

Public Health Pharmacy Service Specification for Needle Exchange by a Community Pharmacy

Specification reviewed: Oct 2013

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**Attachments: Monthly claim form
Enhanced Service Review Criteria**

October 2013 – to be reviewed March 2015

1.0 Introduction

- 1.1 Pharmacy-based needle exchanges are an important easily accessible public health intervention developed as part of the overall wider approach, to prevent the spread of blood-borne diseases, particularly HIV and hepatitis.
- 1.2 Stockport has commissioned a Needle & Syringe exchange service via community pharmacy since 1992. This has been based around a core of 8 to 10 pharmacies distributed across Stockport, with the main focus being the exchange facilities. Choice of equipment has been introduced. It is proposed, as the service allows, to both increase the number of pharmacies included in the scheme and also to provide other appropriate harm minimisation injection paraphernalia.

2.0 Aims of the Service

- 2.1 To help service users to remain healthy and reduce drug related harm by providing sterile injecting equipment, advice and if appropriate referral to other health and social care professionals.
- 2.2 To reduce the practice of sharing injecting equipment and thus reduce the incidence and transmission of blood-borne infections amongst service users
- 2.3 Promote safer injecting practices.
- 2.4 To ensure the safe disposal of used injecting equipment and thus reduce the incidence of used and possibly infected needles in public places.
- 2.5 To increase service user's access to general health information by regular contact with a pharmacist.

3.0 Service Outline

- 3.1 The service may be accessed by any drug user who presents at a participating pharmacy.
- 3.2 The pharmacy will offer user friendly, non-judgemental, client-centred and confidential services.
- 3.3 The area of the pharmacy used for the provision of the service should provide a sufficient level of privacy and safety for the service user, public and staff. A consultation area/private room is not essential; however if used a risk assessment must be undertaken.
- 3.4 **The pharmacy contractor has a duty to ensure that:**
- 3.5 Pharmacists including locums and all staff have relevant knowledge of the service.
- 3.6 A waste disposal contractor is commissioned to remove used equipment
- 3.7 Staffs operating the service have completed training.
- 3.8 There is an operational Standard Operating Procedure (SOP) in place

- 3.9 Equipment is stored in a safe place.
- 3.10 Used equipment is stored in containers provided by the waste disposal contractor commissioned by Stockport Clinical Commissioning Group .
- 3.11 Staff are aware of risks associated with handling used equipment and the correct procedures to minimise risk – this should be detailed in the SOP.
- 3.12 Staff have knowledge of the needle stick injury procedure and how to access the Occupational Health service. Staff have been informed/offered immunisation for Hep B and Tetanus via their GP or Occupational Health.
- 3.13 There is available protective equipment including gloves, overalls and spillage kits.
- 3.14 Appropriate records are completed to ensure effective on-going service delivery and audit.
- 3.15 Pharmacists will share relevant information with Pennine Care Drug and Alcohol Service whilst maintaining agreed confidentiality agreements.
- 3.16 The pharmacy will display the National Scheme logo, easily visible for all customers..
- 3.17 The pharmacy will reinforce the 'exchange' aspect of the service, but does not decline to provide equipment when there are no returns. There will be an agreed limit on provision of equipment, where there are consistently no returns from the client.
- 3.18 Stockport MBC has a duty to ensure that:**
- 3.19 Pharmacies have access to support from the Pennine Care Drug and Alcohol Service (0161 716 4000).
- 3.20 Exchange packs and associated materials are provided at regular intervals or on request.
- 3.21 Health promotional literature is available and relevant to service users.
- 3.22 Information for signposting and referral to other health and social care professionals is available and up to date.
- 3.23 **Service users will :**
- 3.24 Be provided with equipment. Choice depends upon individual pharmacies stock and each exchange is not to exceed '60 needles' per person per week, unless Pennine Care Drug and Alcohol Service advises otherwise. Equipment available to pharmacies:
- Black box packs
 - 1ml, 2ml, 5ml barrel packs
 - Orange, Green and Blue needles

- 20 or 30 insulin packs
 - 0.6 litre sharp bin
- 3.25 Be offered advice and referral to other agencies if appropriate.
- 3.26 Have records completed for each supply.
- 3.27 Be asked to leave the premises for unacceptable behaviour and Pennine Care Drug and Alcohol Services alerted.

4.0 Access, Referral and Discharge

- 4.1 The service is accessed by self-referral and clients do not need to be registered with a specialist drug treatment service to access this provision. Specialist Treatment services may provide service users with information on which pharmacies provide the service but will not direct users to specific pharmacies.
- 4.2 Pharmacies may at the outset of the service with a new client request that they sign up to an agreement of conduct (provided by the pharmacy). Service users are expected to individually visit pharmacies and not disrupt normal business.
- 4.3 The pharmacist may refuse a service user who becomes abusive or disruptive and in such cases will inform the Pennine Care Drug and Alcohol Service.
- 4.4 Pharmacies will be supplied with information for referral to specialist services.
- 4.5 Service users are not routinely discharged from the service. If no exchange is recorded for a user for 6 months the record card will be collected by Pennine Care Drug and Alcohol Service. .

