

COVID-19 EMERGENCY DELIVERY

We are expecting the detail about the new nationally commissioned delivery service very soon, which may have an impact on local arrangements – BUT in the meantime, we have been working with Cumbria County Council (CCC) to set up a delivery service which can be accessed if your own delivery service has failed due to staff shortages, or if your pharmacy does not normally run one.

- This option must be reserved for cases of genuine need, where a vulnerable – usually shielded individual does not have family members or friends who can collect medication on their behalf. Pickup by family or friends, with ID, is always the preferred first choice option to relieve pressure on the service. Although the service is aimed at supporting shielded individuals, you may request help to deliver prescriptions to other vulnerable people on a case by case basis.
- Controlled Drug deliveries should be carried out by pharmacy employed drivers IF AVAILABLE. The service has been revised (07/04/20) to allow delivery of Controlled Drugs by CCC drivers EXCEPT methadone, buprenorphine and any other drugs prescribed for Unity or Shared Care service users. Unity have undertaken to deliver to any of their service users who are housebound and have nobody to safely collect on their behalf. Please see the 'Pharmacy Procedure Section'.
- The County Council drivers are also busy delivering food etc to vulnerable people, so their time needs to be used effectively. The number of drivers available may change, but initially pharmacies can expect one delivery per pharmacy area per day. If possible, less urgent deliveries should be consolidated into geographical areas so that the driver can use time most effectively.
- The drivers WILL NOT collect prescription charges. If a charge is due, the pharmacy will have to make arrangements for its collection with the patient themselves or their representative; for example, by taking a credit card over the phone, or by allowing short term credit with the cash to follow later. Please show some flexibility; it may not always be possible to see proof of exemption.

The drivers are working from local hubs throughout the County. In the event that you wish to call upon their help, please note that the request should be submitted in the afternoon the day before delivery is needed. The people to call for each hub are listed below:

South Lakeland:	Jack Tebbs (jack.tebbs@cumbria.gov.uk) - 07789 924660
Carlisle:	Ann Barlow TBC (ann.barlow@cumbria.gov.uk) - 07388 961 075
West:	Kev Francis (kevin.francis@cumbria.gov.uk) - 07388 961 075 and Harry Collins (Harry.Collins@cumbria.gov.uk) - 0746 4526322
Eden:	Andrew Johnson (andrew.johnson@cumbria.gov.uk) - 07827 663153
Barrow:	Tony Murphy (tony.murphy@cumbria.gov.uk) - 0778 5667065

Please try to use this option considerately, but do remember that it is available! The drivers will all be County Council employees, with CCC Identity Cards, possibly with a CCC jacket and driving badged vehicles.

As always, please contact Community Pharmacy Cumbria with any queries.

Standard Operating Procedure: Covid-19

DELIVERING PRESCRIPTIONS

Purpose:

To ensure patients requesting delivery of their prescriptions receive the correct medication promptly and safely, when pharmacy capacity to deliver has been exceeded.

Scope:

This SOP applies to any patient who requests their prescriptions to be delivered.

Pharmacy Procedure:

1. **Patient requests delivery.** In the Covid-19 pandemic, delivery should only be offered to patients who are in the 'shielded' patient category or otherwise vulnerable and where there are no alternatives to delivery available – no family members, friends or voluntary groups who could collect from the pharmacy on the patient's behalf.
2. **Pharmacy can deliver using its own driver** – follow usual pharmacy standard operating procedure
3. **Pharmacy is NOT ABLE TO DELIVER** – pharmacy does not have a delivery service or capacity is exceeded, then ensure all patient details including contact phone number are noted. Explain to the patient or their representative that delivery is available, but may take a day or two.
4. **CALL CCC TRANSPORT MANAGER TO REQUEST DELIVERY.**
Arrange a suitable time for a CCC driver to attend the pharmacy to collect deliveries. Delivery requests should be submitted the **afternoon before** delivery day
5. Ensure that the delivery driver is allowed easy **ACCESS** to the pharmacy. The driver will have a Cumbria County Council ID badge.
6. The patient's **name, address and phone no.** must be placed on the driver's delivery sheet. Any scripts containing **CDs** or with a counselling note attached should be highlighted on the delivery sheet. The patient must be advised on the counselling note that the pharmacist can be contacted if they are unsure of any of the advice given.
7. Before leaving the pharmacy, the driver should be briefed about the route, and any other information relevant to the delivery. Drivers should, if possible, be provided with a bypass number to allow a rapid answer should he/she need to contact the pharmacy during the delivery round. Ensure that they have hand sanitiser and a supply of disposable gloves for their own use.
8. Ensure that 3rd party drivers have completed a confidentiality agreement (retained at the Hub).
9. The driver must check that all prescription bags that are on the sheet are present before leaving the pharmacy.
10. Any special storage requirements for prescriptions must be catered for during travel e.g. cool box.

