**Pharmacy Emergency Repeat Medication Supply Service (PERMSS)**

**Frequently Asked Questions (FAQs)**

**When does the NHS funded PERMSS service start?**

The service goes live on Wednesday 17 December, 2014 and patients can be accepted until 08.00 on Wednesday 1 April.

**What time periods does the service apply to?**

Assuming that you have a signed Service Level Agreement in place, you can provide the service during any *existing opening hours* that cover:

* All out of hours periods from 18.30-08.00 on weekdays (and from 18.00 on Christmas Eve and New Year’s Eve
* Weekends from 18.30 on a Friday to 08.00 Monday
* Bank holidays (Christmas Day, Boxing Day, New Year’s Day)

**NB: all pharmacists and locums must be familiar with the service specification, have PharmOutcomes access and be able to provide the service during these time periods**

**Which patients can be seen as part of the service?**

* All patients referred by 111 during the timeframes above
* Any self-presenting patients during the timeframes above (NB: a reactive service only and not to be proactively promoted or advertised)
* All patients should be registered with a UK GP practice, however, this may be a practice outside of the North East region

**How will patients be referred by 111 and how will I know one has been made?**

Electronic referrals will come into community pharmacies through PharmOutcomes with a reference number, NHS number, contact details and emergency supply request. You can set PharmOutcomes up so that an email notification is sent when a referral is received. Either way, you must make arrangements to check either emails and/or PharmOutcomes every 30 minutes to ensure patients are contacted as soon as possible after the referral is made.

Patients may:

* Present at your pharmacy immediately after referral
* Phone your pharmacy to check that you have the requested medication in stock before coming to the pharmacy

***NB: if you have a referral on PO and the patient has not arrived at your pharmacy, you must telephone the patient***

**What do I need to do to activate the service on PharmOutcomes?**

Login using your usual login information. If you do not have any login information please contact the help desk team via the “help” tab on the system, you do not need to be logged in to do this. Please refer to the service guide that is available via a link that you will find on the Pharmacy Emergency Supply service main data capture screen to view screen shots and how the service works. To access this, once logged in, please go to the “Services” tab and click on the “Pharmacy Emergency Supply” service title in the left hand side bar of this screen under the heading “Provide Services”. The link is visible from the main service page on the left hand side.

The first time you access this service question set you will be invited to enrol. Please refer to the service guide to see how this works. You will need to carry this out once only.

**What do I need to do when I receive a referral?**

A patient may come directly to your pharmacy or telephone you in advance. As with any emergency repeat medication supply, you should:

* determine if there is an urgent need for the medicine,
* identify the medicines needed,
* establish the nature of the emergency
* establish that is impracticable for the patient to obtain a prescription from their GP before the next dose is due
* assess suitability/legality of making an emergency supply in accordance with the Human Medicines Regulations 2012

When you are happy that the above criteria is satisfied, you should advise the patient to come to the pharmacy and to bring an empty medication pack, repeat prescription request slip or any other evidence of a repeat supply with them.

If you feel that a genuine need can only be assessed face to face, then the patient can be asked to attend the pharmacy sooner. In some cases, a patient may choose to attend the pharmacy first, rather than await a telephone call.

**What medication and how much can I supply?**

Both prescription only medicines (POMs) and other medicines usually obtained on prescription by the patient from their GP can be supplied. Schedule 1, 2 or 3 controlled drugs (except phenobarbitone or phenobarbitone sodium for epilepsy) cannot be supplied in an emergency and the 111 referral mechanism should prevent such requests from coming into the pharmacy.

Up to 7 days’ of medication can be supplied, except in the case of things such as inhalers, creams and special containers etc where small volumes can’t be supplied. In such cases, the smallest pack size should be dispensed.

***NB: you are not auctioning a request from NHS 111 colleagues. You, as a pharmacist, have full professional autonomy over the medication supply decision. Any notes on the 111 referral on PharmOutcomes are from non-clinical call handlers.***

**What do I do if I don’t have the medicine in stock?**

You have a number of options including:

* borrowing stock from a neighbouring pharmacy to enable supply to be made
* verbally signposting the patient to a neighbouring pharmacy that is also providing the PERMSS service after telephoning the pharmacy to check supply (NB: there is no pharmacy to pharmacy referral mechanism through PharmOutcomes, therefore, Pharmacy 2 would treat this patient as a self-presenting patient and Pharmacy 1 would record the referral as a rejected referral with reason on PharmOutcomes if the patient has been referred from 111)
* Refer the patient back into 111

***NB: you should make every effort to work with neighbouring pharmacies to avoid referral back into 111 unless there are clear clinical reasons for doing so***

**What do I do, if I have clinical concerns or don’t feel the emergency supply request to be appropriate?**

You can seek a further clinical opinion by telephoning NHS 111 as per below. This can be done even before asking the patient to come into the pharmacy. If you are satisfied after speaking to another health professional, the emergency medication supply can still be made.