5.0 Recordkeeping and Information Collection

- 5.1 The pharmacist will collect the following information for audit purposes:
- Service user's initials, gender and area of residence.
 - Date of birth/approximate age if date of birth refused.
 - Date of supply.
 - Number of packs supplied
 - Type of equipment supplied
 - Number of sharps tubes/bins returned.
 - Drug of choice.
- 5.2 The pharmacy will complete relevant monitoring at each supply/each month on the PharmOutcomes system which will generate payment (1st working day of the month) in that cycle.
- 5.3 All records to be maintained in such a way that data and details can be

accessed for inspection if required, with user confidentiality maintained

6.0 Training and Accreditation

- 6.1 All community pharmacists involved in the service are to complete (within 6 months of commencing the service) the Centre for Pharmacy Postgraduate Education (CPPE) educational pack '*Substance Use and Misuse*'. A copy of the accreditation certificate should be sent to Stockport MBC. This is in line with commissioners need for assurances re an agreed competencies and training framework.
- 6.2 Attendance at local workshops to support drug misuse (Operating a Needle Exchange System – ½ day, Drug and Alcohol Awareness Course – full day). This is not mandatory but it is expected that one member from the pharmacy has accessed the training. Contact details for Training – 0161 474 3272.
- 6.3 Attendance at commissioner/ provider meetings no more than one per year) as arranged to promote service development and update knowledge of pharmacy staff.
- 6.4 Pharmacists should be aware of, and compliant with any competencies detailed in any agreed training programme as appropriate. This includes HAG, but in future will be via self accreditation on-line as agreed.
- 6.5 Updates are recommended every two years and will monitored for compliance by commissioners. This will be in the form of a self-declaration of competency for pharmacists actively engaged in the service or attendance at a local workshops.

7.0 Clinical Governance

- 7.1 **It is essential that each pharmacy:**
- 7.2 Develops and adopts a Standard Operating Procedure for the service
- 7.3 Ensures that all records of transactions are completed and as required forwarded to Pennine Care Drug and Alcohol Service. Pharmacists can delegate records to trained individuals, maintaining agreed data protection and confidentiality of the service.
- 7.4 Complete audit records as required.
- 7.5 Ensures that individuals have accessed relevant training.
- 7.6 Ensures that staff have been offered immunisation against hepatitis B and tetanus via their GP or Occupational Health or specialist treatment provider as appropriate, and been offered screening for Hepatitis C
- 7.7 Has undertaken appropriate risk assessments on their premises/area where the service is to occur, especially if it is intended to use a consultation area/private room
- 7.8 Adopts safe practice and storage of new and used equipment.
- 7.9 Has adequate protective equipment including gloves, aprons and spillage kits.

- 7.10 Has a detailed information on needle stick injury policy and referrals to Occupational Health.
- 7.11 Pharmacists and staff work within their own individual competencies and only provide advice that they are proficient to give.
- 7.12 Information regarding the service and service users must be treated in confidence, although anonymity of the service users may be compromised at the time of a transaction in open pharmacy premises and are accepted criteria of the service user choosing to access this service in those premises.
- 7.13 The service is to be available at all times the premises are open, with the exception of lunchtimes and when the pharmacist is unavailable.
- 7.14 Complaints about any aspect of the service should be directed to the Team Manager for NSP within Pennine Care Drug and Alcohol Services (Barrie McCallion)
- 7.15 Incidents should initially be raised with the community safety and neighbourhood manager on 0161 474 3017 (Alison Leigh) and Barrie McCallion at Pennine Care Drug and Alcohol Service and reported via an agreed incident form.

8.0 Quality Indicators

- 8.1 The contracted pharmacist should ensure:
- Annual review of the Standard Operating Procedure
 - Relevant CPD for all staff has occurred and updates actioned every 2 years.
 - Health promotion literature is available.
 - Signposting to other services/professionals occurs appropriately and a record of such referrals is made.
 - Complaints and incidents are recorded, reported and reviewed to improve the service.

9.0 Remuneration

- 9.1 Each pharmacy will be paid a retainer of £300 per annum to fund establishment costs and staff.
- 9.2 Each supply whether it is an exchange or only provision of equipment attracts a fee of £ 1.00 to cover monitoring and records. This will be paid monthly in arrears (via the PharmOutcomes monitoring and payment system). The pharmacy must ensure their bank details are forwarded to Stockport MBC to enable payments to be made.

- 9.3 All literature, packs and locally required workshops will be funded by Stockport MBC.

10. Signature Sheet

Signature on behalf of Stockport MBC :

Signature	Name and Designation	Date

Signature on behalf of the Pennine Care Drug and Alcohol Team:

Signature	Name and Designation	Date

Signature on behalf of the Contractor:

Signature	Name and Designation	Pharmacy Stamp Date

Complete and return two copies to

Andy Dunleavy (MPH)
Senior Public Health Advisor
(Health care public health commissioner)
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