

# Medicines Procurement in Scotland



## National Procurement of Medicines and Associated Products and Services: A Guide for Pharmaceutical Companies

Version 2: May 2026

### Introduction

The aim of this guide is to provide an overview of how medicines and associated products and services are procured by NHS Scotland and to sign-post further sources of information and support. If you have any feedback on how this guide can be improved, please let [us](#) know.

For support with a medicines pricing or supply query or to highlight an opportunity for NHS Scotland, please contact the National Procurement Medicines Team. Our contact details can be found at the end of this guide.

We work closely with the other procurement agencies within the UK to ensure that the NHS obtains competitive prices for medicines and that the UK remains a commercially attractive marketplace for pharmaceutical companies. A guide to procurement structures elsewhere in the UK can be found on the [Specialist Pharmacy Service](#) website.

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# Introduction to NHS Scotland

Scotland has a population of 5.5 million people. Certain public policy issues have been devolved from the UK Parliament to the Scottish Parliament. Whilst health is generally a devolved issue, some policy issues relevant to medicines remain reserved to the UK Parliament including the regulation of medicines and the regulation of medicine pricing. Responsibility for public procurement policy has been devolved to the Scottish Parliament.

NHS Scotland is made up of 14 regional health boards. Each health board has overall responsibility for the health of its population. Health boards directly provide hospital services and are responsible for the commissioning of primary care services including community pharmacies. Health boards are funded by and accountable to the Scottish Government.

Five special health boards provide specialist and national services to the regional health boards:

- The **State Hospital** provides secure mental health services.
- The **NHS National Waiting Times Centre**, also known as the Golden Jubilee National Hospital is home to the Scottish Advanced Heart Failure Service, the Scottish Pulmonary Vascular Unit and the Scottish Adult Congenital Cardiac Service. It also provides a range of planned procedures to help regional boards reduce patient waiting times.
- **NHS 24** provides health advice and information.
- **Public Health Scotland (PHS)** is Scotland's lead national agency for improving and protecting health and wellbeing. PHS leads on national reporting of [medicines usage data](#).
- The **Scottish Ambulance Service**

There are also two departmental public bodies which support boards, Healthcare Improvement Scotland and Public Services Delivery Scotland.

**Healthcare Improvement Scotland (HIS)** supports the delivery of high-quality, evidence-based care and scrutinises services to provide public assurance about the quality and safety of healthcare. HIS hosts a number of advisory bodies including:

- The **Scottish Medicines Consortium (SMC)** who issue advice to NHS Scotland on the clinical and cost-effectiveness of new medicines.
- The **Scottish Health Technologies Group (SHTG)** who advise NHS Scotland on health technologies.
- The **Scottish Intercollegiate Guidelines Network (SIGN)** work with health and social care professionals and patients to develop guidelines.

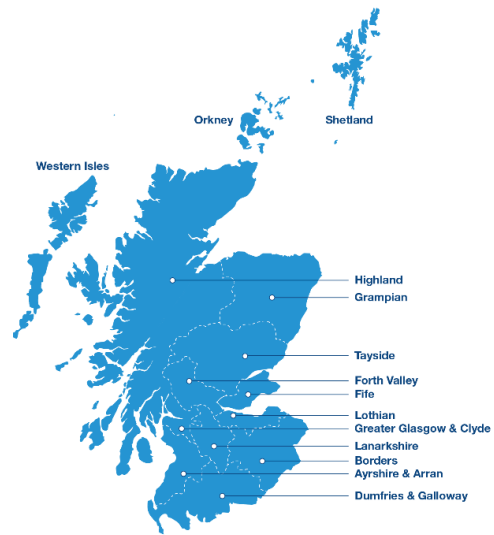


Figure 1: 14 Regional Health Boards

- The **National Cancer Medicines Advisory Group (NCMAG)** provide advice to NHSScotland on the use of cancer medicines where a medicine is off-patent or the proposed use is off-label.
- The **Area Drug and Therapeutics Committee Collaborative** facilitate collaborative working between health board Area Drug and Therapeutics Committees (ADTCs).
- The **Scottish Antimicrobial Prescribing Group (SAPG)** help NHS Scotland monitor and make the best use of antibiotics.

On 1st April 2026, NHS National Services Scotland and NHS Education for Scotland came together to form **Public Services Delivery Scotland (PSD Scotland)**. The name of the legal entity is the Common Services Agency. PSD Scotland functions that are relevant to medicines include:

- **National Procurement** procure medicines for use in Scottish hospitals.
- The **National Services Directorate (NSD)** commission specialist health services and national networks and co-ordinate national screening programmes. NSD host financial risk share schemes for certain high-cost medicines, on behalf of health boards.
- **Practitioner Services** provide services to primary care contractors including prescription payment.
- **Counter Fraud Services** support the prevention, detection and investigation of healthcare fraud.
- The **Scottish National Blood Transfusion Service (SNBTS)** supply blood, tissues and cells to NHS Scotland. SNBTS host Advanced Therapeutics which is a developer and manufacturer of advanced therapy medicinal products (ATMPs).
- **Education:** PSD Scotland lead on developing and delivering education and training for NHS staff.

