NHS Tayside - Pharmaceutical Care of Patients Requiring Support with Adherence to Complex Medication Regimes

Background

A range of new medicines are available that are initiated by specialist prescribers, but require to be dispensed in community pharmacy. This specification is introduced with the following aims:

- to provide a consistent service to improve the quality of pharmaceutical care
- to empower the patients to actively manage their own condition and make best use of the health promoting resources available to them
- to improve the clinical outcomes achieved by patients prescribed these medicines and to improve the patient experience of treatment for complex conditions.
- to ensure clinical monitoring for patients directly affected
- to support the normalisation of care for patients receiving these medicines through community pharmacies. To ensure that all patients experience a service that is free from stigma and discrimination.
- to provide more systematic nationally consistent management of complex care and to facilitate the policy objective of shifting the balance of care to primary care.

Detail

A patient who has received a diagnosis and treatment plan from a specialist prescriber may register with an opting-in community pharmacy contractor for this service, instead of having to obtain their medicines from other sources. Prescribing will be initiated by the specialist team in accordance with the NHS Board Formulary.

When the patient is ready to commence supply from their community pharmacy the specialist pharmacist will contact the community pharmacy nominated by the patient. The specialist pharmacy team will provide all the suitable patient specific information and guidance to enable the community pharmacist to provide pharmaceutical care to the patient. The specialist pharmacist will inform the patient’s general practice about the planned delivery of care. The specialist pharmacy team will inform the community pharmacy when a prescription for the patient has been issued. The prescription will contain the patient’s community health index (CHI) number and an indication of whether there is a need for instalment dispensing its frequency and if supervision is required after a discussion with the community pharmacist.

The community pharmacist will order sufficient medication from the pharmaceutical company or their wholesaler to ensure continuous treatment of the patient. The community pharmacist will discuss the service they provide with the patient at presentation and consider if registration for the Chronic Medication Service is appropriate. The community pharmacist will provide suitable information and advice to the patient to enable them to take their medicines accurately and appropriately and to manage any adverse effects that they may experience. The community pharmacist will contact a member of the hospital team, if the patient is experiencing problems, stops treatment or fails to collect their treatment when they require a further supply.
The scope of items which may be dispensed by community pharmacy contractors through this specification will be subject to local board formulary advice. Inclusion in local board formulary will reflect existing good clinical practice and SMC advice.
ANNEX A

Pharmaceutical Care of Patients Receiving Treatment for Hepatitis C

Service Specification

1. Service Objectives

1.1 The specific objectives of the service to provide pharmaceutical care to patients receiving treatment for hepatitis C are:

- to improve the clinical outcomes achieved by patients prescribed these medicines, especially preventing treatment defaults and poor adherence to treatment courses.
- to shorten the patient journey to one that can be accomplished by the majority of patients and avoid loss to follow-up
- to ensure close clinical monitoring for patients directly affected

2. Service Description

2.1 This service specification allows eligible individuals, who are deemed by the specialist clinician coordinating their care, as likely to benefit from the service, to register with and use their community pharmacy as the delivery point for pharmaceutical care and dispensing of medicines (FORM A). The community pharmacist advises, dispenses or refers the patient to agreed contacts according to their needs.

2.2 The initial consultation must be provided by the pharmacist in person.

2.3 Patients should be sign-posted to support groups or health professionals and should be able to obtain appropriate information about their disease and its management from the pharmacy

3. Service Outline (Flow Chart for Hepatitis C Care Involving Community Pharmacists)

3.1 Service Registration and Withdrawal

- Individual patients can register with the community pharmacy of their choice. Registration with this specification for Pharmaceutical Care of Patients Requiring Support with Adherence to Complex Medication is dependent on receipt of a referral letter provided by the specialist team coordinating the care of the patient. (Form A)
- Individuals can only register with one pharmacy for this service
- The pharmacist registers a person after being contacted by the specialist pharmacist who works with the appropriate multi-disciplinary team. The pharmacist should then create a care record for the patient and use the New Medicines Intervention Support Tool which can be used with or without Registration for CMS to document relevant care issues
- The community pharmacist will order sufficient medication from the pharmaceutical company or their wholesaler to ensure continuous treatment of the patient (Form B) for the medication regime that they are prescribed.
- Individuals can choose to withdraw from service at any point. In addition, pharmacists can withdraw an individual; this might be due to, for example, a change in their eligibility or other exceptional circumstances such as suspected misuse of the service.
3.2 Consultation

All patients eligible for the scheme must have an appropriate prescription from the clinician coordinating their care. The prescription will include the necessary instructions for instalement and supervision if required.

