

Well Pharmacy

Locum Handbook

July 2020



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Well Pharmacy Locum Handbook

Introduction:

Message from Janice Perkins, Pharmacy Superintendent

Welcome to our Locum Handbook which is designed to help you contribute to our vision of providing the best community pharmacy experience.

We recognise the challenges locums may face in their day to day professional practice and want to make it as easy as possible for you to support the wellbeing of our patients and customers.

My role as Superintendent is to protect patients and the public and to support everyone who works for us to meet the required professional and regulatory standards.

Please read this handbook in conjunction with your locum contract. These documents are intended to help you be effective in your role and be clear about our expectations.

We want to deliver the best possible care and a wide range of services so our pharmacy teams may provide feedback on your time with them and I'd encourage you to let us know what we're doing well and where we can improve.

We are determined to put people at the front and centre of our business, and this means we are listening more, collaborating further and want more pharmacists and support colleagues to join us. If you'd like to become part of Well, please contact askrecruitment@well.co.uk

The Pharmacy Superintendent's Team (PST) and Professional Resourcing Team (PRT) work closely to ensure that the professional and legal requirements of the business are maintained. This includes making sure we keep our patients, Colleagues and local communities safe.

Whilst you're working for Well, we want you to:

- Have the highest professional and NHS standards.
- Take personal responsibility for everything you do.
- Walk in our patients' shoes.
- Play your part.
- Keep up to date with local service requirements.
- Follow our operational procedures including hub and spoke process.
- Be flexible so we can effectively meet our patient's' changing needs.

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Message from Adedayo Titiloye,

Pharmacy Support Manager for Well Pharmacy

Professional Resourcing Team (PRT) co-ordinators schedule both employee and locum pharmacists to ensure that all our pharmacies are able to trade and meet their NHS contractual requirements.

In an ideal world the schedule would be planned many months in advance however, “gaps” occur due to holidays, sickness, training sessions and vacancies and these need filling with varying degrees of notice.

Co-ordinators will contact you by telephone, email or text message, and it is therefore important that you keep us notified of any change to your contact details.

We expect everyone who works for us to:

- Arrive at the branch in advance of the opening time.
- Dress in smart business dress.
- Offer exceptional standards of customer service, including the full range of services to meet the NHS pharmacy contract.
- Contact PRT if you are going to arrive late.
- Leave your contact number with the branch in case of queries.
- Check the date and locations of your bookings.
- Plan sufficient travel time allow for bad weather and road conditions.
- Ensure you are fit to work and fit to practise.
- Take regular mental rest breaks.
- Contact the Pharmacy Superintendent’s Team for queries relating to Professional Concerns.
- Don’t take bookings which you cannot commit to.
- Have your own professional indemnity insurance and to renew it in a timely manner in line with your Locum Contract.

Rest Breaks

It's your professional responsibility to take appropriate rest breaks throughout the working day. These should ideally be taken to minimise the impact on patients and at a time convenient to the business. If the pharmacy has specific arrangements these will be confirmed at the time of booking.

Expense Claims

Expense claims should be submitted to PRT within 6 weeks of a shift being worked using the appropriate form. Mileage will be paid at the prevailing rate and after the first 40 miles have been deducted from the daily distance travelled.

Disclosure and Barring Service Renewal (DBS)

All locum pharmacists are required to have an enhanced disclosure from the Disclosure and Barring Service. We advise that you register with the Update Service so that you only need to have one disclosure for any pharmacy you may work for.

Services Re-accreditation

We aim to provide all our patients with a full range of health and wellbeing services therefore it is important that you can provide these in the pharmacies you cover. We will prioritise bookings to those locums who can best meet our local service needs. This may require you to become accredited or to sign a declaration of competence. Help us maintain accurate records by keeping us updated on any changes to the services you provide.