# Medicines Pricing at Market Access

## Health Technology Assessment

Scotland's health technology assessment (HTA) body is the Scottish Medicines Consortium (SMC). SMC is hosted by Healthcare Improvement Scotland. SMC advise health boards on the clinical and cost-effectiveness of new medicines.

SMC review new prescription only medicines that have received a marketing authorisation from the MHRA. SMC also review new indications of established medicines. SMC does not review generic, branded generic, hybrid or biosimilar medicines nor unlicensed medicines or off-label uses of licensed medicines. Information on making a submission to the SMC and more information on the SMC remit can be found on the [SMC website](#).

SMC advice is considered by health board formulary committees; where the SMC has accepted a new medicine, health boards are expected to make it (or an equivalent medicine) available within three months of publication of SMC advice, however, there are some circumstances in which this may take longer, for example where enablers need to be put in place to support implementation.

## Patient Access Schemes

Companies can submit Patient Access Schemes (PAS) to improve the cost effectiveness of a medicine. The Patient Access Scheme Assessment Group (PASAG) reviews proposed schemes and advises on whether they are acceptable for implementation. PASAG is hosted by PSD Scotland.

Simple discount schemes are preferred as complex schemes can introduce significant complexity and burden for the NHS and pharmaceutical companies, however where there is sufficient justification, complex scheme types including indication-based pricing and outcomes-based schemes, will be considered.

The 2024 Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG) allows the details of national commercial arrangements agreed with a purchasing authority in one UK country to be made available on a confidential basis to the purchasing authorities in any part of the UK. Whilst there are differences in HTA arrangements across the home countries, the expectation is that there will be equivalent pricing across the UK for equivalent access.

Guidance on the NHS Scotland Patient Access Scheme arrangements can be found on the [SMC website](#). For support with making a submission, contact the [PASAG Secretariat](#).

## Early Access to Medicines Scheme

The early access to medicines scheme (EAMS) aims to give patients with life threatening or seriously debilitating conditions access to medicines that do not yet have a marketing authorisation when there is a clear unmet medical need. This arrangement is overseen by the MHRA and guidance on applying for the Promising Innovative Medicine (PIM) designation and the scientific opinion required for EAMS eligibility can be found on the [MHRA website](#). The ADTC Collaborative works with pharmaceutical companies that have applied for EAMS to develop operational guidance for Scottish health boards. More information is available on the [Healthcare Improvement Scotland website](#). For support, contact the [ADTC Collaborative](#).

## Pre-HTA FOC Schemes

Some pharmaceutical companies choose to offer medicines free-of-charge whilst waiting for a health technology assessment. These pricing schemes are known as pre-health technology assessment free of charge pricing schemes (pre-HTA FOC).

There is a national approach in Scotland for the review, implementation and on-going management of pre-HTA FOC schemes which is co-ordinated by the PASAG Secretariat. Pre-HTA FOC schemes will only be considered where the indication within the scope of the proposed FOC scheme is for patients with life-threatening or seriously debilitating illnesses, where no alternative therapeutic option is available and where a specialist clinician is required to initiate and manage treatment.

This approach relates solely to medicines pricing arrangements. The existence of a free of charge scheme does not mean that the medicine is automatically available for use; standard health board medicines governance processes continue to apply.

Detailed guidance and the Pre-HTA FOC application pack can be found on the [Healthcare Improvement Scotland website](#). For support, contact the [PASAG Secretariat](#).

# Tendering

## Public Procurement in Scotland

Public procurement is a devolved matter so there are some differences in procurement arrangements across the home countries. Key Scottish legislation includes the [Procurement Reform \(Scotland\) Act 2014](#) and [the Public Contracts \(Scotland\) Regulations 2015](#).

The Scottish Government has developed the '[Procurement Journey](#)' as a best practice process flow for undertaking public procurement. The NHS Scotland medicines procurement process is typically in line with Route 3 of the Procurement Journey.



## Co-ordination

National Procurement (NP), a directorate within PSD Scotland, manages the procurement of medicines for use in Scottish hospitals on behalf of health boards. There are a small number of product areas where there are collaborative procurement arrangements with other home countries, for example collaborative procurement with NHS England on the sourcing of plasma products.

Typically, each framework agreement has a procurement professional managing the framework.

The procurement process is clinically led and commercially driven. Clinical Advisory Panels (CAPs) are formed by National Procurement for each major area of expenditure to help to ensure that products and services sourced meet the needs of those who use them and offer best value for money.

