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Turning Point Specification for Needle & Syringe Programme

Slough

Community Pharmacy Agreement (Part B)

V1.0 April 2025

Turning Point Specification for Needle & Syringe Programme

Community Pharmacy Agreement

1. Introduction

This document sets out a Service Specification for a community pharmacy 'Needle & Syringe Programme' (NSP) to be provided by the Contractor[1] to service users across Slough. The practice is designed to reduce harm to people who inject drugs (PWID) and in turn reduce the prevalence of blood-borne viruses and bacterial infections. The safe disposal of used equipment will also benefit the wider community.

Drug use not only affects the user themselves but also their family and the community at large.

Community pharmacies are well placed to be able to provide services as part of the local harm reduction strategy.

Such services, when delivered well, can support the person to move away from chaotic and risky behaviour. There is evidence that community pharmacy based NSP can complement and support other NSP and harm reduction initiatives commissioned by Public Health. A mixed economy of NSP provision is essential to ensure high coverage, which is necessary to limit blood borne virus spread (NICE PH52, 2014)

This specification has been informed by recommendations from NICE Guidelines PH52 -Needle and Syringe Programmes (https://www.nice.org.uk/guidance/ph52):

- Regularly consult with and involve users, practitioners and the local community regarding the provision of harm reduction services
- Explore ways to collate and analyse data on injecting drug use
- Provide generic and targeted services to meet local need (considering services that are outside of normal hours, mobile and targeted)
- Monitor services both in terms of reviewing of local policies and the quality of service.
- Develop an ongoing policy for young people who inject drugs
- Provide a mix of services, including condoms, foil and naloxone, as well as, as a range of advice and information
- Provide people with the right type of equipment and advice (including low dead-space and identifiable equipment)
- Coordinate community pharmacy-based needle and syringe programmes (including training)
- Provide specialist (level 3) needle and syringe programmes
- Provide equipment and advice to people who inject image- and performance-enhancing drugs

This Service is for anyone aged 18 years and above. Any person aged under 18 years can access the

[1] The term "Contractor" is used throughout this Agreement to represent Community Pharmacies

Company's[2] specialist young people's substance use service and should be referred through local offices. Contractors are also reminded that their own safeguarding policies need to be followed.

2. Aims

The overall **Service Objectives and Intended Health Outcomes** of pharmacy NSP to drug users are:

a) To offer anonymous friendly, non-judgemental, confidential and user centred services.

b) To provide sterile injecting equipment to reduce the rate of sharing and other high risk injecting behaviours. Adequate coverage is essential to achieve this (see later).

c) In doing so, reduce the dangers associated with drug use including the transmission risks of HIV, hepatitis B&C, other blood-borne infections.

d) To help the service user to be healthy and reduce drug related health harms.

e) Assist the service users to remain healthy until they are ready, willing and able to cease injecting and/or access specialist services and ultimately achieve a drug free life.

f) To provide information on harm reduction advice and initiatives and promote safer injecting practices.

g) To facilitate access to relevant specialist and generalist primary care services.

h) To signpost people who inject drugs (PWID) to drug treatment services (for example, opioid substitution therapy).

i) To act as a gateway/signpost to other services (e.g. Hepatitis B immunisation, Hepatitis C & HIV screening).

j) Improve the health of local communities by preventing the spread of blood borne infections facilitate and encourage the safe disposal of used injecting equipment.

k) Maximise the access and retention of all injectors, especially the highly socially excluded, through flexible, low- threshold service delivery and targeted interventions, delivered in a non-judgmental and caring way.

3. Service Outline

a) Pharmacy NSP facilities are available to all adult injectors who are injecting drugs illicitly.

b) Pharmacy NSP facilities and harm reduction initiatives provide an easy, low threshold, open access and user friendly service to adults.

[2] The term "Company" is used throughout this Agreement to represent Turning Point

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c) Staff operating NSP have Standard Operating Procedures (SOPs) in place for their individual premises. An example SOP is given in Appendix 1a. An example SOP for managing needle stick injuries in a community pharmacy is provided in also available for community pharmacies in Appendix 1b. Contractors should note these are **example SOPs** and contractors can develop their own SOP for any operational process within this agreement.

d) Contractors participating in NSP schemes must comply with relevant guidelines laid down by their professional regulator.

e) Under Health & Safety at work legislation, it is the employing contractors owner's responsibility to individually risk assess and support their staff in accessing vaccination against Hepatitis B.

