

LBTH Pharmacy Needle Exchange Service Requirement Guidance (25-26)

1. Introduction

1.1 NICE Guidance (PH52) Published in March 2014 outlines the main aim of needle and syringe programmes as “to reduce the transmission of blood-borne viruses and other infections caused by sharing injecting equipment, such as HIV, hepatitis B and C. In turn, this will reduce the prevalence of blood-borne viruses and bacterial infections, so benefiting wider society. Many needle and syringe programmes also aim to reduce the other harms caused by drug use and include:

- Advice on minimising the harms caused by drugs.
- Help to stop using drugs by providing access to drug treatment (for example, opioid substitution therapy).
- Access to other health and welfare services

2. Local Context

2.1 LBTH SMIC Team commissions a range of substance misuse treatment services; these include a mix of targeted and generic needle exchange and harm reduction provisions. These are delivered within a host of settings including substance misuse treatment services, community pharmacies and hostel settings.

3. Aims of the service

3.1 The needle exchange and harm reduction service aims to reduce the potential harms caused by high-risk injecting behaviour by delivering a consistent and comprehensive approach, focused on facilitating access to safe injecting equipment, providing harm reduction advice and signposting drug users to structured treatment in Tower Hamlets

3.2 Offering a confidential, non-judgemental service Providing access to safe injecting equipment to Injecting drug users and steroid users residing in Tower Hamlets. The Pharmacy will be in operation 46 hours per week across 5 days as a minimum. The service will be provided during all Pharmacy opening hours.

3.3 Facilitating the return and safe disposal of used injecting equipment.

3.4 Providing essential harm reduction advice including information about overdose and the availability of naloxone

3.5 Signposting and referring clients to Reset Drug & Alcohol Treatment Service

4. Service Delivery and Requirement

- 4.1 The Pharmacy will provide the service to all Tower Hamlets residents aged 18 or over (including steroid users). Service Users under the age of 18 should be referred to the local young people's substance misuse service. It is recognised that the service may be accessed by non-Tower Hamlets residents. The Pharmacy should not refuse needle exchange service to residents of other boroughs.
- 4.2 The Pharmacy must ensure that services are delivered from the Pharmacy only.
- 4.3 The Pharmacy must clearly display the national needle exchange logo in the window.
- 4.4 The Pharmacy must hold a standard operating procedure for all elements of the service including dispensing kits, sharps returns, testing, and a needle stick injury policy.
- 4.5 The regular pharmacist at the Pharmacy providing the service must be registered with the General Pharmaceutical Council.
- 4.6 RPS Registration is desirable but not essential.
- 4.7 All Pharmacy staff involved in delivering the service must attend appropriate needle exchange training delivered by LBTH Substance Misuse Commissioning Team and Primary Care Drug and Alcohol Service.
- 4.8 All Pharmacy staff involved in delivering the service must complete the Hepatitis C: Enhancing Prevention, Testing and Care web module training within 3 months of the contract start date.
- 4.9 The Pharmacy will ensure continued learning and development of staff involved in the delivery of the scheme, to ensure awareness of local services, trends and risks.
- 4.10 The pharmacy must have a suitable private space or room for consultation with service users, allowing for confidential discussions to be had.
- 4.11 Where appropriate, service users will be seen as soon as possible on arrival at the pharmacy.

5. Pharmacy Exchange Packs

- 5.1 The Pharmacy will provide readily packaged needle exchange packs in 1ml and 2ml options; the contents of these packs are:

A. 1ml Exchange Pack containing:	
1	Re-sealable opaque and identifiable bag
10	1ml low dead space Nevershare/ coloured fixed needle syringes
10	Citric acid sachets
10	Spoons (assorted colours)
10	Filters
10	Alcohol pre-injecting swabs
1	Condom
1	Sharps bin 0.2L
1	1 x Tower Hamlets Drugs Advice and Needle Exchange Leaflet

B. 2ml Exchange Pack containing:	
1	Re-sealable opaque and identifiable pack
10	2ml syringe (suitable for use with low dead space needles)
10	Low dead space 23g needle
10	Low dead space 25g needle
10	Citric Acid
10	Spoons (assorted colours)
10	Filters
10	Alcohol pre-injecting Swabs
1	Condom
1	Sharps bin 0.45L
1	1 x Tower Hamlets Drugs Advice and Needle Exchange Leaflet