When a booking is made it is on the understanding that you are fit to practice on that date, and that you meet the requirements of the Working Time Directive. (For further information on the working time directive, please visit <https://www.gov.uk/maximum-weekly-working-hours>)

Pharmacist Feedback

Feedback is a core element of how we operate and helps us match pharmacists to the most appropriate pharmacy for them.

Feedback received helps us ensure that the pharmacists covering our pharmacies are aligned to the customer, pharmacy team and business needs.

There are great benefits to giving and receiving feedback and we are keen to hear your thoughts and views about your experience whilst working for us. Please take the opportunity to feedback by emailing locuminsights@well.co.uk

Feedback which we share with you may be to highlight where high standards have been achieved or where there is an opportunity for you to reflect, learn and make improvements to your practice. This feedback may present you with an opportunity to complete a CPD cycle.

Positive feedback about locums tends to highlight those who arrive before the branch opens and are familiar with the company SOPs, required Professional Standards and are accredited to provide any nationally and locally commissioned services.

Responsible Pharmacist

Role of the Pharmacy Superintendent

The Pharmacy Superintendent is professionally accountable for the pharmaceutical aspects of the business and sets the overarching standards and policies.

The Responsible Pharmacist should ensure that these standards and policies are implemented and use their professional judgement to adapt these on a day to day basis where appropriate to maintain patient safety.

Role of the Responsible Pharmacist

The Responsible Pharmacist (RP) is the pharmacist-in-charge of a registered pharmacy who has the legal obligation to secure the safe and effective running of the pharmacy business.

Registered pharmacy premises are required to have an RP in charge to operate safely and securely when dispensing, selling, supplying medicines, and providing pharmacy services. The NHS contractual requirements do not currently enable the Responsible Pharmacist to be absent from the pharmacy unless another pharmacist is present. The RP regulations are no different for locum or employee pharmacists and you should familiarise yourself with the requirements.

You will need to identify the colleagues, their qualifications, and the tasks they are qualified to do by using RP SOP 3 with appendices 1 and 2.

<http://hubintranet.corp.well.co.uk/responsible-pharmacist/>

Key elements of the RP Regulations:

- Display the RP Notice

<http://web-apps.corp.well.co.uk/ResponsiblePharmacist>

- Completion of the Pharmacy Record. NB Please don't sign out in advance of the end of the shift.
- Pharmacy Procedures to be in place.

Fitness to Work

It's your professional responsibility to determine that you are fit to work i.e. healthy both physically and mentally and able to take on your Professional Responsibilities. If this is not the case and you believe being in work could compromise patient safety, you should inform PRT as soon as possible so alternative arrangements can be made. This is not to be confused with the GPhC /PSNI requirement of Fitness to Practice.

Working Effectively as RP

Ensure all messages left from the previous day which require the assistance of the Responsible Pharmacist are dealt with.

Ensure any prescription queries are clear and communicated appropriately for the Responsible Pharmacist the following day. It is often helpful to leave your contact details in case the RP needs to speak to you.

Don't work excessive hours which mean that you haven't had a sufficient break or are in breach of the agreement of the working time directive.

Further information and Standard Operating Procedures relating specifically to the RP Regulations can be found on the hub

<http://hubintranet.corp.well.co.uk/responsible-pharmacist/>

An Introduction to Safe and Well

Safe and Well is personal to Well and sits alongside the work completed in the NHS improving patient safety.

Patient safety underpins all interactions that you have with patients, when providing dispensing and other services.

We want you to think about the patient behind every prescription.

The approach of Safe and Well is to achieve a Just Culture based on fairness, openness and reporting which balances learning with accountability leading to improvements in patient safety.

Safe and Well aims to create an open and honest culture encouraging reporting. Datix is our reporting tool and consistent and prompt use of it enables us to identify trends and opportunities for learning and reducing risk. The reporting of all Near Misses and Patient Safety Incidents must be done through this tool.

