

<b>Service Specification No.</b>	<b>003</b>
<b>Service</b>	<b>Just In Case Palliative Care Medicines</b>
<b>Commissioner Lead</b>	<b>Tracy Savage</b> Locality Director and Head of Primary Care and Medicines Optimisation
<b>Provider Lead</b>	
<b>Period</b>	1 April 2020 – 31 March 2022
<b>Date of Review</b>	Annually (or as determined by the Commissioner)

<b>1. Population Needs</b>																
<b>1.1 National/local context and evidence base</b>																
<p>The Just In Case Palliative Care Medicines is designed to provide timely access to specialist drugs intended for use in Palliative Care (as per the IOW Palliative Care Formulary) to residents on the island or persons visiting the island under direction from a palliative Care Consultant or UK General Practitioner.</p> <p>The on-line palliative symptom control guidelines for IoW - A hyperlinked PDF is available from <a href="http://www.iwhospice.org/page/clinical-guidelines.html">www.iwhospice.org/page/clinical-guidelines.html</a>.</p> <p>The service is available during the pharmacy opening hours. The service can be provided by both pharmacists and pharmacy technicians working under the supervision of a pharmacist. People will either self-refer into the service or will be referred by their General Practice (GP), 111 or the Earl Mountbatten Hospice.</p>																
<b>2. Outcomes</b>																
<b>2.1 NHS Outcomes Framework Domains &amp; Indicators</b>																
<table border="1"> <tr> <td><b>Domain 1</b></td> <td><b>Preventing people from dying prematurely</b></td> <td></td> </tr> <tr> <td><b>Domain 2</b></td> <td><b>Enhancing quality of life for people with long-term conditions</b></td> <td></td> </tr> <tr> <td><b>Domain 3</b></td> <td><b>Helping people to recover from episodes of ill-health or following injury</b></td> <td></td> </tr> <tr> <td><b>Domain 4</b></td> <td><b>Ensuring people have a positive experience of care</b></td> <td>✓</td> </tr> <tr> <td><b>Domain 5</b></td> <td><b>Treating and caring for people in safe environment and protecting them from avoidable harm</b></td> <td></td> </tr> </table>	<b>Domain 1</b>	<b>Preventing people from dying prematurely</b>		<b>Domain 2</b>	<b>Enhancing quality of life for people with long-term conditions</b>		<b>Domain 3</b>	<b>Helping people to recover from episodes of ill-health or following injury</b>		<b>Domain 4</b>	<b>Ensuring people have a positive experience of care</b>	✓	<b>Domain 5</b>	<b>Treating and caring for people in safe environment and protecting them from avoidable harm</b>		
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<b>2.2 Local defined outcomes</b>																
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<ul style="list-style-type: none"> <li>Improved access to palliative care medicines during community pharmacy opening hours</li> <li>Improved access to pharmaceutical support for patients in their homes during the final stages of life</li> <li>Avoided unnecessary distress caused by limited access to medicines during the out of hours period</li> <li>Optimal service delivery for palliative care patients and their carers</li> </ul>																
<b>3. Scope</b>																
<b>3.1 Aims and objectives of service</b>																
The service aims to support people looking after patients with palliative care needs to access the Just																

in Case (JIC) medicines without delay when they are needed. Palliative care patients often experience new or worsening symptoms outside of doctors' normal working hours and the provision of specialist palliative care and the availability of palliative care medicines within the community can present major problems.

The effective management of pain and other symptoms is an essential element of palliative care. Currently the Gold Standard Framework has been adopted by the majority of GP practices on the Isle of Wight. This means that people with palliative care needs and those that are in the last weeks of their life will receive care that is standardised and based on best practice. A key factor that has had a negative impact on palliative care patients and their families is poor access to appropriate medication, particularly, in relation to the management of pain. This service aims to improve access to palliative care drugs during pharmacy opening hours.

The contracted community pharmacies (up to 6 will be selected based on expressions of interest, geographical location and open hours) will regularly audit and restock the list of palliative care drugs, to ensure continuity of stock holding in the community:

- The pharmacy will stock all drugs detailed on the Palliative Care drugs list
- The JIC medicines will be re-ordered immediately if dispensed.
- A quarterly audit of JIC medicine stock held by the pharmacy will ensure that any failures to re-order are identified.
- In the event of supply issues, the pharmacy will notify the Medicines Optimisation Team ([iwccg.mot@nhs.net](mailto:iwccg.mot@nhs.net)) at the CCG enabling the issue to be cascaded to relevant parties.
- Stock past the expiry date these should be reordered and restocked promptly. The cost of the replacement these drugs will be reimbursed by the CCG.
- Pharmacies must accept any medicine returns by family member and carers/nurses.
- Pharmacies must purchase CD destruction kits for safe disposal and complete the legal paperwork necessary to document this.
- MOT will support independent pharmacies by witnessing CD destruction, as often as is required.
- The dispensing/destruction service is available during the community pharmacy opening hours.
- The pharmacy will provide an audit to the CCG via quarterly report via PharmOutcomes® to demonstrate:
  - staff training
  - SOPs
  - stock holding of JIC/palliative care medicines.

