

Service Specification No.	N/A
Service	Community Pharmacy Trans Health Medicines Stockholding service
Commissioner Lead	Jennifer Johnson
Provider Lead	Community Pharmacy Contractor
Period	1 st April 2025 – 31 st March 2026
Date of Review	1 st July 2025 (please refer to the version control section)

1. Population Needs

- Across the country, transgender people generally experience poorer healthcare than the wider population, which can mean significant risks to their health and wellbeing.
- Pharmacists and their teams are ideally placed to make positive steps to support the health of transgender people by providing access to high quality care in a safe and inclusive environment.

2. Outcomes

2.1. NHS Outcomes Framework Domains & Indicators

Domain 1	Preventing people from dying prematurely	
Domain 2	Enhancing quality of life for people with long-term conditions	
Domain 3	Helping people to recover from episodes of ill-health or following injury	
Domain 4	Ensuring people have a positive experience of care	√
Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	√

2.2 Local defined outcomes

- To improve patient access to medicines used in the treatment of gender dysphoria.
- To ensure transgender people have convenient and timely access to medicines required for their treatment in a supportive and inclusive environment.

3. Scope

3.1 Aims and objectives of service

- To maintain an agreed stock of medicines used in the treatment of gender dysphoria
- To ensure timely access to medicines used in the treatment of gender dysphoria
- To support the health and wellbeing of transgender people, ensuring they have access to high quality information and advice in a safe and inclusive environment.

3.2 Service description

- This service specification covers the requirements additional to those for dispensing.
- The object of the service is to maintain an agreed stock of medicines (Appendix 1) used in the treatment of gender dysphoria at a designated community pharmacy. This is intended for supply by community pharmacies against FP10 prescriptions issued.
- Prior to the provision of the service, the pharmacy contractors must be satisfied that all pharmacy staff involved in the provision of this service are competent to do so, including any locum staff.
- The pharmacy contractor will maintain a minimum stock level as specified in Appendix 1, there will be allowances made for medicines issued and awaiting delivery from the wholesaler and where stock is unavailable due to manufacturing problems.
- Where a medicine is unavailable, for whatever reason, the pharmacy will endeavor to identify an alternative point of supply for the patient or their representative.
- Where there are ongoing supply issues affecting medicines included in Appendix 1 the contractor should inform the medicines management team at NHS Cheshire and Merseyside ICB (Sefton) by emailing sefton.mm@cheshireandmerseyside.nhs.uk
- Medicines will be checked regularly to ensure sufficient stock is available and in date.
- The pharmacist will be available to offer professional advice to patients and carers on the medicines dispensed and their use.
- The pharmacy contractor must be able to demonstrate compliance with any relevant central alerting system (CAS) alerts e.g., National Patient Safety alerts and MHRA alerts.
- Changes in pharmacy ownership will be communicated to the medicines management team at NHS Cheshire and Merseyside ICB (Sefton).
- Changes in hours must be communicated to the medicines management team at NHS Cheshire and Merseyside ICB (Sefton).

- If, for whatever reason, the pharmacy ceases to provide the essential services under the pharmacy contractual framework then the pharmacy will become ineligible to provide this locally commissioned service.
- If the service is not provided in accordance with this service specification NHS Cheshire and Merseyside ICB (Sefton) reserve the right to recover the appropriate payment and the pharmacy will become ineligible to provide this locally commissioned service.
- The pharmacy may withdraw from this service at any time provided it gives 3 months' notice in writing of its intention to do so.
- NHS Cheshire and Merseyside ICB (Sefton) will provide 3 months' notice of termination of this service.
- Where a pharmacy withdraws from this service NHS Cheshire and Merseyside ICB (Sefton) reserve the right to reclaim any retention fee on a pro-rata basis.

3.3 Training and development

- Commissioned Service Providers will be responsible for ensuring that only appropriately trained pharmacists and pharmacy staff will deliver the service.
- Prior to commencement of the service all staff involved in providing this service will be offered a (virtual) training session with the lead GP for Trans Health Sefton. The training will ensure staff have the relevant knowledge and understanding of the healthcare needs of transgender people.
- The responsible pharmacist on each given day has overall responsibility for ensuring the service is delivered in accordance with this service specification.

3.4 Equality and Diversity

- The service provider must comply with the requirements of the Equality Act 2010 and will not treat one group of people less favorably than others because of age, disability, gender reassignment, marriage or civil partnership, race, religion or belief, sex or sexual orientation, pregnancy and maternity.

3.5 Payment

- A setting up fee of £515.35 will be payable at commencement of the service. An invoice will be generated by NHS Cheshire and Merseyside ICB (Sefton) and sent to Shared Business Services for payment by the NHS Cheshire and Merseyside ICB (Sefton).
- An annual retention fee will be paid at the start of the service and then on each anniversary of the service. This is currently £309.21. A claim should be submitted on

PharmOutcomes. An invoice will be generated electronically and sent to Shared Business Services for payment by NHS Cheshire and Merseyside ICB (Sefton).

- Contractors will be reimbursed the cost (zero rated for VAT) of replacing any medicines listed in Appendix 1 that go out of date. A claim should be submitted on PharmOutcomes.