<http://hubintranet.corp.well.co.uk/back-office/datix/>

Near Misses are errors in dispensing, OTC advice or service delivery that are identified before reaching the patient. Completion of a near miss records is a contractual clinical governance requirement and helps to show we are meeting the GPhC Standards for Registered Pharmacies and PSNI Code of Ethics and Standards.

During GPhC/PSNI inspections, you will be asked if you record near misses and the inspector will expect every colleague from the dispensing team to explain why they are recorded and what is done with the information.

Patient Safety Incidents (PSI) are usually thought of as dispensing errors and incidents which were not identified until after the patient had received the medication.

However, it is a much more wide-ranging definition encompassing any incident that has affected a patient's health or has had the potential to affect a patient's health. It may relate to either prescribed or OTC medication and includes

- Prescribing errors and interventions.
- Delivery errors.
- Handing out errors.
- Missed interactions and interventions.
- Supply of out of date medication.
- Incorrect advice or counselling.
- Late supply or no supply resulting in delayed or missed doses.

Following a Patient Safety Incident

When a patient suffers harm or there has been potential for harm, patients and their families feel let down, upset and angry and understandably sometimes wish to escalate their concerns. It is important to apologise to the patient or representative and reassure them of the next steps.

You must take immediate action to make sure that the patient gets any medical and supportive care they need. We then need you to ensure the incident is reported. You could stop there but does this really protect patients?

To ensure effective learning and provide the opportunity to take appropriate preventative actions, we need to consider the Root Cause and Contributing Factors. Your personal involvement and insight may be invaluable in this.

With most incidents there will be both pharmacy team learning and learning for the individual. We should look at all aspects with an open mind to learn how the risk could have been minimised. The individual dispenser and checker can spend time reflecting personally and this is also important.

Resolution of a PSI may be achieved between the patient and the pharmacy team, but the patient may not be happy with this and want to escalate as a formal complaint to the PST, the NHS, the GPhC/PSNI, the ombudsman or even speak to the media.

When it gets complicated let the PST take the lead, it is their role to support you and try to make sure the matter is resolved quickly, effectively and to the satisfaction of the patient.

They really need to hear from you straight away if the matter is urgent or serious harm is caused or resulted in hospitalisation. Please ensure they are informed of any letters from patients or solicitors as they may need to make contact or liaise with our insurers as a matter of urgency.

Incidents and discrepancies involving Controlled Drugs must be reported to the NHS Accountable Officer. The PST do this on your behalf using the information provided on the Datix report as a starting point.

Report Share and Learn

The PST will contact you if you've been involved in an incident. They will share with you the incident report form and where necessary will ask for your assistance in providing additional detail including the completion of a Root Cause Analysis. We aim to have an open and transparent culture and recognise that mistakes do happen. Our follow up is to understand what may have gone wrong and share learning across the business and via the National Reporting and Learning System (NRLS).

You should be familiar with our Patient Safety SOP and supporting Essential Guide which can be found on our hub

<http://hubintranet.corp.well.co.uk/pharmacy/patient-safety-zone/>

Standards for Pharmacy Professionals

Professionalism is a word that is often heard and can be defined as behaving in a manner that would be viewed favourably by peers and the public.

Pharmacy professionals' roles and their contributions to public health are diversifying, as are the public's expectations. Demonstrating professionalism is not always easy but doing so is fundamental to the care of patients and people who use pharmacy services.

As a pharmacy professional these are the standards set out by the General Pharmaceutical Council against which your conduct will be judged.

Pharmacy professionals must:

- Provide person-centred care
- Work in partnership with others
- Communicate effectively
- Maintain, develop and use their professional knowledge and skills
- Use professional judgement
- Behave in a professional manner
- Respect and maintain the person's confidentiality and privacy
- Speak up when they have concerns or when things go wrong
- Demonstrate leadership

To fully understand these standards, you should read further details on the GPhC/PSNI website

- <https://www.pharmacyregulation.org/standards-for-pharmacy-professionals>
- <https://www.psni.org.uk/>

Fitness to Practise

In line with the GPhC/PSNI guidance, we consider a pharmacy professional fit to practise when they can demonstrate the skills, knowledge, character and health required to do their job safely and effectively.

