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Via West Berkshire

Service Specification for Community Pharmacy Take Home Naloxone (THN)

1st April 2024 to 31st March 2026

AN AGREEMENT BETWEEN Via, 18 Dartmouth Street, London, SW1H 9BL and the pharmacy shown in Schedule A

The signatures on the Signature Sheet constitute an agreement between the parties concerned for the provision of a Take Home Naloxone service.

1. Introduction

- 1.1. Pharmacies are well placed to be able to provide take home naloxone (THN) and other relevant information as part of the local harm reduction strategy to prevent drug related deaths.
- 1.2. This document provides a framework which enables community pharmacies working in partnership with Via to provide THN.
- 1.3. People involved in the provision of drug treatment services including community pharmacy staff, can supply THN to individuals without a prescription, Patient Specific Direction (PSD) or Patient Group Direction (PGD).
- 1.4. This THN service relates to the supply to people aged 18 years or over for someone who is using or has previously used opioids (illicit/prescribed) and is at potential risk of overdose, their carers, family members or friends liable to be on hand in case of overdose. It covers the use of:
 - Prenoxad[®] - intramuscular (given by injection into the upper arm/leg muscle) naloxone solution for injection. The concentration is 1mg/1ml. Each pack contains 1x2ml i.e. 2mg in each prefilled syringe and 2 x 23G 1.25" needles.
 - Nyxoid[®] - intranasal spray (sprayed into the nose). Each single dose container contains 1.8mg. Each pack contains two nasal sprays.
 - Naloxone – intranasal spray (sprayed into the nose). Each single dose container contains 1.26mg. Each pack ('pebble') contains two nasal sprays.

2. Governance

- 2.1. The Document Owner is responsible for ensuring that this document is designed, ratified and reviewed in line with the Via procedures.
- 2.2. This document supersedes all previous working agreements.
- 2.3. Via and the Pharmacy will fully adhere to their respective obligations set out in this document.
- 2.4. The Pharmacy will adhere to relevant legislative requirements, and the standards set, for example by the General Pharmaceutical Council (GPhC), as well as Public Health England (PHE) Widening the Availability of Naloxone Guidance and the 'Drug Misuse and Dependence UK Guidelines on Clinical Management (2017)' published by the Department of Health.
- 2.5. Both Parties agree to share relevant information and data to allow safe and high-quality Service provision/improvements and in line with the local PharmOutcomes licence agreement which detail data controller/processing/ sharing details.
- 2.6. Each party shall comply with its respective obligations pursuant to applicable data protection laws and/or regulations in relation to the processing of personal and/or special category data under this agreement, including but not limited to the General Data Protection Regulations and the Data Protection Act 2018.
- 2.7. The Pharmacy will demonstrate relevant agreed Quality Standards or will work towards achieving such a standard within an agreed timescale of 3 months. If the Pharmacy remains in default following the expiry of the period specified, Via may proceed to terminate the Agreement.
- 2.8. The Pharmacy will take part in reasonably requested audit activity including, assessment of experiences of offering/receiving this service and the facilitation of Quality Assurance visits as agreed between all parties. Audit content and timing will be agreed in advance with the LPC/contractors.
- 2.9. Outcomes will be monitored Via PharmOutcomes and associated audit/service quality assurance data.
- 2.10. Should the Pharmacy not work in line with the agreed standards, Via shall immediately investigate, and in the case of suspension or variation, report to the Pharmacy every 30 days until such investigation is complete. When the investigation is complete, Via shall immediately notify the Pharmacy of the outcome.

