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PSNC Briefing 024/22: Emergency closure checklist for community pharmacy

This briefing for pharmacy contractors details actions which should be undertaken if an emergency situation means a pharmacy needs to close for a short period.

Preparations prior to an emergency closure

If you need to close your community pharmacy because of an emergency situation, it is important that you do as much as you can before you leave the premises, if safe to do so, to make sure everything is in place to ensure patients are able to access their prescriptions and that your business can resume easily and effectively. You should not put yourself, your staff, or your patients at any unnecessary risk.

Actions: the emergency closure checklist

1. Things you can do in advance

In preparation for a possible future temporary closure, get ready by undertaking the actions below.

- **Plan ahead - be ready before a closure is needed.** Don't wait until your pharmacy needs to be closed before you consider how you will manage and what you can put in place to mitigate the impact.
- **Make sure your business continuity plan is up to date and relevant to the current situation.** For example, try not to rely on family and friends as part of your plan; if you're having to isolate because of infectious illness, your close contacts may need to do so as well.
- **Ensure your SOPs are accurate, up to date and easy-to-find for someone completely unfamiliar with your pharmacy.** Emergency numbers will be crucial. Normal, everyday business continuity issues are still going to arise and anyone on-site needs to know how to address them:
 - Which wholesalers do you deal with? What time do orders have to be submitted by?
 - What happens if there's no internet connection or your phone line goes down?
 - How do you contact your patient medication record (PMR) **system supplier**?
- **Have an effective 'buddying' arrangement in place with one or more local pharmacies who can support your patients whilst your pharmacy is closed.** If you don't already have an established 'buddy' in place, you should speak with your Local Pharmaceutical Committee (LPC) who may be able to link you up with another pharmacy in your area who could help. Make sure you've agreed with any 'buddy' pharmacy/pharmacies what they will be able to pick up for you and what areas you might have to give more thought to. Don't assume they can do whatever you want without agreeing it with them first.
- **Think through how your pharmacy would operate if neither the usual pharmacist nor usual staff could access the premises.** You may struggle to get a locum at short notice or your pharmacy staff may not be able to continue working to show someone who is unfamiliar how your pharmacy operates. Is there a contact number you could leave on the premises for queries and questions? Have you got a handover file / diary that needs updating? The more you can do to be ready, the less the impact, and the easier an emergency closure will be to manage.
- **Make sure all your pharmacists and staff have current, up to date Smartcards and that they don't leave them in the pharmacy overnight.** If they are unable to return to the pharmacy, this will at least mean they can use their Smartcard elsewhere if relevant permissions are added.

2. What you need to do if you have to close?

The reason you are closing will also affect how long you are closing for. Some of the things you will need to do when you have to close down are obvious and are the kinds of things you would do in any short-term emergency situation (e.g. a one-day closure because of flooding or adverse weather conditions). Some actions are needed because of the closure duration.

- ❑ **Close the premises down and restrict entry/access.** Clear notices should be displayed advising patients of the closure, including any arrangements for accessing their medicines and the estimated time when the pharmacy will re-open.
- ❑ **Identify any 'urgent' prescriptions which are awaiting dispensing, collection or delivery.** For example, acute prescriptions for antibiotics or analgesics. Consider whether it is possible to dispense these and deliver them to the patient or have them ready for collection by the patient (having contacted the patient to let them know of the closure).
- ❑ **Implement any buddying arrangements you have in place and alert other (non-buddy) pharmacies in the area.** This will be especially important where you provide daily medications to substance use clients, or have patients who receive blister pack dispensing, as those prescriptions may need to be transferred to your 'buddy'. Daily supervision clients should also be contacted to advise them where and when to access those medications whilst you are closed.
- ❑ **Advise the NHS England regional office.** This is a requirement of your NHS Terms of Service. You should also advise them of any buddying arrangements you've put in place.
- ❑ **Advise any local commissioners of services or lead service providers (such as substance use services).** For example, the local authority or Integrated Care Board which may commission services from the pharmacy. You should advise them of any buddying arrangements you've put in place so that they are aware of how to direct patients, as necessary.
- ❑ **Advise local GP practices.** You should advise them of any buddying arrangements you've put in place so that they are aware of how to direct patients, as necessary.
- ❑ **Update the NHS website and Directory of Services (DoS) pharmacy profile.** This is a requirement of your NHS Terms of Service. It is important to keep the opening times on your NHS website profile up-to-date and to reflect any temporary closures. Read more about updating your pharmacy profile and DoS entries at: [NHS Profile Manager](#).
- ❑ **Cancel any patients' appointments booked during the period of the expected closure.** This could relate to nationally commissioned services such as the Smoking Cessation Service, flu vaccinations and the Discharge Medicines Service, or locally commissioned services.
- ❑ **Let your wholesalers and suppliers know** that you'll be closed and there'll be no one to accept deliveries at your premises with immediate effect. You should also contact your medicines/clinical waste contractor.
- ❑ **Let your Local Pharmaceutical Committee (LPC) know** that you'll be closed (lpc-online.org.uk).
- ❑ **Let your PMR system supplier know** that you'll be closed. You should [notify your PMR supplier](#) by phone and/or email (for emails use the subject PHARMACY CLOSURE NOTIFICATION). If required, you may ask your system supplier to [escalate](#) specific technical EPS issues to NHS Digital and then to liaise with them as needed.
- ❑ **Check your NHSmail shared inbox** for any urgent emails that require your attention. The inbox owner/administrator should then set an 'out of office' message on the shared inbox so that everyone is aware the pharmacy is closed. If the owner/administrator of the shared mailbox is unavailable, email the NHSmail Pharmacy Admin team (pharmacyadmin@nhs.net) from any of the email addresses that are linked to the shared mailbox and request that they add a message on your behalf.
- ❑ **If you use the EPS 'automatic prescription download' feature in your PMR system** you may be able to switch it off yourself; if not, your system supplier should be able to help you turn this feature off.