- 5.2 The Pharmacy must ensure surplus supply of personal sharps containers (0.2 Ltr, 0.3Ltr and 0.45Lts) is available should service users request additional containers. These can be ordered separately in addition to the readily packaged needle exchange packs.
- 5.3 All equipment dispensed must be in accordance with LBTH Substance Misuse Commissioning Team approved equipment list and obtained through the LBTH contracted supplier (Orion Medical Supplies).
- 5.4 The Pharmacy will be responsible for ordering its own stock of needle exchange packs, foil and sharps containers through the LBTH dedicated contract and ensure appropriate stock levels at all times.
- 5.5 Supply of equipment will be in accordance with any protocols and guidelines disseminated by LBTH Substance Misuse Commissioning Team.
- 5.6 Details of the needle exchange equipment supplier and how to order stock will be provided by LBTH Substance Misuse Commissioning Team.
- 5.7 The cost of needle exchange equipment will be met by LBTH Substance Misuse Commissioning Team.
- 5.8 The Pharmacy must ensure needle exchange stocks are stored appropriately in a safe and sterile space.
- 5.9 Service users may obtain more than one pack per visit. However, requests for 5 or more packs are to be at the pharmacist's discretion. Clients requesting a large number of packs should be encouraged to return to the Pharmacy and should be signposted to Reset Treatment Service and encouraged to engage in treatment.
- 5.10 Service users requesting packs for peers may obtain more than one pack per visit. However, they should be encouraged to accompany their peers to obtain their own packs and refrain from sharing any equipment.
- 5.11 The Pharmacy will encourage the return of used equipment via sharps containers (included in the packs). Staff delivering the service must raise this every time equipment is dispensed.
- 5.12 Sharps and used equipment returned in other forms that are deemed unsafe by the Pharmacist or could cause injury (e.g. sharps in a plastic bag or a bottle) should not be accepted. The Pharmacist must provide the service user with a

suitable sharps bin and encourage them to place the equipment in the container before this is collected.

- 5.13 The Pharmacy should strive to maximise return rates but must not refuse to supply equipment on the basis of the return rate. Failure to return equipment does not disqualify the service user from receiving further equipment.
- 5.14 Pharmacists retain the right to refuse or serve a service user, for example, in the event of unacceptable behaviour.
- 5.15 Pharmacy staff must be aware of and will inform service users of structured treatment services available across the borough and signpost to Reset Service as appropriate.
- 5.16 Details of referrals made to Reset Treatment Service must be recorded.
- 5.17 Pharmacy staff must receive appropriate needle exchange and harm reduction training to enable them to deal with requests safely, sensitively and appropriately.
- 5.18 Service users, particularly those presenting for the first time, must be provided with harm reduction advice and informed of local drug and alcohol treatment services. Harm reduction advice must include as a minimum:
 1. Explanation of the type of equipment provided in needle exchange packs.
 2. Safe injecting practice
 3. What to do in the case of an overdose
 4. Information about the use of naloxone/ prenoxad and offer of kit.
 5. Information regarding blood borne viruses, testing as part of the BBV service offer or signposting to the BBV team for screening and treatment.
 6. Information regarding structured treatment options in Tower Hamlets and how to access Reset Treatment Service.
 7. Information about safely discarding of and returning used equipment.
 8. Information about the use of foil.
- 5.19 The pharmacy will dispense **naloxone/prenoxad** kits to clients accessing the service.

- 5.20 Clients who report non-engagement with substance misuse services and do not have access to naloxone/prenoxad should be targeted.
- 5.21 The Pharmacy must ensure appropriate levels of naloxone/prenoxad stock. Kits will be ordered alongside needle exchange packs through the Tower Hamlets approved contract.
- 5.22 Clients must not be issued with a naloxone/prenoxad kit at each visit; but can be issued with a replacement kit if the previous has been used or no longer in the client's possession.
- 5.23 The Pharmacist must provide a brief consultation/training to the client on how and when to use naloxone/prenoxad.
- 5.24 The Pharmacy must maintain accurate records of naloxone/prenoxad kits dispensed, including date of issue and expiry date.
- 5.25 Naloxone/Prenoxad 'Train the Trainer' training will be facilitated by LBTH Substance Misuse Commissioning Team.
- 5.26 No separate fee will be paid for dispensing Naloxone/Prenoxad; this is considered part of the needle exchange transaction.
- 5.27 The Pharmacy will facilitate access to primary care and encourage registration with GP practice where appropriate (Tower Hamlets residents only).

