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**Service Level Agreement**

**Community Pharmacy**

**Wellbeing &**

**Medication Use Review Service**

**for Wirral Ways Clients**

1. **Background**
   1. The Specification only covers Service Users prescribed within the local treatment service CGL (Wirral Ways).
   2. The service is available to all individuals in receipt of a valid NHS prescription who have drug related problems and are being prescribed methadone or buprenorphine as part of the local treatment service, such individuals being ‘Service Users’.
   3. This Service covers the provision of a wellbeing service with two parts:
      1. A general health and welfare check in at the point of dispensing or supervision of substitute medications in the pharmacy, or at another pre-arranged time, for dependent drug users and others who have been assessed as requiring symptomatic treatment for drug related problems (Service Users).
      2. An ad-hoc provision of a Medication Use Review to support any service users newly released from custody and referred in for a review by CGL.
   4. Pharmacies are ideally placed for providing interventions to the target population group as they are one of the main points of contact for opiate users collecting opiate-substitution medication.
   5. The provision of welfare checks through pharmacies increases their availability and access over a wide geographical area and provides opportunities for intervention in a population group who may be hard to reach for other NHS services.

1. **Aims and Objectives of the Service**
   1. The aim of this Service is to ensure that Service Users registered to receive treatment through Wirral Ways can be provided with health and wellbeing services when accessing the pharmacy for their medication by providing an accessible, confidential and safe environment where people with drug dependency can be supported, issues can be identified and reported back to the treatment provider (Wirral Ways), thereby reducing incidents of drug related death through overdose, encouraging wellbeing conversations, building relationships, and strengthening communication to reduce drug related harm to service users and the community.
   2. Through the delivery of the service, Providers will contribute to the following outcomes;

* A reduction in harm associated with drug misuse by increasing retention in specialist substance misuse treatment
* A reduction in drug related deaths
* The prevention of overdose
* Improved wellbeing of the local treatment service (Wirral Ways) Service Users

1. **Service Description/Pathway**
   1. The Provider is required to provide service users with:
      1. A health and wellbeing check in once monthly, and additionally when deemed necessary as set out below. This Service covers the provision of a health and wellbeing ‘check in’ and communication of the outcome of the intervention to local treatment service (Wirral Ways), where it will be recorded in the Service Users case notes.  
           
         The check ins will be delivered to each service user monthly, and additionally if a further requirement for the service is requested by:

* The local treatment service (Wirral Ways) due to a specific concern that they will advise of
* the request of the Service User, or
* due to a concern noted by The Provider.

The reason for a request from local treatment service (Wirral Ways) could include (but is not limited to):

* encouragement to make contact/ concern about lack of contact
* check contact details
* concerns about health and wellbeing
* to pass on information to the Service User

The Provider may initiate a wellbeing check in for reasons including (but not limited to)

* concerns about physical presentation, mental wellbeing, or changes in behaviour or new associates
  + 1. An ad-hoc provision of a medication use review to support any service users newly released from custody. An assessment of any support needed to help manage medications should be included, e.g., the use of monitored dosage systems etc.
  1. The provider must:
* Gain the service users informed verbal consent to provide the service(s) and share any outcomes/concerns highlighted (captured within the Pharmoutcomes consultation form).
* Assist Service Users to access health advice and reduce drug-related harm.
* Have effective links with the local treatment service (Wirral Ways) liaise accordingly concerning specific Service Users (whilst having due regard for the Service Users’ confidentiality), as per the existing supervised consumption SLA. Contact should be made via the Pharmacy Liaison Officer in the first instance by means of their dedicated phone line.
* Share relevant information with all known professionals involved in the Service User’s treatment, within the boundaries of pharmacists’ professional confidentiality guidelines.
* In the event of a specific concern that requires escalation, share information via an ad-hoc Pharmoutcomes submission to the local treatment service, additionally informing the Pharmacy Liaison Officer by means of their dedicated phone line. (Contact details in Appendix 1)
* Where the information relates to any safeguarding concern, also share information via a phone call direct to the prescriber or Recovery Co-Ordinator, in the local treatment service (Wirral Ways) as appropriate. (Contact details in Appendix 1)
* Provider Staff must provide the Service in a manner which maintains a good relationship with the Service User. Information sharing arrangements already exist between the pharmacy, community drug treatment provider and the Service User due to the prescribing and dispensing arrangement.
  1. The Provider should offer opportunistic health advice, wherever possible to promote harm reduction, to include:
* Recognizing Service Users with substantial changes to, or the appearance of any new physical or mental health symptoms and signposting/referring them onto appropriate services.
* Taking measures to reduce harm and prevent drug-related deaths
* Safe injecting advice and techniques.
* Identification of immediate risks (such as wounds/injection site injuries) and provide appropriate advice, treatment, or referral.
* Dangers of mixing drugs, in particular other sedatives with opiates.
* Safe storage and use of Opiate Substitute Treatment (typically methadone or buprenorphine).
* Safe storage and disposal of injecting equipment and substances (e.g., to avoid risk of injury to children).
* Actively encouraging Service Users to access hepatitis B immunisation if not already immunised.
* High risk times for overdose (leaving Prison, Detox, Rehab & any other periods of abstinence).
* Emphasize the risks of overdose and strategies to reduce those risks and to respond to overdose.
* Advise on safer sex, sexual health HBV immunisation, BBVs, HBV, HCV and HIV testing.
* Advice on Nutrition.
* Advice surrounding Alcohol and its misuse.
  1. Advice will be consistent with relevant recognised guidelines and good practice and should be supported with appropriate harm minimisation materials or literature.
  2. The Service will take place during normal pharmacy opening hours.