- **EPS Nominations:** Depending on the potential closure duration, consider whether you need to let certain nominated patients know about the pharmacy closure. Nominations are set for patients against a pharmacy's ODS code. You can check the pharmacy's total number of nominations prior to the temporary closure by referring to the 'Nominations by dispenser' spreadsheet downloadable from [NHS Digital's website](#).
- **Process any partly dispensed prescriptions.** Completed EPS prescriptions should have both their EPS Dispense and Claim notification messages sent in a timely manner, bearing in mind the EPS 5-day window. For any items you have not been able to dispense, the 'Not Dispensed' endorsement can be used prior to submission, if required. It may not be possible for other pharmacies to retrieve partially dispensed prescriptions from the Spine. In this case, using their professional judgement, pharmacists in other pharmacies may be able to provide an emergency supply subject to meeting relevant criteria, where appropriate (refer to submission guidance below).
- **Return any EPS prescriptions, that have not yet been dispensed, to the Spine.** This should include any batches of electronic Repeat Dispensing (eRD) prescriptions which have not yet been dispensed. Your system supplier may be able to support you with returning appropriate scripts to the Spine. The more you can do before leaving the pharmacy, the easier it will be for your patients to continue to obtain their medicines while the pharmacy is temporarily closed.
- **External communications:** Can your main phonenumber play a message to callers about the closure of the pharmacy? Are you able to add a message on the pharmacy closure to auto-responses sent by non-NHSmal email accounts and can you add messaging on your pharmacy website and social media accounts?
- **Follow guidance on submission** of prescription bundles and EPS prescriptions below; it will assist the pharmacy if EPS submissions are as up to date as possible.

3. Submission and EPS guidance for emergency closure

- **Submit EPS dispense and claim notification messages promptly and regularly, preferably daily.** Note:
 - This allows other EPS users to check the status of an EPS prescription via EPS Tracker.
 - If most claims were not to be submitted until the end of the month, that creates significant risk of delayed payments if a temporary closure or technical outage occurs and submission can't be done.
 - Contractors can utilise the PMR 'bulk submit' feature on PMR systems to speed up the process of sending EPS messages frequently.
 - Contractors should take account of the EPS 5-day window and ensure dispense messages are sent within the calendar month and the corresponding claim messages for fully dispensed EPS prescriptions are submitted no later than the 5th of the following month in which supply was made.
 - Read more at: psnc.org.uk/timeeps and within [PSNC's factsheet](#).
- **Make use of PMR reports to support end-of-month claiming.** Your PMR system supplier reports can show the number of EPS claims submitted to date. See psnc.org.uk/epstotals.
- **Make alternative plans if your regular courier service is unavailable.** A secure track and trace method should be used. The monthly pharmacy Advance payment is calculated using declared item totals and pharmacy cashflow may be significantly impacted if you fail to submit your FP34C declaration through the Manage Your Service (MYS) portal by the 5th of the month following that in which supply was made.
- **Submit your paper prescription bundle early if you won't be open later.** If the pharmacy doesn't expect to be open during the usual end-of-month submission period, the pharmacy should sort and submit dispensed paper prescriptions and required tokens to the NHS Business Services Authority (NHSBSA), along with the pharmacy Account Identifier Document, using a secure track and trace delivery method *no later than the 5th day of the month following* that in which supply was made.
- **If you were unable to submit prescriptions within the usual time periods,** submit at the first opportunity to reduce additional reimbursement delay. Contractors are advised to contact the NHSBSA to notify them of the expected delay in bundle submission. If paper prescriptions arrive at the NHSBSA very late, they may miss

the cut-off point for prescription processing that month and be priced based on the following month's Drug Tariff. Please note that an administrative deduction of £25 may apply if a paper prescription bundle is submitted late to the NHSBSA. [Click here](#) for further guidance on the administrative charges for late submission of bundles.

Procedure for reopening the pharmacy

It is important to plan what needs to be done when you reopen the pharmacy. This includes notifying the organisations that you previously notified of the temporary closure, of your expected reopen date and then confirming after reopening. Changes to IT systems and website information should be "reversed" as appropriate.

Further resources

Additional advice and resources linked to this topic is available on PSNC's website:

[Business Continuity hub](#)

[IT contingency arrangements](#)