

SCHEDULE 2 – THE SERVICES

A. Service Specifications

Service Specification No.	PFSS-1
Service	Pharmacy First Supply Service
Commissioner Lead	Nicola Feeney
Period	1 st July 2024 – 31 st March 2025
Date of review	March 2025

1.

1.1 Consultation Process

The consultation should follow the Pharmacy First Service process within the specification.

<https://www.england.nhs.uk/wp-content/uploads/2023/11/PRN00936-i-Community-pharmacy-advanced-service-specification-NHS-pharmacy-first-service-November-2023.pdf>

The pharmacist/accredited pharmacy staff should carry out a professional consultation in line with the Pharmacy First Service with reference to the local supply formulary.

This will involve:

- Provision of advice.
- Completion of PharmOutcomes (Pharmacy IT reporting system) data collection.
- Supply of medication from the agreed formulary when appropriate. Supply will be in an original pack, with a product information leaflet and instructions for use. The decision to provide a medicine for treatment or to refer will be based on symptom and treatment history.

The pharmacist/ accredited pharmacy staff must ensure that the consultation process is confidential.

1.1.1 Record Keeping

A record of any medication supplied through the Pharmacy First Supply service should be documented in the Patients Medication Record (PMR) on the pharmacy IT system (recommended) and MUST be recorded on the appropriate PharmOutcomes (Pharmacy IT reporting system) page.

It is a requirement of the service that all consultations are recorded on PharmOutcomes for invoicing and audit purposes. This information must be recorded at the time of the consultation.

All pharmacies contracted to provide the service will require individual logins to access the Pharmacy First Supply Service Part A (patient registration) and Part B (consultation), and these are provided separately by PharmOutcomes team.

1.1.2 Evaluation

Pharmacies participating may be asked to support the evaluation to inform future commission decisions. Pharmacies will be expected to follow complaints procedure in line with the national Terms of Service. where issues arise so that improvements can be made following significant events or errors.

1.2 Eligibility criteria

- Patient's who have been referred to the community pharmacy electronically by a healthcare referring organisation.
- Community pharmacists can provide treatment without charge to patients exempt from Prescription charges under the national regulations including those with a valid pre-payment certificate. Patients under 16 must be accompanied by their parent or guardian.

Exclusions to the Pharmacy First Supply Service

- Patients cannot self-refer into the supply service.
- If the patient presents with symptoms indicating a diagnosis of a condition which falls outside those included in the service.
- If the patient or parent is unwilling to complete/use the relevant documentation.

GPs cannot refer patients for named medicines – if the GP consultation resulted in a medication recommendation, then a prescription for medication should be issued. Additionally, a GP cannot write a prescription for one item and refer the patient for the other named item.

Pharmacists should refer patients to NHS.UK, the Self Care Forum or NHS 111 for further advice on when they should seek GP Care. The Royal Pharmaceutical Society offers advice on over-the-counter products that should be kept in a medicine cabinet at home to help patients treat a range of self-treatable illnesses.

1.3 Payment

Contractors will be paid the single activity fee per supply plus the cost of the medication supplied.

The list price of the medication supplied is based on the Dictionary of Medicines and Devices

Payment for the Pharmacy First referral must be claimed via the usual route, Manage Your Service (MYS)

Claims for payment will be processed in accordance with the NHS Lancashire and South Cumbria ICB protocols.

All supplies must be recorded on the PharmOutcomes system to ensure payment. Payment will be collated from the PharmOutcomes system on the 5th of the month and submitted to the ICB for payment.

Payments will be made at the end of the month following that to which the payment relates.

Claims should be submitted not later than 3 months after the date of the activity (for example, March claim can be submitted in April, May, or June). Claims submitted after the 3-month period will not be approved for payment. At year end the final processing date for claims for the previous year is 10th July, (for example claims for 2024/2025 must be submitted by 10th July 2024).

2. Applicable Service Standards

2.1 Applicable national standards (e.g. NICE)

Applicable standards set out in Guidance and/or issued by a competent body (e.g. Royal Colleges)

2.1.1 Confidentiality

Both parties shall adhere to the requirements of the **General Data Protection Regulation (GDPR)** May 2018 and the Freedom of Information Act 2000.

2.2 Applicable local standards

2.2.1 Local requirements to provide the Service:

Only community pharmacies that have registered with the LSCICB by signing the contract may provide the service and is subject to the following requirements:

The pharmacy contractor must agree with the NHS Commissioner to participate in all aspects of the service as detailed in this document along with any subsequent amendments as agreed with the Local Pharmaceutical Committee (LPC).

A standard operating procedure (SOP) must be produced for provision of the service, which clearly defines roles and responsibilities of relevant staff within the authorised pharmacy.

The pharmacy should be able to provide evidence they are meeting the requirements for all essential services in the community pharmacy contractual framework.

The pharmacist in charge or pharmacy manager must ensure that any pharmacist or locum employed by the pharmacy is briefed on the scheme, has read the service specification and completed the mandated training requirements before providing the service.

Medicines Counter Assistant qualified staff may be delegated to undertake the supply service provided they adhere to a scheme SOP and sales of medicines protocols and safeguarding procedures. However, overall responsibility and accountability will remain with the responsible pharmacist and, therefore, there must be a supervising pharmacist on the premises who has completed Level 2 Safeguarding Training. It is essential that any regular locum staff should complete the training requirements so that the service can be provided throughout all opening hours.

2.3 Supplying treatment through the Service

Patients will be provided with medicines to manage their condition if:

- The patient is eligible for treatment within the scope of the scheme.
- The medicine required is not contraindicated, having questioned the patient appropriately. The treatment provided is in accordance with the Pharmacy First Supply protocol.

NB. Only the products listed on the local formulary will be provided under the terms of the scheme. If an item is out of stock long term pharmacies are asked to refer the patient to another local pharmacist (where medication may be available) or offer the sale of alternative medication over the counter to the patient.

Quantity supplied will be single packs as specified.

- i. Over the Counter (OTC) medicines must not be supplied outside licensed indications.
- ii. Prescription Only Medicine (POM) will not be supplied.
- iii. Patients will be advised how to take/use the medicines supplied and provided with a Patient Information Leaflet (PIL).
- iv. Pharmacists can use their professional discretion to supply sugar free preparations of the same formulary items when appropriate e.g. diabetic patients and children.
- v. When supplying the medication an entry onto the patient's Patient Medication Record (PMR) must be made, and the product labelled as "Supplied under the NHS '*Pharmacy First Supply Service*'".

Packaging should be clearly marked "NHS supply" to ensure NHS resources are used by those they are intended for.

2.3.1 Pharmacist and Pharmacy Staff Accreditation

All staff operating the scheme must have read and understood the national self-care guidance [NHS England 'Conditions for which over the counter items should not routinely be prescribed in primary care: Guidance for CCGs'](#) (March 2018)

And the [Quick reference for health professionals for condition-specific exemptions](#).

2.4 Professional qualifications required.

Registered with the General Pharmaceutical Council.

2.5 Specialist competence, training and experience

- The pharmacist is responsible for ensuring that they are trained and competent in the OTC management of the minor ailments listed.
- Pharmacists should be familiar with the 'Summary of Product Characteristics' and licensing indications of all medication within the supply formulary.

2.6 Continued training/ education

This should form an integral part of their continuing professional development for relevant areas of work. A CPPE Safeguarding children and vulnerable adults: Level 2 course is available to support CPD which may be of assistance.