If you remain unhappy or feel that the request is not an emergency or is inappropriate, refer the patient back into 111.

**What do I do if the patient cannot evidence the repeat medication?**

If following consultation, you are satisfied that the request is genuine and the medication is needed urgently, you can make the supply in line with the Human Medicines Regulations 2012. Evidence will support the request but is not a legal requirement.

**How do I contact or refer back into NHS 111 if needed?**

Dial 111 and select option 1 for the health care professionals’ line. Give the call handler the initial NHS 111 referral number and/or patient NHS number and request a call back in 30 or 60 minutes, depending on the clinical urgency.

You will be responsible for keeping the patient informed during any time needed to seek further clinical advice. You will also be responsible for informing the patient why a medication supply cannot be made, should this be the outcome.

Through NHS 111, you can choose to:

* Speak with a GP yourself
* Ask for the patient to be reviewed directly over the phone by a GP
* Request that a face to face appointment is organised for the patient with a GP

**Can I make the supply to a patient representative?**

Yes, however, this should be restricted to exceptional circumstances i.e. in the case of a pandemic, or where a genuine health and/or social care need such as the patient being housebound, elderly or infirm etc, for collection by a representative exists.

**In addition to dispensing the medication, what else I must do when the patient (or representative) comes to the pharmacy?**

* Ask the patient to sign a declaration and consent form (this can be downloaded and printed from PharmOutcomes)
* advise the patient or his representative on the importance of ordering prescriptions in a timely manner and suggest any other action to avoid need for future emergency supply
* Record the supply in the private prescription register
* ask patients who have not been referred from 111 to fill in the short patient feedback card

**Should a prescription levy be taken from eligible patients?**

Yes. Unless a patient is exempt from prescription charges a fee of £8.05 should be taken in line with English levy rules.

**What happens with the prescription levy for patients from Wales or Scotland?**

If the patient does not qualify for an English exemption category, they will have to pay the prescription levy. Although there is no prescription levy for any patient in Wales or Scotland, this service has been commissioned by NHS England and therefore English levy rules apply.

**How and what information do I need to record about the consultation?**

In addition to completing the private prescription register, you must complete all data fields on PharmOutcomes. These can be viewed by accessing the NHS Emergency Supply service (for walk-in patients) when you click the services tab.

**How do I inform the patient’s GP about the emergency supply?**

This process is automated is most cases. When data is saved at the Pharmacy following an emergency supply, a secure notification is generated by PharmOutcomes that is sent using the systems in-built nhs.net capability. Where a secure email address is held in the system for a GP practice the notification is sent as data is saved. If a secure email address is not held within PharmOutcomes a hard copy notification must be printed and sent to notify the GP. When this is necessary an alert message will appear in the service screen (see guide). The message displays a link to the relevant supply information. Clicking the link will take the provider to the service record page where a hard copy notification can be printed for onward transmission by secure fax, post or hand delivery.

When a patients presents from an area that is outside the North East of England, a paper notification must be printed and given to the patient so they can inform their GP practice on their return home.

**Where can I get further advice or information?**

*Support with using PharmOutcomes:* Userguides are available via PharmOutcomes or click on the help tab.

*Support with service delivery:* You can contact your LPC representative:

|  |  |  |
| --- | --- | --- |
| North of Tyne | Jean Banks (chair) | 07587 143842 |
| Ann Gunning (community pharmacy development lead) | 07832 967622 |
| Gateshead & South Tyneside | Dave Carter (chair) | 07973 187481 |
| Louise Lydon (secretary) | 07977 007152 |
| Sunderland | Umesh Patel (chair) | 07710 647756 |
|  Jim Smith (secretary) | 07919 332764 |
| Durham & Darlington | Dawn Cruickshank (chair) | 01207 504131 |
| Greg Burke (chief officer) | 07753 254545 |
| Tees | Jay Badenhorst (chair) | 07789 934048 |
| Sandie Hall (chief officer) | 07765 686621 |

*Support with SLA completion and payment queries:* Email NECSU.EnhancedServices@nhs.net

Please note that NECS will be issuing information regarding the payment process for this service in early January, 2015.