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| **Rationale of Checklist** |
| This checklist will be completed by the LPC sub-committee for every new or recommissioned service specification sent to the LPC for comment/consultation. The response summary is completed after consultation and agreement by the sub-committee.The Checklist contains the LPC sub-committee’s comments/recommendations for any requested changes to the proposed/draft service specification in order to achieve / improve further the green rating. It will be sent to the service commissioner for consideration of amendments ideally prior to go-live of the service.The LPC’s purpose is to work positively with commissioners to ensure high quality outcomes from the service, which are both professionally and commercially viable for contractor participation. |
| **Response summary feedback from the LPC** |
| **Needle Exchange, Southampton CC** |
| The LPC has rated this service specification as Amber / Red based on the comments made below. Our recommended actions to further improve the service are:1. Backfill payment for attendance of the compulsory annual workshop – clarification.
2. Remuneration for the provision of Hep B vaccinations to required staff – clarification.
3. Staff turnover needs to be recognised and so it is not fair to limit Hep B payments to ‘new’ pharmacies.
4. Improved remuneration from current £1. Rate has not changed for at least 10 years and should be index linked. This rate seriously undervalues the service provided by community pharmacies and the health & social benefits that the service creates. The £1 rate is substantially lower than other commissioners.
5. Restricted commissioning availability for pharmacy contractors.
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| **Time-line & Next Steps for the LPC** |
| The LPC will publish this service participation rating to contractors in **due course when you the results of the public consultation have been published.**Publication of this recommendation will be via individual email and posting on our website.Commissioners are asked to please respond promptly with feedback / proposed changes so that they can be included within the LPC’s recommendation to its contractors. |
| **Commissioners response to LPC feedback** |
| Please enter response here, returning promptly to richard.buxton@hampshirelpc.org.uk  |
| **Point Covered** | **Action or Notes** |
|  | **LPC Consultation** |
| LPC Consulted?  | Yes |
| LPC Consulted with sufficient time to comment? | Yes |
|  | **Remuneration** |
| Does remuneration include/cover set up costs, backfill, consumables etc..? | No set up, backfill or consumables costs involved.All consumables provided (needles, syringes, other harm minimisation paraphernalia, personal sharps bins and dedicated waste disposal contractor)No off-site training required, all completed on-line. However annual workshop attendance is required – no backfill provided.Hep B vaccination to all staff working on the premises is recommended – not remunerated.DBS for pharmacist recommended but not compulsory. |
| Does the payment structure use a system that is suitable for all contractors and are the payment terms acceptable? | Yes, PharmOutcomes.Automated claims sent monthly. |
| Where equipment is required who provides/calibrates/services this? If contractor, does remuneration sufficiently cover the cost of this? | No equipment required except use of PharmOutcomes to enter information.Consumables provided as described above. |
| Is remuneration fair? | Rate is low.£1 per transaction |
|  | **Is/does the Service.....** |
| Sustainable? | Yes |
| Clinically sound and in line with appropriate National or local guidance? | YesReduce the rate of sharing and other high risk injecting behaviours and reducing the spread of BBVs are local and national priorities.  |
| Enhance patient care? | Yes |
| Have suitable monitoring arrangements and termination clauses? | Three months’ notice if the pharmacy wishes to terminate.SCC can terminate immediately where there are reasonable grounds. |
| Enhance relationships with other HCPs? | YesCollaboration with primary care and specialist substance misuse service providers. |
| Deliverable? | Yes |
| Attractive enough for contractors to consider it worthwhile? | On the limit, due to low remuneration rate.Service only available to geographically invited pharmacies within the City. |
| Have performance criteria that supports a quality service? | Service to be available preferably during all opening hours.Pharmacy will maintain appropriate records using PharmOutcomes. |
|  | **Service Delivery** |
| Are the performance measures reasonable and achievable? | N/A |
| Is the administration proportional to size or service and remuneration? | Yes |
| Are any reporting systems suitable to all contractors? | PharmOutcomes requires internet access.Use essential to enter information. |
| Is the training required for the service reasonable? Consider accessibility to CPPE for non-pharmacist/technician staff. | Completion of CPPE learning pack & online assessment ‘Substance Use and Misuse’ within 3 months of signing agreement.Pharmacist must have a signed version of the DoC for Needle Exchange and must review this every 3 years.Key staff should attend an annual workshop for education and training.Sharps Safety Guidelines supplied for the team to reduce risk of needle stick injury.Substance Misuse signposting details provided. |
| Does record keeping or sharing of information requirements meet current IG regulations. | YesAll records are kept securely on PharmOutcomes. |
|  | **Miscellaneous Information** |
| Any other information specific to this service. |  |
| Suggested RAG Rating |  |