-

|  |  |
| --- | --- |
| **Service** | **Just in Case Service** |
| **Commissioner Lead** | **Melanie Preston / Michelle Ashton** |
| **Provider Lead** |  |
| **Period** | **1st April 2022 – 31st March 2023** |
| **Date of Review** | **Ongoing** |

|  |
| --- |
| **1. Population Needs** |
| * 1. **National/local context and evidence base**

1.1 This service specification covers the requirements additional to those for dispensing.1.2 The object of the service is to maintain a locally agreed stock of medicines (Appendix 1 – ‘Just in Case 4 Core Drugs’ List) used in the treatment of palliative care patients at designated community pharmacies. This is intended as a ‘Just in Case 4 Core Drugs’ supply by community pharmacies against FP10 prescriptions issued. These palliative care medicines will be supplied in a secure bag for storage in the patient’s home in anticipation and in advance of the need to administer the medicine.  |
| **2. Outcomes** |
| **2.1 NHS Outcomes Framework Domains & Indicators**

|  |  |  |
| --- | --- | --- |
| **Domain 4** | **Ensuring people have a positive experience of care** | **Y** |
| **Domain 5** | **Treating and caring for people in safe environment and protecting them from avoidable harm** | **Y** |

**2.2 Local defined outcomes** |
| **3. Scope** |
| **3.1 Aims and objectives of service**3.1 To reduce the incidence of delayed access to Palliative Care medication by anticipating need.3.2 To ensure the public has easy access to Palliative Care medicines during normal working hours.3.3 To support patients, carers, and clinicians by providing them with up to date information and advice and referral where appropriate.**3.2 Service description/care pathway****3.2 Community pharmacy responsibilities for the service:**3.2.1 Maintain a minimum stock level, as specified on Appendix 1 – ‘Just in Case 4 Core Drugs’ List. Each pharmacy must ensure enough stock is available for two ’Just in Case 4 Core Drugs’ supplies at any one time. There will be allowances made for medicines issued and awaiting delivery from the wholesaler and where stock is unavailable due to manufacturing problems.3.2.2 The pharmacy will produce a Standard Operating Procedure (SOP) for all staff and locums. This will include:* Details of wholesalers- delivery / order times and contacts details
* Contact details of other pharmacies in the scheme
* Contact details for the Specialist Palliative Care Team at the Hospice
* List of agreed medicines
* Record of stock check
* Contact details for Fylde Coast CCGs representative
* Significant event reporting form

3.2.3 The pharmacy contractor has a duty to ensure that all employed pharmacists and pharmacy staff participate in the provision of the service. Staff must have relevant knowledge and must be appropriately trained in the operation of the service. A CPPE Palliative Care course is available to support CPD.3.2.4 The pharmacy contractor will dispense the medication in a bag, sealed with a tamper-evident seal in response to NHS prescription presented. Prescriptions may be highlighted as a ‘Just in Case 4 Core Drugs’ supply by the GP practice or the pharmacy will be notified by the community nurse. The pharmacist will ensure batch numbers and expiry dates are visible on each medicine container and ensure that patient information leaflets are included for each medicine. All medicines supplied must have a minimum of three months expiry date.3.2.5 The ‘Just in Case 4 Core Drugs’ supply will be labelled externally at the pharmacy with:* Patient’s name
* The date of supply
* Drug name and quantity supplied
* Batch numbers and expiry dates of the medicines contained within it

3.2.6 The pharmacy contractor will complete the Pharmacy Collection and Delivery Form for the ‘Just in Case 4 Core Drugs’ supply (Appendix 2) and retain the form in the pharmacy. 3.2.7 Medicines will be checked regularly by the pharmacy to ensure sufficient stock is available and in date.3.2.8 Where a medicine is unavailable, for whatever reason, the pharmacy will endeavour to identify an alternative point of supply for the patient or their representative.3.2.9 A feedback form (Appendix 3) is available for the pharmacy to report any operational issues with the service. Forms are to be sent to the Primary Care Team at the CCG. Any clinical issues are to be reported to the Medicines Optimisation Lead at the CCG.3.2.10 The Pharmacy must report any incidents involving Controlled Drugs to the Accountable Officer at NHS England Lancashire Area Team via their usual defined procedures.3.2.11 The pharmacy should maintain appropriate records to ensure effective ongoing service delivery and audit.3.2.12 The pharmacist will be available to offer professional advice to patients and carers on the medicine dispensed and their use within palliative care.3.2.15 The pharmacist must be able to demonstrate compliance with the NPSA Safer Practice Notice – Ensuring Safer Practice with high dose ampoules of morphine and diamorphine and Rapid Response Report Reducing Dosing Errors with Opioid Medicines. Future NHS England Patient Safety Alerts and MHRA alerts must also be complied with.3.2.16 The Clinical lead for end of life will provide an allocation of the tamper-evident bags initially. **3.3 Population covered**3.3.1 All Blackpool & Fylde & Wyre residents if clinically appropriate **3.4 Any acceptance and exclusion criteria and thresholds**For people approaching the end of life when they are likely to die within the next 12 months.  This includes people whose death is imminent and those with* 1. Advanced, progressive, incurable conditions
	2. Moderate to severe frailty and co-existing conditions that mean they are expected to die within 12 months.
	3. Existing conditions if they are at risk of dying from a sudden acute crisis in their condition.
	4. Life threatening acute conditions caused by sudden catastrophic events.

