



Llywodraeth Cymru  
Welsh Government



## SERIOUS SHORTAGE PROTOCOLS FREQUENTLY ASKED QUESTIONS

### **What is a Serious Shortage Protocol?**

**A:** A Serious Shortage Protocol (SSP) is an additional tool to support the management of medicines shortages that affect the UK. It allows for substitution, by pharmacists, of a different medicine to that ordered by the prescriber, in the circumstances and subject to the conditions specified within the SSP, without going back to the prescriber.

### **Q: How will an SSP help to mitigate a supply problem?**

**A:** If the SSP allows it, community pharmacists can supply either an alternative quantity, strength, pharmaceutical form or medicine. Each SSP would clearly set out what action can be taken by the pharmacist, under what circumstances, for which patients and during which period as part of managing the shortage for the affected medicine(s). Implementing the SSP will support patients in being able to access their medicines in a timely manner, whilst also easing pressure on both pharmacy and GP contractors as part of responding effectively to a medicine shortage.

### **Q: What happens if a patient requires a specific medicine and is unable to receive alternative medicine under the SSP?**

**A:** An SSP will not be suitable for all medicines and patients. For example, SSPs for therapeutic or generic equivalents would not be suitable for anti-epileptic treatments or for treatment requiring biosimilar products, where the medicines need to be prescribed by brand for clinical reasons. Additionally, patients with complex health needs may not be considered suitable for supply under an SSP. In these cases, patients would always be referred to the prescriber for a decision about their treatment, before any therapeutic or generic alternative is supplied.

### **Q: Will it be mandatory to dispense drugs against an SSP if there is one in place?**

**A:** No. Under the NHS community pharmacy Terms of Service, dispensing contractors will need to consider whether it is appropriate to supply the drug to a patient in accordance with the SSP. If the patient refuses to accept the alternative, does not fulfil all the criteria set out in the SSP or, based on the pharmacist's professional judgement there are reasons why supply under the SSP is not appropriate, the pharmacist should refer the patient back to the prescriber to discuss

alternative treatment. The decision taken not to dispense against the SSP should be recorded, for example on the pharmacy's patient medication record (PMR).

**Q: Will SSPs have a time limit?**

**A:** Any SSP would be limited in time and would clearly set out the period for which it has effect. The [NHS Business Services Authority \(BSA\) website](#) will have a list of the most up to date SSPs available. This information will also be available in the [Medicines Shortage Log](#) on the NHS Wales intranet.

**Q: What do I do with a prescription for an item where an SSP is in place, once I have dispensed in accordance with the relevant protocol?**

**A:** It is important to note that once an SSP has been used to supply a medicine to the patient, the relevant prescription is no longer valid for further dispensing. It should be endorsed with the relevant details for supply under an SSP for reimbursement and remuneration purposes (please refer to the operational guidance for more information), before this is sent to the NHS Wales Shared Services Partnership. Claims for payment will need to be sent by the 5th of the following month subsequent to supplying under the SSP, as is typically required for prescriptions. Where an SSP is not deemed appropriate for an individual patient, the patient should be directed back to their prescriber to discuss alternative treatment.

**Q: What payment will pharmacy contractors receive for dispensing products against an SSP?**

**A:** Supply in accordance with an SSP will attract the usual reimbursement and remuneration as if the item had been dispensed in line with a prescription with the exception that items supplied in line with an SSP will attract an additional fee as per Part IIIA of the Drug Tariff and the reimbursement price will account for VAT payment.

**Q: What professional indemnity does a Pharmacist have when supplying under an SSP?**

**A:** Supply under an SSP is no different from any other supply where the dispensing pharmacist makes the decision to treat patients rather than a prescriber, such as under a Patient Group Direction. The supply is the professional responsibility of the pharmacist under whose supervision it takes place. The SSP offers a gateway to lawful supply under the Human Medicines Regulations 2012 and reassurance that action is being taken in accordance with a respectable body of professional and clinical opinion during a serious shortage. When supplying in accordance with an SSP, pharmacists should confirm allergy status with the patient. This should then be documented, for example on the pharmacy's patient medication record (PMR) system. Pharmacists would be liable for any errors they made, e.g. if the patient had a known allergy to the alternative medicine under the SSP, but the pharmacist failed to check the patient's allergies at the point of supply.

**Q: Do SSPs apply to dispensing doctors' practices?**

**A:** Where the prescribing and supply functions sit within a dispensing practice, there is scope for the dispensing doctor to review the prescription and amend accordingly, rather than to supply under an SSP.

**Q: Do SSPs apply to appliance contractors?**

**A:** An SSP will allow an NHS appliance contractor to supply a different product, or a different quantity of the product ordered to that ordered on the prescription form, in the circumstances and subject to the conditions set out in the SSP.

**Q: Where can I look for further information?**

**A:** An NHS Wales Serious Shortage Protocol Operational Guide is available on the Medicines Shortages Log webpage, providing further information about the use of SSPs in Wales.

<http://howis.wales.nhs.uk/sites3/page.cfm?orgid=428&pid=77202>

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