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| **NHS Grampian****Service Level Agreement****Compliance Aid Provision** |

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| **SLA Reference** | SLA\_Compliance Aid Provision |
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| 5 | 2021 | Annual update – changes to formatting and wording, hyperlinks to website added in for key documents, change of reimbursement costs, changes for formatting of referral and review forms, addition of appendix 3 (communication log) |
| 6 | 2023 | Annual update |
| 7 | 2024 | Annual Update |

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# 1. Introduction

This Service Level Agreement (SLA) acts as a contract between NHS Grampian and the pharmacy contractor and commits the contractor to provide the services as defined by, and using documents provided in, this SLA. Services will be provided within the legal and ethical framework of pharmacy as a whole.

A three month notice period must be provided if either party wish to terminate this contract. Where a breach in terms of the SLA has occurred the 3 month notice period may not apply.

# 2. Background to service

The provision of compliance aids has been a long-standing service provided by NHS Grampian community pharmacy contractors which was originally part of [Model Schemes](https://www.communitypharmacy.scot.nhs.uk/media/1510/pca_p_2002_6_compliance.pdf) which were introduced by the Scottish Government in 2002.

NICE guidance document NG67 “[Managing medicines for adults receiving social care in the community](https://www.nice.org.uk/guidance/ng67/chapter/Recommendations#ordering-and-supplying-medicines)” highlights the potential use of a [monitored dosing system](https://www.nice.org.uk/guidance/ng67/chapter/recommendations#monitored-dosage-system) for suitably assessed patients as one part of a much wider role of overall management of medicines and patient care. Contractors undertaking this service are advised to review NG67 alongside the content of this SLA.

While it is important to acknowledge that the supply of compliance aids play a role in supporting patients care at home it should not be a universally accepted that when a patient requires support with medication that they are provided with a compliance aid.

No patient should be commenced on a compliance aid without prior assessment from a suitably qualified healthcare professional AND a conversation with the general practitioner (GP).

# 3. Service aims

This SLA aims to enable contractors to assess patients’ suitability to be provided with a compliance aid and sets out the financial reimbursement for consumables associated with providing the service.

# 4. Service outline and standard

## 4.1 Referral

4.1.1 Participating contractors must accept referrals for the assessment of patient’s requesting a compliance aid (when the contractor has capacity to undertake the workload should the patient be deemed appropriate).

4.1.2 Referrals can be made by GPs and healthcare professionals (including secondary care). Where referrals are received from someone other than the patients GP then a conversation with the prescribing GP is advised prior to undertaking assessment. Patient or carer requests for this service should be referred back to the GP to assess suitability and make the request if deemed appropriate.

4.1.3 Where a referral is made for a patient who does not have the mental capacity to undertake the assessment an appropriate representative should be sought to undertake the assessment with.

## 4.2 **Assessment**

4.2.1An *‘*Assessment of suitability for pharmacy supplied compliance aid’form ([Appendix 1](https://www.communitypharmacy.scot.nhs.uk/nhs-grampian-community-pharmacy-services/compliance-aid-provision/)) must be completed in full for all referred patients. Where possible this should be completed with the patient however where there is diminished capacity it can be a suitable representative e.g. family member or carer.

4.2.2 The assessment form must be annotated with the outcome of the assessment and clearly state the reasons for the outcome i.e. reasons for agreeing to or for declining to provide a compliance aid and the pharmacy contractor should feedback the decision of assessment to the patients GP.

4.2.3 The NHS Grampian assessment form ([Appendix 1](https://www.communitypharmacy.scot.nhs.uk/nhs-grampian-community-pharmacy-services/compliance-aid-provision/)) **must** be used for assessment of all patients. Where a pharmacy contractor opts to use a different means of assessment this should be submitted to NHS Grampian Pharmaceutical Care Services team (gram.pharmaceuticalcareservices@nhs.scot) for review and approval of use.

## 4.3 **Ongoing assessment**

4.3.1 The pharmacy contractor should plan to review all patient’s assessment on at least annual basis (sooner may be required if there are a change in patient circumstances). The review month should be annotated on the register of compliance aid patients contained within the Pharmacy Claim Workbook ‘Compliance Aid’ tab.

4.3.2 The pharmacy contractor must complete the ‘Annual review of suitability for pharmacy supplied compliance aid’ form ([Appendix 2](https://www.communitypharmacy.scot.nhs.uk/nhs-grampian-community-pharmacy-services/compliance-aid-provision/)) in full for all patients at least annually. This should be completed with the patient however where there is diminished capacity it can be a suitable representative e.g. family member or carer.

4.3.3 Where the outcome confirms patients’ continued suitability the patient should continue with the compliance aid.

4.3.4 Where the assessment outcome highlights a change in circumstances which demonstrate that a compliance aid is no longer suitable the pharmacy contractor should discuss this with the patients GP. No patient should have their compliance aid provision stopped without prior discussion and agreement with their GP.

