

FINAL VERSION AUGUST 2017

## **SERVICE LEVEL AGREEMENT**

For the provision of

**SUPERVISED ADMINISTRATION**  
(Locally commissioned services)

BETWEEN

Warrington Borough Council

AND

The Pharmacy Contractor

Name:
Address:

September 2017-August 2018

Review date – August 2018

## **1. Supervised Administration (Consumption of Prescribed Medicines) Definition of Service.**

Models of Care: Update 2006 (NTA, 2006) recognises that community based drug treatment can provide a range of interventions spanning across both Tier 2 and Tier 3. However, it also acknowledges that all substitute prescribing interventions should be redefined as Tier 3. This is because they require comprehensive assessment, should be care planned and carry a high duty of care for the clinician prescribing (and the pharmacist dispensing) of controlled drugs.

Shared care is defined as: “the joint participation of specialists and GPs (and other agencies as appropriate) in the planned delivery of care for patients with a drug misuse problem, informed by an enhanced information exchange and beyond routine discharge and referral letters. It may involve the day-to-day management by the GP of the patient’s medical needs in relation to their drug misuse. Such arrangements should make explicit which clinician is responsible for different aspects of the patient’s treatment and care. These may include prescribing substitute drugs in appropriate circumstances (NICE guidance CG52 – Drug Misuse Opioid Detoxification 2007). Pharmacists providing shared care will share relevant information with other healthcare professionals and agencies, in line with locally determined confidentiality arrangements.

Pharmacy dispensing, supervised administration and shared care services for drug (and alcohol) dependent adults are therefore Tier 3 and include those patients’ prescribed:

- For opioid dependence (titration, detoxification and reduction) and maintenance regimens (such as methadone or buprenorphine)
- For withdrawal from opioids with non-opioid medications (e.g. lofexidine)
- For stabilisation and withdrawal from sedatives, where appropriate (such as benzodiazepines and alcohol)
- For relapse prevention where appropriate (e.g. naltrexone, disulfiram)
- For dependent stimulant use, including symptomatic treatment medications (although some substitute prescribing for amphetamines does occur there is still no national consensus on its appropriateness and the evidence base remains limited).

Pharmacists will continue to provide shared care for patients whether or not doses are prescribed to be administered under the supervision of the pharmacist.

Pharmaceutical services to drug users must:

- Be integrated and co-ordinated with the local prescribing services and treatment systems
- Meet the demand of the local population and prescribing services
- Provide the necessary level of privacy to clients, for example the availability of a private area. Particular consideration should be

given to the safety of pharmacy staff using completely closed consultation rooms

- Warrington Council's Public Health Department, along with the Warrington Drug and Alcohol Services - known locally as CGL (Pathways to Recovery), will provide an audit process with pharmacies prior to signing the Service Level Agreement, to ensure all appropriate elements of this specification are in place

## **2. Service Description**

**2:1** This service will require the pharmacist to supervise the consumption of prescribed medicines by CGL at the point of dispensing in the pharmacy, ensuring that the dose has been administered to the patient.

**2:2** Pharmacies will offer a user-friendly, non-judgemental, client-centred and confidential service.

**2:3** The pharmacy will provide support and advice to the patient, including referral to primary care or specialist centres where appropriate.

**2:4** Examples of medicines which may have consumption supervised include methadone and other medicines used for the management of opiate dependence.

## **3. Aims and Intended Service Outcomes**

- 3:1** To ensure compliance with the agreed treatment plan by:
- Dispensing in specified instalments (doses may be dispensed for the patient to take away to cover days when the pharmacy is closed)
  - Ensuring each supervised dose is correctly consumed by the client for whom it was intended.
  - Notify Warrington Drug and Alcohol Services (known locally as CGL or Pathways to Recovery) of failure to attend or other non compliance within 24 hours (1 working day) to ameliorate risk
  - Notify Warrington Drug and Alcohol Services (known locally as CGL or Pathways to Recovery) with concerns over well being.

With regards to bullet point 2, the Pharmacist must ensure that the service user/customer fully ingests the oral medication. On occasions, service users may pretend to swallow, place medication under the tongue or hiding it in hands. The Public Health team are keen to ensure that medication is appropriately consumed and no medication is potentially used elsewhere.

- 3:2** To reduce the risk to local communities of:
- Over usage or under usage of medicines
  - Diversion of prescribed medicines onto the illicit drugs market
  - Accidental exposure to the supervised medicines.

