

NHS Lanarkshire

Service Level Agreement

SLA Reference	The Community Pharmacy Palliative Care Network
Version	1
Effective Date	1 st April 2026 – 31 st March 2028
Next Review date	Annual Financial Review
Approved By	Palliative Care Lead, NHS Lanarkshire

Revision Chronology		
Version Number	Effective Date	Reason for Change

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Introduction

This Service Level Agreement (SLA) acts as a contract between NHS Lanarkshire and the pharmacy contractor and commits the contractor to provide the services as defined by, and using documents provided in, this Service Level Agreement. Should there be any variations made to the contract, the pharmacy contractor will have the right to agree to any variations or withdraw from the contract.

Any intellectual property rights belonging to either Party before the Agreement remains with that Party

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

This agreement is for the period 1st April 2026 – 31st March 2028, however, remains valid and must be adhered to as per the agreement whilst under review

1. Background to service

The Palliative Care service was set up in 1999 due to variations and challenges patients faced trying to access palliative care medicines in a community setting, particularly medicines required urgently or medicines required for subcutaneous use. As a result, patients' symptoms were not adequately controlled, particularly during end of life management.

In response, NHS Lanarkshire set up a network of Community Pharmacies who can provide information and advice on palliative care as well as a requirement to keep an agreed stocklist of palliative medicines as set out by board, aiding urgent access to palliative medicines.

2. Service Aims

- To ensure that patients and their carers have urgent access to palliative medicines and/or advice
- To create a network of specialist community pharmacies which will provide information and advice on pharmaceutical aspects of palliative care to patients, carers, GP's, nurses and other community pharmacies.
- To promote cross sector working with Health & Social Care teams & local Hospices

3. Roles and Responsibilities

The Macmillan Lead Pharmacist for Palliative Care will:

Carry out initial training for all pharmacists/technicians new to the network.

Provide an annual online webinar for Community Pharmacy teams

Provide support material for each site and review annually. Provide advice and practical support to the Key Pharmacists/ Technicians during normal working hours. (See section 9 for contact details)

Liaise between users and providers and other agencies such as Acute Hospital Pharmacy Departments, Hospices, Home Care Services, District Nurses and other Community Pharmacies.

The Pharmacy Contractor will:

Sign and return the SLA agreement prior to service implementation

Notify NHS Lanarkshire of any changes in circumstances whereby they can no longer deliver the service effectively or safely

Any impending changes to personnel involved in the Service, or opening hours, should be communicated to the Macmillan Lead Pharmacist- Palliative Care no later than within two weeks of these changes taking place.

Take full responsibility for ensuring compliance with all aspects of the Service Level Agreement (this may require development & implementation of local Standard Operating Procedures)

Ensure staff involved in the provision of the service are aware of and operate within the service specification

Ensure staff involved in the provision of service are trained in the operation of the service as outlined in subsection 4

Pharmacy Contractors will remain accountable for delivery of their professional responsibilities and standards

Ensure the site has enough skilled and qualified staff to provide a safe and effective pharmacy service as detailed in the GPhC Guidance for contractors: Guidance to ensure a safe and effective pharmacy team

Ensure that they have procedures in place to identify and manage the risks involved in providing and managing prescribing pharmacy services as detailed in GPhC Guidance In Practice: Guidance for pharmacist prescribers

Provide premises that protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services

Ensure that the service is available to patients for the full contracted opening hours of the premises unless there are exceptional circumstances

Pharmacy Contractors are accountable for the delivery of their professional responsibilities and standards e.g. incorrect ordering of a medicine would fall beneath the threshold at which a Board/prescriber would be expected to take financial responsibility, although where possible the service lead will work with the contractor to attempt to utilise such medication for alternative patients.

Nominate a key service provider, a Pharmacist or Technician who will have accountability for provision of the service on a day to day basis from that pharmacy. For pharmacies open over extended hours and particularly on a Sunday, the contractor must also ensure that the Locum/Relief manager and technician/dispenser on duty at these times are competent to maintain continuity of service.

Encourage key service provider(s) to attend the annual palliative care webinar

Consider signing up to the RPS Daffodil Standards (Appendix 2) & display the 'Daffodil window sticker'. Daffodil standards will form site induction training & annual training.

