TMBC SERVICE SPECIFICATION

NEEDLE EXCHANGE

2015 - 2016

Executive Summary

This new contract aims to provide clear minimum standards for pharmacies, reward high quality services and make better use of the skills of pharmacists and their staff. This contract is an enhanced service to be delivered by appropriate pharmacies. Trafford commissioners will not pay for the seven essential services that form part of the essential service delivery; these are:

- Dispensing, including support for people with disabilities
- Disposal of unwanted medicines
- Promotions of healthy life styles (public health)
- Signposting
- Support for self care
- Clinical governance

These essential services should be automatically applied to benefit substance misusers and should be supplemented by the enhanced needle exchange and/or supervised consumption services as described below.

This Trafford specification has been developed to improve the quality of the delivery, and health outcomes for the provision of a needle exchange service and a supervised consumption service.

Trafford recognise the effectiveness of the role played by pharmacists and would like to encourage the growth in quality and breadth of the service. Pharmacists, as part of a team of healthcare professionals, have a key role to play in providing services to substance misusers. They also act as a link to treatment services and other relevant agencies by acting as referral agents for clients to attend treatment.

Aims and Objectives of the services

The overall aim of pharmacy services to drug users are to assist the service user to remain healthy, reduce drug related harm, work towards Recovery, provide service users with regular contact with a healthcare professional and help them access further advice or assistance.

Pharmacy needle exchanges aim to reduce the rate of sharing and other high risk injecting behaviours by providing sterile injecting equipment and other support, as well as ensuring the safe disposal of used injecting equipment. It is essential for providers to encourage the return of needles, a payment incentive will be provided.

Pharmacies providing dispensing services for substance misusers will ensure compliance with the agreed Recovery Plan and aim to improve retention in drug treatment by providing installment dispensing and ensuring each supervised dose is correctly administered to the patient for whom it was intended. Pharmacists will contribute to the shared care of the patient by liaising with the prescriber or named key worker directly involved in the care of the patient. This should reduce the risk to local communities of diversion of prescribed

medicines onto the illicit drugs market. This service will be available to all individuals who have drug-related problems, including dependent opioid users as well as those who present with additional polydrug use or concurrent use of benzodiazepines, pychostimulants and alcohol.

Clients using steroids may buy needles, but are NOT within the scope of the free needle exchange policy.

Access to pharmacy needle exchange facilities and harm reduction initiatives is voluntary and open. Referrals will be accepted from a wide variety of sources, with self referral being the most usual route of access. Whenever possible and where appropriate, pharmacy service providers should facilitate onward referral to specialist drug treatment services.

Pharmacists or other appropriately trained staff should provide direct input wherever possible to promote harm reduction, health promotion and Recovery. Pharmacists should encourage hepatitis B immunization and course completion and hepatitis C assessment if the risk of that disease is high.

It is appropriate for pharmacy needle exchange and/or supervised consumption services to provide screening, risk assessment, referral, advice where appropriate and needle exchange equipment as well as compliance with legal responsibilities in dispensing.

Pharmacy needle exchange facilities and harm reduction initiatives provide an easy, low threshold, open access and user friendly service. Supervised consumption must take place in a private or quiet area of the pharmacy. There will be a requirement to share relevant information with all professionals involved in the treatment of individuals – this within the bounds of pharmacists professional confidentiality guidelines.

It is essential that pharmacists have an operating procedure in place specific to their premises.

The contracts with each pharmacist or chemist will be managed by the Specialist Commissioning Team for the foreseeable future or until legislative changes remove Public Health from the Local Authority. The main contact for this specification will be:

Kylie Thornton – Commissioning and Service Development Manager

The contact details are:

Drugs and Alcohol Action Team
Trafford Council
Children, Families & Wellbeing
1st Floor
Trafford Town Hall
Talbot Road
Stretford
Manchester
M32 0TH

0161-912-4776

Email: kylie.thornton@trafford.gov.uk

The following pages detail the expectations of this specification, the payment regime and the data reporting requirements.

Needle and syringe services

Definition – of a needle and syringe programme

It's anticipated that the provision of would not take longer than 2 -3 minutes as required, and staff should not put themselves in danger in delivering any aspect of this specification.

The supply of needles, syringes and other injecting equipment used to prepare and take illicit drugs (for example, filters, citric acid, mixing containers) The main aim of the service is to reduce the transmission of blood borne viruses through injecting drugs, it is also to reduce other harms caused by injecting drugs. A further aim of this specification is to encourage clients using the service to attend drug treatment provided in the borough.