## Procurement Procedure

The procurement procedure typically used for medicines procurement in Scotland is the open procedure.

A Direct Award (using the Negotiated Procedure without Prior Publication) may be used where there is only one supplier due to exclusive rights or an absence of competition for technical reasons. This approach can offer a more efficient procurement process with reduced timescales. Where appropriate, a voluntary ex ante transparency (VEAT) notice will be published to provide advance market visibility of the procurement outcome.

## Contract Structure

The contract structure is determined based on the product context, for example a single supplier framework, a ranked multi-supplier framework or an unranked multi-supplier framework.

## Generic and Biosimilar Frameworks

The majority of generic and biosimilar medicines are tendered every two to three years as part of one of a number of therapy area specific frameworks:

- Analgesics, Anaesthetics, Musculoskeletal, and Joint Disease Medicines
- Antimicrobial and Genitourinary Medicines
- Cancer Medicines
- Cardiovascular and Respiratory Medicines
- ENT, Ophthalmology & Skin Medicines
- Gastrointestinal, Endocrine, Nutrition, and Blood Medicines
- HIV Medicines
- Psychiatry and Neurology Medicines

In some scenarios, generic and biosimilar medicines are tendered separately, for example through a transition framework following patent expiry, or where products have been subject to a contract termination or a previous tender has received no compliant bids, before being merged into the main therapy area framework.

# Tendering

## Where to find Opportunities?

Contract notices are published on the [Public Contracts Scotland \(PCS\)](#) and [Find a Tender](#) websites. Companies interested in bidding then access the Invitation to Tender (ITT) via the [Public Contracts Scotland Tender \(PCS-T\)](#) website.

For queries on future opportunities, contact the relevant procurement lead, where known, or alternatively: [nss.nppharmacy@nhs.scot](mailto:nss.nppharmacy@nhs.scot). When a tender is live, all communication should be via the PCS-T website.

Contract Award Notices confirming the outcome of the procurement process are published on the [Public Contracts Scotland \(PCS\)](#) national portal within 30 days of the conclusion of the contract award.

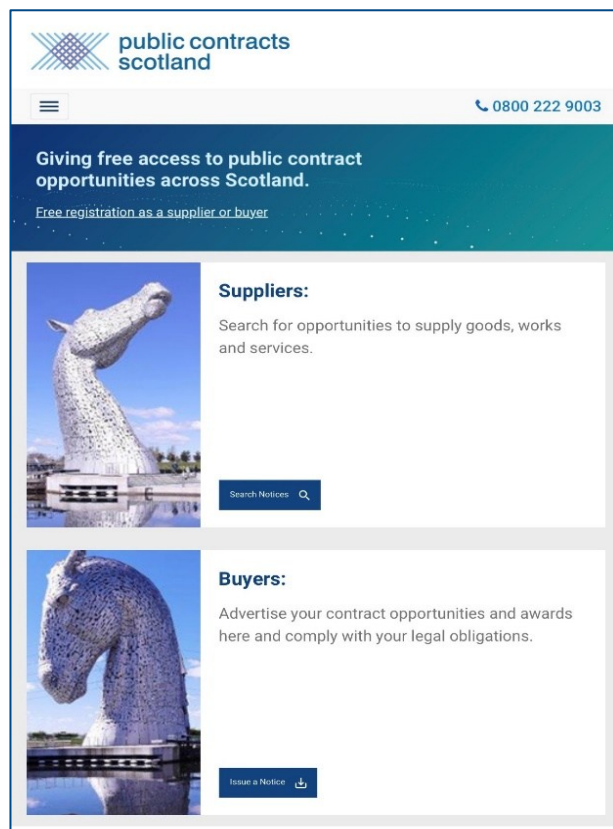
## Responding to Tenders

When responding to tender questions, it is important to address every element thoroughly. Begin by carefully reading the question and identifying key requirements, then ensure the response directly addresses all points. Use clear, concise language and follow any format or page limits strictly. Avoid generic responses: tailor your answer to the specific question, providing evidence of your capability and offering practical solutions to meet the requirement.

To score highly, show a deep understanding of the issue and explain how your proposed solution will meet the core objective. Provide measurable outcomes, contingency plans, and detailed explanations of your processes, backed by past examples or case studies where relevant. Always focus on reducing risk, ensuring service quality, and demonstrating how you will deliver on the requirements reliably. A well-structured and comprehensive response that is relevant to Scotland will maximise your chance of getting full marks in the tender evaluation.

## Quality Assurance Checks

A selection criteria routinely used in medicines procurement is that packaging and labelling must comply with [MHRA Best Practice Guidance on Labelling and Packaging](#). In some cases, artwork and/or physical samples may be requested during the procurement process.