- 2.11. Any incidents or concerns will be reported immediately, including via email to west.berkshire@viaorg.uk and appropriately actioned in accordance with respective organisations incident reporting processes.
- 2.12. Issues pertaining to concerns, incidents, indemnity, performance, disputes, confidentiality, and data handling, which include safeguarding issues, will be promptly reported to Via, usually within one working day as appropriate as soon as the Pharmacy become aware.
- 2.13. The Pharmacy will demonstrate they have appropriate procedures and insurance in place to be able to offer the Service and will ensure that Via is indemnified against any claim arising from the provision of the Service, and in the case of negligence of the Pharmacy: this liability may not be transferred.
- 2.14. The Pharmacy will be able to demonstrate that all of their staff have signed all associated Standard Operating Procedures.
- 2.15. The health and safety of Pharmacy staff (and any associated indemnity issues), remain the responsibility of the Pharmacy.
- 2.16. Any dispute, which cannot be resolved by negotiation, shall be referred to a nominated arbitrator for example the Local Authority Commissioner or Chair of the Local Law Society.
- 2.17. Representatives of the Pharmacy LPC (Community Pharmacy Thames Valley) and Via are required to attend regular review meetings, which should occur at least once a year and may be called by either party, usually agreeing a date with at least 14 days notice.

3. Funding, Notices and Termination

- 3.1. Payment for this scheme is to be agreed between Via (local operational contract management supported by the Director of Pharmacy) and relevant Local Pharmaceutical Committee(s) (LPC) (Community Pharmacy Thames Valley) to represent Pharmacy contractors in the locality.
 - **£100 per pharmacy set up fee to cover training and preparation.**
 - **£15 per supply transaction (regardless of the naloxone device type or quantity) for the first supply provided**
 - **The cost of the Prenoxad[®]/Nyxoid[®]/naloxone pebble reimbursed at the tariff price for the month of supply**
 - **VAT as applicable**This payment covers:
 - Cost of time taken to procure the medication.
 - Pharmacy staff time and associated costs for the THN activity.
 - Record keeping activities to include PharmOutcomes data entries.
 - Communication with Via/relevant others relating to this Service.
 - Completion of relevant training to ensure maintenance of confidence and competence when supporting people who use substances.
 - Active participation in Quality Assurance visits and achieving required Quality Standards (where applicable)
- 3.2. Pharmacies will be selected to provide the Service dependent upon identified local needs.
- 3.3. Any changes to the terms of the contract (including reduced funding or notice to cease) will be made with at least 60 days' notice in order to cause the least disruption for people who need the service. The Pharmacy may choose to cease providing the Service at the end of this notice period without incurring a penalty or by giving 60 days notice. Via also has the option to terminate funding should the Pharmacy enter receivership or become insolvent.
- 3.4. To enable payment, the Responsible Pharmacist assigned to the Pharmacy will complete the relevant PharmOutcomes THN sign up module. The Pharmacy is responsible for subsequently ensuring that Via are provided with the correct Pharmacy bank details to complete the enrolment process.
- 3.5. Via will make payment to the Pharmacy within 30 days in arrears upon receipt of an invoice received Via PharmOutcomes.
- 3.6. No payment will be made if the invoice covers activity that was undertaken more than 3 months prior to the date of the invoice being submitted.
- 3.7. Via will examine the data submitted and may seek to verify the Fees claimed.
- 3.8. Payments will only be made where Via is satisfied that the Service has been provided in accordance with the terms of this Agreement. Via shall be entitled to suspend payment and/or vary the amount of the payment if it considers the Pharmacy has committed a serious breach of the Agreement and shall forthwith notify the Pharmacy in writing accordingly. Once all relevant investigations are complete and

if deemed appropriate, within 30 days Via will pay any sums to the Pharmacy that were suspended or varied.

- 3.9. Via may from time to time, require reasonable changes to the terms of this Agreement in discussion with the LPC, and where reasonably practicable, up to 30 days' notice will be given. Once agreed, the Pharmacy shall use its reasonable endeavours to implement this change on the understanding that such change will not materially affect the nature of the Service or the Pharmacy's ability to provide the Service.
- 3.10. The Service will be offered every day that the Pharmacy is open. If the Pharmacy put in an application to reduce their opening days or times, then Via should be informed at the time the application is granted.
- 3.11. Notices will be given in writing Via email (with acknowledged receipt) or by recorded delivery post to the details provided for that purpose. A notice given by post will be deemed to have been served the first working day after it was posted.
- 3.12. This Agreement will be reviewed and subject to agreement, renewed on an annual basis. However, it may be ended earlier, either on dissolution of the Pharmacy or where at least 60 days' notice is given by either Party of their intention to terminate the Agreement.
- 3.13. Nothing in this Agreement confers or purports to confer on any third party any benefit or any right to enforce any term of this Agreement.