The provision of the service is to include:

- Access to sterile needles and syringes, and sharps containers for return of used equipment
- Encouraging users to register with a GP
- Provide advice on safer injecting –i.e a referral to a health specialist within drug treatment
- Requiring users to return injecting equipment to the service for safe disposal
- Advice on avoiding overdose
- Information on safe disposal of injecting equipment
- Help to stop injecting drugs
- Referral to other health and social care services
- Provide information about agencies offering further support

It is important that care and interventions offered by a pharmacy needle exchange match the level of training and expertise of the staff. This contract would expect to see included in the Needle exchange service a range of interventions that include

Screening, risk assessment and referral
Referral to immunisation clinics or services

The target population

Adults over the age of 18 years who inject drugs are the target population for injecting:

- Opioids
- Stimulants
- Other illicit substances
- Non-prescribed Anabolic Steroids, or other performance or image enhancing drugs – (needles can be provided but clients should be charged for these needles, Providers cannot claim from Trafford Council for distributing).

- Special attention may have to be given to clients who are not in touch with drug treatment services.

Aims and objectives

- To assist the service user to remain healthy until they are ready to cease injecting and ultimately achieve a drug-free life with appropriate support
- To reduce the rate of sharing and other high-risk injecting behaviours by providing sterile injecting equipment and other support
- To promote safer injecting practices, to reduce the risk of BBV infection and risk of overdose
- To help service users access other health and social care and to act as a gateway to other services
- To ensure the safe disposal of used injecting equipment
- To maximise the access and retention of all injectors, especially the highly excluded, through the low threshold nature of service delivery
- To prevent initiation into injecting and to encourage alternatives to injecting

On-going support and advice

A comprehensive assessment of needle exchange clients is not required, especially if it constitutes a barrier to service utilisation. As a minimum, this contract requires that all clients must be:

- Informed of drug (and alcohol) treatment services in the borough with clear information on referral and eligibility criteria
- Encouraged to register with a GP
- Provided with details of other pharmacies offering needle exchange in the locality
- Provided with information about harm reduction and services
- Provided with information of overdose risks
- Informed about the need for the provision of injecting equipment and the risks of sharing injecting equipment, unsafe injecting practices
- Informed about the risks of unsafe disposal of used injecting equipment
- Informed about sites for disposal of used injecting equipment
- Informed about the importance of always returning used equipment for safe disposal
- Given advice on safer injecting practices – the risks of sharing or borrowing injecting equipment, filters spoons etc
- Given advice on legally available paraphernalia including whether and where this can be accessed by clients if not available via the pharmacy

- Given advice on safe storage and handling of injecting equipment
- Given advice and interventions on drug-related harm that do not involve injecting (e.g harm related to smoking crack)

Handing out equipment

Following training in the safe management of needles and syringes, pharmacists managing the needle exchange service should:

- Distribute the appropriate pack of sterile needles and syringes
- Safely dispose of injecting equipment, including the supply of personal sharps bins, in the large bins provided by the waste management contract, SRCL.

Please note these are separate to the bin used to collect patient returned sharps funded by the NHS.

- Distribute other safe and appropriate harm minimisation injecting paraphernalia – specifically, swabs, filters, citric acid, ascorbic acid and water for injections (not more than 2ml of sterile water)
- Be consistent in their effort to maximise the return of used injecting equipment.

Should Pharmacists ask where a service user is disposing of used injecting equipment, promote safe injecting and disposal.

Staff

Pharmacists and their staff will adhere to the General Pharmaceutical Councils 'standards of conduct, ethics and performance'. In addition the National Pharmacy Association (NPA) provides members with a resource manual on operating a needle exchange.

Pharmacies should ensure that staff who dispense needles, syringes or packs receive appropriate training for the level of service they offer.

As a minimum this should include awareness training on the safe handling and disposal of needles, the correct procedures to minimise any risks (a needle stick policy must be in place), health promotion advice and how to minimise the harm caused by injecting. Staff must be aware of and operate within the framework of the pharmacies' protocols. Appropriate protective equipment will be provided by the contractor for the staff including gloves and overalls and materials to deal with spillages. Particular consideration should be given to the safety of pharmacy staff using completely closed consulting rooms

Training must be updated regularly in response to changes in drug use, risk behaviours, BBVs, harm minimisation and local or national drug strategies or legislation. This may be through formal events organised or endorsed by Trafford Council or other accredited agencies, through newsletters, information packs and a variety of on-line learning hubs about substance misuse (**www.smmgo.org.uk**)

