. Training, premises and other requirements**

The pharmacy contractor has a duty to ensure that pharmacists involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.

#### **B6.5. Service availability**

The pharmacy contractor should ensure that the service is available throughout the pharmacy's opening hours (both core and supplementary) which **fall in the out-of-hours period (6.00 pm to 8.00 am on weekdays plus weekends and Bank Holidays).**

#### **B6.6. 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.

**B6.7. 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.

For Reference Only