This support document is provided as an **example only** and should be reviewed and updated by your pharmacy prior to use. There is an expectation that each pharmacy will have a Risk Management Plan (1.2.1) as per QCPP Accreditation). Access to the pharmacy and provision of pharmacy services after hours should be included in any risk mitigation strategies.

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| **Action for (Insert Pharmacy Name Here)** |
| --------------------------------------------------------------------------------------------------   1. On-call pharmacist receives request from Health Professional for urgent A/H supply of CML medicine (preferably a business mobile rather than a personal mobile number) provided via Find a Pharmacy website or SA Palliative Care Network. |
| 1. On-call pharmacist establishes: -  * Identity of caller and patient * how the service was initiated * Existence of a valid/legal prescription (via a token/e-prescription or image of prescription) to be confirmed prior to attending the pharmacy * Need for emergency supply. |
| 1. If emergency/after hours supply deemed appropriate,    * 1. advise the caller:-    * They will need to bring the prescription or e-prescription with them.    * They will need to bring ID/preferably photo ID for collection of the medication    * The On-call pharmacist will meet them outside the pharmacy (specify a designated spot and ideally how the pharmacist will be identified). Or confirm delivery arrangements.    * They will need to sign for receipt of the medications and provide some basic contact details. (payment arrangements may also be discussed)      1. <insert any security arrangements your pharmacy has in place here> |
| 1. Open the pharmacy using the pharmacy’s ‘Opening the Pharmacy’ procedure (4.3.3) |
| 1. Dispense medication from Core Medicines List, ensure to check ScriptCheckSA and make entry in Drugs of Dependence register (e-book or paper based) for S8s where appropriate. |
| 1. Time permitting, record the after-hours call out in the pharmacy’s spreadsheet noting date, time, medication, quantity, details of patient and person collecting medications and potentially how the call was initiated ie palliative care nurse, GP, palliative care network, or Carer. Include any other ‘comments. NB Ensure call out recorded by end of next shift at the pharmacy or whenever practicable. |
| 1. Close the pharmacy using the pharmacy’s ‘Closing the Pharmacy’ procedure (4.3.3) |
| 1. Meet person collecting medications at the designated location and:-    1. Obtain copy of original prescription (or as applicable)    2. Handover medications along with an SA Palliative Care Pharmacy Network leaflet / postcard with QR code\* to provide feedback on our survey should they wish to at a later date    3. Obtain signature/contact details on printed receipt (template provided by GuildSA) |
| 1. Record any incidences in the incident log (1.3.5.). Advise PDL if appropriate.   10.Report any improvements and changes made to the service/program in the pharmacy’s quality improvement log. (5.2.7) |
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