Access routes to this service through presentation of a legal FP10 will include requests:

- From UK registered GPs
- By Earl Mountbatten Hospice
- From Macmillan nurses and community nurses

**List of JIC/palliative care medicines to be held in stock at all times:\***

Preparation	Category	Stock
Cyclizine (50mg/1ml) Ampoules	POM	10 amps
Dexamethasone (3.3mg/1ml) Ampoules	POM	10 amps
Fentanyl (100 micrograms/2ml) Ampoules	CD2	10 amps
Haloperidol 5mg/1ml Ampoules	POM	10 amps
Hyoscine butylbromide 20mg/1ml Ampoules	POM	10 amps
Levomepromazine (25mg/1ml) Ampoules	POM	10 amps
Lorazepam 1mg tablets (rapidly dispersible – e.g. Thornton	POM	28 tabs

& Ross or Genus brands)		
Metoclopramine (10mg/2ml) Ampoules	POM	10 amps
Midazolam (10mg/2ml) Ampoules	CD3	10 amps
Morphine Sulphate (10mg/1ml) Ampoules	CD2	10 amps
Morphine Sulphate (30mg/1ml) Ampoules	CD2	10 amps
Oramorph 10mg/5ml Oral Solution (one 300ml bottle)	CD5	1X300ml
Oxycodone (10mg/1ml) Ampoules	CD2	10 amps
Water for Injections 20ml size Ampoules	POM	10 amps
Methadone (10mg/1ml) Ampoules for injection	CD2	10 amps
Ondansetron (4mg/2ml) Ampoules for injection	POM	10 amps
Phenobarbitol (200mg/1ml) Ampoules for injection	CD2	10 amps
Ranitidine (50mg/2ml) Ampoules for injection	POM	10 amps

\*The lists of JIC/palliative care medicines are regularly reviewed and may vary over the duration of the contract, depending on stock availability. The current list will always be available on PharmOutcomes®. The pharmacies will be notified of any changes to the list e.g. due to stock supply issues.

### 3.2 Population covered

The NHS controlled drug prescription dispensing and destruction service is available to all patients registered with a GP in the UK.

### 3.3 Any acceptance and exclusion criteria and thresholds

#### 3.3.1 Inclusion Criteria

- Registered with a UK GP
- This service is available to all palliative care patients
- Patient is under palliative care and during their final stages of life
- Provision of a valid/legal prescription.

#### 3.3.2 Exclusion Criteria

- Not registered with a UK GP
- Patient is not end of life or under palliative care.
- The prescription is from an unknown/unverifiable prescriber
- The prescription is not valid/legal

### 3.4 Interdependence with other services/providers

- General Practices
- Earl Mountbatten Hospice
- Macmillan nurses and community nurses

### 3.5 Claiming payment

Only the specific pharmacies contracted to provide the service may claim.

Pharmacies must complete the quarterly audit and assurances to be able to submit a claim.

Claims need to be recorded on PharmOutcomes® in a timely manner for the pharmacy to claim £60.00 payment. This may be completed by the pharmacist or a pharmacy technician/dispenser.

Replacing out of date stock - keeping of stock for dispensing is part of the dispensing process (zero rated for VAT).

Payments will be made to pharmacies quarterly.

## 4. Applicable Service Standards

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

NICE Guidance:

- Managing symptoms for an adult in the last days of life  
<https://pathways.nice.org.uk/pathways/end-of-life-care-for-people-with-life-limiting-conditions#path=view%3A/pathways/end-of-life-care-for-people-with-life-limiting-conditions/managing-symptoms-for-an-adult-in-the-last-days-of-life.xml&content=view-node%3Anodes-principles-for-managing-medicines>

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

**Mandatory Centre for Pharmacy Postgraduate Education (CPPE) distance learning:**

- CPPE Palliative Care gateway: <https://www.cppe.ac.uk/gateway/palliative>
- theLearningpharmacy.com - Palliative care <https://www.cppe.ac.uk/programmes/l/tp-e-06>

**4.3 Applicable local standards**

Pharmacists/technicians are required to make sure that they have read, understood and comply with the service specification.

The Pharmacist must complete electronic declaration (enrolment) via PharmOutcomes, by clicking on JIC tab.

The pharmacy contract holder must satisfy themselves that any staff involved in the provision of the service has undertaken continuing professional development (CPD) relevant to the service.

There will be a 3 months grace period after registration to complete this or access/claiming will be denied.

**5. Applicable quality requirements and CQUIN goals**

**5.1 Applicable Quality Requirements (See Schedule 4A-C)**

The pharmacists/technicians involved in the provision of the service complete the online declaration of competence via PharmOutcomes® that they have undertaken continuing professional development (CPD) relevant to the service.

The pharmacist is responsible for keeping themselves aware of any changes to the recommendations for the medicine listed.

It is the responsibility of the individual to keep up-to-date with continued professional development and to work within the limitations of their own individual scope of practice.

The pharmacist is required to complete the required training and competency declaration every time a new contract is signed as this may change slightly in line with current evidence.

**5.2 Applicable CQUIN goals**

Reserved as not applicable under terms of the contract

**6. Location of Provider Premises**

**The Provider's Premises to confirm inclusion:  
 (please list each site if a multiple pharmacy chain)**



**Premises Requirements**

Consultation Rooms:

- If a consultation room is available, consultations should take place in that room.
- If a consultation room is not available, or the patient does not wish to use the consultation room, then the pharmacist must give consideration to the part of the pharmacy used for provision of the service, which should provide a sufficient level of privacy and safety.

**7. Individual Service User Placement**

Not applicable

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