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Pharmacy Brief

March 2020 - Issue No 93

CRS Pharmacy Conference

Unfortunately, we have had to postpone our annual pharmacy conference, which was scheduled to take place on 26th March. We hope to hold it on 22nd September 2020. Save the date emails will be sent out nearer the time.

Coronavirus Q&A

As a firm, we have robust remote working procedures in place (for example, all our lawyers have agile devices and can access all of the firm's systems remotely). We are therefore well-placed to help all our clients through these challenging times.

We appreciate that pharmacists are experiencing unprecedented levels of demand at the moment from patients worried about the coronavirus pandemic: from the purchasing of OTC items to providing general advice to early dispensing of repeat medication. We have also received a large number of enquiries over the last week or two from pharmacists who are worried about the potential impact of the outbreak on their business. In this issue, we thought it might be useful to share with you the most common queries that we have been receiving. We also have a dedicated page on our website which deals with a whole host of issues ranging from employment law to real estate to tax — https://www.charlesrussellspeechlys.com/en/news-and-insights/blogs/coronavirus-covid19-insights-and-information/.

I cannot open my pharmacy because of staff shortages caused by the virus. What should I do?

Pharmacy owners must not undertake certain activities if they do not have a responsible pharmacist signed in and present on the premises (for example, the sale of P or POM medicines), so ordinarily a pharmacy which has an absent pharmacist must not provide these services. However, the GPhC has announced that pharmacies can hand out medicines which have already been dispensed and bagged up (by or under the supervision of a pharmacist) even where the RP is absent at the time of the handover to the patient due to the virus.

Pharmacy owners must also ensure that there are sufficient staff who are suitably qualified to provide services to patients safely and effectively.

If a pharmacy is unable to open, or can open but is not able to supply prescribed medicines, for example, because there is no pharmacist, the pharmacy owner should notify NHS England as soon as possible of the suspension of services. In normal circumstances, staffing problems would not be accepted by NHS England as a reason beyond the pharmacist's control to justify a suspension, but these are extraordinary times, and I anticipate that NHS England would have more sympathy than normal with the pharmacy owner. Pharmacies will need to re-open as soon as possible once any staffing issue has been resolved, and should signpost patients to nearby pharmacies in the meantime.

NHS England has recently relaxed the rules on opening hours to give the pharmacy team undisturbed time in the pharmacy to carry out dispensing tasks.



Articles

- Pharmacies targeted by phone scammers claiming to be from NHS (Chemist and Druggist)
- <u>'Pharmacies must reassess</u> whether to sell CBD products' (Chemist and Druggist)
- LAW: Planning issues tips and traps for pharmacists (Pharmacy Business)
- <u>Legal view: Pharmacists</u>
 <u>beware these CPCS pitfalls</u>
 (Chemist and Druggist)

The new rules permit the pharmacy to be closed to the public for a couple of hours a day during their normal opening times, as long as they remain open during specified times.

I have been asked by patients to sell them a private Covid-19 testing kit. I know that these are available on the market – can I sell them?

Pharmacists may be coming under pressure at the moment from patients who want certain medicines or products supplied to them. Pharmacists must remember that any supply must be lawful and must also be appropriate, so the usual high standards of care provided by pharmacists must be maintained.

Whilst private testing may be available, pharmacists would need to be satisfied that the kits are approved and of suitable quality to ensure a reliable result. If the product is not sufficiently accurate, there is a risk of false positives or false negatives which may give rise to liability issues. There may also be a wider public health issue if testing is not centrally controlled and recorded. There has been some negative publicity involving clinics selling testing kits at what are perceived to be inflated prices.

Is there any flexibility around supplying OTC medicines, for example in terms of split packs?

Medicines legislation has not changed so, strictly speaking, the usual rules apply. However, the GPhC has indicated that it will take a pragmatic view of tasks such as splitting packs of paracetamol for OTC, which would normally not be permitted, where this is done in the best interests of patients.

Will the outbreak affect GPhC fitness to practise cases?

GPhC staff are working remotely, so should be able to progress investigations. The Investigating Committee (which screens out less serious cases) is still functioning, albeit remotely. Some hearings are still taking place (such as urgent interim order hearings and review hearings), but most final hearings are being adjourned for at least two months. It is likely that these measures will mean that fitness to practise cases will take even longer than usual to conclude.

I am in the process of buying/selling a pharmacy. Will the pandemic affect the process?

It is relatively early days, but signs are that deals are still progressing normally.

- Document sharing portals are in use, which avoids handling large amounts of paperwork or relying on the postal service.
- Electronic signing protocols are in place for signing certain of the transaction legal documents.
- Our team are all agile working so there should be no interruption to the usual standards and speeds of service (we are dealing with 3 completions in the coming few days and have not had any difficulty).





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- Company law allows director and shareholder meetings to take place from multiple locations and via phone (and company constitution may also allow for other virtual meeting forums such as skype).
- Banks remain supportive (but allow a few extra days for fund transfers to be processed by lending banks).
- It is possible that NHS England will take longer to process change of ownership applications if there are staffing issues at PCSE, so this might have to be factored into completion dates.

As an employer, what steps should I be taking in respect of staff?

- On 20 March 2020 the Government announced unprecedented measures to support businesses with paying their employees' wages by way of the Coronavirus Job Retention Scheme (the "Scheme"). The Scheme offers temporary contributions to the wages of employees whom businesses cannot afford to pay due to the COVID-19 pandemic, to avoid redundancies. Further information is available on our website.
- Staff and patients should be advised that if they (or someone in their household) are displaying any symptoms they must not come into the pharmacy and signs should be displayed to this effect.
- If employees are required to self-isolate and do not have any symptoms themselves, they would only be entitled to Statutory Sick Pay during such time, although employers should still consider paying full pay where possible.
- All staff and patients should be required to use hand sanitisers before entering the pharmacy and physical contact should be kept to a minimum. All staff should be encouraged to wash hands regularly.
- If staff have particular concerns about coming into work then pharmacy
 owners should listen carefully and constantly review whether any further
 steps can be taken to protect staff. Consideration should also be given
 to more flexible working hours, avoiding staff having to travel on public
 transport in busy commuter times where possible, or extra parking being
 made available to staff.
- If staff refuse to come to work then consider any alternative arrangements, such as taking holiday or unpaid leave (although a business does not have to agree to this).
- Unless the government implements any emergency measures regarding redeployment, any changes to roles would require staff to consent (which may be express or implied). Any unilateral change to a role could otherwise amount to a repudiatory breach of contract, potentially giving staff grounds to resign with immediate effect and bring a claim.

Contact

Noel Wardle
Partner
+44 (0)20 7203 5395
noel.wardle@crsblaw.com

charlesrussellspeechlys.com