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Key points to note on submitting samples:

- Please do not send samples/artwork at tender submission; if samples/artwork are required, this will be requested via the tender portal (PCS-T) during the tender evaluation.
- If required, clear instructions will be provided on where the sample should be sent, for example a specific location in a hospital. It is essential that these instructions are followed to ensure the sample reaches the quality assurance pharmacist that will be undertaking the check.
- Only send one sample of each requested product and not outers.
- Samples must be submitted before the deadline included in the request.
- Double check that the correct sample is being sent.

A standard provision in framework agreements is that the packaging, closure, labelling and pack size should not be changed without prior written agreement by National Procurement. Where there are changes during the lifetime of an Agreement, there may be a request for samples/artwork to be shared for review.

Examples of other information that may be requested depending on the product context are:

- Confirmation of whether the medicine contains specific excipients [identified](#) by the Neonatal and Paediatric Pharmacists Group as having potential safety risks.
- Stability data/displacement values.
- The product marketing authorisation number.

# Tendering

## Stockholding and Delivery Requirements

Typical stockholding and delivery requirements in frameworks for the supply of medicines include:

- From the commencement of the framework, a requirement on the supplier to hold stock to meet a minimum of twelve weeks of anticipated demand.
- Delivery costs must be included in the unit price. A key principle is geographical equity in medicines costs; there should not be additional delivery costs for hospitals in remote and rural areas.
- Deliveries must be within a maximum of five working days from date of order.
- When a scheduled delivery falls on a bank holiday, alternative arrangements may only be made with the agreement of health boards. Scottish bank holidays can differ from English bank holidays.

The standard list of NHS Scotland purchasing points can be found on page 7.

NHS Scotland has a preference for a choice of distributor of medicines; the number of distributors is commonly included as a tender evaluation question.

## Environmental Sustainability

NHS Scotland, working in collaboration with other UK health services, is aiming to reduce supply chain emissions to net-zero [by 2045](#). This is a rapidly evolving area and will become increasingly important in procurement exercises. Future approaches in Scotland will be subject to consultation.

## Contract Implementation

Following the award of a framework, a 'Buyer's Guide' is issued to all health boards informing them of the awarded supplier(s), prices and savings opportunities. In a number of therapy areas, treatment cost comparators are also shared with health boards as a tool to support decisions on preferred treatment options.

The Scottish Government has [stated](#) that where national contracts exist (including framework agreements) the overriding principle is that use of these contracts is mandatory. Only in exceptional circumstances shall products or services be ordered out-with such contracts.

For those medicines supplied via medicines homecare providers or outsourced compounding companies, there are typically provisions in the framework that require that those providers can access the medicine at the framework pricing along with provision for National Procurement to communicate pricing information in confidence to those specific providers as necessary to ensure the efficient supply of medicines.

## Contract Management

### Stock Availability Reporting

In addition to reporting shortages via the [DHSC Discontinuations and Shortages \(DaSH\) portal](#), for medicines on a framework agreement, suppliers are required to submit a fortnightly update on stock status/availability. A report template is included in the tender documentation. The report should be sent to: [nss.nhssmedicineshortages@nhs.scot](mailto:nss.nhssmedicineshortages@nhs.scot)

Single supplier frameworks typically include provision for 'Off-Contract Claims'. NHS Scotland follows the [process](#) agreed between the NHS in England, the ABPI and the BGMA on the management of off-contract claims.

To help ensure a co-ordinated approach to the management of medicines shortages within the UK market, both National Procurement and the Scottish Government are represented on the UK-level Medicines Shortage Response Group (MSRG) which provides oversight of medicine supply issues. Medicines Supply Notifications (MSNs) and National Patient Safety Alerts (NatPSAs) issued by the DHSC or NHS England are typically cascaded to health boards and where relevant to community pharmacies.

### Complaints Management

Health boards raise complaints about products or services on national frameworks via an online feedback portal. There are defined maximum timescales for responding to complaints set out in tender specifications.

### Service Disruption

When problems arise with commissioned services, we work with providers to agree an action plan and then monitor the delivery of performance improvements against that plan until service levels return to agreed standards. In some areas, such as medicines homecare there are established escalation routes for UK-level collaboration when significant issues arise.

### Supplier Meetings

National Procurement organises regular meetings with key suppliers to Scotland, both manufacturers and distributors. This is an opportunity to meet the team and for two-way discussion on both any issues arising and future opportunities. To request a meeting to discuss a product query or to share information on a current or future opportunity for NHS Scotland, contact [National Procurement](#).

