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| **Please Complete Table** | |
| **ODS Code** |  |
| **Pharmacy** |  |
| **Address Line 1** |  |
| **Address Line 2** |  |
| **Postcode** |  |

**2024/25 “Only Order What You Need” Enhanced Service Commissioned by Gloucestershire ICB**

1. Introduction
2. Aims and Objectives
3. Service Specification
4. Financial Detail
5. Activity monitoring form and Reporting
6. Termination of SLA
7. Appendix A: Signatures

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| 1. **Introduction** |
| This Local Enhanced Service is being commissioned under Direction 14(1)(O), i.e., Prescriber Support Service, and in particular the Repeat Prescribing and clinical and cost-effective use of our medication resource elements.  This agreement set outs the framework for an Enhanced Service to increase the effectiveness of the ICB’s “Only Order What You Need” campaign (OOWYN).  The desired outcomes of the OOWYN campaign are listed in Part 2 of this SLA but essentially it is to reduce the number of unnecessary repeat prescriptions and reduce medication waste as part of [NHS One Glos GREEN PLAN 22-25](https://www.nhsglos.nhs.uk/wp-content/uploads/2023/04/GREEN-PlanFINAL.pdf)  The Gloucestershire OOWYN initiative is based upon a similar campaign implemented by Dorset ICB.  This initiative will be over and above the dispensing service provided within the Essential Services outlined in the Pharmacy Regulations. |
| **2. Aims and Objectives of Service** |
| The ICB are proposing a Local Enhanced Service to complement its ICB’s OOWYN campaign that is being run in Summer 2024.  This main aim of the OOWYN campaign is to reduce the number of unnecessary repeat prescriptions ordered by patients and further the delivery of several other desired and associated outcomes for the county:   * Reduction in medication waste and improving NHS Sustainability as part of our Green Agenda 22-25 and ongoing Medicine Optimisation * Clinical and cost effective use of drugs as per Gloucestershire Non-Medical Prescribing Policy and [Gloucestershire Joint Formulary](https://www.gloshospitals.nhs.uk/healthcare-professionals/gloucestershire-joint-formulary/) prescribing guidelines for therapeutic selection and duration * Improved medication safety by ensuring only currently prescribed medications available to patients in the right quantity that may need blood test or a review before being prescribed again. * Reduction in workload for General Practice Teams administering prescription requests, authorising, and processing unnecessary medicines. * Reduction in workload for both Community Pharmacy Teams as prescriptions not needed will not be issued and waste items will not be returned for disposal. |
| **3. Service Specification** |
| This Local Enhance Service will pay each Community Pharmacy who participate, £340 to undertake the following:   1. Exhibit posters and other Gloucestershire OOWYN resources within the community pharmacy until at least 30th November 2024. Gloucestershire ICB will provide (and fund) the resources. 2. The Community Pharmacy Team to stop ordering repeat prescriptions on behalf of patients (with exception for patients who have a genuine need for orders to be made on their behalf). 3. Train staff about the use of NHS App so they can confidently signpost patients to use the NHS App for ordering repeat medicines. The ICB has pulled together some resources to assist our partners, please refer to Appendix 1. 4. Develop and implement a process within the Community Pharmacy whereby staff automatically advise patients how many items are in the bag and check to see if that was what the patient was expecting. This may prompt patients to check their medication before they leave the pharmacy “Open the Bag” or at least reduce the need for patients to contact the pharmacy again about missing or not enough medication. 5. The Community Pharmacy will need to complete a brief form on PharmOutcomes confirming they have complied with the requirements of this Enhanced Service to Gloucestershire ICB before payment.   The Pharmacy contractor has a duty to ensure that all staff (including the Pharmacists and regular relief staff) involved in the provision of the service have relevant knowledge and are appropriately briefed and supported to deliver the undertakings described in Points 1 to 5 above.  The ICB will provide training resources for pharmacy staff to understand and support patients to use the NHS app to order repeat medications.  The Pharmacy will be responsible for operating appropriate security procedures within the pharmacy, where appropriate. |
| **4. Finance Details** |
| Community Pharmacies that participate in this Local Enhanced Service will be paid £340 subject to confirmation of delivery of all 5 elements.  Payment will be made to successful Community Pharmacies no more than 2 months after submitting confirmation that they have delivered all 5 elements of the Service Specification using the Declaration made via PharmOutcomes. |
| **5.** **Activity Reporting** |
| Declarations will be made via PharmOutcomes to allow for ease of declaration and speedy payment. The narrative about the “Open Your Bag” initiative will also be submitted via PharmOutcomes.  Your Declarations via PharmOutcomes should be submitted by 30th November 2024 to ensure Payment. |
| **6. Termination of SLA** |
| This SLA can be terminated by 30 days written notice on either side. |

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| **7. Appendix A Signature Sheet - Local Enhanced Service - “Only Order What You Need” Campaign (OOWYN)** |

Name of Pharmacy: ODS Code:

Address of Pharmacy:

**Declaration**

We / I can confirm that the Pharmacy is capable of meeting its obligations under the Local Enhanced Service - “Only Order What You Need” Campaign (OOWYN) and will adhere to all requirements of the service specification.

Signature on behalf of the Pharmacy: …………………………………………………………….

Print Name: …………………………………………………………………………………………..

Post Title: ……………………………………………………………………………………………..

Date: …………………………………………………………………………………………………..

Signature on behalf of NHS South West CCH: …………………………………………………..

Print Name…………………………………………………………………………………………….

Date: …………………………………………………………………………………………………..

By signing this agreement, you acknowledge that action may be taken against you if you make an incorrect claim. You are also consenting to the disclosure of relevant information for the purposes of fraud prevention, detection and investigation.

**Please return Appendix A by 27th September 2024** to the following email address:

Email: [glicb.pod@nhs.net](mailto:glicb.pod@nhs.net)