

**v-i-a**

**Service Level Agreement  
for  
Pharmacy Supervised  
Consumption**

# Service Level Agreement for Pharmacy Supervised Consumption

**THIS AGREEMENT** is made **BETWEEN**:

1. **Via Community Ltd** of Passmores House, Third Avenue, Harlow, Essex, CM18 6YL (Company Registration No. 2807934; Charity No. 1031602); and the provider named in the [Agreement](#) section (hereafter referred to as the 'Pharmacy')
2. Each a "Party" and together the "Parties".

## Background

- A. Via Community Ltd wish to enter into a Service Level Agreement (the 'Agreement') with the Pharmacy under which a supervised consumption service (the Service) will be provided by the Pharmacy.
- B. Via Community Ltd and the Pharmacy have agreed that the Pharmacy shall provide the Services to Via Community Ltd on the terms and conditions set out in this Agreement.

**NOW IT IS HEREBY AGREED** as follows:

## 1. Definitions and Interpretations

In this Agreement, the following words and expressions shall have the following meaning unless the context otherwise requires:

**Agreement** means this Agreement together with the schedule(s) and any appendices attached hereto or referred to herein;

**Associated Person** means in relation to a company, a person (including an employee, agent or subsidiary) who performs services for or on that company's behalf;

**Commencement Date** means the date of this Agreement or such later date as may be agreed by the Parties;

**Costs** means, without limitation, all and any payments, penalties, costs, claims, demands, damages, compensation, fines, awards, losses and expenses (including any legal or other professional fees on any indemnity basis) and any other liabilities whatsoever (including, for the avoidance of doubt, in relation to Tax);

**Data Controller** means the entity which alone or jointly with others determines the purposed and the means of the Processing of Personal Data;

**Data Subject** means a natural person whose Personal Data are processed in the context of this Agreement;

**Data Protection Legislation** means the Data Protection Act 2018 ("the Act") and the UK GDPR 2016 ("UK GDPR") as amended by the Data Protection, Privacy and Electronic Communications (Amendments etc) (EU Exit) Regulations 2020 or any successor legislation and any other directly applicable laws and regulations in the United Kingdom relating to data protection and privacy;

**Fees** means the fees for the Services as calculated in accordance with Schedule 1;

**Intellectual Property** includes all patents, copyrights, design rights, trademarks, service marks, trade secrets, know-how, database rights and other rights in the nature of intellectual property rights (whether registered or unregistered) and all applications for the same, anywhere in the world.

**Party** means any of the parties to this Agreement;

**Personal Data** means any information relating to an identified or identifiable natural person including 'special' categories of personal data as set out in Article 9(1) of the GDPR. An identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, generic, mental, economic, cultural, or social identity of that natural person;

**Service** means the service set out in Schedule 1.

**Third Party** means any supplier of services fundamentally the same as the Services (either in whole or in part) immediately before the Commencement Date;

**Working Day** means a day other than a Saturday, Sunday or public holiday in England when banks in London are open for business.

1.1. In this Agreement:

1.1.1. references to the singular includes the plural and vice versa, references to any gender includes a reference to all genders and references to a person includes natural persons, firms, partnerships, bodies corporate, corporations, associations, organisations, governments, states, foundations and trusts (in each case whether or not incorporated and whether or not having separate legal personality);

1.1.2. unless the context otherwise requires, references to any clause, sub-clause or schedule is to a clause, sub-clause or schedule of or to this Agreement;

1.1.3. any phrase introduced by the term "including", "include", "in particular", "for example" or any similar expression shall be construed as illustrative and the words following any of those terms shall not limit the sense of the words preceding any of those terms.

1.2. Each of the Schedules to this Agreement shall have effect as if set out in full, in the body of this Agreement.

## **2. Commencement and Duration**

This Agreement shall commence on 1<sup>st</sup> April 2026 and shall (subject to other provisions of this Agreement) continue until 31<sup>st</sup> March 2028.

## **3. Fees**

Via Community Ltd shall pay the Fees in accordance with the invoicing and payment provisions set out in Schedule 1 (Payment Arrangements).

The Fees set out in Schedule 1 (Payment Arrangements) will be subject to any applicable Value Added Tax at the prevailing rate.

## **4. Liabilities**

4.1. Neither Party limits its liability for death or personal injury caused by its negligence or that of its employees, agents or subcontractors as applicable.