The Key Service Provider(s) will:

Maintain client confidentiality and privacy at all times

Maintain their competency to practice in this speciality by successfully completing all specified training requirements including the mandatory element of this agreement (subsection 4)

Ensure all pharmacy staff working in the pharmacy are fully conversant with the principles of the Service and their designated roles and specific responsibilities in providing the service when a request is presented (Appendix 1)

Where unlicensed stock is required to be held e.g. Clonazepam injections, an Unlicensed Stock Authorisation form should be completed once annually. This will be prompted by the board annually.

Ensure all support and reference materials (updated where applicable) are provided and retained in the pharmacy and are readily available to all pharmacy staff, particularly locum pharmacists and dispensing staff.

Maintain stock of agreed list of drugs and nominate a member of staff to maintain this to ensure that sufficient quantities of all stock list medicines are available at all times. **A six monthly expiry date check must be carried out as a minimum requirement.**

Any stock with a 6 month expiry should be flagged to the Macmillan Lead Pharmacist- Palliative Care.

Ensure that the urgency of supply of palliative care drugs is confirmed when the prescription is presented, as per [flowchart](#), and that these are provided promptly and efficiently according to patient, carer and clinical need on an individual basis.

Display the [flowchart](#) of how to respond to a palliative request within the pharmacy.

Ensure every effort is made to obtain a supply of a drug should a drug on the agreed list not be available for any reason. **The pharmacist will take responsibility to source supply from elsewhere e.g. another network pharmacy or a hospital pharmacy department and contact the prescriber for an alternative prescription should these efforts be unsuccessful.** The pharmacist should contact the Macmillan Lead Pharmacist- Palliative Care for advice in these circumstances.

Ensure that appropriate advice on the optimal use of these drugs, tailored to the patient's circumstances is provided as routine.

Ensure any changes made to patients' treatment plan is appropriate and shared with patients and/or carer(s) e.g. change dose, new item. A Patient information Leaflet should also be provided at each dispensing.

Ensure continuity of supply is maintained by reordering any dispensed or expired stock immediately.

Ensure local process to cease ongoing medication supplies / deliveries if notification of deceased patient, to avoid further stress following patient death.

Ensure all medication incidents involving palliative care medicines, whether prescribing or dispensing, are promptly reported to the Macmillan Lead Pharmacist- Palliative Care for anonymised details to be disseminated across the network to minimise the risk of reoccurrence. A Significant Event Analysis (SEA) may have to be completed in certain circumstances. Incidents involving controlled drugs must also be reported to the Controlled Drug Governance Team. Participants are encouraged to share independent reports of good practice which should be sent to Macmillan Lead Pharmacist- Palliative Care for dissemination.

4. Training requirements

The nominated person(s) responsible for service delivery should complete the following NES training prior to service delivery, **you do not have to repeat modules if already completed as part of another service delivery**

Essential: NES Module	NES TURAS Palliative Care Module Enhanced Palliative Care Module
Optional: Annual	Online webinar held annually by the Lead Pharmacist for Palliative Care
Optional: Resources	Scottish Palliative Care Guidelines Palliative Care Stocklist Daffodil Standards Medicines Complete Palliative care resource folder <ul style="list-style-type: none">• Community pharmacy palliative care network

	<ul style="list-style-type: none"> • Dispensing opioids and patient safety • Introduction to palliative care • Managing symptoms and side effects • Recognising and prioritising palliative care prescriptions • Signposting for patients
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Other pharmacists, locums, relief managers, pre-registration pharmacists and technicians/dispensers regularly working in a network pharmacy are welcome to attend the annual online webinar.

5. Claims and payment

An initial 'one-off' stock purchase payment made when a contractor enters the service or when the agreed drug list is amended. Payment will be made on completion of a claim form supported by a copy of an invoice sent to Macmillan Lead Pharmacist-Palliative Care.

A base payment will be made quarterly automatically at the end of the following months- June, September, December and March. Pro-rata fees applicable to those that join in year.