1. **Quality and Safety**
   1. The Provider must comply with the General Pharmaceutical Council standards for Pharmacy Professionals.
   2. The Service must have in place a Standard Operating Procedure (SOP) for all personnel operating the Service.
   3. The Provider will review their Standard Operating Procedures for the Service as per the Providers own internal procedures or every two years as a minimum.
   4. The Provider has a duty to ensure that all Staff involved in the provision of the Service have relevant knowledge and are appropriately trained in the operation of the Service in accordance with Schedule 1.
   5. All Provider’s Staff should be offered a hepatitis B vaccination.
2. **Acceptance and Exclusion Criteria** 
   1. The service is available to all individuals in receipt of a valid NHS prescription who are being prescribed methadone or buprenorphine as part of the local treatment service such individuals being ‘Service Users’.
   2. The Service Users engagement with The Service is voluntary and non-engagement with a wellbeing check in will not impact on other services provided by The Provider.
   3. The local treatment provider (Wirral Ways) will ensure that Service Users are aware of what constitutes unacceptable behaviour.
   4. There are no exclusions to the Service based on gender, race, sexual orientation, physical and/or mental impairment or any other protected characteristic, though the service provider may be able to exclude Service Users where:

* Acceptable behavior is not upheld.
* If a Service Users behavior indicates a serious risk to staff, other Service Users and/or members of the public.
  1. The Provider will, for all cases where exclusion is made, inform the local treatment service (Wirral Ways), who are responsible for the supervised consumption prescription, in a reasonable amount of time and within 24 hours of the exclusion taking place.

