10 April 2020

An electronic copy of this letter can be found here: www.england.nhs.uk/coronavirus/primary-care/

Dear colleagues

Thank you and your teams for your continued hard work to address the COVID-19 pandemic.

This letter announces that, while patients meeting the COVID-19 shielding criteria need to stay at home and away from community pharmacy and dispensing doctor premises, they must be offered a home delivery option for their prescription items unless a family member, friend, relative or volunteer can collect the medicine for them.

The National Health Service (Amendments Relating to the Provision of Primary Care Services During a pandemic etc.) Regulations 2020 came into effect on 27 March 2020 and provide for such an announcement.

Medicines delivery services will be commissioned from both pharmacies and dispensing doctors across England from 9 April 2020 until 1 July 2020 in the first instance but may be extended as necessary as part of the COVID-19 response.

Home delivery of medicines and appliances service during the COVID-19 outbreak

For community pharmacies

Change to essential services

The above regulations introduce an essential service that places a responsibility on pharmacy contractors to make sure that a home delivery option is available to people at high risk of complications from COVID-19 who are advised to isolate at home for 12 weeks and meet the ‘shielding’ criteria. This option has to be offered if their prescription items cannot be collected and delivered by a family member, friend, carer or volunteer. These patients are flagged as being in this group on the web version of their Summary Care Record.

A monthly payment will be made for the period this service is commissioned recognising the administration required in assessing eligibility of patients, supporting the alternative of using volunteers to deliver prescription items and associated processing and advice. As Distance Selling Pharmacies are already contractually required to deliver medicines they have dispensed, they will not be eligible to receive the payment associated with provision of this essential service. This and further details are outlined in the Essential Service Guidance (Appendix 1).

NHS England and NHS Improvement
**Introduction of a new advanced service**

An advanced service is also being commissioned to pay a ‘per delivery fee’ where the patient cannot make their own arrangements for the prescription items to be collected and no suitable volunteer can be found, and the pharmacy therefore themselves delivers medicines to the patient. If a pharmacy does not wish to take part in the advanced service, as part of their essential services they may work with another pharmacy to deliver medicines on their behalf, or they must find another pharmacy who will dispense and deliver the medicine. As Distance Selling Pharmacies are already contractually required to deliver medicines they have dispensed, they will not be eligible to provide this Advanced Service. See the service specifications for the advanced service in Appendix 2 and Appendix 3.

**For dispensing doctors**

**Change to essential services**

As for pharmacy contractors, the above regulations places a responsibility on dispensing doctors to make sure that medicines are delivered to people at high risk of complications from COVID-19 who are advised to isolate at home for 12 weeks and meet the ‘shielding’ criteria, if these medicines cannot be collected and delivered by a family member, friend, carer or volunteer.

The funding of these services will be in addition to the current contractual agreement for both pharmacies and dispensing doctors.

**NHS Volunteers**


We encourage all parts of the NHS to use these volunteers to maximum effect.

Yours sincerely

Dr Keith Ridge CBE  
Chief Pharmaceutical Officer for England

Jill Loader  
Deputy Director of Pharmacy Commissioning  
NHS England and NHS Improvement
Appendix 1: Essential service: community pharmacy home delivery service during the COVID-19 outbreak – guidance

Background

1. A Community Pharmacy Home Delivery Service During the COVID-19 outbreak is being commissioned from community pharmacy (and a similar service from dispensing doctors) to ensure delivery of medicines to eligible patients who should not present in the pharmacy.

2. The service is made up of two elements; an Essential Service and an Advanced Service. This guidance covers the Essential Service only and there is a separate service specification for the Advanced Service.

3. The service was announced by NHS England and NHS Improvement on 8 April 2020, in agreement with the Secretary of State, and is to be utilised as a consequence of COVID-19 reaching pandemic proportions in line with the National Health Service (Amendments Relating to the Provision of Primary Care Services During a Pandemic etc.) Regulations 2020.

