

# **Service Level Agreement**

**Between Cheshire and Wirral Partnership (CWP)**

**and**

**Community Pharmacy**

**Needle exchange scheme**

**July 2017-October 2018**

## **1. Overview and service principles**

1.1. Needle exchange programmes supply needles, syringes and other equipment used to prepare and take illicit drugs. They reduce the transmission of blood-borne viruses (BBVs) including hepatitis B and C, and other infections caused by sharing injecting equipment. They aim to reduce the harm caused by injecting drugs through providing information and advice and acting as a gateway to other services, including drug treatment centres.

1.2 The needle exchange service may be the only contact some people have with a Healthcare Professional, for example those who inject performance and image-enhancing drugs. Needle exchange services in England are based across a range of services, with pharmacy making up the majority of the sites.

1.3 The provision of needle exchange in pharmacies provides the benefits of increasing the availability of needles exchange packs across a wide geographical area. This provides more flexibility of provision of services not only by area but by opening hours as well.

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

2.1 To assist the service users to remain healthy until they are ready and willing to cease injecting and ultimately achieve a drug-free life with appropriate support

2.2 To protect health and reduce the rate of blood-borne infections and drug related deaths among service users:

by reducing the rate of sharing and other high risk injecting behaviours;

by providing sterile injecting equipment and other support;

by promoting safer injecting practices; and

by providing and reinforcing harm reduction messages.

To improve the health of local communities by preventing the spread of blood-borne infections by providing a safe and effective route for the disposal of used injecting equipment.

2.3 To help service users access treatment by offering referral to the CWP service and health and social care professionals where appropriate.

2.4 To aim to maximise the access and retention of all injectors, especially the highly socially excluded.

2.5 To help service users access other health and social care providers, acting as a gateway to other services.

2.6 To reduce the number of drug-related deaths associated with opioid overdose

## **3. Aims and intended service outcomes**

3.1 All members of the pharmacy team will treat the service users with dignity and respect at all times, refraining from referring to service users as 'drug addicts'.

3.2 The pharmacy will provide the needle exchange packs in a suitable bag to the service user. The part of the pharmacy used for the provision of the service must provide a sufficient level of privacy and safety for service users and other members of the public accessing the pharmacy.

3.3 Used equipment is normally returned by the service user for safe disposal.

- 3.4 The pharmacy will provide support and advice to the user, including referral to CWP and other health and social care professionals where appropriate.
- 3.5 The pharmacy will promote safe practice to the user, including advice on sexual health and STIs, HIV and Hepatitis C transmission, and Hepatitis B immunisation.
- 3.6 An accredited pharmacist does not need to undertake the transaction or be present when the transaction occurs. However, the pharmacist will be responsible for ensuring that any staff member undertaking the transaction is competent to do so and have undertaken the required training.
- 3.7 The pharmacy will ensure that staff are made aware of the risks associated with the handling of returned used equipment and the correct procedure used to minimise those risks. Please refer to the pharmacy's own safety guidance.
- 3.8 A needle stick injury Standard Operating Procedures should be in place and visible to all staff. Used needles and sharps boxes must not be handled directly by any pharmacy staff. Sharps bins should be offered to clients to deposit used 'works' directly into.
- 3.9 It is strongly advised that staff in the delivery of this service are immunised against Hepatitis B.
- 3.10 If the service user requests equipment not supplied within the needle exchange programme, the pharmacy will refer them to the CWP service.
- 3.11 Pharmacists and staff involved in the provision of the service must be aware of and operate within any locally agreed protocols and follow their company Standard Operating Procedures that cover the provision of this service.
- 3.12 The pharmacy will deal with any complaints sensitively and will report any complaints, comments or concerns to the Contract Manager within 2 working days.
- 3.13 Pharmacy staff must be aware of local child and vulnerable adult protection procedures. These must be followed at all times.