4.2. Subject to clause 4.1, neither Party will be liable to the other Party for any indirect or consequential loss or damage including, without limitation, any indirect loss of business or profits in each case whether arising from negligence, breach of contract or otherwise.

## **5. Intellectual Property Rights**

- 5.1. All Intellectual Property Rights belonging to a Party prior to the execution of this Agreement shall remain vested in that Party.
- 5.2. All Intellectual Property Rights and all other rights in any documents or materials produced pursuant to this Agreement shall belong to Via Community Ltd.
- 5.3. Subject to clause 5.1, each Party will grant to the other a non-exclusive, non-transferable and revocable right to use and reproduce its name and trademark solely as necessary to permit the other's performance of its obligations under this Agreement. Use of the name and trademark will be agreed between the Parties and consent to such use will not be unreasonably withheld.
- 5.4. Neither Party shall use any name or trademark belonging to the other Party in any way that may damage the goodwill of the other Party.
- 5.5. Each Party shall indemnify the other Party against all costs, expenses, claims, losses and damages arising directly or indirectly from any claim by a third party that any Intellectual Property supplied by the Party infringes the trademark, patent, copyright, design or other intellectual property right of such third party.

## **6. Confidential Information**

- 6.1. Each of the Parties agrees that it shall keep any information designated as confidential or which is otherwise clearly confidential in nature ("Confidential Information") received by it from the other Party before or during the term of this Agreement and which relates to the business, clients and suppliers of the other Party and that it shall not use any such Confidential Information for its own benefit (save as is necessary in order to perform its obligations and/or exercise its rights under this Agreement) or disclose any such Confidential Information to any third party and that it shall ensure that no third party shall have access to it. Notwithstanding the foregoing, the Parties shall be entitled to disclose the Confidential Information to its employees to the extent that those employees have a genuine need to know the same to enable the Parties to perform their obligations or exercise their rights under this Agreement and who have been advised of the existence and terms of this Agreement, and who are legally obligated to protect the Confidential Information from unauthorised disclosure or use. The recipient of the Confidential Information shall be liable for acts in violation of this Agreement as if they were actions or omissions of that Party.
- 6.2. The restrictions in clause 6.1 shall not apply to any Confidential Information which is required to be disclosed as a matter of law, statutory or regulatory provisions that either Party, individually or jointly, may be subject to in the United Kingdom.
- 6.3. Each Party shall, if so requested by the other Party following termination of this Agreement, deliver up to the other party or destroy all documents and (save to the extent that the same shall have been incorporated into the formal records of that party) other material in its possession or control which include or incorporate any Confidential Information of the other party save that one copy of the Confidential Information may be kept by the legal department of each Party for audit purposes. All such incorporated or retained confidential information shall remain subject to the obligations set out in the preceding provisions of this clause 6.
- 6.4. Via Community Ltd may require the Pharmacy to supply any relevant information required to carry out monitoring and evaluation of the Service. Any Client information supplied must be anonymised where appropriate and will not be used for any purpose other than monitoring, evaluation and validation.

## **7. Data Protection**

- 7.1. The Parties agree that in relation to any Personal Data and Special Category Personal Data (together "Client Data") that may need to be processed by Via Community Ltd in the course of providing Services under this Agreement, Via Community Ltd shall be the Data Processor and the Pharmacy shall be the Data Controller. "Data Controller", "Personal Data" and "Special Category Personal Data" have the meaning defined in the Data Protection Legislation.
- 7.2. Each Party shall at all times, comply with their respective obligations under Data Protection Legislation in relation to all Client Data that is processed by it in the course of performing its obligations under this Agreement.

## **8. Termination**

- 8.1. Each Party may terminate this Agreement at any time on giving not less than 3 months' written notice to the other Party.
- 8.2. Without prejudice to its other rights or remedies which the Parties may have, either Party may terminate the Agreement immediately by written notice to the other Party, if the other Party (where applicable):
  - 8.2.1. commits a material breach of any of the terms of this agreement and (if such a breach is remediable) fails to remedy that breach within thirty (30) days of that Party being notified in writing of the breach;
  - 8.2.2. repeatedly breaches any of the terms of this agreement in such a manner as to reasonably justify the opinion that its conduct is inconsistent with it having the intention or ability to give effect to the terms of this agreement; or
  - 8.2.3. is unable to pay its debts or becomes insolvent, is the subject of any order made or a resolution passed for the administration, winding-up or dissolution (otherwise than for the purpose of a solvent amalgamation or reconstruction), has an administrative or other receiver, manager, trustee, liquidator, administrator, or similar officer appointed over all or any substantial part of its assets, enters into or proposes any composition or arrangement with its creditors generally or is the subject of any events or circumstances analogous to the foregoing in any applicable jurisdiction.
- 8.3. On termination of this Agreement for any reason, the accrued rights, obligations and liabilities of the Parties as at termination and the continuation of any provision expressly stated to survive or implicitly surviving termination, shall not be affected.