4. The Essential Service does not apply to Distance Selling Pharmacies as their Terms of Service already requires them to provide deliveries to their patients.

5. The service is restricted to those patients who are covered by the shielding policy¹, as set out in Annex A, and will apply across the whole of England. Pharmacy contractors should be aware that GPs have the ability to remove or add patients to the list of those deemed most vulnerable as their clinical condition changes. Appropriate checks should therefore be made to ensure that the patient remains eligible for this service. The pharmacist can check this on the Summary Care Record.

6. Patients who meet the eligible patient criteria, should be encouraged in the first instance to arrange for their medicines to be collected from the pharmacy and then delivered by family, friends or a carer.

7. Where a patient does not identify themselves, but the nature of the prescription leads the pharmacy team to consider that the patient may fulfil the ‘shielding’ criteria, they should enquire of the patient if they have been asked to self-isolate for 12 weeks, via a letter from the NHS or their general practice. Where they have, they should enquire if the patient has anyone who they can ask to collect their medicines for them as in paragraph 6.

8. Where there is no family, friend, neighbour or carer, the pharmacy team must advise the patient of the potential for a local volunteer to act on their behalf who can collect the patient’s prescription and deliver it to them. This must include

local provision of volunteers\(^2\) and NHS Volunteer Responders\(^3\), where either are available. 'NHS Volunteer Responders information for health professionals' is available in Annex B.

9. Where a volunteer is to be used, the pharmacist must be satisfied that the volunteer is an appropriate person to deliver medicines to the patient. Volunteers should not deliver Schedule 2 and 3 Controlled Drugs and pharmacists should use their professional judgement to determine whether it is appropriate for a volunteer to deliver Schedule 4 or 5 Controlled Drugs.

10. Where there is no volunteer available who can deliver the medicine(s) to the patient in the timescale that they are required, the pharmacy contractor must ensure that eligible patients get their prescription delivered. This can be done in one of the following ways:
   a. deliver the medicine themselves as part of the Advanced Service
   b. arrange for another pharmacy to deliver it on their behalf as part of the Advanced Service
   c. arrange for the prescription to be dispensed and delivered by another pharmacy under the terms of the Advanced Service.

11. This service does not replace any existing delivery services that a pharmacy contractor provides under normal circumstances.

Payment

12. Payments will be made as set out below:
   a. Pharmacy contractors who dispense 101 prescription items or more in any month from 1 April 2020 will receive the following payment for ensuring prescription items are delivered to eligible patients during the COVID-19 pandemic as set out in table 1 below:

<table>
<thead>
<tr>
<th>Number of items per month from 1 April 2020</th>
<th>Monthly Payment from 1 April 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 – 100</td>
<td>£0</td>
</tr>
<tr>
<td>101 – 2,500</td>
<td>£34</td>
</tr>
<tr>
<td>2,501 – 5,000</td>
<td>£396</td>
</tr>
<tr>
<td>5,001 – 12,500</td>
<td>£500</td>
</tr>
<tr>
<td>12,501 – 19,167</td>
<td>£542</td>
</tr>
<tr>
<td>19,168+</td>
<td>£563</td>
</tr>
</tbody>
</table>

13. The payments relating to this service will be kept under continuous review. Revised arrangements will be considered should data on utilisation show that

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\(^2\) For example, any support that local authorities have separately put into place.


Appendix B outlines the process for accessing NHS Volunteer Responders.
volunteers, and the NHS Volunteer Responder service in particular, are not being deployed wherever possible.

Appendix 1: Annex A: Eligible Patients for COVID-19 outbreak

Patients should have been notified via a letter, sent out by NHS England and NHS Improvement or their general practice or hospital consultant, and will be asked to contact their pharmacy if they need to have their prescriptions delivered.

The delivery service must only be provided to the following groups of patients:

- Solid organ transplant recipients
- People with specific cancers:
  - People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
  - People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
  - People having immunotherapy or other continuing antibody treatments for cancer
  - People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.
  - People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.