Hub Procedure

The Hub may receive delivery requests direct from patients. In this instance, calls will be screened, and if the patient satisfies the delivery criteria, the Hub will contact the nominated pharmacy with patient name, address, contact details and exemption category. If a script charge is due, the patient will be advised to contact the pharmacy direct to arrange payment. If the pharmacy can arrange delivery using its own workforce then the standard delivery SOP will be followed. If capacity is exceeded, Follow the procedure from Step 4 above, **PHARMACY PHONES CCC Transport Manager** to arrange delivery.

DRIVER PROCEDURE

Social distancing must be maintained at all times. Do NOT approach any person closer than 2m.

Upon arrival at pharmacy, driver must make themselves known to pharmacy staff member and provide id. Do not queue – but be aware that other pharmacy users may have been waiting for some time, so act with sensitivity.

- Medicines must only be delivered to the patient or carer at the address stated on the bag label.
- Before leaving the pharmacy, the delivery driver should be briefed about delivery route, and any information relevant to the delivery. A bypass number should be provided to allow a rapid answer should he/she need to contact the pharmacy during the delivery round. Drivers should ensure that they have hand sanitiser and a supply of disposable gloves for their own use.
- The driver must check that all prescription bags that are on the sheet are present before leaving the pharmacy.
- Use hand sanitiser and disposable gloves provided before and after delivery.
- Prescriptions for delivery should be transported in a locked boot
- The driver should approach the delivery address, place the prescription on the doorstep, knock, then step back a safe distance – minimum 2m. If there is no answer, the contact telephone number should be used. Receipt of the prescription should be confirmed on the delivery sheet – the driver should ascertain the name of the person receiving the prescription, their date of birth and relationship to the patient and add it to the delivery sheet. This is always required, but especially so if Controlled Drugs are being delivered.
- If the patient is not at home a note must be put through the door indicating that the pharmacy had tried to deliver his/her prescription, and to contact the pharmacy to determine an arrangement for collection. Repeat delivery attempts should not be attempted.
- Completed delivery sheets must be returned to the issuing pharmacy. This does not have to be the same day as delivery if inconvenient, and may be by post.
- Drivers should complete a Confidentiality Agreement before attending for pharmacy deliveries. This only needs to be completed once.

Responsibility:

The delivery of prescriptions is the responsibility of the designated delivery driver; if acting as a delivery agent for the pharmacy personal liability will be covered by the pharmacy's business liability insurance. Any driver using their own vehicle must ensure that their insurance company is aware of its use for prescription delivery purposes.

All dispensing staff and the pharmacist are responsible for ensuring that the correct prescriptions are separated for delivery

Signed:

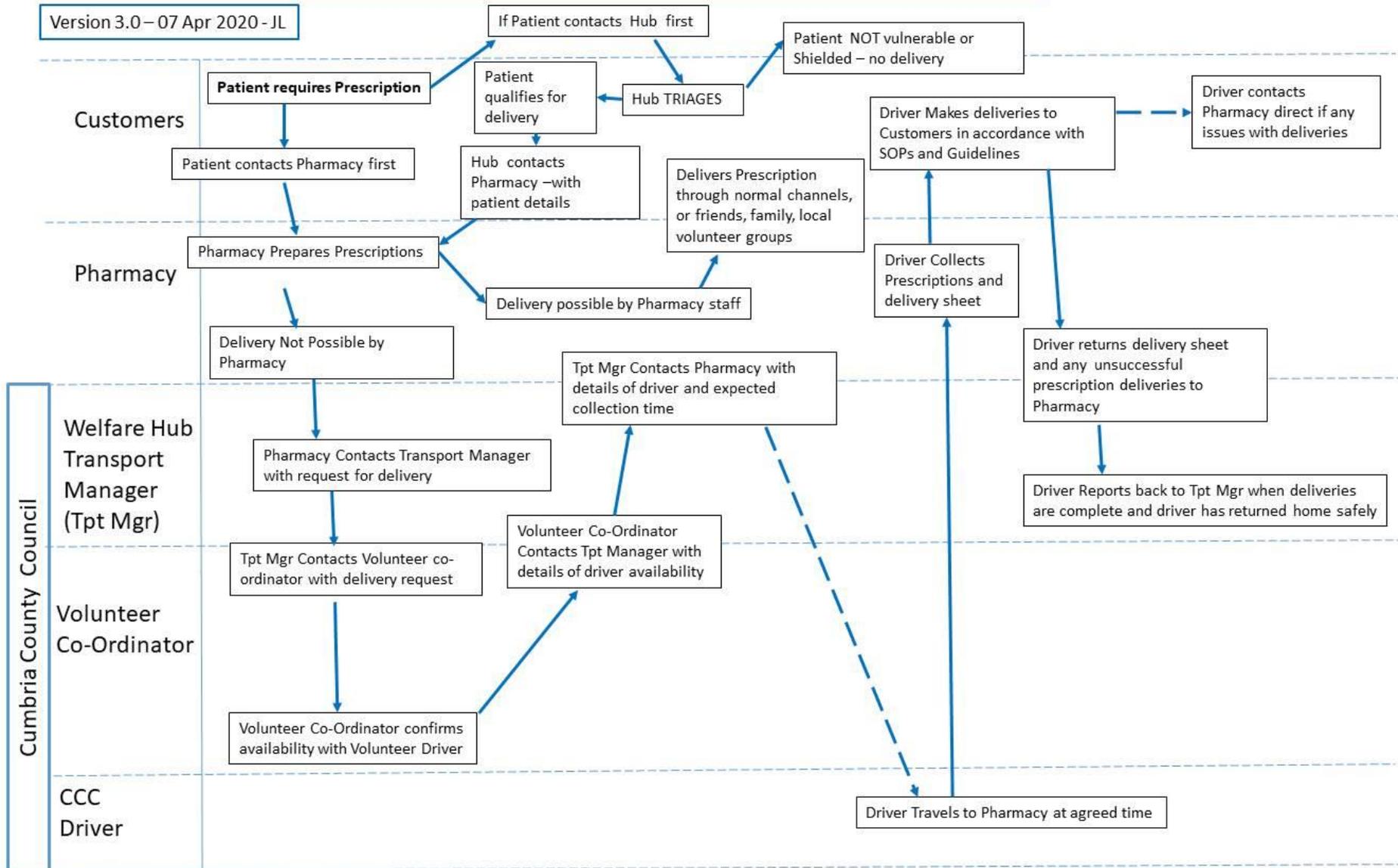
I have signed to say that I have read the procedures for delivering prescriptions, and understood its implications.

NAME	SIGNATURE	DATE

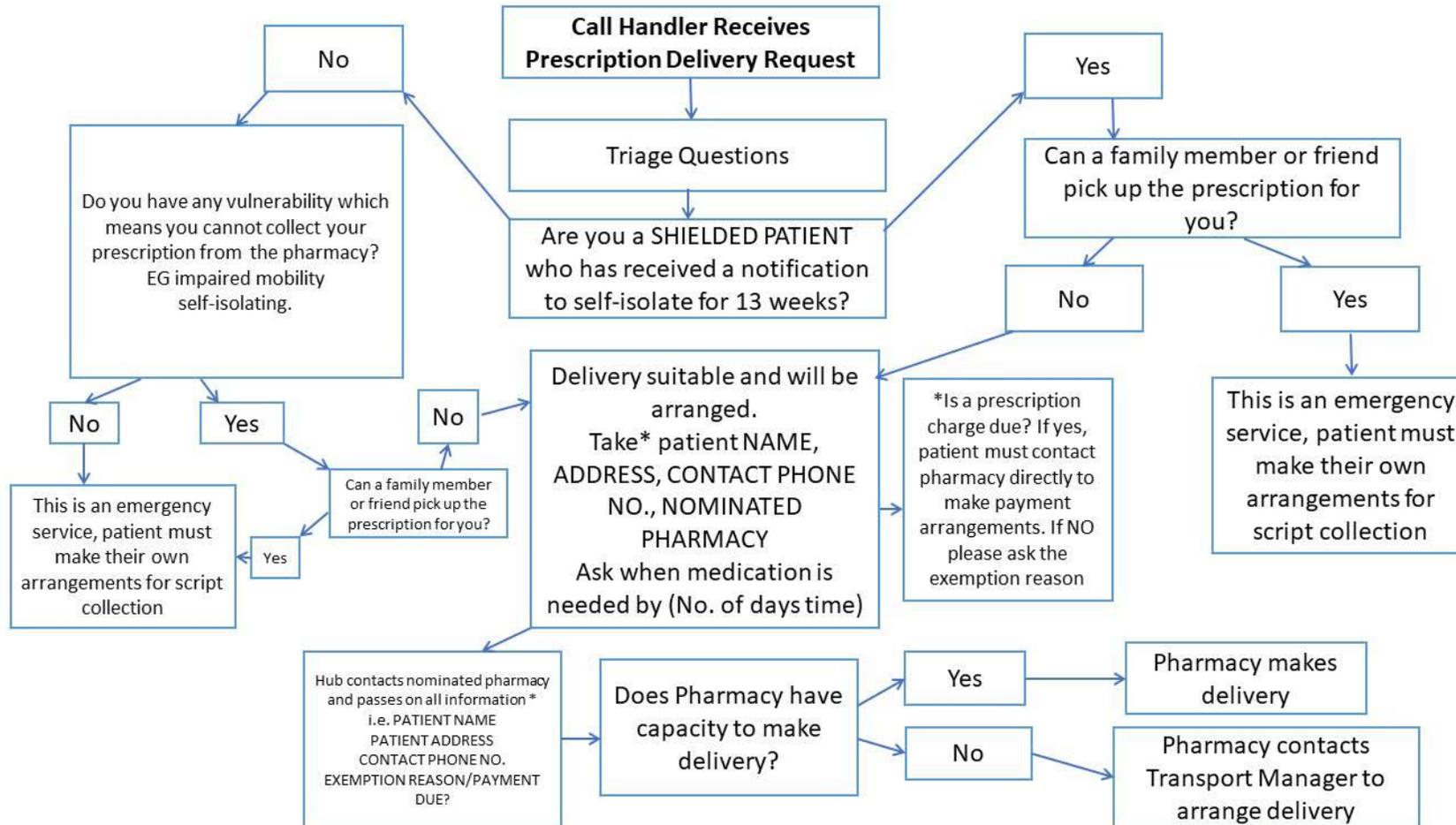
COVID19 Pharmacy Prescription Delivery Flow Chart – CCC Support –