f) Pharmacy NSPs should actively encourage returns of used injecting equipment, but this should not be a condition of accessing sterile injecting equipment. Nor should a 1 for 1 policy be operated. Optimised coverage levels of 150% require that the amount of sets of sterile equipment needed is 1.5 times the number of injections the person administers (Vickerman et al, 2012). Returned sharp bins for other prescribed medication e.g. insulin needles are not included within the provisions of this Service Level Agreement (SLA).

g) Injecting equipment must meet UK standards (where they exist) and safe disposal of equipment must meet UK regulations.

h) Contractors are provided with support from the Company to operate the NSP scheme.

i) Contractors receive prompt payment for Services provided i.e. within 30 days of the claim deadline (see section 6 "Payment Terms" in the Services Agreement for further details).

j) Contractors are required to monitor stock level and order regular supplies (where an automated stock control system is not in place) at levels required to meet service user need. Where an automated stock control system is in place, contractors must enter distributed stock in a timely manner to ensure it is replenished through our supplier. The Company operates a NSP equipment formulary. The Company will store additional and specialist items locally within the hubs. Contractors may be able to order additional stock to meet the local needs – please liaise with your local Company Harm Reduction Lead for further details. A list of the stock available to Contractors is provided in Appendix 3.

4. Service Description

Please refer to Appendix 4 - Roles and Responsibilities for full details of the Roles and Responsibilities of the Pharmacy and other individuals and organisations providing this Service.

a) Contractors should comply with the Handing Out Equipment Checklist before delivering NSP (Appendix 2).

b) Contractors will provide access to sterile needles and syringes and sharps containers for return of used equipment. Used equipment is normally returned to the contractor by the service user for safe disposal or to the local specialist service. Contractors should raise awareness of local disposal facilities amongst people who use the NSP Service.

c) Where agreed locally, associated materials that promote safe injecting practice and reduce transmission of infections by PWID will be provided by the Company.

d) Appropriate wider health promotion materials will be provided to the service user. Contractors should consider other locally commissioned pharmacy services from which PWID may benefit (e.g. minor ailment schemes) when providing this material.

e) The Contractor will promote safer injecting practice to the service user, and give advice on sexual health and STIs, HIV and Hepatitis C transmission and encourage Hepatitis B immunisation.

f) Contractors will offer a user-friendly, non-judgmental, client-centred and confidential service.

g) Advice will include the availability of written information and verbal information on:
- Legally available paraphernalia including whether and where this can be accessed by service users if not available via the pharmacy NSP scheme.
- Safe storage and handling of injecting equipment.
- Screening, risk assessment and referral including signposting to appropriate treatment services including immunisation services.

5. Accreditation

a) The service should be provided by suitably trained and competent pharmacy staff.

b) For the rest of this document, the term “pharmacy staff” will be used to denote pharmacists, pharmacy technicians and other non-registered members of the pharmacy team. The responsible pharmacist must ensure that delegated tasks are being undertaken safely by competent pharmacy staff. The pharmacy contractor must ensure all pharmacy staff providing the service are appropriately trained.

c) Pharmacy staff providing the service must:
- have relevant knowledge and be appropriately trained in the operation of the Service to a standard agreed with the Company. Training in the operation of the Service is provided by the Company in the form of guidance, protocols and local workshops (at least annually). Delivery of these support services will be determined locally between the Company, Local Pharmaceutical Committee (LPC), local commissioners and any other organisation or group that are considered to be a valid stakeholder in the service delivery e.g. service user group.
- be encouraged to complete the free Level 1 NSP practitioner course online training courses from Exchange Supplies at https://www.exchangesupplies.org/shopdisp_E101.php. This e-learning programme is free and supports learning and development in the subject of harm reduction and

needle exchange
- be aware of and operate within local protocols agreed with the Company. The Pharmacy's SOP must be based on local protocols and must be regularly reviewed (see section 7b for further details).

d) Registered pharmacy professionals at the accredited pharmacy should be encouraged to complete a Declaration of Competence (DoC) for "Pharmacy Needle and Syringe Programme provision" and complete the CPPE Substance use and misuse e-learning programme.

e) Contractors will be invited to attend at least one meeting per year with the Company to promote Service development and update the knowledge of pharmacy staff. This includes an awareness raising session about the drug and alcohol treatment and support services available locally and an opportunity to raise questions and/or concerns about practice. Although attendance is not mandatory, the Company would encourage engagement from Contractors to support both Service development and as a CPD update for pharmacy staff.