# NHS Scotland Standard Purchasing Points

Health Board	Purchasing Points
NHS Ayrshire & Arran	<ul style="list-style-type: none"> <li>University Hospital Ayr (KA6 6DX)</li> <li>University Hospital Crosshouse (KA2 0BE)</li> </ul>
NHS Borders	<ul style="list-style-type: none"> <li>Borders General Hospital (TD6 9BS)</li> </ul>
NHS Dumfries & Galloway	<ul style="list-style-type: none"> <li>Dumfries &amp; Galloway Royal Infirmary (DG2 8RX)</li> </ul>
NHS Fife	<ul style="list-style-type: none"> <li>Victoria Hospital (KY2 5AH)</li> <li>Queen Margaret Hospital (KY12 0SU)</li> </ul>
NHS Forth Valley	<ul style="list-style-type: none"> <li>Forth Valley Royal Hospital (FK5 4WR)</li> </ul>
NHS GG&C	<ul style="list-style-type: none"> <li>Pharmacy Distribution Centre (PDC) (G21 2BQ)</li> <li>Royal Hospital for Sick Children (G51 4TF)</li> <li>Glasgow Royal Infirmary (G4 0SF)</li> </ul>
NHS Grampian	<ul style="list-style-type: none"> <li>Aberdeen Royal Infirmary (AB25 2ZN)</li> </ul>
NHS Highland	<ul style="list-style-type: none"> <li>Raigmore Hospital (IV2 3UJ)</li> <li>National Treatment Centre Highland (IV2 5NA)</li> </ul>
NHS Lanarkshire	<ul style="list-style-type: none"> <li>University Hospital Monklands (ML6 0JS)</li> <li>University Hospital Hairmyres (G75 8RG)</li> <li>University Hospital Wishaw (ML2 0DP)</li> </ul>
NHS Lothian	<ul style="list-style-type: none"> <li>East Lothian Community Hospital (EH41 3PF)</li> <li>St John's Hospital (EH54 6PP)</li> <li>Royal Infirmary of Edinburgh (EH16 4SA)</li> <li>Royal Edinburgh Hospital (EH10 5HF)</li> <li>Western General (EH4 2XU) – deliveries for this purchasing point go to Royal Edinburgh Hospital (EH10 5HF)</li> </ul>
NHS Orkney	<ul style="list-style-type: none"> <li>Balfour Hospital (KW15 1NZ)</li> </ul>
NHS Shetland	<ul style="list-style-type: none"> <li>Gilbert Bain Hospital (ZE1 0TB)</li> </ul>
NHS Tayside	<ul style="list-style-type: none"> <li>Ninewells Hospital (DD1 9SY)</li> <li>Perth Royal Infirmary Dispensary (PH1 1NX)</li> <li>Perth Royal Infirmary Satellite Pharmacy (PH1 1NX)</li> <li>The Carseview Centre (DD2 1NH)</li> <li>Strathcaro Hospital (DD9 7QA)</li> </ul>
NHS Western Isles	<ul style="list-style-type: none"> <li>Western Isles Hospital, Isle of Lewis. (HS1 2AF)</li> </ul>
National	<ul style="list-style-type: none"> <li>Golden Jubilee National Hospital (G81 4DY)</li> </ul>
National	<ul style="list-style-type: none"> <li>Scottish National Blood Transfusion Service (SNBTS) (EH14 4BE)</li> </ul>
National	<ul style="list-style-type: none"> <li>NHS Scotland Pharmaceutical 'Specials' Service (DD2 1FE)</li> </ul>
National	<ul style="list-style-type: none"> <li>Public Services Delivery Scotland, TPS Healthcare Ltd (G68 0LL)</li> </ul>

This is a standard list and subject to change. A list of purchasing points is included in tender documentation.

# NHS Commissioned Medicines Homecare

National Procurement co-ordinates the commissioning of medicines homecare on behalf of health boards.

There is an NHS commissioned framework agreement covering the following service levels:

- Low-tech homecare: Dispensing and delivery of oral formulations (excluding oral cancer medicines).
- Mid-tech homecare:
  - Dispensing and delivery of subcutaneous injections with provision for cold-chain handling and nurse device training; and
  - Dispensing and delivery of oral cancer medicines where a more reactive service can be required with the potential for prescription amendment following routine monitoring tests.

Tables 1, 2 and 3 detail current providers (in alphabetical order).

There is flexibility to add medicines to the homecare delivery arrangements where the service requirements are in line with the commissioning arrangements. As part of the implementation process for adding new products to NHS-commissioned homecare arrangements or switching patients from an established provider to a new provider, National Procurement will work with the relevant pharmaceutical company and the provider to ensure that supply and pricing arrangements are in place before any prescriptions are issued.

There is not currently an NHS commissioned framework covering high tech service levels, for example nurse administration of a medicine in the patient's home but this is planned as a future development. In recent years, there have been a small number of pilots of high-tech services managed by health boards.

Homecare services for parenteral nutrition, blood clotting factors and peritoneal dialysis are commissioned separately by National Procurement.

Homecare for medicines to treat lysosomal storage disorders is commissioned jointly with NHS England.