The community pharmacist should:

- Ask the patient to sign the relevant section on the registration Form A together with the pharmacist to indicate that they have been registered for the scheme. These should be kept for payment verification purposes.
- Complete the appropriate care record for the patient and consider the most appropriate course/s of action, the counselling and advice needs and any requirements for follow up or referral. The care record should be initiated at first consultation and used to inform care on an on-going basis.
- Help the patient understand the most appropriate way to obtain the best clinical outcome from the medicine, according to their assessed needs. Some patients will require daily supervised administration of their medication and on-going monitoring. Other patients will require on-going supplies of small amounts of medication.
- Agreements will be made with the patient regarding how best to contact them in about any issues that arise with their care. This is especially important when contact with the multi-disciplinary team is required. Details of patients’ contacts will be kept in the care record.
- Documentation of orders for medicines will be made on a standard spread sheet that demonstrates that medicines orders and dispensing records can be matched to referred patients. Pharmacists are required to regularly document the care provided to patients using the care record. The Health Board office will hold a register of patients receiving care provided by pharmacy contractors through this specification.
- Maintain a running stock balance for each patient.
- This service will be available to patients during all contracted hours.

4. Administration, record keeping and audit

4.1 The referral form presented by the patient indicating eligibility for the scheme will be used to record that signature of the patient and the pharmacist. This should be retained by the pharmacist.

4.2 A care record should be created for each person. Some may already be registered for CMS and have a care record but others may not. The PCR and NMIST should be used to identify the pharmaceutical care issues and record the outcomes for the patient during treatment. Registration for CMS may or may not be appropriate.

4.3 Where appropriate, information is annotated into the patient’s medication record on the pharmacy patient medication record (PMR) system.

4.4 In the case of adverse reactions the pharmacist will consider whether there is a need to report any adverse reactions to the Committee on Safety of Medicines Scotland (CSM) through the Yellow Card reporting mechanism.
4.5 Recording of dispensing

The pharmacy contractor will maintain a dispensing record of supplies made to all registered patients for this service (Stock Balance Spreadsheet). A copy of this should be submitted with the patients CHI number to PSD at completion of the prescription to ensure payment as per board arrangements. The hard copy should be retained by the contractor.

4.6 Provide a progress report and the running balance for each patient to the pharmacy specialist team when requested (the pharmacy will be contacted by telephone periodically but no more than weekly to collect this information).

5. Remuneration

Contractors should first complete the Service Level Agreement. Please send to Diane Robertson Pharmacy Department, King Cross Hospital, Dundee, DD3 8EA

Remuneration is based on an initial treatment fee and on a monthly capitation payment for providing the pharmaceutical care that patients require to ensure adherence to complex medication regimes.

Contractors will receive a single payment of £75 per patient when treatment commences via the pharmacy. Thereafter a capitation payment of £40 will be paid for each completed month. Contractors in receipt of this payment for a patient will not claim for instalment dispensing and supervision fees. Only one capitation per patient is applicable.

6. Financial Support

Direct Acting Antivirals are very expensive and contractors will receive monthly advanced payments to cover the procurement costs.

7. Training and supporting staff

7.1 The pharmacist providing the service must be aware of and operate within the national service specifications and local practice guidelines.

7.3 Pharmacy contractors taking part in the scheme are free to develop their own standard operating procedures to deliver the scheme in their own pharmacy. It is a requirement that locum staff are competent to operate the scheme so that a seamless approach to care is experienced by the patient.

7.4 Agreement forms are required to be completed and returned to NHS Boards to ensure that staff are able and willing to participate in the scheme. Each pharmacy will designate a named pharmacist to be responsible for the on-going management and delivery of the scheme.

7.5 Specialist pharmacists leading the service will publish and maintain a list of contacts to enable community pharmacists to effectively and efficiently communicate with the clinical team managing the care of their patient and seek advice.
Pharmaceutical Care of Patients Receiving
Treatment for Hepatitis C

Community Pharmacy Service

Summary

- Patients will specify their community pharmacy of choice.

- The specialist pharmacy team will make initial contact the community pharmacy to confirm arrangements. Following this, contact will be continued with the specialist pharmacy team.

- Community pharmacy staff should read the HCV information pack that details the clinical condition and the need for the service.

- When details are confirmed, the specialist pharmacy team will
  - Request an advanced payment to be made to cover the first prescription. This should reach the contractor’s account within 10 days.
  - Provide the contractor with a referral notification which includes patient and specialist clinic contact details (Form A).