Pharmacy policies and protocols

The standard operating procedure for pharmacy needle exchange must detail requirements around the following issues:

- Security of staff, stock and premises
- Minimising of risk to staff and members of the public

- Dealing with unacceptable behaviour and guidance on – what is unacceptable and ways of minimising unacceptable behaviour
- Seeking to prevent needle stick injuries
- Client confidentiality – including what to do when a patient request needle exchange who is also being prescribed substitute medication
- Dealing with needle stick injuries based on contemporary definitions and guidance
- Dealing with spillage or contamination by potentially infected blood or body fluids, or spillages of sharps
- Dealing with requests for needle exchange where the pharmacist identifies an increased risk to an individual – ie at risk of overdose, someone recently released from prison, intoxicated etc.
- Ensure all staff involved in the service are instructed on procedures to be followed in order to minimise risk
- How client can access Patient Opinion or other ways to make comment on the service
- How to refuse a client under 18 the needle exchange and what to do in such circumstances
- Distribution of clean injecting equipment, personal sharps containers, citric acid, ascorbic acid, etc
- Guidance on the maximum number of packs that can be issued – and this is preferably linked to the number of needles returned
- Safe storage, disposal and destruction of used equipment and clinical waste
- Advice and health promotion materials relating to harm reduction
- Information on other harm reduction, needle exchange and treatment facilities
- Advice on access to vaccination against hepatitis A and B, relevant to both staff and patients
- Information on who to contact in the event of drug litter not being collected

General Requirements

It is the responsibility of the Pharmacist to ensure that the hazardous waste bins provided by Trafford Council via SRCL are used to dispose of used Needle Exchange equipment only.
If you require additional hazardous waste bins for waste separate to Trafford's Needle Exchange Service for drug users, please contact the Local Area Team using this email address:
agm.optometry-pharmacy@nhs.net

Your pharmacy will be provided with one hazardous waste bin per quarter, either 30L, 50L or 60L capacity. If you require and additional bins from SRCL this must be approved with Trafford in advance of the additional bin being issued. If additional bins are not approved by Trafford Council in advance, you may be liable for the cost.

Payment

Will be monthly and in arrears on production of a certified invoice and the accompanying data. See appendix A.

Trafford Metropolitan Borough Council reserves the right to revise fees.

All contractors must submit an invoice and audit data in a timely manner. Payments will not be made if audit data is not submitted. Any invoice which relates to work completed more than four months prior will not be paid.

Quality Indicators and performance management

1. Pharmacists must demonstrate that they have undertaken appropriate training to deliver either or injecting equipment or supervised consumption
2. Pharmacists will demonstrate that they have standard operating procedures and that these are reviewed annually for the injecting equipment or supervised consumptions services
3. Pharmacists will demonstrate annually that they have undertaken training or refreshed their skills in the delivery of the injecting equipment or supervised consumptions services by signing a self-declaration.
4. Numbers of needles/packs returned
5. Numbers of client using the service/s
6. Number of clients referred to and accepting treatment services
7. Numbers of people accepting additional health information

Payment for level one Needle Exchange Service

1	Client pick up	£1
2	Sharps bin return	£0.50

the above payments are for drug use injecting equipment and do not include steroid injecting equipment*

Invoices should be completed as per the forms and sent one month in arrears.

Service Monitoring

Monitoring is an integral part of any commissioned service agreement and compliance with the terms of service is essential for continuity by the provider. Information agreed between the commissioner and the provider will be supplied to Trafford Council.

The Provider will submit monitoring data for each service user with each claim that is sent to Trafford Council via the Clinical Support Unit (CSU).

Points of Contact

The operational contact for the agreement at Trafford Council is:

Drugs and Alcohol Action Team
1st Floor
Trafford Town Hall
Stretford
M32 0TH

Training Requirements

Providers will be offered appropriate training where required e.g.

- Harm Minimisation
- Safe Injecting Techniques

ANNEX C

PRICING SCHEDULE

1	Client pick up	£1
2	Sharps bin return	£0.50

the above payments are for drug use injecting equipment and do not include steroid injecting equipment*

Payments will be made quarterly in arrears.

The 2015/16 quarterly claiming deadlines are:

Q1 (1st April 2015 – 30th June 2015) - **31st July 2015**

Q2 (1st July 2015 – 30th September 2015) - **31st October 2015**

Q3 (1st October 2015 – 31st December 2015) - **31st January 2016**

Q4 (1st January 2016 – 31st March 2016) - **31st April 2016**

All contractors must submit an invoice and audit data in a timely manner (including nil returns). Payments will not be made if audit data is not submitted.