## **9. Force Majeure**

- 9.1. In this clause, "Force Majeure" shall mean any event or circumstance which is beyond the reasonable control of the Party affected by it including, but not limited to an act of God, local government or government, war, fire, flood, earthquake or storm, acts of terrorism, explosion, civil commotion or industrial dispute affecting a third party (for which a substitute third party is not readily available).
- 9.2. If either Party is, or considers that it is likely to be, affected by a Force Majeure event, it shall promptly notify the other Party of the relevant event or circumstance.
- 9.3. Neither Party shall be in breach of this Agreement if any delay or failure in the performance of any obligation of that Party under this Agreement is caused, in whole or in part, by any Force Majeure and any time by which, or period within which, that obligation is to be performed shall be extended accordingly.

## **10. Dispute Resolution**

- 10.1. If any dispute arises out of this Agreement, the Parties shall attempt to settle it by negotiation, who shall seek in good faith to resolve the dispute within twenty-one (21) days of the issue being referred, escalating it within their respective companies as necessary for this purpose.
- 10.2. If the Parties are unable to settle any dispute by negotiation within twenty-one (21) days, the Parties may elect to refer the dispute to mediation or an alternative form of dispute resolution however nothing in this Clause shall prevent the Parties commencing or continuing court proceedings at any time.

## **11. Assignment/Sub-Contracting**

- 11.1. Neither Party shall assign, transfer, charge or otherwise deal with all or any of its rights under this Agreement without the prior written consent of the other Part. No such permitted assignment shall relieve either Party of any of its obligations under this Agreement.

## **12. Variations**

- 12.1. The Agreement may only be amended or varied by a document in writing signed by a duly authorised person on behalf of each Party.

## **13. Governing Law**

- 13.1. This Agreement shall be governed by English law and the Parties hereby agree, for the purposes of this Agreement only, to submit themselves and any claim or matter arising under or in connection with this Agreement to the exclusive jurisdiction of the English courts.

# Schedule 1

## A: Service Specification:

### 1. Introduction

- 1.1 Community pharmacies are ideally placed to provide supervised consumption to service users within an agreed and structured protocol.
- 1.2 Supervised consumption helps keep service user's safe and supports adherence to their prescribed medication.
- 1.3 Supervised consumption also helps keep communities safe by reducing opportunity for diversion and illicit supply of medication.
- 1.4 Daily contact allows not only a relationship to develop but also monitoring of service user adherence and the opportunity to offer timely supportive advice and response on issues of concern.
- 1.5 Community pharmacies must be aware that supervision aims to liberalise as soon as safe and clinically appropriate to do so, but may be reinstated at times of crisis, relapse or by service user's choice, as part of an evolving treatment plan.

### 2. Aims

- 2.1 To work collaboratively with prescribing agencies to enhance the treatment and care experience for people who are prescribed supervised consumption.
- 2.2 To minimise the possible harmful effects and of supply of substances liable to misuse, by both increasing adherence and reducing supplies diverting into the illicit market.
- 2.3 To adhere to the Drug Misuse Dependence UK Guidelines on Clinical Management and National Institute for Health and Clinical Excellence (NICE) guidance TA114; methadone and buprenorphine for the management of opioid dependence.
- 2.4 To share valuable data with prescribing agencies to allow them to intervene at critical times during the treatment journey.

### 3. Objectives

- 3.1 To ensure there is a model of pharmacy care with associated counselling and care programmes for substance misusers, aimed at immediate harm minimisation, with the ultimate goal of recovery wherever possible.
- 3.2 To ensure the service user takes the correct dose of medication as prescribed by the clinician.
- 3.3 To notify the prescribing agency of missed and late doses for those who are prescribed supervised consumption.
- 3.4 To ensure greater involvement of community pharmacists in the care of more stable drug misusers.
- 3.5 To ensure that the medication is not inappropriately diverted into the illegal market.

