



Health and Social  
Care Board

To: All Community Pharmacy Contractors

**Directorate of Integrated Care  
Western Office**

Gransha Park House  
15 Gransha Park  
Clooney Road  
LONDONDERRY  
BT47 6FN

Tel : 028 9536 3375

Fax : 028 9536 1166

Web Site : [www.hscboard.hscni.net](http://www.hscboard.hscni.net)

29<sup>th</sup> April 2020

Dear Colleague

**UPDATE IN RELATION TO PHARMACY SERVICE DURING FIRST SURGE  
OF COVID**

It is now a month into the service response to the COVID pressures.

I write to reiterate my thanks and appreciation to all community pharmacy staff for their support over the past month; to confirm additional funding to be paid at the end of April; and to set out plans in the short term in relation to services.

**1. DISPENSING SERVICES**

Given the increased demand for prescription medicines there has been additional workload with regards to procuring and dispensing medicines. There has also been an increase in the range of medicines in short supply and price volatility. With respect to the processing of prescriptions, I am pleased to advise that March prescriptions have been processed by BSO in order to make a full payment. This should hopefully alleviate concerns around an estimated payment. We are totally cognisant of the supply chain issues that are being experienced and are applying price concessions in-month in line with the normal processes.

We have been aware of the issues of both prescription demand and price fluctuations and to that end, a special advance has already been paid in two parts - £10m with the March payment and a further £25m via BACs at the start of April. We will continue to monitor the market and discuss with CPNI both the circumstances and the arrangements to withdraw the advance.

**2. ADDITIONAL SERVICE FUNDING**

It was important that the commissioned additional services be considered rapidly in light of COVID and the potential risks for face to face consultation between patients and pharmacy staff. To that end, most additional services have been fully stood down. The HSCB has

advised that there are certain additional services that it is necessary for some provision:

- Risk stratified clients for supervision of substitution therapy;
- Needle and syringe exchange; and,
- Targeted provision of adherence support.

We are committed to develop clinical and patient facing services via community pharmacy but we appreciate that to do so in this time when there are strict social distancing measures, and the restrictive arrangements within premises to deliver these patient services, will be incredibly challenging. We will be working with CPNI to explore what additional services can be delivered, given the context and in line with the immediate need as we deal with the response to COVID.

Three recent examples are:

- The need for business continuity arrangements to be established which include securing access to HSC e-mail and daily Sit Rep reporting. Funding of £2m has been secured and provided for the establishment of these arrangements and for these arrangements during this initial phase up to end of June.
- HSCB commissioned the Emergency Supply Service to run from April to June in the first instance as a response to the COVID pandemic. £1m has been committed as part of the package of funding to be paid in April. We will be reviewing the provision of the service, the activity and discussing with CPNI the potential for and extension of the service beyond end of June and further funding arrangements.
- HSCB commissioned partial opening on the Easter Monday and Tuesday Bank holidays and £1m was secured to support this enhanced opening. We are exploring other arrangements for access to medicines in the out-of-hours setting and anticipate further enhancements in due course.

While consideration is being given to what additional services we may need over the course of the coming year, HSCB has committed to the payment of additional service fees in line with previous year's payment. Therefore each month, pharmacies will receive their proportion of circa £300k additional service fees which is estimated would have been paid (e.g. medicines management, minor ailments etc.). This will be reconfigured into different payment lines when we are clearer as to the additional service priorities for 20/21.

### **3. FUNDING PRESSURES**

It is recognised that substantial adjustments were required at pace within community pharmacies in response to the COVID pandemic. To that end, pharmacies invested in premises, both structurally and putting in place enhanced cleaning and PPE. Furthermore, it was recognised that there was likely to be additional staff costs. Funding of £2.5m and

£1m was invested at the start of April linked to premises changes and staff cost pressures respectively. A further £4m is being invested at the end of April linked to ongoing staff pressures for the period of April to June 2020.

The Minister previously advised that although funding was being made available for the period April-June, payment would be made as early as possible to assist cash flow. He has also confirmed that the position would be reviewed in May and bids would be considered for any additional pressures identified in responding to COVID. CPNI has already highlighted further cost pressures and HSCB has committed to developing further bids linked to evidence associated with these cost pressures. We are currently working with CPNI in relation to what evidence might be available and appropriate to support further bids.

#### 4. ASSURANCE

It was recognised early that there was a need to sustain pharmacy services and one of the measures has been the availability of cash-flow and investment to deal with staff and service pressures to pharmacies on the pharmaceutical list. HSCB will be required to account for all of the investments that have been made and a verification process will need to be established. We recognise that the focus has been maintaining safe and effective services and therefore will work closely with CPNI to draw up an assurance framework which meets the need for accountability with respect to public funding but which does not unnecessarily encumber practitioners and distract them from the important work that must be prioritised. HSCB will communicate in due course in relation to an assurance framework around the use of funding.

#### CONCLUSION

In summary the following payments have been arranged:

Service Area	March 31 <sup>st</sup> Payment Run	April 3 <sup>rd</sup> BACs Payment	April 30 <sup>th</sup> Payment Run	May 31 <sup>st</sup> Payment Run
Special Advance*	£10m			
Special Advance*		£25m		
Premises Adjustments		£2.5m		
Staff (March – June)		£1m	£4m	
Business Continuity (March – June)		£0.5m	£1.5m	
Emergency Supply (April – June)			£1m	
Easter Rota				£1m

\* Special Advance – arrangements for reclaim to be considered during 20/21

I would like to restate my gratitude to community pharmacy teams for their commitment over the past month in particular and will continue to work with you to shore up and develop our services for the coming year.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Joe Brogan', with a stylized, cursive script.

**Joe Brogan**  
**Assistant Director of Integrated Care**  
**Head of Pharmacy and Medicines Management**