## 4.4 **Provision of Compliance Aid**

4.4.1 The contractor must agree with the patient or carer the details of:

* The day of the week that the aid will be supplied / delivered (highlight weekly or 4-weekly collection – as per directions from GP)
* The process for collection or delivery
* The ownership and process for reordering prescriptions to fill the compliance aid (where appropriate highlighting the management of ‘when required’ and ‘acute’ medications)
* The process for changing the contents of the compliance aid due to cancellation or addition of a medicine
* The annual review process

4.4.2 A Patient Information Leaflet (PIL) should be supplied for all medication within the compliance aid for every new prescription cycle.

4.4.3 The pharmacy contractor must assess the suitability of the patients prescribed medication for dispensing into a compliance aid and where not suitable for inclusion provide these medications in their original packaging (please check [SPS website](https://www.sps.nhs.uk/?s=&order=DESC&cat%5B%5D=3253)).

## 4.5 **Record Keeping**

4.5.1 A copy of every assessment form, whether the patient receives a compliance aid or not, should be retained in the pharmacy (as either paper or electronic copy) for audit purposes and be available to be submitted to NHS Grampian on request.

4.5.2 Records of all medication supplies should be annotated on the patient’s Patient Medication Record (PMR)

4.5.3 Records of all communication regarding the patients compliance aid should be recorded in the ‘Compliance Aid Patient Communication Log’ ([Appendix 3](https://www.communitypharmacy.scot.nhs.uk/nhs-grampian-community-pharmacy-services/compliance-aid-provision/)) and where appropriate annotated in their PMR. All changes to medication should be entered onto this log along with dates to ensure a robust audit trail is maintained.

4.5.4 The pharmacy contractor should maintain a list of all patients who receive a compliance aid by completing the Compliance Aid tab within the [Pharmacy Claim Workbook](https://www.communitypharmacy.scot.nhs.uk/nhs-grampian-community-pharmacy-services/pharmacy-claim-workbook/) which is submitted monthly to the Primary Care Contracts Team (gram.pcctpharmacy@nhs.scot).

# 5. Training requirement

5.1 Contractors may allow staff to undertake relevant training using NHS Grampian modules found on Turas or internal pharmacy learning and development modules. To ensure compliance with Service Level Agreements a record of staff learning must be kept and may be requested upon NHS Grampian visits. Turas platform automatically stores individual’s learning history and records renewal dates.

5.2 The pharmacy contractor is responsible for ensuring that all pharmacy staff are suitably trained in their roles and responsibilities with regard to the provision of this service and are competent to deliver them.

5.3 The contractor must have Standard Operating Procedures (SOPs), guidance documents or web links relating to all aspects of Compliance Aid Provision Service in place and these should form the basis of training for staff.

These should detail:

* How to action a referral for a compliance aid.
* The compliance needs assessment process.
* How to set up the provision of a compliance aid for a patient.
* How to safely fill a compliance aid.
* What medicines can safely be included in a compliance aid.
* Safe storage of filled compliance aids.
* Safe storage of prescriptions for compliance aids
* Reordering processes for prescriptions for compliance aids.
* Safely managing changes to a compliance aid.
* Keeping records of compliance aid activity.
* Safe domiciliary delivery of compliance aids to patients.

# 6. Monitoring & evaluation

6.1 Claims made for this service via the Pharmacy Claim Workbook may be used by NHS Grampian for the purposes of SLA auditing.

# 7. Claims and payment

7.1 Pharmacy contractors will be reimbursed for the consumables used to provide the service where an appropriate assessment / annual review has been completed at a rate of 30.7p per tray

7.2 To ensure accurate monthly claims, contractors are required to maintain records of the service being provided by full and accurate completion of the Pharmacy Claim Workbook Compliance Aid tab.



7.3 The Pharmacy Contractor must submit a completed claim to Primary Care Contracts Team (gram.pcctpharmacy@nhs.scot) before the 7th of the month for the previous month in order to receive payment.

7.4 Information provided in the monthly Pharmacy Claim Workbook should be retained in the pharmacy and be made available to NHS Grampian, if requested, for audit purposes.

7.5 Claims older than 3 months will be deemed as an historical claim and will only be considered by the Pharmacy Performance and Governance Group for payment if the claim form is submitted with information detailing the exceptional circumstances of why the claim was not submitted at its due date.

**8. References**

[Stability in dosette boxes – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](https://www.sps.nhs.uk/?s=&order=DESC&cat%5B%5D=3253)

[Recommendations | Managing medicines for adults receiving social care in the community | Guidance | NICE](https://www.nice.org.uk/guidance/ng67/chapter/Recommendations#ordering-and-supplying-medicines)

[Improving patient outcomes through MCA (rpharms.com)](https://www.rpharms.com/resources/toolkits/improving-patient-outcomes-through-mca#data)

[Microsoft Word - sti02811.doc (scot.nhs.uk)](https://www.communitypharmacy.scot.nhs.uk/media/1510/pca_p_2002_6_compliance.pdf)