- People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD
- People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)
- People on immunosuppression therapies sufficient to significantly increase risk of infection
- People who are pregnant with significant congenital heart disease
- People who have been added to the list by their GP because of the very high risk (in line with the risk of those above) to them associated with COVID-19
Appendix 1: Annex B: Volunteer Support for Delivery of Medicines


- **Campaign seeking NHS volunteer responders**
- **Volunteers sign up to Good Sam App (registered/ID) and receive some training and advice re delivering medicines [link if published].**
- **Good Sam App alerts nearest volunteer and others nearby until someone accepts. They are then given further details of the job.**
- **Pharmacy dispenses medicines, bags and labels to include owning slips (no medicines liable to diversion).**
- **Request volunteer to support deliveries via Good Sam webpage [www.goodsamapp.org/NHSSend], app or telephone call centre (0808 196 3383) e.g. medicines deliveries for 2 hours. Can schedule future requests.**
- **Volunteer arrives at pharmacy at requested time. Pharmacy checks Good Sam ID and another ID. Gives volunteer medicines and addresses and advises of any refrigerated items.**
- **Any queries volunteer phones pharmacy. Any undelivered medicines are returned to the pharmacy.**
- **Volunteers follow process for medicines delivery. Patient receives medicines.**
Appendix 2: Service specification – Community Pharmacy Home Delivery Service During the COVID-19 outbreak

1. Introduction and background information

1.1. A Home Delivery Service During the COVID-19 outbreak is being commissioned from community pharmacy (and separately dispensing doctors) to deliver prescribed items to specified, eligible patients who, due to their medical condition, should not present in the pharmacy and where no other person is able to collect the item from the pharmacy and deliver it to the patient.

2. Service description

2.1. The Community Pharmacy Home Delivery Service During the COVID-19 outbreak (‘the service’) is an Advanced service commissioned under the NHS Community Pharmacy Contractual Framework.

2.2. In line with the shielding policy⁴, patient eligibility is defined by those patients who are deemed to be clinically extremely vulnerable should they become infected with the COVID-19 virus. The full list of eligible patient groups is set out at Annex A.

2.3. Pharmacy contractors should be aware that GPs have the ability to remove or add patients to the list of those deemed clinically extremely vulnerable as their clinical condition changes. Appropriate checks should therefore be made to ensure that the patient remains eligible for this service.

3. Aims and intended service outcomes

3.1. The aim of this service is to ensure that eligible patients during the COVID-19 outbreak who do not have a family member, friend or carer who can collect their prescription on their behalf and where a volunteer is not able to collect and deliver the medicines can have their medicines delivered in a manner which keeps both them and pharmacy staff safe from COVID-19.

4. Prerequisites for service provision

4.1. Prior to provision of the service, the pharmacy contractor must:
   a. be satisfactorily complying with their obligations under Schedule 4 of the Pharmaceutical Services Regulations (Terms of Service of NHS pharmacists) in respect of the provision of Essential services and an acceptable system of clinical governance;
   b. be satisfied that all pharmacy staff involved in the provision of the service are competent to do so; and

c. have established that the medicine cannot be delivered by a friend, relative, carer or volunteer.

4.2. As Distance Selling Pharmacies are already contractually obliged to deliver dispensed items to their patients, this Advanced service will not be open to them to provide.

4.3. The pharmacy contractor must have a standard operating procedure (SOP) in place for this service, which includes procedures to ensure health and safety and infection control procedures are maintained in line with any relevant guidelines. All staff involved in the provision of this service should ensure they are familiar with and adhere to the SOP.

5. Service duration

5.1. The service will begin on 8 April 2020.

5.2. The service will remain in place until the COVID-19 outbreak has subsided. In the first instance it will run until 1 July 2020.

6. Service availability

6.1. The pharmacy contractor should seek to ensure that the service is available throughout the pharmacy’s contracted opening hours.