**Table 1: Dispensing and Delivery (Low Tech)**

Alcura UK
Fresenius Medical
HealthNet Homecare
Lloyds Clinical
Personal Homecare Pharmacy
Polar Speed Distribution
Sciensus

**Table 2: Dispensing and Delivery (Mid Tech)**

Alcura UK Ltd
Calea UK Ltd
Fresenius Medical
HealthNet Homecare
Lloyds Clinical
Personal Homecare Pharmacy
Polar Speed Distribution
Sciensus

**Table 3: Nurse Injection Device Training (Mid Tech)**

Alcura UK Ltd
Calea UK Ltd
HealthNet Homecare
Lloyds Clinical
Personal Homecare Pharmacy
Polar Speed Distribution
Sciensus

# Manufacturer Commissioned Medicines Homecare

If a homecare service is required, the strong preference of NHS Scotland is for homecare services to be commissioned by the NHS; this approach is optimal from a governance and sustainability perspective and helps ensure that services best meet the needs of NHS Scotland. Where this is not feasible, manufacturer-commissioned arrangements will be considered.

The NHS Scotland Medicines Homecare National Governance and Management Group (MHNGMG) leads the once for Scotland review of services proposed by manufacturers and service governance. The group meets monthly, and its membership includes the medicines homecare leads from the 14 regional health boards.

## Proposing a Homecare Service

Manufacturers wishing to propose a new manufacturer-commissioned service or to make an amendment to an existing homecare service are encouraged to engage with the MHNGMG and at UK level, the National Homecare Medicines Committee (NHMC) as early as possible. It can take up to six months to review and implement a new or amended homecare service; early engagement will help ensure services are in place from the point of need. The single point of contact for companies to propose a homecare service in Scotland is the National Procurement Medicines Homecare team: [nss.pchc@nhs.scot](mailto:nss.pchc@nhs.scot).

Service proposals should be submitted using the NHMC [Homecare Service Proposal](#) (HSP) Form. This form collects background information on the product, a summary of the proposed service level offered and the commissioning arrangements in place. Following review by the MHNGMG, feedback will be provided to the manufacturer.

As part of the review process, companies are asked to confirm that they have agreed to comply with the NHMC [Good Practice Principles](#) for manufacturer-commissioned homecare which include offering a choice of provider and a minimum of six months' notice of the withdrawal of funding from a provider. Agreement with these principles supports demonstrating a commitment to work collaboratively to provide a high-quality service and experience to NHS patients.

## Service Governance

National Procurement manages a national service level agreement (SLA) with each provider on behalf of Scottish health boards. There is a standard service specification with service-specific arrangements detailed in appendices to the SLA. Providers work with National Procurement to agree SLA wording to accurately reflect the service funded by the manufacturer.

Services that can be managed within the scope of the standard SLA include dispensing and delivery of the medicine, nurse device training and ongoing nurse administration of a subcutaneous injection or intravenous infusion.

There is significant complexity associated with having different commissioning arrangements for individual medicines and this complexity can lead to errors that impact on patient care. Arrangements should be as simple as possible including avoiding commissioning of services by indication.

## Information Governance

Where a service involves use of an app by patients or a health care professional, additional Information Governance (IG) checks may be required including undertaking a Data Protection Impact Assessment (DPIA) on the IT solution. These checks can take considerable time. If use of an app specific to a service is being proposed, National Procurement should be alerted as early as possible so that consideration can be given to whether a separate Information Governance assessment is required.

## Ongoing Service Management

National Procurement organise regular national service management meetings with individual providers and health boards covering all commissioned services; more frequent meetings are requested if significant service issues arise.

# Primary Care

## Scottish Drug Tariff

Scotland's community pharmacy contractual arrangements are different to the other home countries. The NHS (Pharmaceutical Services) (Scotland) Regulations 2009 regulate the terms on which pharmaceutical services are provided by primary care dispensing contractors in Scotland. The Scottish Drug Tariff sets out the reimbursement arrangements for medicines and appliances dispensed by primary care contractors against NHS prescriptions in Scotland. The Scottish Drug Tariff is available online on the [Public Health Scotland \(PHS\)](#) website. Changes to the Drug Tariff are determined by the Scottish Government following consultation with Community Pharmacy Scotland.

## Prescription Pricing

The PSD Scotland Practitioner Services Directorate is responsible for pricing NHS prescriptions dispensed by primary care contractors in Scotland to calculate the payments due to contractors. The prescription pricing system draws medicines information including list prices from the dictionary of medicines and devices (dm+d). To add a product to dm+d or to notify the dm+d team of changes including list price updates, contact the NHSBSA at [pippa@nhsbsa.nhs.uk](mailto:pippa@nhsbsa.nhs.uk) or alternatively use the EMC [Market Access](#) facility.