## **4. Principles of the Service**

- 4.1 The Service Specification outlines the procedures for carrying out the Service and its administration. The service specification has been separated into prescriber and community pharmacy responsibilities.
- 4.2 Supervised consumption is recommended for new prescriptions. The duration of supervision will be based on an individual risk assessment for, and with each service user. The dispensing arrangements should take into account the service user's social factors such as child responsibilities and employment.
- 4.3 Supervision itself may create secondary dependence. Service users should not see it as a punishment but as a supportive measure and one in which a therapeutic relationship can be developed.
- 4.4 The service user enters into a contract with the Pharmacy to ensure appropriate engagement.
- 4.5 There must be a designated area in the Pharmacy i.e. consultation room/area that has been passed as suitable for delivering professional services as part of the Community Pharmacy Assurance Framework Monitoring Visits, that takes into account both the service user's dignity and that of other customers of the Pharmacy and its staffs' safety. Supervision must never occur in the dispensary. This as a minimum should allow the service user to take medication out of public view; be constructed in such a way that the client cannot be easily overheard talking to Pharmacy staff, and should not be used to store stock or act in the capacity of a staff room at any time.

## **5. Prescriber Responsibilities**

- 5.1 The prescriber shall reach an understanding with the service user that their prescriptions will be dispensed at a designated community pharmacy. This will be recorded in the Prescribed Treatment Agreement (see Appendix One). The prescribing agency must negotiate with the service user the most suitable community pharmacy, which is part of the scheme.
- 5.2 The Pharmacy shall be contacted in advance by the prescribing agency to ascertain if the Pharmacy has space to take the service user, and that there are no historical issues e.g. a ban. If the Pharmacy is able to take the service user, then the prescribing agency will discuss the dispensing arrangements for the service user.
- 5.3 If the Pharmacy accepts the service user, then the prescribing agency must complete a Prescribed Treatment Agreement and a copy will be presented to the Pharmacy by the service user at the first visit or emailed by the prescribing agency in advance. The Pharmacy will sign and retain a copy of the Prescribed Treatment Agreement on site for the duration of the treatment.
- 5.4 The prescribing agency must provide feedback to the service user, when appropriate, on service user issues raised by the Pharmacy.
- 5.5 The length of time an individual is under supervision and when that is instigated will vary and be dependent on an assessment as provided for by the Drug Misuse and Dependence UK Guidance on Clinical Management 2017.
- 5.6 It is important that close links are maintained between the prescribing agency and Pharmacy involved in the Service. To avoid any confusion or 'mixed messages' each service user will have a named Via recovery coordinator.

## **6. Pharmacy Required Training**

- 6.1 It is a requirement for the accredited pharmacists and pharmacy technicians providing the Service to have completed the CPPE training on 'Substance Use and Misuse' and 'Opioids' within 6 months of commencing provision of the Service. If the training has been completed in the last 2 years prior to commencing the Service there is no need to repeat this.
- 6.2 The pharmacists and pharmacy technicians must complete the CPPE 'Declaration of Competence (DoC) for Supervised Consumption of Prescribed Medicines' and indicate declaration of this on PharmOutcomes. Refresher training must be undertaken, and evidence provided of completion every two years.
- 6.3 Training will be completed, and evidence provided to Via through PharmOutcomes prior to the service being delivered.
- 6.4 A three month grace period will be provided for new staff members to complete the required training avoiding disruption to Service delivery.
- 6.5 The local Via service will provide update training, suitable for all members of the pharmacy team on an annual basis. This will be delivered as an online event.
- 6.6 Training will be delivered on appropriate topics, in order to reinforce knowledge and skills and identify any gaps or additional training needs; alongside sharing information on incidents, resolving queries, and expanding ideas for improvements to the service.
- 6.7 Attendance at the annual training is recommended as part of the Service delivery.

## **7. Pharmacy Responsibilities**

- 7.1 The Pharmacy must have an understanding of and must comply with 'Community Pharmacy: Delivering substance misuse services (OHID 2024)' best practice guidance, and with the General Pharmaceutical Council (GPhC) 'Standards for Pharmacy Professionals'; and any locally set clinical governance and quality standards as agreed by the Pharmacy and Via.
- 7.2 There is a professional requirement for all participating pharmacies to put in place and operate written standard operating procedures (SOPs) covering this locally commissioned enhanced service.
- 7.3 The Pharmacy will ensure that:
  - a. All pharmacy staff are appropriately trained, registered where required, responsible, and accountable.
  - b. All dispensing is in accordance with all legal requirements and practice guidance for the provision of instalment dispensing services to drug misusers, as well as the supervised consumption guidelines as detailed within this document.
  - c. It uses a SOP from its own organisation, providing it is not contrary to the provisions in this agreement.
  - d. All reasonable efforts are made to accommodate all new supervised consumption service users who are referred to the Service.