- The medication will be prescribed on HBP prescriptions and issued from the specialist clinic at monthly intervals allowing sufficient time to source the medication and ensure an uninterrupted supply. Each prescription will be for 28 days therapy.

- Treatment courses are 12 or 24 weeks (approximately 20% of patients will require a 24 week course).

- The specialist pharmacy team will contact the community pharmacy and issue the first prescription.

- Community pharmacies will be required to source the DAA as per the agreed process for each manufacturer. This will require to be signed by a pharmacist and must include the prescription reference numbers to the supplier on each occasion (see separate order form).

- When all doses on a prescription have been dispensed, the prescription forms should be submitted for payment in the normal way.

- NHS Tayside will process a payment of £75 per patient when treatment commences and a payment of £40 will be made for each completed month.

- Subsequent prescriptions (2 or 5) will be sent directly to the pharmacy at monthly intervals giving sufficient time to order the next supply.
• Further advance payments will be made on a monthly basis in respect of each prescription. Each advance payment will be recovered after 4 months by which time the prescription will have been submitted and paid.

• Community pharmacists will:
  o Sign and return the Service Level Agreement
  o Provide pharmaceutical care including support with concordance
  o Create a PCR for each patient if they do not have one and document relevant issues as they arise.
  o Register the patient for CMS if appropriate
  o Supervise administration where required.
  o Maintain a running stock balance (template provided).
  o Contact the specialist team as soon as possible if there are relevant clinical issues or if the patient fails to attend the pharmacy (a message should be left if out of hours).
  o Provide a progress report and the running balance weekly for each patient to the pharmacy specialist team (the pharmacy will be contacted by telephone every week to collect this information). This will support the monthly payments.

• If treatment is discontinued and the agreed process has been followed, NHS Tayside will ensure that contractors are reimbursed for any remaining stock. If this is the case, contractors should retain this stock and contact the specialist pharmacy team regarding recovery of any unused stock and guidance on reimbursement.
PHARMACEUTICAL CARE OF PATIENTS REQUIRING
SUPPORT WITH TREATMENT FOR HEP C

PHARMACY - SERVICE LEVEL AGREEMENT

This document is an agreement between NHS Tayside and the undernoted community pharmacy contractor to provide pharmaceutical care of patients receiving treatment for hepatitis C

Name and Address of Contractor

Contractor Code: __________

In signing this document you are agreeing to provide services in accordance with the requirements of the Service Level Agreement as at 1 November 2014.

It is also your responsibility to ensure, within reason that any person they either directly employ or engage in providing this service from the pharmacy, complies with the appropriate specification standards.

Signature: Date:

(Signatory on behalf of the Contractor)

Signature: Date:

(Signatory on behalf of the Health Board)

Please complete and return this agreement to Diane Robertson, Community Pharmacy Development, Kings Cross, Clepington Road, Dundee, DD3 8EA
Flow Chart for Hepatitis C Care Involving Community Pharmacists

Patient has been started on antiretroviral therapy by the Specialist Hepatitis Team. They have been appropriately counselled and trained on the administration of their medication and monitoring in line with BBV MCN Guidelines. The patient is agreeable to obtain supplies via their nominated community pharmacy.

Prior to the patients’ first visit, a transfer form is completed by the Hepatitis Clinical Nurse Specialist / Clinical Pharmacist and sent to the patients nominated community pharmacy. The community pharmacy is also contacted by telephone.

Patient should be attend appointments for ongoing monitoring / review by the hepatitis Team as per the BBV MCN Guidelines.

The Hepatitis Clinical Nurse Specialist / Clinical Pharmacist discuss the patients' care with their Consultant as part of regular MDT meetings and ensure ongoing supplies are appropriate. Monthly prescriptions are generated and posted to patients nominated community pharmacy. If the patient is not to continue therapy or if they are to have a break in therapy the community pharmacy is contacted by telephone / via clinical e-mail.

The community pharmacist dispenses the supply of antiviral therapy as per the instructions on each prescription. This is recorded on the record of transactions form (stock balance spreadsheet).

Patient collects supplies from nominated community pharmacy. The patient has a consultation with community pharmacist who ascertains if there are any pharmaceutical care issues which need to be resolved.

- No ongoing issues
  - Supply made to patient

- Ongoing issues
  - Hepatitis team contacted immediately for further advice.