Out of date stock can be claimed for by submitting a copy of the invoice to the Palliative Care Lead

Reimbursement for costs incurred in obtaining miscellaneous items, e.g. Controlled Drug (CD) cabinets, must be discussed and agreed with the Macmillan Lead Pharmacist- Palliative Care before any order is placed.

Contractors are responsible for monitoring fees paid and have a 3-month window to raise any concerns regarding a missing payment from the month it should have been paid. Any claim queries raised after this time will be deemed as an historical claim and will only be considered by the Pharmacy Performance and Governance Group for payment.

General business costs such as insurance, servicing finance, banking charges, business administration, payment tracking etc. are reflected in national arrangements for community pharmaceutical services and as such do not form part of local arrangements/ service level agreements.

Service liability for the contractor will remain capped at the service fee associated with the Community Pharmacy Opioid Substitute Treatment service. Service liability does not extend to medicines obtained in error, this will remain the contractor's responsibility

6. Monitoring & evaluation

It is a requirement of the service that appropriate records are kept and maintained by the pharmacy contractor, to enable verification of service provision and training undertaken by staff. These records may be used for information for internal and external audit and evaluation purposes.

NHS Lanarkshire regularly monitors service provision across all contractors. Data is submitted on an annual basis for service review & evaluation.

Where requested, participating pharmacies will be required to participate in service evaluation and audit. . The Pharmacy Contractor will be given 28 days' notice.

Post-payment verification checks will be undertaken in line with the process established and agreed via National Services Scotland. Pharmacy Contractors participating in the service should support this exercise by providing information if requested.

7. Confidentiality

All parties will maintain patient confidentiality and comply with all relevant GDPR regulations. The [General Data Protection Regulation \(GDPR\) \(EU\) 2016/679](#) and [Data Protection Act 2018](#) came into force on 25 May 2018. All organisations that process personal data are required to comply with the requirements of this legislation. This means that personal information will be:

- Processed lawfully, fairly, and in a transparent manner.
- Collected for specified, explicit and legitimate purposes.
- Only collected so far as required for our lawful purposes.
- As accurate and up to date as possible.
- Retained for a reasonable period, in accordance with retention policies.
- Processed in a manner which ensures an appropriate level of security.

8. The Health and Care (Staffing) (Scotland) Act 2019

The Health and Care (Staffing) (Scotland) Act 2019 (“the 2019 Act”) places requirements on the Health Board stating that: “In planning and securing the provision of healthcare from another person under a contract agreement must have regard to

- a) The guiding principles for health and care staffing; and
- b) The need for the person from whom the provision of health care is to be secured to have appropriate staffing levels in place.”

The Pharmacy Contractor will ensure that they have taken into consideration provisions set out in the Health and Care (Staffing) (Scotland) Act 2019 so that the level of support available to operate the service is in line with the aims of the Act and that sufficient staff are available to safely and effectively provide the service.

9. Contacts

Currently this contract is delivered by NHS Lanarkshire. Queries should be directed to the Palliative Care team vi:

Telephone; 01236 772021

or

email; Linda.Johnstone@lanarkshire.scot.nhs.uk

10. References

- a) [Scottish Palliative Care Guidelines.](#)
- b) [Palliative Care Formulary](#)
- c) [Syringe pump compatibility tables](#)
- d) [Drug Compatibility Checker](#)
- e) [Community Pharmacy Palliative Care Network leaflet](#) The leaflet provides the names, addresses, hours of opening and contact numbers for all participating pharmacies and details the network stock list. It also contains other useful telephone numbers

Appendix 1 – Training of other Pharmacy Staff checklist

All staff should be aware of the following:

1. Participation in the Service.
2. What the aims of the Service are.
3. Where the support material is held.
4. Read and understand the support material.
5. How to respond when presented with a request for drugs from the agreed list or advice about these drugs.

6. How the support materials present a CPD opportunity for both pharmacists and pharmacy technicians.

Appendix 2 - Daffodil Standards

Please consider signing up to the Royal Pharmaceutical Society (RPS) Daffodil Standards. Registration is completely free and getting involved can help your whole pharmacy team to self-assess and consistently offer the best end of life and bereavement care for patients.

To find out more about the Daffodil Standards go to <https://www.rpharms.com/recognition/setting-professional-standards/daffodil-standards>