## Primary Care Rebate Schemes

Primary Care Rebate Schemes (PCRS) are arrangements offered by pharmaceutical companies which offer retrospective financial rebates to the NHS against medicines and appliances dispensed by NHS dispensing contractors (community pharmacies, dispensing doctors and dispensing appliance contractors) and the prison pharmacy contractor. The strong preference of the NHS is for medicines and appliances to be supplied in primary care using transparent pricing mechanisms, which do not create an additional administrative burden, however, where there is justification, primary care rebate agreements will be considered.

The NHS Scotland Primary Care Rebate Scheme Review Group (PCRSRG) assess PCRS proposals and advise on their acceptability for implementation by health boards in Scotland. If the PCRSRG supports a scheme, PSD Scotland will enter into the agreement on behalf of all Scottish health boards.

Detailed guidance on the process for the submission, assessment and implementation of PCRS in NHS Scotland, along with an application pack to propose a PCRS is available on the PSD Scotland website or on request from [nss.pchc@nhs.scot](mailto:nss.pchc@nhs.scot).

Patient Access Schemes include a provision for primary care rebates as standard.

## Financial reconciliation of primary care rebate agreements

There is a once for Scotland approach to financial reconciliation of schemes. On a quarterly basis, PSD Scotland will provide companies with a request for payment for the total value of the rebate due to NHS Scotland and a usage report drawn from reimbursement claims for supply against NHS prescriptions by NHS dispensing contractors. Companies make the payment to PSD Scotland and PSD Scotland transfers payments to each individual health board. Health boards receive a single consolidated report each quarter with product level details of rebates received. It is not possible to differentiate UK marketed packs from parallel imported packs in reimbursement data.

## Branded Generics

There have been examples of companies promoting prescribing of branded generics by brand name in primary care where the brand list price was lower than the Drug Tariff reimbursement price. Branded prescribing of off-patent medicines is not supported by NHS Scotland where it is not clinically required and not required to meet an individual patient need. This position is for several reasons including:

- The risk of suppressing competition in the generics market, driving up prices over the long term;
- The impact on supply chain resilience if community pharmacies are limited to sourcing from a particular supplier; and
- The risk of undermining the retained purchase margin provisions in the national community pharmacy contract.

## Primary Care Medicines Usage Data

Primary care medicines usage data is published on the [Public Health Scotland](#) website.

A list of all NHS dispensing contractors in Scotland is available via [open data](#) (updated quarterly). The HB2019 column gives the organisational code for the associated health board; a separate file on [open data](#) provides the mapping of organisational code to the name of the health board.

# NHSS Pharmaceutical Specials Service

## Introduction to the NHSS PSS

A 'Special' is an unlicensed medicine made to satisfy the needs of an individual patient. The NHS Scotland Pharmaceutical 'Specials' Service (PSS) provides a national service to ensure that all patients in Scotland have access to quality unlicensed medicines that are not commercially available from licensed manufacturers or are in short supply, and to provide Investigational Medicinal Products for clinical trials and research across the UK.

The modern NHS pharmaceutical manufacturing facility was opened in 2019 on the Ninewells Hospital campus in Dundee, replacing previous facilities in Tayside (Tayside Pharmaceuticals) and Glasgow (Pharmacy Production Unit). The facility has a range of clean room facilities for over-labelling and repackaging, non-sterile manufacture, extemporaneous preparation, sterile and aseptic manufacture. The facility also contains analytical and microbiology laboratories, warehouses for starting materials/packaging and finished products, and office space for sales order processing, purchase order processing and printing of production documentation/labels.

PSS operates under a Manufacturer's 'Specials' Licence (MS), a Manufacturer's Authorisation – Investigational Medicinal Products (MIA(IMP)) and a Wholesale Distribution Authorisation (Human) (WDA(H)) as well as a Home Office Licence for the procurement, manufacture and supply of Controlled Drugs. PSS Quality Management Systems are ISO 9001 Certified.

## Products

Over 1200 products are listed in a range that includes: creams; ointments; powders; oral liquids; topical liquids; over-labelled medicines for unscheduled care and one-stop dispensing; injections; infusions; eye drops; and emergency pouches for hospitals, and Scottish Ambulance Service use.

In conjunction with National Procurement, PSS engages with NHS Scotland customers to discuss ongoing requirements and unmet need for unlicensed medicines.



## Sourcing

As an NHS Scotland service, many medicines used by NHSS PSS are sourced from NHS Scotland framework agreements:

- Over-labelled medicines, also known as 'to take out' medication (TTO), are pre-labelled packs of a commonly used medicine with the name of the medicine, its form, strength, dose and directions for use applied, leaving gaps for the patient's name, date of supply, issuing hospital and clinical area to be added manually. They are used in hospitals across Scotland in unscheduled care settings and to support the timely discharge of patients. Over-labelling is undertaken in large batches, typically equating to three months of PSS sales. To support this, stock is procured in large quantities with the same batch number. Expiry dates required are as long as possible and no less than one year. There is an [NHS Scotland agreed list of pre-labelled medicine pack sizes](#).
- Manufacturing of 'Specials' involves procuring starting materials; sourcing from as little as 50g up to 500kg at a time.
- A small proportion of the overall business is wholesale activity to end users including the Scottish Ambulance Service, Police Custody Suites and Hospices.