**3:3** To provide clients with regular contact with a health care professional i.e. the pharmacist, and to help them access further advice or assistance. The client will be referred to specialist treatment centres or other health and social care professionals where appropriate.

#### **4. Service Specification**

**4:1** The part of the pharmacy used for provision of the service provides a sufficient level of privacy and safety.

**4:2** The pharmacy will present the medicine to the service user in a suitable receptacle and will provide the service user with water to facilitate administration and/or reduce the risk of doses being held in the mouth.

**4:3** The pharmacy will have already agreed to be a provider of supervised administration in conjunction with Warrington Drug and Alcohol Services (known locally as CGL or Pathways to Recovery) and will have agreed to its protocols.

**4:4** The pharmacy will notify the Drug and Alcohol Service if the Pharmacy has concerns over the clients health or under the influence of other drugs or alcohol

**4:5** Terms of agreement are set up between the prescriber, pharmacist and patient (a three-way agreement) to agree how the service will operate, what constitutes acceptable behaviour by the client, and what action will be taken by the prescriber and pharmacist if the user does not comply with the agreement.

**4:6** The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.

**4:7** The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service are aware of and operate within local protocols. The pharmacy will have appropriate up to date Standard Operation procedures in place in line with national governance and that all staff are aware of and have signed up to the SOPs.

**4:8** The pharmacy will maintain appropriate records to ensure effective ongoing service delivery and audit in line with the best practice guidelines. All recordings will be in line with current data protection governance.

**4:9** Pharmacists will share relevant information with other healthcare professionals and agencies, in line with locally determined confidentiality arrangements.

**4:10** The pharmacist will attend at least one meeting per year organised by Warrington Council's Public Health Department, along with the Warrington Drug and Alcohol Services (known locally as CGL - Pathways to Recovery) to promote service development and update the knowledge of pharmacy staff. The meeting will be held a minimum of 4 times a year, perhaps up to 6 times per year, so it is anticipated that each pharmacy would attend once over the year. These will be held in the evening. Ideally this should be the pharmacist or a named lead member of staff who will be responsible for supervised administration.

**4:11** Warrington Council's Public Health Department will provide a framework for the recording of relevant service information for the purposes of audit and the claiming of payment. Pharmacies will be required to send the framework along with any sheets signed by the client to Warrington Council's Public Health Department, New Town House, Buttermarket Street, Warrington, WA1 2NH. It may be during the length of this contract that audit and claiming of payment is by an electronic data management system – if so, you will make appropriate arrangements to ensure data is appropriately submitted onto the system for recording and payment provision.

**4:12** Warrington Council's Public Health Department will provide details of relevant referral points which pharmacy staff can use to signpost service users who require further assistance.

**4:13** Warrington Council's Public Health Department /Warrington Drug and Alcohol Services (known locally as CGL - Pathways to Recovery) will provide Health Promotion materials to pharmacies for distribution to clients.

**4.14** The pharmacy should ensure that a pharmacist trained to the required level is available to provide this service throughout the pharmacy opening hours.

**4.15** The service provider must have an adverse incident and near miss reporting system in place which includes maintaining a log of patient safety incidents. The pharmacy must follow their incident reporting procedures for controlled drugs. Warrington Borough Council would need to be notified of any public safety incident should it occur – contact details are Public Health Head of Service within Warrington Borough Council – 01925 443425.

## **5. Quality Indicators**

**5:1** The pharmacy has appropriate health promotion material available for the client group and promotes its uptake.

**5:2** The pharmacy reviews its standard operating procedures and the referral pathways for the service on a bi-annual basis or if there is a substantial change to service provision.

**5:3** The pharmacy can demonstrate that pharmacists and staff involved in the provision of the service have undertaken training relevant to this service.

**5:4** The pharmacy participates in an annual Service Provider organised audit of service provision and a training event (as cited in paragraph 4:10)

**5:5** The pharmacy co-operates with any assessment of the service user experience undertaken by the Service Commissioner.

## **6. Location/Coverage**

This service will be provided by Community Pharmacies commissioned directly by Warrington Council's Public Health Department within the remit of Cheshire Community Pharmacy Cheshire and Wirral Pharmaceutical Committee

## **7. Monitoring and Review**

Commissioned pharmacies will agree to take part in an annual audit (as cited in 5:4) as agreed by the Warrington Council's Public Health Department and Warrington Drug and Alcohol Services (known locally as CGL - Pathways to Recovery) and for quality assurance.