The GPhC describe fitness to practise as a person's suitability to be on the register without restrictions. In practical terms this means, maintaining appropriate standards of proficiency ensuring you are of good health and good character, and you are adhering to principles of good practice set out in various standards, guidance and advice.

A pharmacy professional's fitness to practise can be impaired for a number of reasons including misconduct, lack of competence, ill-health and through having been convicted of a criminal offence. Our expectations mirror those of the GPhC and so in addition to the requirement to inform the GPhC/PSNI of Fitness to Practice concerns, the Pharmacy Superintendent's Team also request that you make them aware.

Potential Conflict of interest

As mentioned in your contract you should declare any potential conflict of interest to the PRT so that any potential risk can be assessed. This does not necessarily mean you cannot work for us it just supports our goal of being open and transparent in all we do.

Standards for Registered Pharmacies

GPhC/PSNI Standards aim to create and maintain the right environment, both physical and organisational, for the safe and effective practice of pharmacy. The Pharmacy Superintendent is responsible for ensuring the standards are met in our pharmacies and there is compliance with all legal requirements. The standards can be viewed in detail on the GPhC/PSNI website.

<https://www.pharmacyregulation.org/standards/standards-registered-pharmacies>

<https://www.psni.org.uk/>

There are only two potential inspection outcomes: standards met or standards not all met. Inspections are unannounced, and the report outcome is published on the GPhC website. Each pharmacy is visited on a 3-5-year cycle or more frequently if there is local intelligence.

It is important that you are aware of the standards and of what to expect should an inspection visit take place. You can demonstrate leadership by involving the whole team in the management of pharmacy services, so they are familiar with the standards and understand the importance of meeting them. The inspector will discuss the standards with the RP and the pharmacy team during an inspection and expect to see evidence that the standards are met.

The standards are grouped under 5 principles that safeguard the health, safety and wellbeing of patients and the public:

- The governance arrangements
- Staff are empowered and competent.
- The environment and condition of the premises from which the pharmacy services are provided
- The way in which pharmacy services, including the management of medicines are delivered
- The equipment and facilities used in the provision of pharmacy services

Please read our guidance and ensure you are familiar with the types of questions you and the branch colleagues may be asked on an Inspection visit. The inspector will not approach the inspection any differently when a locum pharmacist is the Responsible Pharmacist.

<http://hubintranet.corp.well.co.uk/pharmacy/standards/standards-for-registered-pharmacies/phc-standards-for-registered-pharmacies-inspection-2/>

Please ask to see the “SUPER Folder” in the pharmacy which contains useful evidence required to demonstrate we are meeting the standards.

Raising Concerns

If you believe someone or something is putting our people, our business or our customers at risk, please tell us. We will deal with all concerns raised confidentially, openly and professionally

Registered professionals have a professional responsibility to raise concerns if they believe the standards are not being met. You can contact PST or email raisingconcerns@well.co.uk

Further guidance:

<http://hubintranet.corp.well.co.uk/contact-us/speak-up-raising-concerns/>

SOPs and Essential Guides

Our SOPs focus on the key steps within a defined process whilst allowing a degree of flexibility to ensure that the pharmacists are supported in discharging their professional responsibilities and have the ability to respond to changes in circumstance.

By adhering to the SOPs, you should be able to achieve consistency of processes in the pharmacy to minimise risk of errors and delegate effectively to appropriate colleagues.

As the Responsible Pharmacist you should ensure that the appropriate SOPs are followed in branch to ensure that a safe and effective pharmaceutical service is provided.

There may be occasions when in your professional judgement it's appropriate to deviate from the SOP. This should be documented along with the rationale for your decision. The PS Team are always happy to discuss this with you if you need any support.

