

**Enhanced Service Level Agreement**

# NHS ENGLAND AND

# Cheshire and Merseyside Contractors as detailed in Appendix 5

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**STOCKHOLDING AND SUPPLY OF ANTIVIRAL MEDICATION**

**July 2021 – July 2024**

**CONTRACT END DATE: July 2024**

## Introduction

Public Health England (PHE), NHS England, Clinical Commissioning Groups, System Resilience Groups and Directors of Public Health (DsPH) have some health protection responsibilities that are best delivered on a collaborative basis to support patient pathways and ensure a cohesive and system wide approach to patient care.

The following is an Enhanced Service agreement between the supplying Pharmacy1 (see appendix 5 for specific Contractors) and NHS England for the stockholding and supply of antiviral medication.

This SLA supports an enhanced service commissioned under the regulatory governance of THE NATIONAL HEALTH SERVICE ACT 2006, The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013. Specifically, regarding Direction 14(l).

Under direction 14(1)(l)

**14.**—(1) The NHSCB is authorised to arrange for the provision of the following additional pharmaceutical services with a pharmacy contractor (P)—

(L) an On Demand Availability of Specialist Drugs Service, the underlying purpose of which is for P to ensure that patients or health care professionals have prompt access to specialist drugs.

This is specifically (although not exclusively) to support the patient pathway for access to antiviral medication to protect patients exposed to **influenza (Flu)** or **Influenza-like illness (ILI)** in an institution / **care setting** - providing accommodation and care for people who are unable to look after themselves (e.g. care home).

## Agreement

1. Consultants in Communicable Disease (CsCDC) / Consultants in Health Protection (CHP) who are employed by CMPHEC and registered with the GMC*,* will be responsible for formally declaring an outbreak of Flu or ILI in a care setting. This person will then contact the person(s) or service identified locally as responsible to provide clinical support to the identified care setting in the event of a declared outbreak of Flu or ILI.

Table 1: Incident for which emergency supply of medicines may be required

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| **Incident Type** | **Medicines** |
| Influenza, in a care/residential setting | Oseltamivir. |

The medicines and amounts detailed in Table 2 are expected to be in stock for dealing with public health emergencies, i.e. to facilitate a timely response, especially during weekends and bank holidays.

Table 2: Medicines and doses to be kept in stock

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| **Medicine** | **Dose Available** |
| Oseltamivir (Tamiflu) | 75mg x **100 courses**; and **30mg x 100 courses** |

1. During working hours CMPHEC CCDC or appropriately nominated person should contact a supplying Pharmacy who will arrange supply of the above medication.

1 The pharmacy may be a pharmacy within an NHS Hospital Trust or a community pharmacy

1. Medication will be requested by a prescriber against via a supply of NHS (FP10) prescriptions, during flu seasons. The prescriber should check with the pharmacy before issuing the prescriptions and sending via the Electronic Prescription Service (EPS). If the pharmacy being used is not the usual dispensing pharmacy, the prescriber may need to use a “one off nomination” process to ensure the prescription is sent to the required pharmacy.

If the prescriber cannot send the prescriptions by EPS and needs to write a paper FP10 (for example if the provider is not the patient’s registered GP and/or there is a technical problem with sending via EPS), the prescriber will need to make a request for an emergency supply and make arrangements for the pharmacy to receive the prescriptions within 72 hours of issue. Pharmacies no longer accept copies of prescriptions sent by fax so the prescriber needs to supply the following information either verbally or by NHS mail:

1. the name, quantity and, where appropriate, the pharmaceutical form and strength;
2. the name and address of the practitioner requesting the emergency supply;
3. the name and address of the patient;
4. the date on the prescription.

A scanned copy (or photograph) of each prescription is recommended as a practical means of sending the required information to the pharmacy by NHS mail.