6. Staff Requirements and Health & Safety

- 6.1 It is expected that the regular pharmacist at the Pharmacy is registered with the Royal Pharmaceutical Society (RPS), has completed the appropriate needle exchange and harm reduction training organised by LBTH and has completed the Centre for Pharmacy Postgraduate Education (CPPE) Training - Substance Use and Misuse.
- 6.2 All Pharmacy staff delivering needle exchange services will receive appropriate training. Mandatory training by LBTH Substance Misuse Commissioning Team. will be delivered annually.
- 6.3 It is expected that staff continue to update their knowledge and skills by attending additional training where necessary and utilise guidance and learning materials such as the NICE PBNX (pharmacy-based Needle Exchange) Programme for Community Introduction.

- 6.4 Pharmacy staff involved in the scheme must be made aware of the risks associated with handling returned used injecting equipment. Needle stick injury procedure and infection control policies must be in place.
- 6.5 Pharmacies are expected to establish pathways with Reset Services and understand the treatment provision and offer and attend service open days as appropriate.

7. Sharps and Hazardous Waste Collections

- 7.1 Collections of sharps and hazardous waste will be delivered by a dedicated supplier commissioned by LBTH Substance Misuse Commissioning Team.
- 7.2 The cost of sharps bins collections will be met by LBTH Substance Misuse Commissioning Team.
- 7.3 The Pharmacy must ensure sharps containers and used equipment are disposed of safely as clinical waste and through suitable sharps bins provided.
- 7.4 The Pharmacy must ensure this type of waste is not mixed with any other types of waste or disposed of through other bins.
- 7.5 The collection of sharps bins will take place on a monthly basis. Full bins taken away will be replaced by empty bins of the same size.
- 7.6 The Pharmacy will be expected to provide a signature as way of confirming that full sharps bins are collected and replacement bins are provided.
- 7.7 Sharps bins must be kept in a safe place away from service users and the general public and must be used for this provision only.
- 7.8 Additional collections (on top of standard allocation) where required, must be requested through LBTH Substance Misuse Commissioning Team. (e.g. if allocated sharps bins become full well in advance of the scheduled collection date)

8. Confidentiality and Information Sharing

- 8.1 The Pharmacy must ensure compliance with the General Data Protection Regulation, coming into effect on 25th May 2018.
- 8.2 Service user confidentiality must be maintained. It is recognised that there are exceptional circumstances where confidentiality cannot or should not be

preserved (refer to pharmacist professional codes of conduct and LBTH Terms and Conditions for further information).

- 8.3 Neither party will disclose to any other third party, except those directly involved in the service users' clinical management information concerning any service user without their consent, except in defined exceptional circumstances.
- 8.4 Written consent must also be sought where referral is made to Reset Treatment Service.
- 8.5 A consent form template will be developed and provided by LBTH Substance Misuse Commissioning Team.

9. Expected Outcomes

- 9.1 An increase in the number of needle exchange transactions taking place across Tower Hamlets.
- 9.2 Increased access to safe injecting equipment for injecting drug users.
- 9.3 Reduced levels of drug related litter and paraphernalia being disposed of unsafely and inappropriately.
- 9.4 Increased number of drug users engaging in structured treatment.
- 9.5 Promote safe injecting practice and reduce practice of sharing injecting equipment.

10. Quality and Performance Indicators

- 10.1 The Pharmacy will successfully refer a minimum 10 clients, with their consent, into Reset Treatment Service during each year of the contract. This will be evidenced and monitored through NDTMS Adult Activity Reports collated by LBTH Substance Misuse Commissioning Team and Reset Treatment Service.
- 10.2 This target refers to clients accessing the needle exchange service who report non-engagement with drug and alcohol treatment services.
- 10.3 Clients referred must be Tower Hamlets residents and referrals made to Reset Treatment Service.