For use when normal delivery methods, Friends, Family and Volunteer Groups are not available

Version 3.0 – 07 Apr 2020 - JL



Welfare Hub – Call Handler Protocol



DELIVERY SHEET

DATE:

PHARMACY:

REMEMBER – AVOID PERSONAL CONTACT CLOSER THAN 2M. USE CLEANSING GEL TO CLEAN HANDS BEFORE AND AFTER DELIVERY

PATIENT NAME ADDRESS / CONTACT NO. – can affix pharmacy label			NAME OF PERSON RECEIVING DELIVERY – WITH DATE OF BIRTH	
NAME & ADDRESS:				
CONTACT NO:	CD?	Note?	D.O.B.	RELATIONSHIP TO PATIENT:
NAME & ADDRESS:				
CONTACT NO:	CD?	Note?	D.O.B.	RELATIONSHIP TO PATIENT:
NAME & ADDRESS:				
CONTACT NO:	CD?	Note?	D.O.B.	RELATIONSHIP TO PATIENT:
NAME & ADDRESS:				
CONTACT NO:	CD?	Note?	D.O.B.	RELATIONSHIP TO PATIENT:
NAME & ADDRESS:				
CONTACT NO:	CD?	Note?	D.O.B.	RELATIONSHIP TO PATIENT:
NAME & ADDRESS:				
CONTACT NO:	CD?	Note?	D.O.B.	RELATIONSHIP TO PATIENT:

COVID -19 CONFIDENTIALITY AGREEMENT

BETWEEN: *Cumbria County Council/Community Pharmacy Cumbria*

AND

("the Volunteer")

You will have access to patient information which is confidential to the patient.

Both during your voluntary period of engagement and after its termination, you are prohibited from communicating or disclosing to any third party confidential information of any Pharmacy. For this purpose information shall include but not be limited to:

- Details of any Pharmacy's patients including (without limitation), names and addresses, medication prescribed and/or purchased, and other dealings with the company
- Any Pharmacy's proposed strategies and plans
- Any Pharmacy's current business strategies and plans including (without limitation) know-how and internal working practices
- All information as to the requirements of any Pharmacy's patients/customers
- All information relating to patient profiles, histories or similar information

You will not, at any time, whether during your voluntary period of engagement or at any time after its termination, make public or disclose to any third party, whether person or persons or body corporate, any information as to any Pharmacy's business which you know, or ought reasonably to know, is confidential.

You will also not, at any time, take copy or copies of any information, list or record, whether held manually, on computer, mobile device or otherwise, pertaining to any Pharmacy, including lists of patients or suppliers.

Should you have access to any information, list or record as referred to above, at the termination of your period of voluntary engagement, howsoever caused; you shall return that information, list or record to the Pharmacy concerned without making copy or copies.

You are responsible for protecting all confidential information for the duration of this voluntary period of engagement and following termination, and shall:

1. Use your best endeavours to prevent the access to, use of or communication of any confidential information by any person, company or organisation (except in the proper course of your duties, as required by law or as authorised by the Pharmacy); and
2. Inform the Pharmacy immediately on becoming aware, or suspecting, that any such person, company or organisation knows or has used any confidential information.

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Signed by the Volunteer

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Print Name