Any uplifts agreed in accordance with national guidance will be adjusted following ICB approval.

3.6 Population covered

- Any patient presenting to the pharmacy with a prescription for a medicine listed in Appendix 1.

3.7 Any exclusion criteria and thresholds

- N/A

3.8 Interdependence with other services/providers

- The service will involve working collaboratively with GP practices and other services and health professionals, as necessary.

4 Applicable Service Standards

4.1 Applicable national standards (e.g., NICE)

- NHS England Service Specification: Gender identity services for adults (non-surgical interventions) <https://www.england.nhs.uk/publication/service-specification-gender-identity-services-for-adults-non-surgical-interventions/>
- NHS England Interim service specification for specialist gender incongruence services for children and young people <https://www.england.nhs.uk/publication/interim-service-specification-for-specialist-gender-incongruence-services-for-children-and-young-people/>

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

- General Pharmaceutical Council Standards for Pharmacy Professionals

4.3 Applicable Local Standards

- It is expected that the service will be offered consistently throughout the opening hours of the branch including evenings, weekends, and Bank Holidays.
- It is expected that Service Providers contributes to any locally agreed NHS Cheshire and Merseyside ICB (Sefton) led assessment of the service or service user experience.

- The service provider must have a complaints procedure that complies with Local Authority Social Services and National Health Service complaints (England) Regulations 2009.
- Complaints directly linked to the quality of this service must be reported to the commissioner as set out in the NHS standard contract.
- Incidents and significant events should be reported to the commissioner using ULYSSES
<https://ulysses.midlandsandlancashirecsu.nhs.uk/Incident.aspx?link=D0155A369162E2E15F>

5 Applicable quality requirements and CQUIN goals

5.1 Applicable quality requirements

- The pharmacy will produce a Standard Operating Procedure (SOP) for all staff and locums. This will include:
 - Details of wholesalers – delivery/order times and contact details.
 - List of agreed medicines.
 - Contact details for NHS Cheshire and Merseyside ICB (Sefton) Medicines Management Team
 - Record of stock check.
 - Significant event reporting information
- The service provider must ensure that all staff working in the pharmacy have relevant knowledge, are appropriately trained, and operate within SOPs.
- The service provider should review their SOP for the service when there are any major changes in the law affecting the service or in the event of any incidents. In the absence of any of these events they will be reviewed every 2 years.
- The SOP must be available to the commissioner if requested.
- Pharmacists and their staff must be fully aware of their responsibility to safeguard vulnerable adults and children, and to refer appropriately as per local safeguarding procedures. Pharmacies must also have internal procedures in place to deal with safeguarding concerns.
- Pharmacists and staff involved in the provision of this service must be able to demonstrate ongoing CPD related to this service through private study and attendance at relevant teaching sessions.
- Failure to participate in any service audits or assessments organised by NHS Cheshire and Merseyside ICB (Sefton), when required, will lead to claims for payment being rejected.
- A member of the medicines management team at NHS Cheshire and Merseyside ICB (Sefton) will carry out spot checks of stock and documentation when necessary and where it is convenient to the pharmacy, this will occur at least annually.

6 Location of Provider Premises
6.1 Participating pharmacies within Sefton
7 Individual Service User Placement
7.1 N/A

Appendix 1

Testosterone products	Pack size	Brand	Quantity (OP)
Testosterone decanoate, isocaproate, phenylpropionate and propionate 250mg/1ml solution for injection	1	Sustanon	2
Testosterone undecanoate 1g/4ml solution for injection	1 vial	Nebido	2
Testosterone 16.2mg/g gel pump	88g	Testogel	2
Testosterone 2% gel pump	60g	Tostran	2
Estradiol Products	Pack size	Brand	Quantity (OP)
Estradiol 1mg tablets	84 tablets	Elleste solo	2
	84 tablets	Zumenon	2
	84 tablets	Progynova	2
Estradiol 2mg tablets	84 tablets	Elleste solo	2
	84 tablets	Zumenon	2
	84 tablets	Progynova	2
Estradiol 50 mcg/24 hrs transdermal patch	8 patches	Evorel 50	3
	8 patches	Estraderm MX 50	3
	8 patches	Estradot 50	3
	24 patches	Evorel 50	1
	24 patches	Estraderm MX 50	1
Estradiol 100 mcg/24 hrs transdermal patch	8 patches	Evorel 100	3
	8 patches	Estraderm MX 100	3
	8 patches	Estradot	3
	24 patches	Estraderm MX 100	1
Estradiol 500 mcg gel sachets	28 sachets	Sandrena	2
Estradiol 1mg gel sachets	28 sachets	Sandrena	2
Estradiol 0.06% gel pump	80g	Oestrogel	2
Estradiol 1.53mg/dose transdermal spray	56 dose	Lenzetto	2
GNRH analogues	Pack size	Brand	Quantity (OP)
Leuprorelin 11.25mg powder and solvent for suspension for injection prefilled syringes	1	Prostap 3 DCS	2
Triptorelin 11.25mg powder and solvent for suspension for injection	1	Decapeptyl SR	2

Version control:

Service Specification	Section 3.5	Amended the setting up and annual retention fee to include a 2.15% uplift	Dated 1.7.25	Jennifer Johnson
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