#### **4. Ordering and returning packs**

- 4.1 NSP equipment will be ordered via Frontier ( Telephone number 01495 235809) using the order form
- 4.2 The ordering of packs should be organised by the pharmacy so that appropriate stock control is maintained
- 4.3 Each pack will contain a sharps return bin.
- 4.4 Pharmacy staff should encourage a 1-1 exchange (i.e. supplies given out in exchange for a used bin being returned) however failure to return all used equipment should not result in a withdrawal of the service. Insistence on 1-1 exchange can be counterproductive, and consequently it is NOT necessary for a client to return used equipment in order that they may receive sterile equipment.
- 4.5 Pharmacy staff should keep encouraging service users to return their used equipment and should enquire if there is a particular problem that makes it difficult for them to return (e.g. lack of transport or fear of police).
- 4.6 Pharmacies should position a returns deposit bin in a convenient location in order to encourage and facilitate the return of used equipment, but having regard to the safety of staff, patients and other users of the pharmacy. The pharmacy will allocate a safe place to store equipment and returns for safe onward disposal. The Storage containers provided by the clinical waste disposal service will be used to store returned used equipment.

- 4.7 Appropriate protective equipment, including gloves, overalls and materials to deal with spillages, should be readily available close to the storage site.
- 4.8 Contractors are responsible for ensuring they have sufficient sharps bins in the pharmacy to enable them to deal with demand and not put staff at risk.
- 4.9 CWP will commission a clinical waste disposal service, SRCL, for each participating pharmacy. Collection of sharps bins will be managed by SRCL on a scheduled collection basis. SRCL, Unity House, Marshfield Bank, Crewe, CW2 8UY, telephone 0845 124 2020.

**5. Eligibility**

- 5.1 This service will be available to all presenting adults (aged 18 and over) who are Cheshire East residents requiring access to needles and other injecting paraphernalia in relation to intravenous drug use. This will include users of performance enhancing drugs (PEDs) including anabolic steroids and growth hormones.
- 5.2 Young people under 18 years old should be sign-posted to the local specialised young people’s service at Catherine House, Crewe 01270 656301 and The Barnabas Centre, Macclesfield 01625 721 2000.
- 5.3 The Needle exchange service will NOT be available to individuals requiring access to needles and other injecting paraphernalia in relation to non-drug misuse related treatment regimens which requiring regular intravenous administration of prescribed medication e.g. insulin.

**6. Accessibility**

This will be available on an open access basis with no requirement for clients to be referred from another agency.

**7. Required training**

- 7.1 All pharmacists will be required to complete the CPPE Declaration of Competence for Needle Exchange Programme, the CPPE Substance use and misuse (2nd edition) and the CPPE Safeguarding Children and Vulnerable adults. It is recommended that all registered pharmacy technicians complete the same declaration.
- 7.2 CWP will aim to arrange at least one contractor interaction per year to promote service development and update the knowledge of the named pharmacist.

**8. Payment arrangements**

Packs Supply is the sum of all packs supplied and the cost is based on bands below per invoice/claim month

Additional supply is based on the number of packs supplied each month and based on bands below.

No of packs per month	Additional Payment	Packs Payment
0 - 9		£25.63
10 - 40		£76.88
41 - 60	£10.25	£87.13
61 - 80	£20.50	£97.38
81 - 100	£30.75	£107.63
101 - 120	£41.00	£117.88

121 - 140	£51.25	£128.13
141 - 160	£61.50	£138.38
161 - 180	£71.75	£148.63
181 - 200	£82.00	£158.88
201 - 220	£92.25	£169.13
221 - 240	£102.50	£179.38
241 - 260	£112.75	£189.63
261 - 280	£123.00	£199.88
281 - 300	£143.50	£220.38
301 - 320	£153.75	£230.63
321 - 340	£164.00	£240.88
341 - 360	£174.25	£251.13
361 - 380	£184.50	£261.38
381 - 400	£194.75	£271.63
401 - 420	£205.00	£281.88
421 - 440	£215.25	£292.13
441 - 460	£225.50	£302.38
461-480	£235.75	£312.63
481-500	£246.00	£322.88
501-520	£256.25	£333.13
521-540	£266.50	£343.38
541-560	£276.75	£353.63
>560	£276.75	£353.63

VAT – 20% NEX, we generate a consolidated invoice summing the individual invoices in the quarter, we process 2months data including the current claim period when processing individual month invoices

Example for quarterly invoice, Feb 2017 to April 2017, if the total invoice amount due is £1359.18, below is the breakdown

Claim Period	Amount	Pack Supply count
Feb 2017 claim period	£363.88	298
Mar 2017 claim period	£384.38	306
Apr 2017 claim period	£384.38	315
Total (ex VAT)	£1,132.64	
VAT (20%)	£226.54	
Total (inc VAT)	£1,359.18	