1. It is the **responsibility of the supplying Pharmacy** to ensure:
   * The medicines are correctly labelled to comply with the Medicines Act as issued against an FP10 / PSD.
   * All appropriate patient records and supply records are maintained as per legislation requirements.
   * The medicines have been correctly stored to ensure patient safety.
   * The medicines are transported to the care setting using an appropriate courier service or employed delivery driver which allows an audit trail (or tracking facility) where necessary.
   * Supplies are made within 24 hours of the initial request.
   * Invoices are submitted to NHS England (see Appendix 2 for template) before the 3rd working day each month to ensure timely payment.
   * Appropriate stock levels are maintained and rotated with normal stock to minimize out of date wastage.
   * Any stock shortages or supply issues are identified in a timely manner and reported to both NHS England Primary Care Team and to the CCDC.
   * Any incidents, complaints regarding this service should be notified to NHS England.
   * Appropriate SOPs should be in place to support delivery of this service in branch.
   * All appropriate staff should receive training to support delivery of this service.
   * An agreed level of service - as defined by a directed rota for pharmaceutical services, will be made available 365 days a year including Sundays, Bank Holidays and Statutory Holidays.
2. NHS England will reimburse the pharmacy as follows
   1. SLA fee for procurement, storage and management of the medication at the rate of £400.00 per year for the term of contract.
   2. Medications dispensed against an FP10 will be reimbursed though the existing NHS contractual mechanisms.
   3. Medications dispensed against a PSD will be reimbursed though invoices submitted to NHS England (see Appendix 2 for template) before the 3rd working day each month to ensure timely payment.
   4. A dispensing fee, equivalent to twice that paid against the dispensing of NHS FP10 supply (as documented in the most up to date Drug tariff), will be paid for each individual patient supplied against a PSD, reimbursed though invoices submitted to NHS England (see Appendix 2 for template) before the 3rd working day each month to ensure timely payment.
   5. Initial Stock Allocation – the initial stock allocation will be reimbursed against procurement price (as evidenced by wholesaler’s invoice) up to the stock holding thresholds specified in the contract. Stock will be reimbursed on submission of invoice to NHS England Cheshire and Merseyside detailing procurement has been completed and stock is available for use.
   6. Reimbursement for charges incurred for courier service. Reimbursement will be through submission of claim form with supporting evidence of claim (Appendix 3).
   7. Out of date stock – will be reimbursed against procurement price (as evidenced by wholesaler’s invoice) on submission of invoice to NHS England Cheshire and Merseyside (Appendix 4).

2 A Patient Specific Direction (PSD) is a written instruction, signed by a doctor, dentist, or non-medical prescriber for medicines to be supplied and/or administered to a named patient after the prescriber has assessed the patient on an individual basis.

1. Review of Contract:

This contract will be reviewed annually to assure the commissioners that the service is still required to support the patient pathway for flu. This contract can be terminated with 3 months’ notice if found to be redundant to need.

The provider can withdraw from this contract at the end of each flu season should they wish to discontinue provision of this service.

This contract will stand for the term of three years subject to the above caveats.

Signed by:

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|  | **NHS England North**  **(Cheshire and Merseyside)** | **Pharmacy Representative** |
| **Name:** | Jackie Jasper |  |
| **Title:** | Pharmacy Contracts Manager |  |
| **Signature:** |  |  |
| **Date** |  |  |

**Appendix 1**

Suspected Outbreak Identified Suspected Outbreak notified to PH England

Outbreak confirmed



CsCDC / CHP treatment authorised and liaise with Operational and Pharmacy Leads to inform them of outbreak

FP10 / PSD process

Operational Lead (e.g. infection control nurse/PHE/GP/ Care Home Manger) assigned to support coordination of FP10 or PSD prescription(s) by care home

CsCDC/CHP contact CCG to inform of outbreak and arrange appropriate clinical review of patients and supply of FP10/PSD where appropriate via CCG local arrangements.

Operational Lead to ensure presentation of FP10 or PSD prescription(s) at pharmacy or where not practicable Prescriber to ensure FP10 or PSD prescription(s) to identified pharmacy with full patient list - to enable pharmacy to cross reference receipt of Rx and ensure all received. Original signed FP10 or PSD prescription(s) to be forwarded to pharmacy by recorded delivery within 48 hours of faxing.