- e. It will not decline new referrals for supervised consumption unless it has reached capacity or there is a valid professional clinical reason for refusal.
  - f. It responds to requests from the prescribing agency to discuss any clinical issues or queries within the same working day and ideally at an interval of no more than 4 hours after the initial request.
  - g. It relays any appropriate concerns or comments regarding a service user's progress or conduct to the prescribing agency.
- 7.4 The Service will operate every day the Pharmacy is open.
- 7.5 The Pharmacy will take part in audit activity, including visits, and agree to share information regarding substance misuse data to allow discussion and improvement of services.
- 7.6 When the service user first attends, the Pharmacy must:
- a. Check that the service user meets the description given by the named contact.
  - b. Check the details of the Prescribed Treatment Agreement and register the service user on the Patient Medical Record (PMR) system.
- 7.7 The Pharmacy will establish an appropriate system to aid service user identification when collecting medication.
- 7.8 The Pharmacy must take the service user through the Prescribed Treatment Agreement and discuss any relevant information including:
- a. The opening hours for the service user to access the Service (this must be as flexible as possible to encourage retention).
  - b. The Pharmacy's right to contact the prescriber and/or named contact or any other relevant healthcare professional.
  - c. That missed doses cannot be dispensed at a later date.
  - d. That medicines will not be dispensed if a service user has missed three or more consecutive doses.
  - e. That medicine will not be dispensed if the Pharmacy suspects that there is drug and/or alcohol intoxication. If this is the case then the service user must be asked to return later or the prescribing agency contacted for assessment.
  - f. That the service user must come in alone.
  - g. The expectation of acceptable behaviour between the Pharmacy and the service user.
- 7.9 If a service user has missed one titration dose, then the Pharmacy must contact the prescribing agency by telephone to inform of the missed dose. If the service user misses three consecutive doses, the Pharmacy must contact the prescribing agency and discuss the appropriateness of dispensing the dose.
- 7.10 If a service user has missed collecting three or more consecutive doses and it is not possible for the Pharmacy to speak to the prescribing agency at that time, as it is outside normal opening hours, then the Pharmacy must not dispense the dose.

- 7.11 Where the Pharmacy has not dispensed a daily dose of medication, entries must be made on the relevant patient medication record.
- 7.12 The Pharmacy must also contact the prescribing agency if the service user fails to attend regularly to collect their medication within any two-week period.
- 7.13 The risk of death during methadone induction is nearly seven-fold greater during initiation than once on methadone maintenance. Therefore extra caution must be exercised during the first weeks and any dose missed must be reported to the prescribing agency.
- 7.14 All service users must receive medication daily in accordance with the prescriber's directions. The Pharmacy must dispense instalments due on Pharmacy closed days on a prior suitable day. If an instalment's collection day has been missed, the Pharmacy must still dispense the amount due for any remaining day(s) of that instalment.
- 7.15 It is good practice for pharmacists to supply multiple doses in separate containers. To reinforce this practice, additional Home Office wording can be added to the prescription e.g. 'Dispense daily in separate containers'. Where the decision is taken by the pharmacist not to do this, a suitable measuring device should be supplied.
- 7.16 Where the dispensing service has been terminated for a service user for whatever reason, any prescriptions that have not yet been started must be crossed and marked 'INVALID'. A note must be made on the service user's patient medication record, and the prescription destroyed in the presence of a witness and placed in confidential waste.
- 7.17 Locum pharmacists must be made aware of this Service and the procedures in advance of the provision of locum cover.

## **8. Referral Criteria/Liaison**

- 8.1 Service users may be re-referred back to the prescribing agency for supervised consumption if for example:
- a. Collections are erratic.
  - b. Drug testing results or disclosures indicate on top use.
  - c. There is concern that the prescribed drug is being diverted or used inappropriately.
  - d. The service user shows a continued and unstable pattern of drug misuse.
  - e. There are broader concerns such as safeguarding e.g. to reduce the chance of accidental consumption by children.