6.2. The pharmacy contractor must ensure the service is accessible, appropriate and sensitive to the needs of all service users. No eligible patient should be excluded or experience particular difficulty in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion or belief, gender reassignment, marriage or civil partnership status, pregnancy or maternity, or age.

6.3. The pharmacy contractor can refuse to provide the service to an eligible patient who threatens violence or commits or threatens to commit a criminal offence.

7. Service provision

7.1. A pharmacy contractor (contractor A) can provide this delivery service to eligible patients, where as part of Essential services:
   a. they have dispensed the prescription themselves; or
   b. where another pharmacy (the dispensing pharmacy) has dispensed the prescription and the dispensing pharmacy has asked contractor A to deliver the prescription.

7.2. If the pharmacy contractor delivers items which they have not dispensed themselves, they either need to check patient eligibility on the Summary Care Record or attain assurance that the patient is eligible, from the pharmacy that dispensed it.
7.3. The pharmacist should use their clinical judgement, based on the information presented to them, to take into account the clinical need of the patient and the urgency with which the prescription item(s) should be delivered.

7.4. Then the pharmacy contractor must either:
   a. deliver the medicine which the pharmacy has dispensed itself, or outsource it via a secure delivery method; or
   b. deliver the medicine which another pharmacy has dispensed or outsource it via a secure delivery method.

7.5. The delivery service must be provided in line with any Public Health England or professional guidance.

8. Records and data Sharing

8.1. The pharmacy contractor must maintain appropriate records to ensure effective ongoing service provision and to support post-payment verification. This should include, as a minimum, details of the eligible patients to whom a delivery was made under this service and the date of the delivery.

9. Governance

9.1. The pharmacy contractor is required to report any patient safety incidents in line with the Clinical Governance Approved Particulars for pharmacies.

10. Payment

10.1. Claims for payments for this service should be made monthly, via the MYS portal.

10.2. The NHSBSA will make appropriate payments claimed by the pharmacy contractor as described above, in the same payment month as other payments for NHS Pharmaceutical Services and the payments will be separately itemised on the FP34 Schedule of Payments.

10.3. Payment will be £5 per delivery plus an allowance for VAT.

10.4. This fee is only payable when the pharmacy undertakes the delivery themselves or outsources it via a secure delivery method.

10.5. The fee is not payable if a patient, relative, carer or volunteer could have appropriately delivered the medicine.
Appendix 2: Annex A: Eligible patients for COVID-19 outbreak

Patients should have been notified via a letter, sent out by NHS England and NHS Improvement or their general practice or hospital consultant, and will be asked to contact their pharmacy if they need to have their prescriptions delivered.

The delivery service must only be provided to the following groups of patients:

- Solid organ transplant recipients
- People with specific cancers:
  - People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
  - People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
  - People having immunotherapy or other continuing antibody treatments for cancer
  - People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.
  - People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.
- People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD
- People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)
- People on immunosuppression therapies sufficient to significantly increase risk of infection
- People who are pregnant with significant congenital heart disease
- People who have been added to the list by their GP because of the very high risk (in line with the risk of those above) to them associated with COVID-19
Appendix 3: Service specification – Dispensing Doctors Home Delivery Service during the COVID–19 outbreak

Introduction and background information

1. A Home Delivery Service During the COVID–19 Outbreak is being commissioned from dispensing doctors (and separately, community pharmacy) to ensure delivery of prescribed medicines and appliances to eligible patients who should not present in the practice and where no other person is able to collect the item from the practice and deliver it to the patient.

2. For dispensing practices, the service is made up of two elements: an addition to dispensing doctors’ terms of service which must be provided by all dispensing practices and is set out in the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations; and this service specification which dispensing practices can sign up to if they choose.

3. The service is restricted to those patients who are covered by the shielding policy, as set out in Annex A, and will apply across the whole of England.