### More Information:

NHS Scotland Pharmaceutical  
'Specials' Service  
James Arnott Drive  
Ninewells Hospital  
Dundee. DD2 1FE  
Tel: 01382 496702  
Email: [tay.pssoffice@nhs.scot](mailto:tay.pssoffice@nhs.scot)

# Other Settings

**Prisons:** The responsibility for the provision of primary and community healthcare services for people in prison lies with the regional health board responsible for the area in which the prison is located.

There is a national contract for the provision of pharmacy services to prisons. The contract is currently awarded to **MD Green Ltd** in partnership with **Phoenix Healthcare Distribution**. Medicines for the majority of prisons are dispensed through a central dispensing hub with three local dispensaries supporting outlying prisons. Supply of medicines to people in prison can be complex and challenging. Consideration has to be given to the relationship between the patient, the medicine and the environment. This can influence product requirements in terms of the packaging and presentation of medicines.

There are strict security requirements for delivery into prisons including advance notification of drivers, a range of prohibited items and prior agreement of timed delivery slots. For security reasons, vehicles may be asked to delay leaving the prison in certain circumstances, for example during movements of prisoners. It is not feasible for prisons to receive direct deliveries from multiple suppliers therefore all of a prison's medicines needs are provided through the contracted prison pharmacy service provider. This is a vulnerable population in a high-risk environment, with associated risks of disorder in prisons if there are delays in access to medicines. Where manufacturers are entering into reduced wholesaler or agency distribution models, consideration needs to be given to ensure medicines can be accessed in a timely way by the NHS Scotland prison pharmacy service provider.

The NHS Scotland standard Patient Access Scheme agreement includes provision for confidential retrospective rebates to health boards for supply via the prison pharmacy service. Where appropriate, provision for rebates against supply to prisons can be built into secondary care framework agreements and PCRS.

**Emergency Planning Stockpile:** National Procurement manages a national pharmaceutical emergency planning stockpile on behalf of the Scottish Government in line with a co-ordinated four nations approach. The stockpile includes pharmaceutical countermeasures to support a response to a chemical, biological, radiological or nuclear (CBRN) incident and a pandemic. Medicines within the stockpile are either purchased directly by National Procurement or supplied to Scotland following procurement by the UK Health Security Agency (UKHSA). The stockpile is held at an outsourced pharmaceutical distributor.

The expiry of stockpiled products has an environmental impact as well as a financial impact. To reduce the risk of stock being wasted, National Procurement works closely with health boards to cycle products within the stockpile through the normal NHS hospital pharmacy supply chain, where feasible. As medicines in the stockpile near their expiry, hospital pharmacies are asked to purchase them. The funds from the sale are used to purchase replacement stock with longer expiry dates. There is close engagement with suppliers of products within the stockpile to ensure awareness of the programme to support supply planning.

**Vaccine Distribution:** There are a number of procurement and distribution models for vaccines including:

- Procurement of vaccines by UKHSA and distribution via an UKHSA commissioned distributor (e.g. childhood vaccines, COVID-19 vaccines and RSV vaccines)
- Procurement of vaccines by PSD Scotland and distribution via a PSD Scotland commissioned distributor (e.g. adult flu vaccines)
- Procurement of vaccines by NHS National Services Scotland with distribution via the business-as-usual supply chain.

The service model for delivery of national vaccination programmes in Scotland has changed from GP delivery to typically, dedicated health board teams. Vaccines are typically supplied to a network of Vaccine Holding Centres (VHCs) based in hospital pharmacies for onward distribution to clinics.

## National Procurement Contacts

Medicines Supply/Shortages:  
[.nhssmedicineshortages@nhs.scot](mailto:.nhssmedicineshortages@nhs.scot)

PASAG / New Medicines Pricing  
[nss.np-pasag@nhs.scot](mailto:nss.np-pasag@nhs.scot)

Rebate Financial Reconciliation  
[nss.np-pharmfin@nhs.scot](mailto:nss.np-pharmfin@nhs.scot)

Tender/Contract queries:  
[nss.nppharmacycontracts@nhs.scot](mailto:nss.nppharmacycontracts@nhs.scot)

Homecare and Primary Care  
[nss.pchc@nhs.scot](mailto:nss.pchc@nhs.scot)

General  
[NSS.nppharmacy@nhs.scot](mailto:NSS.nppharmacy@nhs.scot)