4. Competency and Training

- 4.1. This Service may only be undertaken by competent Pharmacy staff and under the supervision of the Responsible Pharmacist registered with the GPhC.
- 4.2. Pharmacy staff will be trained and assessed to administer naloxone in an emergency/supply naloxone/train others (as appropriate), using *Appendix A 'Pharmacy THN Competency Assessment and Supply Exemplar Template'* which will then be filed locally and kept readily accessible for audit and inspection purposes.
- 4.3. The assessor will ensure that the trainee has met all of the listed criteria and fully understands all requirements before signing to confirm their competence.
- 4.4. Training may be provided either individually or in groups.
- 4.5. Training may be provided remotely, and information conveyed e.g. in writing/remote consultation using any suitable medium, so long as the trainer has been provided with assurances that the person can demonstrate the required competencies.
- 4.6. Only placebo packs may be used for the purposes of training. They can be sourced direct from the manufacturer.
- 4.7. It is the responsibility of the Pharmacy to ensure that the staff undertaking the Service have received appropriate training, including completion of relevant competencies/accreditation and relevant health and safety training.
- 4.8. Mandatory training in the delivery of the THN service is provided by Via which may be delivered virtually and the Pharmacy will retain a training record for each member of staff. Additionally, all Pharmacy staff should be encouraged to complete the free online training courses from Addiction Professionals at <https://www.ap-elearning.org.uk/> (individual registration required).
- 4.9. The Responsible Pharmacist will have completed Safeguarding training to Level 2 and be DBS checked in line with current guidance, which will be rechecked/updated in response to any legislative/best practice guidance changes. The Responsible Pharmacist will ensure the suitability of any Pharmacy staff who are in one-to-one situations with vulnerable people.
- 4.10. Where locums or part time staff predominantly operate a Pharmacy, the Superintendent Pharmacist or delegated deputy will nominate a lead person to act as a contact. This will be communicated to Via.
- 4.11. Via will seek to provide at least one training event per year (face-to-face or online) which will usually be available for access by the wider Pharmacy Team (including locum staff), to support broader development of competency and confidence in the management of problematic substance use.
- 4.12. Via may ask Pharmacy staff to demonstrate competency in providing this service using *Appendix A 'Pharmacy THN Competency Assessment and Supply Exemplar Template'*
- 4.13. The Responsible Pharmacist on duty at any time will retain professional responsibility and the Pharmacy shall retain liability for the Service.

