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| **Rationale of Checklist** | | | |  |
| This checklist will be completed by the CPSC sub-committee for every new or recommissioned service specification sent to CPSC for comment/consultation. The response summary is completed after consultation and agreement by the sub-committee.  The Checklist contains the CPSC 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.  CPSC’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. | | | |  |
| **Service and Commissioner** | | | |  |
| Hampshire and Isle of Wight ICB  On Demand Availability of Drugs for Palliative Care | | | |  |
| **Response summary feedback from CPSC** | | | |  |
|  | | | |  |
| CPSC has rated this service specification as Green based on the comments made below. Our recommended actions to further improve the service are:   1. Initial purchase of the medicines to be paid for. | | | |  |
| **Time-line & Next Steps for CPSC** | | | |  |
| CPSC will publish this service participation rating to contractors in **10 days’ time.**  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 CPSC’s recommendation to its contractors. | | | |  |
| **Commissioners response to CPSC feedback** | | | |  |
| Please enter response here, returning promptly to [alison.freemantle@cpsc.org.uk](mailto:alison.freemantle@cpsc.org.uk) | | | |  |
| **Point Covered** | | | **Action or Notes** |  |
|  | | **CPSC Consultation** | |  |
| CPSC Consulted? | | | Yes |  |
| CPSC Consulted with sufficient time to comment? | | | Yes |  |
|  | | **Remuneration** | |  |
| Does remuneration include/cover set up costs, backfill, consumables etc..? | | | First annual remuneration will cover cost to purchase drugs for initial set up. |  |
| Does the payment structure use a system that is suitable for all contractors and are the payment terms acceptable? | | | Yes PharmOutcomes  Payment quarterly.  Able to claim for any out of date stock quarterly. |  |
| Where equipment is required who provides/calibrates/services this? If contractor, does remuneration sufficiently cover the cost of this? | | | No |  |
| Is remuneration fair? | | | Yes |  |
|  | **Is/does the Service.....** | | |  |
| Sustainable? | | | Yes |  |
| Start/ end date | | | 1st November 2023- 31st October 2026.  3 years |  |
| Clinically sound and in line with appropriate National or local guidance? | | | Yes |  |
| Enhance patient care? | | | Yes, providing easy access to urgent medicines for patients/ family/ carers at a very difficult time for them. |  |
| Have suitable monitoring arrangements and termination clauses? | | | Yes  Stock holding check every 3months – completion of this on PharmOutcomes will trigger payment.  The service may be terminated by either party with three months’ notice. |  |
| Enhance relationships with other HCPs? | | | Yes, for those pharmacies involved.  The palliative care drugs list and pharmacies involved will be circulated to all primary care prescribers, including the out of hours services, District Nurses, Palliative Care Nurses, Community Pharmacies, Hospital Pharmacists and Palliative Care Consultants. |  |
| Equality, diversity, and inclusion considered? | | | HIOW ICB will select participating pharmacies from those who express interest to ensure all localities and populations are included. |  |
| Deliverable? | | | Yes |  |
| Attractive enough for contractors to consider it worthwhile? | | | Yes |  |
| Have performance criteria that supports a quality service? | | | Yes, quarterly stock check and out of date claiming.  Regular review of drug list and out of dates will be carried out using data on PharmOutcomes. |  |
|  | **Service Delivery** | | |  |
| Are the performance measures reasonable and achievable? | | | Yes |  |
| Is the administration proportional to size or service and remuneration? | | | Yes |  |
| Are any reporting systems suitable to all contractors? | | | Yes PharmOutcomes. |  |
| Is the training required for the service reasonable? Consider accessibility to CPPE for non-pharmacist/technician staff. | | | Yes  No mandatory training.  Recommended: CPPE e-course: Fundamentals of Palliative Care <https://www.cppe.ac.uk/programmes/l/palliative-ec-01> |  |
| Does record keeping or sharing of information requirements meet current IG regulations. | | | Yes, No patient record keeping required.  Stock Checks completed on PharmOutcomes. |  |
|  | **Miscellaneous Information** | | |  |
| Any other information specific to this service. | | | HIOW ICB looking to contract approx. 40 pharmacies to deliver the service. |  |
| Suggested RAG Rating | | |  |  |