Patient & community pharmacist advised of management plan and supply status.
Transfer of patients on HCV Triple Therapy to Community Pharmacy  
(FORM A)

Referral Form sent by __________________________ (contact number)

Patient Name:

Patient Address:

Patient Contact Telephone Number:

CHI number:

HCV Genotype / Previous treatment / Condition:

Date Antiviral Regimen started:

Administration Pattern: Weekly / Monthly

Relevant Past Medical History:

Other Medication: See attached Medication Profile

Patients General Practice:

Nominated Community Pharmacy:

Date to start at Community Pharmacy:

Comments:

Patient Consent:

I consent to receiving treatment from my nominated community pharmacy as specified by this referral form

Patient Signature  ________________________________

Pharmacist Signature  ________________________________

Local Advice Points
Clinical Nurse Specialists Tel 01382 740078 (for messages)
Jan Tait - Mobile 0771 3479114
Kirsty Turnbull
Diane McKnight
Brian Stephens
Clinical Pharmacist
Tom McEwan
Hospital Consultant
Dr John Dillon

Dr Morgan Evans
**Flow chart for medicines dispensing – Treatment with sofosbuvir (Sovaldi®)**

**Prescribing**

Sofosbuvir will be prescribed in specialist clinics in accordance with local NHS Board Formulary recommendations. Key information on the prescription should include 1. The patients CHI number 2. An indication of a requirement for instalment dispensing with or without supervised administration.

Following agreement for a start date of therapy, HBP (hospital based prescriber) prescriptions may be used in accordance with local guidelines. The community pharmacist will work closely with the local specialist pharmacist and multi-disciplinary team to optimise the patient outcomes obtained from the prescription.

The mechanism for clinical contact between the specialist clinic and the identified Community Pharmacy, the provision of sofosbuvir and patient support will be in accordance with local arrangements.

**Dispensing and administration**

Sofosbuvir is supplied by Alcura UK Ltd acting as a medicine wholesaler. (see order form)

The patient and prescriber should agree on an identified Community Pharmacy to which the patient should take the HBP for dispensing. The Community Pharmacy will order the medicine from Alcura UK Ltd by completing and faxing the attached order form (appendix 1). The prescription number will require to be added to the order form prior to faxing the order. The prescription should be dispensed as a single dispensing, by instalments or by instalments with supervision.

The dispensing schedule and ongoing clinical monitoring for sofosbuvir will be agreed between the patient and prescriber.

After the prescription has been fully dispensed it should be forwarded to the Practitioner Services Division (NSS) to ensure payment, as per normal arrangements.

**Reporting on medicines usage**

The Community Pharmacist will retain a spreadsheet of dispensing and running stock balance and will notify relevant issues to managing clinicians in accordance with the local arrangements.

**Claiming Reimbursement for Service Provision**

The community pharmacist will submit a claim form to the local health board for reimbursement of pharmaceutical care according to board LES and to PSD for prescription costs.
Request for the supply of Sovaldi (sofosbuvir) for the purpose of dispensing by Community Pharmacy to NHS Scotland patients (FORM B)  
Faxback on 01420 89594 or e-mail to chlorders@alcura-health.co.uk

To Alcura UK Ltd

Please supply Sovaldi for the purpose of dispensing to patients presenting to community pharmacy with an NHS Scotland prescription.

1. Pharmacy Details

| Alcura UK Ltd account number* | ___________________________________________ |
| Pharmacy Name*                | ___________________________________________ |
| Address*                      | ___________________________________________ |
| Telephone number*             | ___________________________________________ |
| Email address*                | ___________________________________________ |

2. Prescription details

Sovaldi is only supplied to community pharmacies in Scotland in response to the receipt of valid NHS Scotland prescriptions specifying Sovaldi. The unique prescription number must be referenced to place an order for this product and volumes will be audited against prescriptions issued.

| Prescription Number | ___________________________________________ |
| Number of tablets   | ___________________________________________ |
| Number of boxes (28 tablets) | ___________________________________________ |
| Invoice price (£11,660.98 per box) | ___________________________________________ |

3. Pharmacist Declaration

I declare that the information I have given on this form is correct and complete. I understand that, if it is not, appropriate legal action may be taken. To enable the Common Services Agency to confirm the amount of Sovaldi supplied to patients and for the purposes of prevention, detection, and investigation of crime, I consent to the disclosure of relevant information from this form including to and by NHS Scotland Practitioner & Counter Fraud Services. This declaration is made on behalf of the responsible pharmacist detailed below and the Community Pharmacy NHS Contractor.

4. Signed confirmed by the responsible pharmacist

| Full Name* (block capitals) | ___________________________________________ |
| Signature*                  | ___________________________________________ |
| Date*                       | ___________________________________________ |
| GPhC Pharmacist registration number* | ___________________________________________ |
| NHS Pharmacy contractor number* | ___________________________________________ |

*All sections to be fully completed - please telephone Alcura in the first instance if wishing to open a new account.