Pharmacy dispenses against FP10 or PSD prescription(s), labelled for each patient as per regulations. Pharmacy uses assigned courier to transport medication to appropriate address for receipt by named staff member/ALTERNATIVELY HOME MAY BE ABLE TO COLLECT. Pharmacy liaises with Operational Lead to give approximate time for supply. Full medication supply to be furnished within 24 hours of request.



Pharmacy reimbursed for supply through normal contractual arrangements or claims process as detailed in SLA.

**Appendix 2**

For reimbursement of medication costs and dispensing fee (**only** **when supply is made under a PSD)** - please ensure that evidence of invoices / charges is submitted with claim.

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| **CLAIM ASSOCIATED WITH THE SLA FOR STOCKHOLDING AND SUPPLY OF ANTIVIRAL MEDICATION**  **ODS Code:**  **Pharmacy Name:**    **Pharmacy Address:**  **Contact Name:**  **Telephone Number:**  ***Declaration of Submission:***  ***In submitting this claim, I give assurance that the costs claimed have legitimately occurred in the provision of the service as contracted under the SLA.***  FULL NAME (Please print):  Date: | | | |
| **Medication supplied** (**only** **when supply is made under a PSD).** | | | |
| Date of supply | Patient Initials | Antiviral supplied / strength / quantity | Medication Cost |
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| Total number of dispensing fees claimed  (no of patients x £XXX) |  | Total Drugs Cost Claimed (please include copy of wholesalers invoice to demonstrate claim) |  |

**Appendix 3** Template for invoice for reimbursement of delivery / courier costs: - please ensure that evidence of charges is submitted with claim.

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| **CLAIM ASSOCIATED WITH THE SLA FOR STOCKHOLDING AND SUPPLY OF ANTIVIRAL MEDICATION**  ODS Code:  Pharmacy Name:  Pharmacy Address:  Contact Name  Telephone Number: | | | |
| Date | Courier Used | Care Facility Requiring Delivery / Courier | Charge- (include mileage if claim is based on mileage) |
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| Total costs claimed (please include copy of wholesalers invoice to demonstrate claim) | | |  |
| *Declaration of Submission:*  *In submitting this claim I give assurance that the above costs have legitimately occurred in our delivering the service as contracted under the SLA.*  Signed  Printed  Date  Email to [ENGLAND.CMPharmacy@nhs.net](mailto:ENGLAND.CMPharmacy@nhs.net) | | | |

**Appendix 4** Template for invoice for reimbursement of out of date stock.

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| **CLAIM ASSOCIATED WITH THE SLA FOR STOCKHOLDING AND SUPPLY OF ANTIVIRAL MEDICATION**  ODS Code  Pharmacy Name:  Pharmacy Address:  Contact Name  Telephone Number: | | | |
| Expiry Date | Medication, Form and Strength | Batch Number | Cost |
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| Total costs claimed | | |  |
| *Declaration of Submission:*  *In submitting this claim I give assurance that the above costs have legitimately occurred in our delivering the service as contracted under the SLA.*  Signed  Printed  Date  Email to [ENGLAND.CMPharmacy@nhs.net](mailto:ENGLAND.CMPharmacy@nhs.net) | | | |

**Appendix 5** Contractors .

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| **ODS Code** | **Ownership Name** | **Trading Name** | **Address 1** | **Address 2** | **Town** | **County** | **Postcode** | **Tel No.** |
|  |  |  |  |  |  |  |  |  |
| FWP65 | Lloyds Pharmacy Ltd | Lloyds Pharmacy | Arrowe Park Hospital | Arrowe Park Road | Upton, Wirral | Merseyside | CH49 5PE | 0151 6776449 |
| FWK62 | Stockton Heath Healthcare Llp | Stockton Heath Pharmacy | Stockton Heath Med Centre | The Forge, Stockton Heath | Warrington | Cheshire | WA4 6HJ | 01925 266753 |
| FJX71 | Bestway Panacea Healthcare Limited | Well Pharmacy | Fountains Health | Delamere Street | Chester | Cheshire | CH1 4DS | 01244 379268 |
| FX408 | Aim Rx Ltd | Appleton Village Pharmacy | 2-6 Appleton Village |  | Widnes | Merseyside | WA8 6EQ | 0151 4208794 |