In addition to this handbook, you should have an electronic copy of the Essential Guide to SOPs and our Core SOPs as a useful reference. The Essential Guide provides key information that applies to all our SOPs and therefore familiarising yourself with the content of Essential Guides and SOPs will assist you to fulfil your role as Responsible Pharmacist.

The SOPs are available on our Hub:

<http://hubintranet.corp.well.co.uk/pharmacy/sops-and-resource-packs-2/>

Controlled Drug Management

It is a requirement to ensure that the CD keys are always in the personal possession of the Responsible Pharmacist. CD keys must be placed into a sealed envelope at the end of your shift and you should sign and date the envelope. At the start of your shift, check the integrity of the envelope containing the CD keys. If you believe that this has been tampered with, you should contact PST.

To help you comply with the Misuse of Drugs Act a good understanding of the Controlled Drug Regulations is essential. As Responsible Pharmacist you are required to ensure the safe management and use of controlled drugs.

Errors and discrepancies are reported by PST externally to NHS Accountable Officers. Feedback from Accountable Officers highlights 3 key areas of focus

- SOP compliance regarding 'weekly' balance checks.
- Accurate and timely recording in the register.
- Timely reporting of Patient Safety Incidents and unresolved discrepancies.

Compliance with our CD Management SOP will help you achieve this.

Our SOP states:

Once every working week, check and count the physical stock held in the CD cabinet against the total running balance in the CD register. This includes out of date or obsolete stock and prescriptions awaiting transfer to the patient. During the balance check, check the validity of prescriptions awaiting collection.

Carrying out a physical balance check against the CD register at the time of dispensing and supplying helps identify any anomalies or concerns promptly which increases the likelihood of effective resolution or prompt reporting where appropriate.

Patient Returned CDs should be destroyed as soon as possible (within 5 working days of return). If this is not possible you should segregate and mark them as patient returns and store in the CD cabinet away from other stock. A record of the returned stock must be made, on receipt, in the “Controlled Drugs destruction register for returned medicines”

Obsolete and out of date CDs must only be destroyed in the presence of an Authorised Witness (AW). Therefore, you should segregate and mark them as obsolete or OOD and store in the CD cabinet away from other stock. The total amount should remain in the running balance of the CD register until an Authorised Witness is present to witness destruction and make the appropriate entry removing them from the running balance of the register. We have trained Authorised Witnesses covering our pharmacies. Please notify the local AW if there are a significant number of CDs to be destroyed.

Please ensure that you investigate and discrepancies to try to resolve them. Any unresolved discrepancies must be reported on Datix before leaving the pharmacy and the registers annotated appropriately.

Ensure you make accurate and timely records in the CD Register following supply or receipt of CDs.

Problem Solving

There may be occasions when you need to use your professional judgement to solve problems. Professional judgement can be described as the use of accumulated knowledge and experience, in order to make an informed decision. It takes into account the law, ethical considerations and all other relevant factors related to the surrounding circumstances. In some cases, there may appear to be a potential conflict between your ethical duty to put the care of the patient first and legislative requirements.

It may be necessary to contact another healthcare professional to discuss a patient's care. You may also be contacted by a healthcare professional or asked by a patient for relevant information or clarification. Before discussing a patient's care, you should ensure you are providing advice within your area of competence. Professional decisions should be made within the framework provided by the GPhC Standards for Pharmacy Professionals

<https://www.pharmacyregulation.org/standards-for-pharmacy-professionals>

It is important to

- Clarify the problem and test your understanding.
- Gather all relevant information and evidence.
- Seek advice and support if needed e.g. telephone PST.
- Generate possible options then choose a solution assessing the benefits and risks of each.
- Document the rationale for your decision making.

There may be risks and benefits to the various options and it is important to consider them all whilst always making the care of the person your priority.

Reference sources including Medicines Complete and Electronic Medicines Compendium are available on our Hub under "quick links". Accessing references in this way ensures you are using the most up to date information.