**3.5 Interdependence with other services/providers**3.5.1The Community Specialist Palliative Care Nurse from Trinity Hospice will provide advice and support to pharmacists as needed, to help meet the needs of palliative care patients and the requirement to demonstrate ongoing CPD.3.5.2 The Community Specialist Palliative Care Nurse from Trinity Hospice will provide adequate signposting for patients, carers and clinicians to improve awareness of specialist palliative care services and the availability of support and advice.**3.6 Activity/ Monitoring**3.6.1 The service provision will be reviewed annually. 3.6.2 The CCG may carry out spot checks of stock and documentation when necessary and where it is convenient to the pharmacy.3.6.3 The CCG will regularly review the drug list with the Specialist Palliative Care Team at the Hospice to ensure the list reflects the availability of new medicines and changes in guidelines and practice.3.6.4 The CCG will disseminate information on the service to other pharmacy contractors and health care professionals in order that they can signpost patients to the service.3.6.5 The CCG will provide a framework for the recording of relevant service information for the purpose of audit and claiming payment.**3.7 Finance**3.7.1 An initial set up fee of £220.00 will be payable for the year, at the commencement of the service and will be paid on return of the signed Contract to:enhancedserviceslcsu@nhs.netPayment will be made by Midlands and Lancashire Commissioning Support Unit on behalf of the CCG. |
| **4. Applicable Service Domains** |
| **4.1 Applicable national domains (e.g., NICE)**NICE Quality Standards for End-of-Life Care**4.2 Applicable domains set out in Guidance and/or issued by a competent body (eg Royal Colleges)** **4.3 Applicable local domains**The pharmacy reviews its SOP ‘Stock Holding of Palliative Care Medicines’ on an annual basis or as required if any significant changes occur.The pharmacy demonstrates that pharmacists and staff involved in the provision of this service have relevant knowledge and are appropriately trained in the operation of the service.The pharmacy participates in any CCG organised audit of the service.The pharmacy co-operates with any locally agreed CCG - led assessment of service user experience. |
| **5. Applicable quality requirements and CQUIN goals** |
| * 1. **Applicable Quality Requirements (See Schedule 4A-D)**
	2. **Applicable CQUIN goals (See Schedule 4E)**
 |
| **6. Location of Provider Premises** |
| **The Provider’s Premises are located at:** |

**Appendix 1 – ‘Just in Case 4 Core Drugs’ List**

**Drug**  **Pack size for each ‘Just in Case 4 Core Drugs’ supply**

Morphine 10mg/1ml injection 5 Vials x 1 ml

Levomepromazine 25mg/ml injection ampoules 5 Vials x 1 ml

Glycopyrronium bromide 200mcg/ml ampoules 5 Vials x 1 ml

Midazolam 10mg/2ml injection 2ml ampoules 5 Vials x 2 mls

Water for Injection 10ml ampoules 10 Vials

**Appendix 2**

**PHARMACY COLLECTION AND DELIVERY FORM FOR**

**THE ‘JUST IN CASE 4 CORE DRUGS’ SUPPLY**

(To be retained in Pharmacy)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Patient** | **Address of Patient** | **Date of Collection** | **Name of Person****Collecting** **Medicine**  | **Signature of Person Collecting** **Medication** |
|  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Drug** | **Quantity Dispensed** | **Batch****Number** | **Expiry Date** |
| Morphine 10mg/1ml injection | 5 Vials x 1ml |  |  |
| Levomepromazine 25mg/ml injection ampoules | 5 Vials x 1 ml |  |  |
| Glycopyrronium bromide 200mcg/ml ampoules | 5 Vials x 1 ml |  |  |
| Midazolam 10mg/2ml injection 2ml ampoules | 5 Vials x 2 mls |  |  |
| Water for Injection 10ml ampoules  | 10 Vials |  |  |

Date Dispensed: …………………………………………………

Pharmacist Signature………………………………………….