## **9. Dispensing and Supervision**

- 9.1 Doses of medicines can be made up in advance each day (assuming the Pharmacy is in possession of a current prescription). Where prepared in advance, it is recommended that medicine is dispensed into an appropriate child resistant container, labelled in accordance with the requirements of the Medicines Act, and must be stored in the Controlled Drugs cupboard until the service user arrived at the Pharmacy.

- 9.2 When the service user arrives, the Pharmacy staff must ensure that the service user is correctly identified, and interact with them to determine general health and suitability for collecting medication and receiving their dose of medicine.
- 9.3 All labels must be removed from the service user's dispensed containers, or have their name obliterated indelibly, before throwing away, to maintain confidentiality. It is also good practice to rinse out any methadone container before disposal.

## **10. Procedure Specific to Methadone**

- 10.1 The daily amount should be measured into a suitable container, capped and labelled. When the service user arrives, ideally the measured dose may be poured into a disposable cup.
- 10.2 The pharmacist or pharmacy technician should be satisfied that the dose has been swallowed. This can be carried out by giving the service user water to take immediately afterwards, or by conversing with the service user. The service user should always be offered a drink of water in a disposable cup. Please note that diversion can occur in the following ways:
- a. Swapping of bottles – the top must be taken off the methadone bottle when given to the service user so that this can't be swapped with an empty one.
  - b. "Spit-methadone" – some people may say that they prefer to wash down their methadone with a can of soft drink. However, what they might do is to discharge ('spit') the methadone into the can instead for a later sale.
- 10.3 Sugar free or colourless methadone mixture should only be dispensed if specifically requested on the prescription. It is important that the dose is ready for the service user's arrival.
- 10.4 The whole transaction should be as discreet and efficient as possible, maintaining the service user's dignity.
- 10.5 Doses that are collected to be taken on Sundays or bank holidays must be dispensed in a container with a child resistant closure. Service users must also be advised to store their medication out of the reach of children.

## **11. Procedure Specific to Buprenorphine and Buprenorphine / Naloxone Sublingual Tablets**

- 11.1 If it is the service user's first dose of buprenorphine, the pharmacist or pharmacy technician should explain that they must have waited at least 8 hours since their last heroin use or at least 24 hours since their last dose of methadone. Ideally service users should be in the initial stages of withdrawal before taking their first dose. This is to minimise the risk of precipitated withdrawal. It is the service user's responsibility to assess his or her own withdrawal state and readiness for the first dose.
- 11.2 A drink of water should be supplied to the service user prior to dose to moisten the mouth (this aids dissolution of the tablet).
- 11.3 It should be explained that the tablet(s) must be dissolved under the tongue to absorb the active ingredient and the service user should avoid swallowing (both the tablet(s) and saliva whilst dissolving).

- 11.4 The pharmacist or pharmacy technician will place the tablet(s) into a pot and hand to the service user. The pharmacist or pharmacy technician will then observe the service user placing the tablet(s) under the tongue to dissolve. The pharmacist or pharmacy technician can ask to observe the tablets in situ under the tongue before they begin to dissolve (to ensure the tablet(s) have been placed under the tongue). The service user should be observed until the tablet(s) have dissolved and then asked to open their mouth to confirm the tablet(s) has dissolved. Supervision is most important in the first three minutes during which time the majority of the tablet will have dissolved and the risk of diversion greatly reduces. It should be noted that different brands of buprenorphine have different dissolution rates.
- 11.5 Service users should be advised that excessive saliva production may reduce the effectiveness of the drug and is not desirable. Saliva should be ideally kept in the mouth and not swallowed.
- 11.6 Crushing of buprenorphine prior to administration is not recommended but may be required in exceptional circumstances. It should be noted that this is an off-label use.

## **12. Procedure Specific to Buprenorphine Oral Lyophilisates (Espranor®)**

- 12.1 The route of administration of Espranor® is on the tongue, not under it.
- 12.2 The pharmacist or pharmacy technician will prepare the dose. The oral lyophilisate should be taken from the blister unit with dry fingers and placed whole on the tongue until dispersed, which usually occurs within 15 seconds. Swallowing should be avoided for 2 minutes and no food or drink consumed for 5 minutes after.
- 12.3 Espranor® is not interchangeable with other buprenorphine products. Different buprenorphine products have different bioavailability, and as a result the dose in mg can differ between products. Once the appropriate dose has been identified for a service user with a certain brand, the brand cannot be readily exchanged with another brand.