Terms of service

4. This section summarises mandatory requirements added to dispensing doctors’ terms of service via the National Health Service (Amendments Relating to the Provision of Primary Care Services During a Pandemic etc.) Regulations 2020.7

5. Patients who meet the eligible patient criteria should be encouraged in the first instance to arrange for their medicines to be collected from the dispensing practice and then delivered by family, friends or a carer (“duly authorised person”).

6. Where there is no family, friend or carer, the dispensing practice must advise the patient of the potential for a local volunteer to act on their behalf who can collect the patient’s prescription and deliver it to them. This must include local provision of volunteers8 and NHS Volunteer Responders9, where either are available, ‘NHS Volunteer Responders information for health professionals’ is available in Appendix B.

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5 As amended by The National Health Service (Amendments Relating to the Provision of Primary Care Services During a Pandemic etc.) Regulations 2020
8 For example, any support that local authorities have separately put into place.
Appendix B outlines the process for accessing NHS Volunteer Responders.
7. Where a volunteer is to be used, the dispensing doctor must be satisfied that the volunteer is an appropriate person to deliver medicines to the patient. Volunteers should not deliver Schedule 2 and 3 Controlled Drugs and dispensing doctors should use their professional judgement to determine whether it is appropriate for a volunteer to deliver Schedule 4 or 5 Controlled Drugs.

8. Where there is no volunteer available who can deliver the medicine(s) to the patient in the timescale that they are required, the dispensing doctor must ensure that eligible patients get their prescription delivered. This can be done in one of the following ways:
   a. deliver the medicine themselves as set out in paragraphs 11-33 or;
   b. arrange for another dispensing doctor or pharmacy contractor to deliver it on their behalf as set out in paragraphs 11-33
   c. arrange for the prescription to be dispensed and delivered by another dispensing doctor or pharmacy contractor as set out in paragraphs 11-33.

9. This service does not replace any existing delivery services that a dispensing doctor provides under normal circumstances.

10. The terms of service requirement is funded by a monthly payment to cover start up and administrative costs based on the number of dispensing patients.

11. The payments relating to this service will be kept under continuous review. Revised arrangements will be considered should data on utilisation show that volunteers, and the NHS Volunteer Responder service in particular, are not being deployed wherever possible.

Service description

12. The Dispensing Doctors Home Delivery Service During the COVID–19 outbreak (‘the service’) is commissioned by NHS England and NHS Improvement further to the National Health Service (Amendments Relating to the Provision of Primary Care Services During a Pandemic etc.) Regulations 2020.
13. In line with the shielding policy\textsuperscript{10} patient eligibility is defined by those patients who are deemed to be clinically extremely vulnerable should they become infected with the COVID-19 virus. These are the patients that are identified as being in the shielded group by a flag on their patient record. The full list of eligible patient groups is set out at Annex A.

14. GPs have the ability to remove or add patients to the list of those deemed clinically extremely vulnerable as their clinical condition changes. Appropriate checks should therefore be made to ensure that the patient remains eligible for this service.

**Aims and intended service outcomes**

15. The aim of this service is to ensure that eligible patients during the COVID–19 outbreak who do not have a family member, friend or carer who can collect their prescription on their behalf and where a volunteer is not able to collect and deliver the medicines can have their medicines delivered to them in a manner which keeps both them and dispensing practice staff safe from COVID–19.

**Prerequisites for service provision**

16. Prior to provision of the service, the dispensing doctor must:

i. be satisfactorily complying with their obligations under Schedule 6 of the Pharmaceutical Services Regulations (Terms of Service of dispensing doctors) and an acceptable system of clinical governance and;

ii. be satisfied that all practice staff involved in the provision of the service are competent to do so.

iii. Have established that the medicine cannot be delivered by a friend, relative, carer or volunteer.

17. The dispensing practice must have a standard operating procedure (SOP) in place for this service, which includes procedures to ensure health and safety and infection control procedures are maintained in line with any relevant guidelines. All staff involved in the provision of this service should ensure they are familiar with and adhere to the SOP.