6. Support

To ensure the effective management and development of pharmacy NSP (including appropriate support for pharmacies) the following Company staffing structure will be in place:

- Area Operations Managers to oversee the Agreement sign up and performance monitoring and quality assurance
- Service Administrator to validate claims and support process of payments
- Locally based Harm Reduction Leads and (Senior) Recovery Workers to ensure training, support and develop provision to meet the needs of the Service and to act as a single point of contact for pharmacy referrals, guidance and stock/wastage control

Any queries can also be directed to the appropriate local pharmacy lead at the Company

The Company will also provide the following information or signposting to leaflets/information to support the Contractor to deliver an outcome focused service:

- Written information on harm reduction (e.g. information about specialist agencies, details about safer injecting practices, preventing overdose)
- Referral pathways to specialist services
- Physical resources (e.g. leaflets)
- Health promotion advice (including how to reduce harms from injecting)
- Pathways to access BBV services within specialist provision.

Support will also be provided through our Needle Exchange supplier (Exchange Supplies) and our Pharmacy IT partner (NEO360). Contact details will be provided to services to access this support.

7. Performance and Quality Monitoring

a) The Contractor must maintain appropriate records to ensure effective on-going Service

delivery and audit.

b) The Contractor must review its SOPs on a two-year cycle ***or*** when a significant change to services ***or*** significant incident dictates a need to review the SOP earlier.

c) The Company reserves the right to request evidence or information that the Contractor is providing the Service in a way that is safe, convenient and in accordance with the requirements of this Specification. The Contractor is required to comply with all reasonable requests for evidence or information, i.e. records of orders, stock check to corroborate orders and safe storage, etc. that is relevant to the delivery of the Service.

d) The Contractor participates in an organised audit of Service provision and co-operates with any locally agreed Company or Public Health led assessment of service user experience.

e) The Company's Local Service will undertake an annual audit to review quality of provision which may include the following performance and quality measures:

- **Service activity –** volume of work as measured by data recorded
- **Clinical outcomes –** measured via the review process and by analysis of data
- **Quality and governance –** training attendance and compliance with local procedures i.e, use of paperwork, display of NSP logo and needle bin map
- **Service User experience –** service user views on their experiences and satisfaction levels measured through the Company service user involvement mechanisms
- **Value for money –** Services will be reviewed against activity levels, quality, outcomes and payments made to determine 'value for money'. This will link to the quarterly monitoring and annual review

f) As the Company embeds specialist NSP provision and quality assurance processes there may be a need to review and rebalance pharmacy NSP provision. Turning Point will work closely with pharmacies and the local LPC over the lifetime of the Agreement to review and agree any changes and provide a minimum of 28 days' notice to terminate where it is identified that quality standards are not met or if the demand is not there.

References

- Vickerman et al, 2012. *Addiction*, 107(11). 1984-95.
- NICE (2014) Public Health guideline [PH52] Needle and syringe programmes. Available at https://www.nice.org.uk/guidance/PH52 (Accessed 05/04/2017)

Schedule 1

Payments

Payment process

NEO360 has been commissioned by the Company to act as an agent for processing NSP claims. Under this agreement

- NEO360 is funded to provide access to Contractors commissioned to provide the NSP Services and process Service payments on behalf of the Company
- Monthly claims are completed via the NEO360 system.

Claims will be paid in line with the "Payment Terms" of the Company "Services Agreement" document (Part A)

Paper-based claims will not be processed for payment.

For queries relating to the use of NEO360 please contact NEO360 directly

Payment rates

NSP payments will be made to the Contractor at the following rates:

£2.20 per transaction
£82.50 quarterly payment for each pharmacy which has NSP activity

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Schedule 2

Guidelines for the Pharmacies

National guidelines

- *Needle and Syringe Programmes – NICE Guidelines (PH52):* *http://www.nice.org.uk/guidance/ph52*
- *Drug Misuse and Dependence: UK Guidelines on Clinical Management 2017:* https://www.gov.uk/government/publications/drug-misuse-and-dependence-uk-guidelines-on-clinical-management
- *NICE Drug Misuse guidance & guidelines page:* https://www.nice.org.uk/guidance/health-protection/drug-misuse
- For Pharmacy Teams: CPPE Learning Gateway for Substance Use & Misuse: https://www.cppe.ac.uk/gateway/substance

Local Guidelines

Agreement details for referrals and advice will be provided by the Company through the LPC

Your local Company Harm Reduction Lead will also be able to provide the Contractor with on-going access to updated best practice guidance, training and support as Service provision is developed.

Appendix 1a – Example Pharmacy SOP for NSP

Pharmacy NSP SOP (template).docx

Appendix 1b – Example Pharmacy SOP for managing Needle Stick Injuries

Appendix 1b Example Needle Stick

Appendix 2– Handing Out Equipment: Checklist & Contact Numbers

Appendix 2 Handing out EQ checklist and (

Appendix 3 – List of equipment available to service users and ordering details

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Appendix 4 – Roles and Responsibilities

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