## **13. Data Recording and Information Sharing**

- 13.1 The Pharmacy will share relevant information with other healthcare professionals and agencies, in line with locally determined confidentiality arrangements. The service user should be informed that information is being shared (unless to do so would put another person at risk e.g. in the case of suspected child abuse).
- 13.2 All provisions of a dose of prescribed medicine will be recorded on PharmOutcomes. These records will operate together with the Controlled Drug Records required by legislation.
- 13.3 The Pharmacy will maintain records of the Service provided and record on PharmOutcomes all occasions where the service user fails to attend the Pharmacy to collect a prescribed dose of medication.

## **14. Incidents**

- 14.1 Incidents and feedback in relation to this Service will be reported to and investigated as per the Pharmacy's incident reporting procedures.
- 14.2 A summarised copy of the incident report, investigation, and outcomes will be provided

to Via when requested.

14.3 Any serious incidents will be notified to Via within 5 working days.

## 15. Payment Arrangements

15.1 The fee payable for the provision of a community pharmacy Supervised Consumption Programme service is a fee for each dose issued:

| Payments to be made (fee per supervised consumption) | Amount |
|--|--------|
| Methadone oral solution/tablets                      | £2.56  |
| Buprenorphine oral lyophilisates (Espranor®)         | £2.56  |
| Buprenorphine sublingual tablets                     | £3.88  |
| Buprenorphine and Naloxone sublingual tablets        | £3.88  |

15.2 Payment will be made monthly upon the input of the data on PharmOutcomes. Invoices will be generated automatically by PharmOutcomes on the 6th of the month.

15.3 Claims for payments for this service should be submitted within one month of, and no later than two months from the claim period for the chargeable activity provided.

15.4 All sums are exclusive of VAT, which shall be applied at the appropriate rate where applicable.

15.5 Fees will be paid based on submitted claims, into a bank account specified by the Pharmacy.

15.6 The service contract and financial details will need to be completed and returned before any payments will be made.

15.7 The information required to be reported on PharmOutcomes may be developed to reflect the changing requirements of the commissioner.

15.8 Either party wishing to terminate this agreement must give three months' notice in writing. However, Via reserves the right to suspend or terminate the service at short notice following a significant event or serious incident.

## B. Key Contacts

### Via General Contractual Queries:

|                          |  |
|--------------------------|--|
| <b>Company Name:</b>     | Via Community Ltd  |
| <b>Address:</b>          | Passmores House, Third Avenue, Harlow, Essex, CM18 6YL         |
| <b>Name:</b>             | Emma Griss, Director of Pharmacy                               |
| <b>Telephone number:</b> | 07976 968691   |
| <b>Email address:</b>    | <a href="mailto:Emma.Griss@viaorg.uk">Emma.Griss@viaorg.uk</a> |

### Via Finance Queries:

|                          |  |
|--------------------------|--|
| <b>Department Name:</b>  | Via Finance Department                                   |
| <b>Address:</b>          | Passmores House, Third Avenue, Harlow, Essex, CM18 6YL   |
| <b>Telephone number:</b> | 020 7421 3106  |
| <b>Email address:</b>    | <a href="mailto:finance@viaorg.uk">finance@viaorg.uk</a> |

### Service User Referral to Via Prescribing Service Queries:

|                          |  |
|--------------------------|--|
| <b>Service Name:</b>     | Via West Berkshire   |
| <b>Address:</b>          | 1 Station Road, Newbury, Berkshire, RG14 7LP                           |
| <b>Telephone number:</b> | 0300 303 4554  |
| <b>Email address:</b>    | <a href="mailto:west.berkshire@viaorg.uk">west.berkshire@viaorg.uk</a> |

## C. Agreement

Via Community Ltd and the Pharmacy confirm their understanding and acceptance of the terms laid out in this Agreement and acknowledge same below:

### *For and on behalf of Via Community Ltd*

|                    |   |
|--------------------|---|
| <b>Print name:</b> | Dani Cawsey   |
| <b>Job Title:</b>  | Service Manager   |
| <b>Signature:</b>  |  |
| <b>Date:</b>       | 31 <sup>st</sup> March 2026   |
| <b>Telephone:</b>  | 07759 131841  |
| <b>Email:</b>      | <a href="mailto:dani.cawsey@viaorg.uk">dani.cawsey@viaorg.uk</a>                  |