Contact PST if you need urgent advice or professional support.

Information Governance

Information Governance (IG) is the collection of rules and procedures that we are required to follow to prevent patient and personal information being disclosed inappropriately, mis-used, lost, misplaced or stolen. With the advent of GDPR, it is now more important than ever that everyone working in our pharmacies follows approved Standard Operating Procedures (SOP) and Best in Class processes. If you make any local changes which are not approved, you could increase the risk of a breach occurring in your pharmacy and become personally liable.

As a regulated pharmacy professional, you are expected to comply with the GPhC/PSNI standards regarding confidentiality and consent. Our pharmacy colleagues undertake annual IG training, however as a locum pharmacist you should be able to demonstrate a working knowledge of the standards required in relation to:

- the maintenance of confidentiality and obtaining consent to disclose information
- information governance of data kept on computer and other recording systems
- obtaining consent for professional services

Patients trust us with their personal data and provide us with confidential information in good faith. Sensitive information should not be discussed where it is possible to be overheard. When transferring medication to patients ask the patient or their representative to confirm their address rather than reading their details out loud. Ensure adequate steps are taken to confirm the identity of a person prior to releasing any information. Take responsibility for how you obtain, record, use, retain and share information. Familiarise yourself with the IG resources available on the Hub and via PSNC.

<http://hubintranet.corp.well.co.uk/pharmacy/information-governance/>

<https://psnc.org.uk/contract-it/pharmacy-it/data-security/data-security-training/>

Any breaches of patient confidentiality should be reported under the category of IG Incident using Datix. <http://hubintranet.corp.well.co.uk/back-office/datix/>

Complaints Management

We have a positive attitude to receiving customer feedback as this is an opportunity for us to learn and improve the customer care we provide. We will always try to offer an explanation for any concern that has arisen and use any feedback constructively.

Complainants should be treated with dignity, respect and confidentiality. If you're discussing a patient's complaint with a third party, you should check that they are authorised to speak on behalf of the patient to avoid a potential breach of confidentiality. In some cases, you may need written consent.

We recommend you:

Always ensure that the patient's immediate health needs are being met and, if appropriate, take any action necessary i.e. referring to or involving a medical practitioner.

Familiarise yourself with the Complaint Management SOP located on the hub

<http://hubintranet.corp.well.co.uk/pharmacy/sops-and-resource-packs-2/>

Familiarise yourself with the customer facing resource displayed in our pharmacies, including:

- Customer Complaint Number 0333 010 2222
- Customer Care Notice
- Pharmacy Practice Leaflet

Contact PST for professional advice and support if you are concerned about an incident that has occurred.

Potential and actual complaints can be reported on Datix – as can compliments – under the category Customer Experience. It is particularly important to ensure this is done if the complaint does not appear to be resolved to the customer’s satisfaction.

<http://hubintranet.corp.well.co.uk/back-office/datix/>

We are committed to providing a safe and comfortable environment for both our patients and pharmacy colleagues. A chaperone provides a safeguard against any allegations of misconduct and therefore remember it may be appropriate to have one present when using the consultation room.

Abusive Customers

Dealing with difficult or demanding customers is very much part of our role as pharmacists and the GPhC Standards for Pharmacy Professionals contain many useful pieces of guidance to support us.

From time to time, the behaviour of some customers may move from being difficult to being abusive or even criminal. You must prioritise the safety and wellbeing of yourself and the pharmacy colleagues in such situations.

Such incidents can be reported on Datix under the category of “Abusive Customer”. Any reports received are reviewed promptly and an assessment made of the most suitable course of action which may range from providing advice and reassurance to those affected to formal permanent exclusion from the pharmacy.

Please remember the need to provide person centred care in accordance with the GPhC standards at all times.

NHS Contract

Pharmacy is a valuable provider of healthcare services in the UK and community pharmacies are independent contractors to the NHS. Each pharmacy enters into a “contract” with the NHS. The contractual framework varies for England, Scotland, Wales and Northern Ireland.