- 10.4 A successful referral means a referral resulting in a service user commencing structured treatment at a community-based substance misuse service i.e. Reset Treatment Service. This will be referred to as a 'treatment start'.
- 10.5 A referral requires the completion and sending of a referral form to Reset Treatment Service; contact details for relevant services and a copy of the referral form will be provided by LBTH Substance Misuse Commissioning Team.
- 10.6 Referral forms must be sent securely, through a secure e-mail to ensure data security.
- 10.7 Meeting the above target of treatment starts will be attached to a Payment by Results elements, the details of which are outlined below.
- 10.8 LBTH Substance Misuse Commissioning Team will carry out an audit on an annual basis with prior notice.
- 10.9 Performance indicators and targets will be reviewed after the first year of the contract and additional performance targets may be introduced.
- 10.10 LBTH Substance Misuse Commissioning Team will endorse mystery shopping exercises and this may take place during the lifetime of the contract. Where the Supplier is thought to be departing from requirements of the service specification and best practice guidelines, Substance Misuse Commissioning Team will call a meeting to discuss any concerns highlighted.
- 10.11 Where essential and required registration, training and policies are not currently in place, the Pharmacy awarded this contract must commit to completing the above requirements and be able to submit evidence prior to implementation of the contract. This is expected to be no longer than 3 months.

11. Activity and Data Recording

- 11.1 The Pharmacy must record each exchange on PharmOutcomes. Data recorded will include:
 1. Unique identification number of each client accessing the service.
 2. Ethnicity of client
 3. Gender of client
 4. Sexual Orientation

5. Date the exchange took place.
 6. Type and quantity of packs provided.
 7. Additional sharps bins provided.
 8. Foil provided.
 9. Any equipment returned.
 10. Interventions offered.
 11. Knowledge of and access to Naloxone/ Prenoxad
 12. Naloxone/prenoxad offered.
 13. Naloxone/prenoxad uptake
 14. Naloxone/prenoxad kit expiry date (where given out)
 15. Whether client is already engaged in treatment
 16. Referral made to Reset Treatment Service
 17. Name of Pharmacist delivering the service
 18. Any additional notes
- 11.2 Each exchange must be recorded at the time of the exchange and submitted by the date specified in order to receive payment for that month.
- 11.3 PharmOutcomes forms must be completed in full; incomplete information may lead to the exchange not being remunerated.
- 11.4 Late data submissions may result in loss of payment for exchanges not recorded or submitted correctly.
- 11.5 Activity reports will be generated through PharmOutcomes on a monthly basis.
- 11.6 The Pharmacy will provide additional data to LBTH Substance Misuse Commissioning Team for the purpose of audit, research or data analysis where required to do so.
- 11.7 The Pharmacy will record and report number of and details of referrals made to Reset Treatment Service and submit to Substance Misuse Commissioning Team on a monthly basis.

11.8 Any incidents, accidents or near misses must be recorded by the Pharmacy and reported to Substance Misuse Commissioning Team within 7 calendar days of the incident taking place.

12. Remuneration and Payments terms

12.1 Payment will be made on a monthly basis in arrears subject to PharmOutcomes reports being received. The Pharmacy will receive a payment of £2.50 for each individual/ unique transaction (dispensed) and £1.50 for each individual / unique return (paraphernalia or sharps bins returned).

12.2 Each exchange must be recorded at the time of the exchange and submitted by the date specified in order to receive payment for that month. PharmOutcomes forms must be completed in full. Incomplete information may lead to the exchange not being remunerated.

12.3 Late data submissions may result in loss of payment for exchanges not recorded or submitted correctly.

12.4 Any payment reconciliation must be made within the same financial year. Payment reconciliation may include claims/ invoices not received by the Finance department.

12.5 The cut off point for payment is 5th of each month (which is the PharmOutcomes system payment run). Pharmacists are advised to ensure they enter all their information on to the system by the **4th of each month** as claims will not be accepted 2 months after this date.

12.6 The grace period is 2 months. The report runs on the 5th of every month and will look at provisions that are within the two months previous to the invoice running. i.e. with regards to a provision from the month of March (regardless to how late in the month the provision date is) the invoice that runs on the 5th of May would be the last chance to have it processed by the invoicing system. By the 5th of June it is too late and the provision will be ignored. So any March provisions will be out of grace.