### *For and on behalf of the Pharmacy*

|                          |  |
|--------------------------|--|
| <b>Print name:</b>       |  |
| <b>Job Title:</b>        |  |
| <b>Signature:</b>        |  |
| <b>Date:</b>             |  |
| <b>Provider Name:</b>    |  |
| <b>Provider Address:</b> |  |
| <b>Company Reg. No.:</b> |  |
| <b>Telephone</b>         |  |
| <b>Email</b>             |  |

### D. Pharmacies Providing the Service

| Pharmacy Name | Pharmacy Address | Telephone Number | Email |
|---------------|------------------|------------------|-------|
|               |                  |                  |       |
|               |                  |                  |       |
|               |                  |                  |       |
|               |                  |                  |       |
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## Appendix One: Prescribed Treatment Agreement

|                          |  |                      |  |
|--------------------------|--|----------------------|--|
| <b>Service User Name</b> |  | <b>Date of Birth</b> |  |
| <b>Nebula No.</b>        |  | <b>NHS No.</b>       |  |

**You are now receiving a regular prescription for addictive medication and, for your safety, we require you to accept these rules.**

1. I understand that it is in my best interests to be honest about my drug use.
2. I agree to all attend appointments on time and to see the doctor/Non-Medical Prescriber (NMP) at least twice a year for a Medical Review and general check-up. I understand that the Doctor/NMP is responsible for my prescription and cannot commence, recommence or continue to sign it without verifying my health. If I miss more than two appointments, my prescriptions may be stopped.
3. I agree to treat staff, other clients at VIA, and the Pharmacy with respect.
4. I understand that Physeptone<sup>®</sup> (Methadone), Buprenorphine (Generic or Espranor<sup>®</sup>), and Suboxone<sup>®</sup> can cause serious harm or death in overdose.
5. I understand that my medication is potentially dangerous for people with no opiate tolerance, particularly children. Due to this, I have been offered a safe storage box for my medication and will ensure that my medication is kept safe at all times.
6. I understand that prescribed medication can cause drowsiness and I must inform the **DVLA** if I am a licence holder. If I operate machinery, I must inform my employer/colleague that I am taking medication which may cause drowsiness.
7. I have been informed that it is dangerous to mix Physeptone<sup>®</sup> (Methadone), Buprenorphine (Generic or Espranor<sup>®</sup>) or Suboxone<sup>®</sup> with alcohol and/or benzodiazepines.
8. I understand that taking **any other** drugs not prescribed may result in my prescription being stopped.
9. I agree to give urine or oral fluid specimens or be breathalysed at regular intervals and/or if we have concerns. If the service believes me to be acutely under the influence of alcohol or substances, I understand that I will be expected to provide a urine screen and/or be breathalysed.
10. I understand that shoplifting in the pharmacy will result in my prescription being discontinued.
11. I understand that my prescribed medication is for my use only. Giving or selling medication to anyone else is a criminal offence.
12. I understand that if I fail to collect my prescription from VIA or, fail to collect 3 consecutive days from the pharmacy, my prescription will be stopped.
13. Should I miss my medication for 3 consecutive days, I understand that I will be expected to attend re-engagement appointments prior to being reviewed by a Dr/NMP for recommencement of prescribing, unless I can provide evidence that missing prescribed doses was unavoidable.

14. Once the prescription has been issued, I understand that it is my responsibility to look after it and the medication that is dispensed. Lost/stolen/damaged medication is unlikely to be replaced and must be reported to the police immediately. Lost prescriptions will be replaced at the service's discretion and only after I have provided a valid crime reference number.
15. I understand that making any alterations to details featured on my prescription will render it invalid and potentially end my prescribing with immediate effect and is a criminal offence.
16. If I am intending to travel I will give at least 2 week notice in order for VIA to discuss this request to arrange prescriptions and any Export Notices needed. Proof of travel arrangements will be required. A minimum of 2 urine/oral fluid samples confirming abstinence from substances is also required, except in exceptional circumstances.
17. I understand that details of my treatment will be shared with my GP. If I am not registered with my GP, I agree to register within the initial 4 weeks of my treatment commencing or treatment will cease.

**I have read and understand the above rules and I agree to abide by them. Should I fail to comply with any of the above, I understand that my prescription may be stopped, suspended or a statutory detoxification regime given and/or my dispensing regime may be changed.**

|                         |  |                            |  |
|-------------------------|--|----------------------------|--|
| <b>Client Name</b>      |  | <b>Keyworker Name</b>      |  |
| <b>Client Signature</b> |  | <b>Keyworker Signature</b> |  |