**Service duration**

18. The service will start on 8 April 2020.

19. The service will remain in place until the COVID-19 outbreak has subsided and NHS England and NHS Improvement has announced, with the agreement of the

Secretary of State, that dispensing practices are no longer required to provide home delivery services. In the first instance it will run until 1st July 2020.

Service availability

20. The dispensing doctor should seek to ensure that the service is available throughout core hours, which will be extended by announcement to include Good Friday, Easter Monday and, possibly, further May bank holidays.

21. The practice website or online presence, and NHS website profile, should be edited to indicate that a Home Delivery Service During a Pandemic is provided to those at-risk patients required to isolate for 12 weeks. If the practice temporarily or permanently ceases to provide the service, it should, as soon as possible, update its website or online presence, and NHS website profile to reflect that the service is no longer available.

22. The dispensing doctor must ensure the service is accessible, appropriate and sensitive to the needs of all service users. No eligible patient should be excluded or experience particular difficulty in accessing and effectively using this service due to their race, gender, disability, sexual orientation, religion or belief, gender reassignment, marriage or civil partnership status, pregnancy or maternity, or age.

23. The dispensing doctor can refuse to provide the service to an eligible patient who has committed an act of violence against the contractor, a partner, a member of the practice staff or anyone engaged by the contractor including service volunteers, or has behaved in such a way that any of those persons has feared for their safety.

Service provision

24. A dispensing doctor can provide this delivery service to eligible patients, where:

- they have dispensed the prescription themselves; or
- where another dispensing doctor or pharmacy (the dispensing pharmacy) has dispensed the prescription and the dispensing doctor or pharmacy has asked the dispensing doctor to deliver the prescription.

25. If the dispensing doctor delivers items which they have not dispensed themselves they either need to check patient eligibility on the Summary Care Record or attain assurance that the patient is eligible from the dispensing doctor or pharmacy who dispensed it.

26. The dispensing doctor should use their clinical judgement, based on the information presented to them, to take into account the clinical need of the patient and the urgency with which the prescription item(s) should be delivered.
27. Then the dispensing doctor must either:

- deliver the medicine which the dispensing practice has dispensed itself, or outsource it via a secure delivery method; or
- deliver the medicine which another dispensing practice or pharmacy has dispensed or outsource it via a secure delivery method

28. The delivery service must be provided in line with any Public Health England or professional guidance.

Records and data sharing

29. The dispensing doctor must maintain appropriate records to ensure effective ongoing service provision and to support post-payment verification, including taking all reasonable steps to ensure that the medical records of patients are kept up-to-date. Records should include, as a minimum, details of the eligible patients to whom a delivery was made under this service and the date of the delivery.

Governance

30. The dispensing doctor is required to establish and maintain an effective system of clinical governance and must report any patient safety incidents either following their established system or, if they participate in the Dispensary Services Quality Scheme (DSQS), in line with the Clinical Governance Approved Particulars for pharmacies.

Payment

31. There is an item of service fee of £5 & VAT per delivery under the service.

32. This item of service fee is only payable when the dispensing practice undertakes the delivery itself or outsources it via a secure delivery method.

33. The fee is not payable if a patient, relative, carer or volunteer could have appropriately delivered the medicine.

Appendix 3: Annex A: Eligible patients during COVID–19 outbreak

Patients should have been notified via a letter, sent out by NHS England and NHS Improvement or their general practice or hospital consultant, and will be asked to contact their dispensing practice or pharmacy if they need to have their prescriptions delivered.

The delivery service must only be provided to the following groups of patients:

- Solid organ transplant recipients
- People with specific cancers
  - People with cancer who are undergoing active chemotherapy or radical radiotherapy for lung cancer
- People with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
- People having immunotherapy or other continuing antibody treatments for cancer
- People having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors.
- People who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs.

- People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD
- People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell)
- People on immunosuppression therapies sufficient to significantly increase risk of infection
- People who are pregnant with significant congenital heart disease
- People who have been added to the list by their GP because of the very high risk (in line with the risk of those above) to them associated with COVID-19.