There is country specific guidance on our Hub

<http://hubintranet.corp.well.co.uk/pharmacy/nhs/>

It is your responsibility to ensure you are aware and able to provide all the required elements of the contract and you are expected to be able to provide all standard services and to gain accreditation for any specialised services before working in our branches.

Details of which services are required can be obtained from your PRT co-ordinator. When bookings are being made priority will be given to those pharmacists whose skills best match the pharmacy requirements.

Please familiarise yourself with the services and contract requirements for the pharmacies you work in and ensure you understand the Service Level Agreement before providing a service so that you meet the standards specified. SLAs and PGDs for the enhanced services provided by the pharmacy can be found in the SUPER folder.

Further information available her:

<http://web-apps.corp.well.co.uk/NHSServices>

End of Day Processes

Sign out of the Responsible Pharmacist Register.

Seal the CD Key in an envelope, sign across the seal and ensure it is secured in the safe.

Ensure the Cash is removed from the till and secured in the safe.

Cashing up is a weekly process. Information on this and till procedures available here:

<http://hubintranet.corp.well.co.uk/back-office/incontrol-2/>

Stay with the colleagues as the premises are alarmed and locked.

PMR

Our PMR system Analyst facilitates our off-site dispensing process known as Central Fulfilment (CF).

CF Process:

Day 1

- Prescription received, and data entered on Analyst.
- Any items for CF are annotated H (Hub).
- Labels are printed for any items to be dispensed in the pharmacy.
- RP completes clinical and accuracy checks for hub items and submits.

Day 2

- Local items dispensed, checked and scanned to shelf.
- Prescriptions dispensed at Hub are dispatched to pharmacy

Day 3

- Receipt of CF packages which are matched to prescriptions and scanned to shelf.

Further guidance available:

<http://hubintranet.corp.well.co.uk/pharmacy/pmr/analyst-processes/>

Ordering Stock

Our PMR system places all orders with our Healthcare Service Centre (HSC). If the HSC does not stock a required item, the order will transfer automatically to Alliance our second line supplier.

Direct to Pharmacy (DTP) lines will be transferred automatically to the relevant wholesaler.

Items supplied by the HSC will be delivered the following day by the Alliance delivery driver. Items supplied by Alliance or AAH will be delivered twice daily.

Dressing and appliances should be ordered from Wardles, our Dispensing Appliance Contractor. The pharmacy team will have full details of the ordering procedure. If there are no drugs on the prescription the items can be ordered through the FP10 scheme whereby the prescription is sent to Wardles once we have received the items. If there are drugs on the prescription along with dressings or appliances the items should still be ordered from Wardles, but they will be classed as trade purchases and the prescription is processed in the normal way through the NHSBSA. Some hosiery lines are available at Wardles, others will need to be ordered via the PMR – check with Wardles first.

IPS are our preferred specials supplier though other companies may be used for specific lines. You should refer to the specials' guidance available on the hub

Oxygen (Northern Ireland) is ordered from BOC.

Brand Equalisation deals. Occasionally our NHS Commercial Team will negotiate that we dispense a branded product on prescriptions written generically. You should follow the information provided by the PMR system.

Further guidance is available on our Hub.

<http://hubintranet.corp.well.co.uk/pharmacy/stock-management/nhs-stock-information/>

Business Continuity

Our Business Continuity Plan aims to ensure we can continue to provide continuity of care for patients and ongoing support for pharmacy teams should there be a disruption to normal service. A copy is held in the SUPER folder.

The plan is a reference tool that helps prioritise activities and resource and ensure patient and colleague safety is maintained until service provision returns to normal.

Whilst we will make every effort to continue to trade, occasionally this may not be possible. Any decision to close will be made between the Pharmacy Superintendent's Team and the Regional Operations Manager or Area Operations Manager utilising information supplied by you and the pharmacy team.