1. **Interdependencies with other Services**
   1. The Provider must ensure that it has effective communication mechanisms in place with other healthcare professionals and agencies it may be required to link with and, in particular, Wirral Ways.
   2. The Provider should attend any events hosted by the Local Pharmaceutical Committee (LPC) where updates and information sharing opportunities with the local treatment provider (Wirral Ways) will be facilitated.
2. **Data Recording and Information Sharing**
   1. The consultation room will have access to a computer to enter patient details on to PharmOutcomes. Verbal consent must be captured and recorded within the Pharmoutcomes module.
   2. The pharmacy will maintain accurate records of the service provided on Pharmoutcomes.
   3. The pharmacy will be expected to ensure secure systems and records to prevent misuse of service, and to ensure the confidentiality for service users.
   4. The pharmacy will create a record on PharmOutcomes using information provided by the service user.
   5. Internet access must be available for input of data onto PharmOutcomes.
   6. Advice will be consistent with relevant recognised guidelines and good practice and should be supported with appropriate harm minimisation materials where available.
3. **Accessibility**
   1. This service will be provided on an open access basis for all Wirral Ways service users in receipt of opiate substitution treatment with no requirement for referral from an external agency.
4. **Service Requirements and Duration**
   1. This service specification is valid from 1st November 2022 – 31st March 2025.
   2. The pharmacy will offer a user-friendly, non-judgmental, patient-centred and confidential service.
   3. The service will be delivered in a consultation area in the pharmacy which ensures a sufficient level of privacy and safety and meets GPhC standards for premises requirements.
   4. Pharmacists and staff involved in the provision of the service must be aware of and operate within their company Standard Operating Procedures that cover the provision of this service, or the provision of locally commissioned services as per the service specifications.
   5. Pharmacists and staff involved in the provision of the service must have relevant knowledge and be appropriately accredited in the operation of the service.
   6. CGL must be informed in the event that the provider is not able to deliver the service, for example, where locums would decline to offer provision. Every effort should be made to ensure service continuity.
5. **Safeguarding and Governance** 
   1. Pharmacy staff must be aware of local and company child and vulnerable adult protection procedures (which must be followed at all times); and know where they can access the contact details of the local safeguarding leads.
   2. It is implicit in the service being provided that it is delivered to the standard specified in this service specification and complies with the legal and ethical boundaries of the profession.
   3. Should an issue or concern be identified by a member of the Pharmacy team, an initial discussion should take place with the Pharmacy Liaison Worker unless there is a serious and immediate risk to the client or to a third parties wellbeing. The Pharmacist should use their professional judgment and escalate as required.
   4. Should an issue be identified by CGL or through any other means, an action plan will be produced with communication/agreement of the points to be addressed going to the Service Providers nominated person on the Contract first before the pharmacist in store. This may be the pharmacist in store, or others if from a multiple etc.
6. **Required Training**
   1. For all Pharmacists the CPPE courses “Substance Use and Misuse” (Modules 1 – 4) and Level 2 “Safeguarding Children and Vulnerable Adults” must be completed. The completion certificate for this must be no more than three years old.
   2. The training requirements must be met within three months of joining the service and updated every three years.
   3. The Responsible pharmacist will be responsible for identifying staff training needs and for recording their own Continuing Professional Development, and cascading training to all staff where appropriate
7. **Quality Indicators**
   1. The pharmacy will have standard operating procedures relating to this service. The pharmacist will review these standard operating procedures and the referral pathways for the service once every two years barring incident.
   2. The pharmacist has undertaken CPD relevant to this service, and pharmacists (including locums) and staff involved in the provision of this service have sufficient relevant knowledge and are familiar with the requirements of this service specification
   3. The pharmacy has a complaints procedure in place
   4. The pharmacy co-operates with any local assessment of service and service user experience, including use of “mystery customers” and audits, as long as these aren’t onerous and are agreed by the provider.
   5. The pharmacy should ensure (as far as is reasonably possible) that there are adequate support staff, including staff specifically trained to always support this service in the pharmacy in order to support the pharmacist (including locum pharmacist) in the operational elements of the service and to help ensure the safe and smooth running of the service.
   6. The pharmacy will ensure that appropriate professional indemnity insurance is in place.
   7. It is a requirement for pharmacies signing up to this agreement to comply with all the requirements of the essential services of the NHS Community Pharmacy Contractual Framework.
8. **Use of Locum Pharmacists**
   1. The pharmacy has a duty to ensure that staff and other pharmacists (including locums) involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service to ensure the smooth continuation of the service in the absence of the regular pharmacist.
   2. Where possible, the pharmacy should ensure it is staffed by a regular pharmacist/s. Should the pharmacy be in a position where the pharmacy will be run on different locum pharmacists for more than a month, the Contract Manager must be informed.
   3. CGL has the right to withdraw the service from a pharmacy that is not staffed with regular pharmacists. Alternatively, CGL may impose additional conditions on the pharmacy in order for the pharmacy to remain providing the service. Any conditions imposed would need to be agreed with the Provider.
9. **Payment Arrangements**

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| **Element to be Delivered** | **Amount** | **Claim** |
| Wellbeing Check in | £10.00 per intervention (exclusive of VAT) | To be claimed via the PharmOutcomes system |
| Medication Review | £30.00 per intervention (exclusive of VAT) |
| Annual Retainer | £25.00 per quarter (exclusive of VAT) |

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| **Data collection** | **Method of collection** |
| Ensure that the following information is uploaded to Pharmoutcomes on every occasion:   * Service Users Full Name * Service Users Date of Birth * Origin of wellbeing check in (Routine monthly consultation/ Wirral Ways request / Provider request / Service user request). * Reasons for wellbeing intervention (from list) * Day/date of attendance * Reason for refusal (if appropriate) | 100% data upload required as per PharmOutcomes |

* 1. Payments for the completion of welfare checks will be made monthly upon input of the data onto PharmOutcomes. Invoices will be generated automatically by PharmOutcomes on the 5th of the month, with payment to be made within 30 days of the invoice date. The service level agreement and financial details will need to be completed and returned before any payments will be made.
  2. Fees will be paid on the basis of submitted claims into a bank account specified by the pharmacy.
  3. The pharmacy is responsible for entering accurate claims data on the correct website

1. **Audit**
   1. The pharmacy will participate in audits of this service provision organised by the Contract Manager, as and when required, and deliver identified action points reported on the audit within the agreed timescale. Any requests should be reasonable and must be agreed with the provider.
   2. The Contract Manager may employ mystery shoppers as part of this audit.
2. **Incidents and Complaints**
   1. The pharmacy is required to have a robust incident reporting and investigation procedure in place.
   2. Incidents relating to this service should be reported in line with the pharmacy’s incident reporting procedure. The pharmacy will provide a summary of the incident report to the Contract Manager at CGL.
   3. The pharmacy will deal with any complaints sensitively and will report a summary of any complaints, comments or concerns to the Contract Manager as soon as possible.

**Appendix 1: Local Contact Information**

Local CGL Service - CGL (Wirral Ways)

Local CGL Service address - 84 Market Street, Birkenhead, CH41 6HB

Local CGL Service telephone number – 0151 556 1335

Pharmacy Liaison Worker – Denise Heys (Tel: 07825 657 969)

Pharmacy Liaison Worker – Alex Woods: TBC