5. THN Supply

- 5.1. Pharmacies will have processes in place which cover the ordering, storage, access, supply, monitoring and disposal arrangements for the entire THN process and the information contained in this document where relevant.
- 5.2. The Pharmacy is responsible for ensuring that the medication is stored in line with manufacturers requirements: THN will not be stored in temperatures exceeding 40°C and if inappropriately stored, the medication will **NOT** be supplied.
- 5.3. The Pharmacy will ensure sufficient stock levels, usually a minimum of two kits of each product type at any given time, replenishing the stock as required.
- 5.4. In addition to supplying THN free of charge to the person, the Pharmacy team will:
 - Provide support and advice about drug overdose/harm reduction to people accessing the service.
 - Offer a user-friendly, non-judgmental, person-centred, and confidential service.
 - Link into existing networks for harm reduction services to enable rapid referrals.
 - Ensure that when unable to provide the service, for whatever reason, (e.g. under 18 years, no trained staff on site, person banned from premises) people are effectively signposted to alternative providers.
 - Display health promotion material which may be supplied by Via, and make this available for people who may use this service.
 - Promote the uptake of this service.
- 5.5. The Service will be provided in a location that considers the persons' comfort/privacy/dignity, Pharmacy staff/customer safety, infection control and health and safety requirements (this should usually be in the consultation room/area designated for delivering professional services): it will never be provided in the Dispensary.
- 5.6. Competency of the individual and informed consent (including provision of information relating to the safe storage, administration, disposal and re-supply) will be obtained and documented prior to every supply, using PharmOutcomes.
- 5.7. PharmOutcomes entry will be completed for each THN supply.
- 5.8. The Pharmacy will maintain appropriate records to ensure effective ongoing service delivery and audit.
- 5.9. The person should be offered THN/information about THN if they are thought to be at risk of experiencing/responding to drug related overdose e.g. if they access Needle Syringe Provision (NSP).
- 5.10. Pharmacy staff members should assure themselves that the supply is only made to individuals of 18 years or over. Young people will be signposted to specialist local young persons' services.
- 5.11. Pharmacy staff members should ensure that the individual is not knowingly allergic to Prenoxad[®]/Nyxoid[®]/naloxone pebble or any of the ingredients. Any details of an adverse drug reaction will be recorded (and if required associated action taken) in line with established best practice.
- 5.12. Individuals should be signposted to the local Via service for further information and referral for those currently not engaged in treatment.
- 5.13. The Pharmacy will have sufficient staffing levels to ensure safe and effective service provision. Pharmacy staff delivering the Service will not lone work.
- 5.14. Locum Pharmacy staff will be made aware of this Service and the procedures when providing locum cover, as the presence of a locum is generally not a valid reason for the Service not to be appropriately implemented by a trained member of the team.
- 5.15. It is essential that communication channels (e.g. Via PharmOutcomes and NHSmail) are regularly checked and promptly actioned, otherwise the safety/quality of Service provision may be impacted.
- 5.16. Every supply will be recorded using PharmOutcomes. No entries are required to be added to the Patient Medication Record (PMR) system as supplies are usually anonymised. Entry onto PMR is recommended when patient is known.
- 5.17. Where systems permit, reminders for expiry dates will be sent.
- 5.18. Prenoxad[®] should be offered first line. In some cases, intranasal sprays may be the preferred product, for example where the person is needle phobic.
- 5.19. One pack per person should usually be supplied; however more may be issued in exceptional circumstances at the professional discretion of the Pharmacy/if directed by Via (e.g. in response to a formal drugs alert).
- 5.20. An information leaflet should usually be provided in every pack of medication and will be provided every time a supply is made. Also available from: www.medicines.org.uk

- 5.21. Before being issued, naloxone packs should be labelled with:
- Pharmacy name and address
 - Person's name (or other identifiers as used for NSP, to maintain anonymity if needed)
 - Date of supply
- 5.22. Additional labels must be placed on the outer packaging of the medication but must not obscure key information such as 'expiry date' or affect the opening of the container.
- 5.23. If the person is accessing naloxone Via NSP, similar anonymity may be maintained by using the same identifiers (e.g. initials) to provide the THN.
- 5.24. The recipient should be encouraged to return to the service before the expiry date to collect a new supply. It is not necessary to receive expired naloxone packs before replacing, but it should be encouraged.
- 5.25. The following will be recorded as a minimum on the PharmOutcomes template:
- Supplying Pharmacy name
 - Pharmacy staff name making supply
 - Date of supply
 - Type of THN supplied ie Prenoxad[®] injection 1mg/ml (2ml pre-filled syringe)/Nyxoid[®] 1.8mg or naloxone pebble 1.26mg nasal spray (2x single use container)
 - Batch number(s)
 - Expiry date(s)
 - Number of packs supplied
 - Details of who the supply is made to (anonymised as appropriate)
- 5.26. If it is the persons' first time of being supplied with THN, it will also be evidenced that the person:
- Understands what naloxone does
 - Can identify causes of drug overdose
 - Can identify symptoms of opioid overdose
 - Understands actions to take if witnessing a suspected opioid overdose and how to administer THN if required
 - Knows about safe storage requirements
 - Knows how to open the pack and not to do so except for emergency use
 - Knows to dispose of unwanted/expired/used packs and how to source replacements
 - Knows how to access information leaflets/training resources if needed
- 5.27. If the person has had THN supplied to them previously (from any source), the following will also be evidenced:
- Confirmation of person's familiarisation with THN
 - Reason for (re)supply

SCHEDULE A

Pharmacy Agreement Contact:

Name:	
Pharmacy Name:	
Pharmacy Address:	
Telephone number:	
Email address:	

Via Agreement Contact:

Name:	Via Community Ltd
Address:	18 Dartmouth Street, London, SW1H 9BL
Name of individual to provide services:	Mak Chohan, Director of Pharmacy
Telephone number:	07918 626674
Email address:	Mak.chohan@viaorg.uk

Via Agreement Contact:

Name:	Via Finance Department
Address:	18 Dartmouth Street, London, SW1H 9BL
Telephone number:	020 7421 3106
Email address:	finance@viaorg.uk

DATES FOR PROVISION OF SERVICES

Start date: 1st April 2024

End date: 31st March 2026

Signature Sheet

Signed for and on behalf of Company: Via

Signature:



Print name: Dani Cawsey

Position: Service Manager

Date: 01/04/2024

Signed for and on behalf of Contractor:

Signature:

Print name:

Position:

Date:

List of stores from which the service will be provided from:

Name of pharmacy, address, email address, telephone number, fax number:

Appendix A

Community Pharmacy Staff Naloxone Competency Assessment and Supply Form

Name		Position	
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Assessment Criteria	Check
Understands what naloxone does (temporarily reverses the effects of opioids for about 20mins, buys time for ambulance to arrive, not a 'safety net', overdose may return, especially if using again, used to help save lives, does not reverse other drugs e.g. alcohol or benzos)	<input type="checkbox"/>
Identifies symptoms of opioid overdose (e.g. pinpoint pupils, colour changes, unconscious, unresponsive to noise/touch, breathing problems/'snoring', blue tinge to lips/nose/fingertips)	<input type="checkbox"/>
Identifies causes of drug overdose (e.g. polypharmacy, lack of tolerance including post prison release/detox/hospital discharge, using alone/too much, injecting, changes in purity, poor health)	<input type="checkbox"/>
Outlines actions to take if witnessing a suspected opioid overdose 1. Keep self/others safe 2. Identify symptoms of possible opioid overdose. Place into recovery position if breathing 3. Dial 999 for an ambulance 4. Administer naloxone (first dose) 5. If not breathing administer basic life support (BLS)/cardio-pulmonary resuscitation (CPR) 6. Monitor and give further dose(s) if no response after every 2 mins and continue with BLS/CPR 7. Do not leave the person. Inform ambulance service about action taken 8. Dispose of used naloxone pack(s) correctly (Prenoxad® in sharps bin/intranasal in clinical waste bin)	<input type="checkbox"/>
Demonstrates how to use Prenoxad® injection (1mg/ml; 0.4ml (up to the first black line) from 2ml prefilled syringe, immediately into outer thigh/upper arm muscle, can be through clothes, repeat every 2 minutes if needed)	<input type="checkbox"/>
Demonstrates how to use intranasal spray (1.8mg or 1.26mg; 1 spray from single use container, immediately into the nostril, repeat every 2 minutes if needed, alternating nostrils)	<input type="checkbox"/>
Knows how to open the pack and knows not to do so except for emergency use	<input type="checkbox"/>
Aware of safe storage requirements (out of sight and reach of children/pets, informing competent others of location)	<input type="checkbox"/>
Knows to dispose of unwanted/expired packs of naloxone (return to pharmacy for disposal in pharmaceutical waste bin)	<input type="checkbox"/>
Knows to dispose of used packs of naloxone (Nyxoid®/naloxone pebble intranasal spray: Return to pharmacy for disposal in pharmaceutical waste bin, Prenoxad® in the original container then a personal sharps bin from needle syringe provision service: can be given to paramedics/local needle syringe provision)	<input type="checkbox"/>
Knows about reminders for expiry dates/getting replacement packs (checking dates, returning to service before expiry, should return with old pack)	<input type="checkbox"/>
Can access relevant information leaflets/training resources e.g. www.ap-elearning.org.uk/ and www.medicines.org.uk	<input type="checkbox"/>
Demonstrates how to record a naloxone supply on PharmOutcomes	<input type="checkbox"/>
Describes how to manage requests for young people <18yrs; by referring to Via	<input type="checkbox"/>

Competency <i>(complete appropriate)</i>	Prenoxad® (pre-filled injection)			Nyxoid®/naloxone pebble (intranasal spray)		
	Administer	Supply	Train Others	Administer	Supply	Train Others
Date Achieved						
Assessor's Name						