If there is a requirement to close you will need to make arrangements for:

- Vulnerable patients including substance misuse clients
- Urgent medication requests
- Urgent deliveries of medication

<http://hubintranet.corp.well.co.uk/back-office/business-continuity/>

Health and Safety

Our policy is to ensure, as far as is reasonably practicable, the health, safety and welfare of everyone working in our pharmacies and to conduct our business in such a manner as to make sure that we do not expose customers, and the public generally, to health and safety risks. As a contractor in our business you have responsibilities for your own safety and that of others.

The Health and Safety at Work Act imposes duties on everyone working in our pharmacies and that we are required by law to carry out and we require your co-operation with these. Always work in such a way that you do not cause injury to yourself, pharmacy colleagues, customers and other persons in the vicinity of our premises.

Our health and safety policy and manual are available on the hub

<http://hubintranet.corp.well.co.uk/back-office/health-safety/>

If there is an accident in the pharmacy, the first priority is to get help for any injured persons and prevent further injuries. Accidents must be recorded on the online report form found on the hub

<http://hubintranet.corp.well.co.uk/back-office/health-safety/>

Efficient reporting will enable us to investigate so that we can take corrective action to prevent a repeat and a potentially more serious outcome.

To protect everyone there should always be two people to open and close the pharmacy. You may be asked to support this process. Be vigilant and if you have any concerns, phone the police.

If any person demands goods or money under the threat of a weapon or physical violence, you must hand over the articles or cash demanded if you are able to. Do not attempt to apprehend the offender or raise the alarm until you are satisfied that there is no longer a risk to yourself or others.

Whilst every effort is made to ensure the security and safety of the pharmacy, you are reminded that we cannot accept responsibility for loss of, or damage to, personal belongings. If lockers are provided, they should be used, and all personal belongings secured whilst on duty.

The Security Rules and our Security Search Policy apply to all colleagues, locums and visitors, and are designed to safeguard our people and protect the business.

Risk assessments have been completed for most pharmacy activities. These consider the hazards and the likelihood of anyone being injured. Importantly they also list the safe methods or control measures to use to reduce the risk of injury from that activity. You should comply and co-operate with all of these safe methods as notified to you to prevent injury to yourself, colleagues and the public. These risk assessments are available to view in section 21 of the Health & Safety compliance folder in the pharmacy.

If you believe there is a hazardous situation that requires action or a risk assessment, then report it to the Risk and Insurance Team via Well Support Team.

Useful Contacts

Well Support 0333 010 0111

Hours: 8.30am-6.00pm

Option 1 - IT Service Desk

Option 2 – Healthcare Service Centre (Wholesale)

Option 3 – Central Fulfilment

Option 4 – Retail Support Team and Pharmacy Superintendent's Team

Option 5 – Wardles

Option 6 - HR

Option 7 – Home Delivery Service

Option 8 – Professional Resourcing Team

Out of Hours

Professional Resourcing Team

The out of hours emergency contact number should ONLY be used if your store is unable to trade due to a Pharmacist issue/emergency.

0333 010 0111 (Option 8, followed by Option 1)

Monday – Friday: 07:00 – 23:00

Saturday and Sunday: 08:00 – 23:00

Facilities and Maintenance

For urgent out of hours issues (including alarm issues), please call 01942 403 096.

For urgent professional queries, or if you have a significant incident:

Urgent Professional Queries

Outside the above office hours, including Saturday, Sundays and Bank Holidays – please call your RDM, who will contact the Professional Team for you.

Useful references:

www.well.co.uk/staff (accessible outside of the pharmacy)

<http://hubintranet.corp.well.co.uk/> (accessible via the pharmacy intranet)

<http://hubintranet.corp.well.co.uk/coronavirus-wuhan/>

<http://hubintranet.corp.well.co.uk/contact-us/emergency-out-of-hours-contacts/>