# Appendix 1

**Assessment of suitability for pharmacy supplied compliance aid**

|  |
| --- |
| **Details** |
| Patient name |  |
| Patient CHI/DOB |  |
| Patient address |  |
| Reason for assessment (including details of referrer) |  |
| Patients representative details (when diminished capacity) | *Name & relationship to patient required* |

|  |
| --- |
| **Reasons for assessment**  |
| Forgetting to order or collect prescriptions | Yes / No |
| Forgetting to take medication (or forgetting medication has been taken and taking again) | Yes / No |
| Not wanting / refusing to take medication | Yes / No |
| Unable to open medication packaging (bottles / tablet blisters) | Yes / No |
| Unable to read and/or understand medication labels and patient information leaflets (PIL) | Yes / No |
| Request from formal care worker of care provider | Yes / No |
| Other (please provide details) | Yes / No |
| Comments |

|  |
| --- |
| **Support already in place (or that has been trailed)** |
| Ordering prescriptions | Yes / No |
| Collecting prescriptions | Yes / No |
| MCR prescription | Yes / No |
| Delivering medications | Yes / No |
| Administering medication | Yes / No |
| Medication chart | Yes / No |
| Compliance aid filled by informal carer/family | Yes / No |
| Formal carer support | Yes / No |
| Other (please provide details) | Yes / No |
| Comments |

|  |
| --- |
| **Potential solutions.** Please highlight anything already in use or anything which has been tried previously. |
| Simplifying medications / regimen | In use / No benefit / Not tried |
| Counselling and/or advice | In use / No benefit / Not tried |
| MAR chart | In use / No benefit / Not tried |
| Large print labels | In use / No benefit / Not tried |
| Ordering medication on patients behalf | In use / No benefit / Not tried |
| MCR prescription | In use / No benefit / Not tried |
| Delivering medications | In use / No benefit / Not tried |
| Referral for more general needs assessment (i.e. not just medication) | In use / No benefit / Not tried |
| Comments |

|  |  |
| --- | --- |
| **Suitability of patient and medication for compliance aid** |  |
| Medication is suitable for dispensing into a compliance aid (please check [SPS website](https://www.sps.nhs.uk/?s=&order=DESC&cat%5B%5D=3253)) | Yes / No |
| Medication regimen is stable | Yes / No |
| Patient/informal carer is able to manage compliance aid including:* Understanding how the compliance aid works and where doses should come from
* Understand where to locate the compliance aid and the times of day medication should be taken
* Can push medication from blisters in compliance aid
* Dealing with any medication which cannot be included in compliance aid including ‘when required’ medication and short courses of medication
 | Yes / NoYes / NoYes / NoYes / No |

|  |  |
| --- | --- |
| **Outcome of assessment** |  |
| Patient suitable for a compliance aid? | Yes / No |
| Patient suitable for other medication support tools e.g. MAR, large print labels etc? (please provide details) | Yes / No |

|  |  |
| --- | --- |
| Pharmacy name |  |
| Assessor name |  |
| Assessor role |  |
| Date |  |

*This assessment should be retained in the pharmacy (in either paper or electronic form) and be supplied to NHS Grampian upon request.*

# Appendix 2

**Annual review of suitability for pharmacy supplied compliance aid**

|  |
| --- |
| **Details** |
| Patient name |  |
| Patient CHI/DOB |  |
| Patient address |  |
| Patients representative details (when diminished capacity) | *Name & relationship to patient required* |

|  |  |
| --- | --- |
| **Suitability of patient and medication for compliance aid** |  |
| Medication is suitable for dispensing into a compliance aid (please check [SPS website](https://www.sps.nhs.uk/?s=&order=DESC&cat%5B%5D=3253)) | Yes / No |
| Medication regimen is stable | Yes / No |
| Patient/informal carer is able to manage compliance aid including:* Understanding how the compliance aid works and where doses should come from
* Understand where to locate the compliance aid and the times of day medication should be taken
* Can push medication from blisters in compliance aid
* Dealing with any medication which cannot be included in compliance aid including ‘when required’ medication and short courses of medication
 | Yes / NoYes / NoYes / NoYes / No |

|  |  |
| --- | --- |
| **Outcome of assessment** |  |
| Patient still suitable for a compliance aid? | Yes / No |
| Patient no longer suitable for compliance aidNote: Compliance aid provision should not be stopped without conversation with the patient’s GP | Yes / No |
| Where no longer suitable please provide details of reasons and communication with GP: |

|  |  |
| --- | --- |
| Pharmacy name |  |
| Assessor name |  |
| Assessor role |  |
| Date |  |

*This assessment should be retained in the pharmacy (in either paper or electronic form) and be supplied to NHS Grampian upon request.*

# Appendix 3

[**Compliance aid communication log**](https://www.communitypharmacy.scot.nhs.uk/nhs-grampian-community-pharmacy-services/compliance-aid-provision/)

This log should be use to track **all** communication with regard to medication included in the patients compliance aid and retained with all other patient information in a designated file (either paper or electronic).

|  |  |
| --- | --- |
| Patient name |  |
| CHI/DOB |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Date | Details | Action required? | Complete? |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*This assessment should be retained in the pharmacy (in either paper or electronic form) and be supplied to NHS Grampian upon request.*