## **8. Confidentiality/Data Protection**

The pharmacist must protect personal data in accordance with provisions and principles of the Data Protection Act 1988 and the General Pharmaceutical Council's Guidance on patient confidentiality.

## **9. Data Collection and Claims for Payment**

**9:1** The point of contact for all payment queries is Warrington Council's Public Health Department, Business Support Unit, New Town House, Buttermarket Street, Warrington, WA1 2NH.

**9:2** Payment for supervised administration services is made on the basis of the pharmacy submitting monthly signed sheets to Warrington Council's Public Health Department.

**9:3** Payment is made by submitting the invoice (see attachment) at the end of every month. Payment will not be made without the submission of the invoice sheets.

Warrington Council's Public Health Department will provide a framework for the recording of relevant service information for the purposes of audit and the claiming of payment. It may be during the length of this contract that audit and claiming of payment is by an electronic data management system – if so, the pharmacist will make appropriate arrangements to ensure data is submitted onto the system for recording and payment provision.

## **10. Competencies and Training**

Nothing contained within this agreement is intended to remove the inherent professional obligations or accountabilities pertaining to dispensing pharmacy practices. All pharmacists and registered technicians involved in providing this service must fully adhere to their relevant professional code of conduct.

It is the personal responsibility of each professional to practice only within the bounds of their competence.

The pharmacist on duty has overall responsibility for ensuring the service is delivered in accordance with this service specification. The service provider has a responsibility to ensure that all staff providing the service do so strictly in accordance with the service specification.

### Declaration of Competency (DoC)

In line with Centre for Pharmacy Postgraduate Education (CPPE) guidance the Council requires all pharmacists supervising provision of the service to have completed a self-declaration of competency.

This approach involves self-declaration of competency by pharmacy professionals with a framework to self-assess their competence. This concept aligns to the model for the Department of Health's New Medicine Service (NMS) self-assessment which pharmacy professionals are already familiar with and adopts some of the key recommendations from the previous successful approach to harmonisation of accreditation for service delivery.

The pharmacy contractor is responsible and accountable for ensuring that each person who delivers the service from the pharmacy is competent to do so.

The pharmacist must satisfy the requirements of the CPPE "Self-declaration of Competence for Supervised Consumption of Prescribed Medicines for Substance Misusers (Opioids)", complete a self-assessment of core competences and print and sign their "Personal Declaration of Qualifications and competence to deliver a Supervised Consumption of Prescribed Medicines service".

This signed competency or approved accreditation aligned to this service delivery will be sent to the Head of Service – Substance Misuse as the commissioner of this service.

Cathy Fitzgerald  
Head of Service – Substance Misuse and Commissioning Development  
Public Health Department  
Families and Wellbeing Directorate  
Warrington Borough Council  
New Town House  
Buttermarket Street  
Warrington  
WA1 2NH  
01925 443425  
[Cathy.Fitzgerald@warrington.gov.uk](mailto:Cathy.Fitzgerald@warrington.gov.uk)

#### Maintenance of Accreditation.

Pharmacists are responsible for reassessing their competence to deliver this service every two years. Pharmacists are required to complete a new self-declaration of competence.

The pharmacy will ensure that if any pharmacy has locum cover, that the locum pharmacist clearly understands the practices within the Warrington footprint on supervised administration specifically around the information provided in paragraph 3 and its bullet points.

### **11. Arbitration**

Warrington Council's Public Health's Head of Service together with representatives of the LPC would seek to arbitrate on any issues between individual pharmacies and Warrington Council's Public Health Department and Warrington Drug and Alcohol Services (known locally as CGL - Pathways to Recovery) Services with regards to service specification, funding and quality.

### **12. Payment**

The payment for this service is £1.60 per intervention of liquid methadone and £2.00 per intervention of buprenorphine.

### **13. Indemnity**

The pharmacy should ensure that it is adequately covered with indemnity insurance.

#### 14. Termination of Agreement

This agreement will be considered terminated at the end of the contract period.

This agreement may be terminated if either the Pharmacy or Warrington Council's Public Health Department gives the other party three months notice in writing. If the pharmacy or Warrington Drug and Alcohol Services (known locally as CGL or Pathways to Recovery) is in breach of the agreement, the agreement can be terminated with one months notice in writing or with immediate effect for a serious breach.

**Signed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signed By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name :**  
**Designation:**

For and on behalf of the Pharmacy Contractor