Name of Pharmacist…………………………………………….

**Appendix 3**

**Feedback Form for Enhanced Service**

**‘Just in Case 4 Core Drugs’ supply**

Stock Holding of Palliative Care Medicines

Pharmacy Name and Address

|  |
| --- |
|  |

Description of the issue (Contained on a separate page if necessary)

|  |
| --- |
|  |

Actions taken already to address/rectify the issue

|  |
| --- |
|  |

Involvement of other Healthcare Professionals

|  |
| --- |
|  |

Recommendations you would like to make regarding the service

|  |
| --- |
|  |

Name of person completing this form………………………………………………………...

Date ………………………………………………………………

**List of Participating Pharmacies and Useful Contacts**

|  |
| --- |
| **Community Pharmacies Participating in Anticipatory Supply of JiCD in Tamper‐Evident Bag** |
|  |
| **Blackpool Cohens Pharmacy** | Moor Park Health Centre Bristol Avenue BlackpoolFY2 0JGTelephone 01253 354988Mon-Fri 08.00 – 23.00 Sat 09.00 – 22.00 Sun 10.00-22.00  | **Blackpool** **The Hub Pharmacy** | Whitegate Primary Care Centre 150 Whitegate Drive BlackpoolFY3 9ESTelephone 01253 807808Mon-Sun 08.00 – 21.00 |
| **Blackpool** **Well Pharmacy** | 9‐11 All Hallows Road BisphamBlackpool FY2 0ASTelephone 01253 355699Mon-Fri 08.30 - 18.30Sat 09.00 – 13.00 | **Blackpool** **Lytham Road Pharmacy** | South Shore Primary Care Centre Lytham Road BlackpoolTelephone 01253 403038Mon - Thur 08.15 – 19.15Fri 08.00 – 18.00 |
| **Kepple Lane Pharmacy** **Garstang** | Garstang Medical Centre, Kepple Lane, Garstang PR3 1RBTelephone 01995 607399Mon-Sat 8.30am-12pm +2pm-6pm Sun 8am-12pm + 1pm-4pm | **Kirkham** **Well Pharmacy** | 5 Market Square, KirkhamPR4 2SDTelephone 01772 686118Mon-Fri 08.30 – 18.30 Sat 09.00 – 13.00 |
| **Fleetwood Warburtons Pharmacy** | 84‐86 Lord Street Fleetwood FY7 6JZTelephone 01253 874849Mon-Fri 09.00 – 17.30 Sat 09.00 – 17.00  | **Poulton / Carleton Carleton Pharmacy** | 5 Poulton Road CarletonFY6 7NHTelephone 01253 896878Mon,Tue,Thur,Fri 09.00 – 18.30 Wed 09.00 – 18.00Sat 09.00 -12.30  |
| **Freckleton Well Pharmacy** | Douglas Drive Health Centre FreckletonPR4 1RYTelephone 01772 632347Mon-Fri 08.30 – 18.00Sat 9am-12.30pm  | **St Anne’s / Lytham** **Pharmacy** | Lytham Primary Care Centre Warton Street LythamFY8 5EETelephone 01253 806510Mon-Fri 08.30 – 18.00  |
| **Great Eccleston Great Eccleston Health Centre****The Pharmacy** | Raikes Road Great Eccleston PR3 0ZATelephone01995 672925Mon 08.00 – 19.00Tue-Fri 08.00 – 18.00 Sat 08.00 – 12.00Closed daily 1-2pm lunch | **Hambleton Hambleton Pharmacy** | Kiln Lane Poulton le Fylde Hambleton FY6 9AHTelephone 01253 702219Mon-Fri 09.00 -12.45 + 14.00 – 18.00Sat 09.00 - 12.30 |

**CCG Contacts:**

Melanie Preston

Medicines Optimisation Lead

Melanie.preston@nhs.net

Tel 01253 951306

Michelle Ashton

Senior Commissioning Manager

michelleashton@nhs.net

Tel 01253 951315

Kathryn Smith

Clinical Lead, End of Life Care

Commissioning

kathryn.smith@blackpool.nhs.uk

Tel: 01253 655230