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**Turning Point Specification for Community Pharmacy Counter-Staff Led Take Home Naloxone (THN) Programme**

**Somerset Drug and Alcohol Service (SDAS)**

**Community Pharmacy Agreement**

**(Part B) V1.00**

**May 2023**

# Turning Point Specification for Take Home Naloxone (THN) Programme

### Community Pharmacy Agreement

1. **Introduction, aims and objectives of service**

This document sets out a Service Specification for a community pharmacy Take Home Naloxone (THN) to be provided by the Contractor[[1]](#footnote-1) to service users across the Somerset Drugs & Alcohol Service (SDAS) area.

**Pharmacies are well placed to be able to provide services as part of the local harm reduction strategy.**

The THN service relates to the supply of Prenoxad® 1mg/ml pre-filled syringe (2ml) injection and Nyxoid® 1.8mg/actuation nasal spray for lay administration and includes the details of who may supply Prenoxad® and Nyxoid®, who may receive a supply of Prenoxad® and Nyxoid®, who is excluded from receiving a supply of Prenoxad® and Nyxoid®, the procedure that must be followed and the information that must be recorded.

This specification has been informed by the following recommendations and guidance:

* PHE (2019) Guidance: Widening the availability of naloxone.
* Drug Misuse and Dependence Update 2017 Independent Expert Working Group (2017) Drug misuse and dependence: UK guidelines on clinical management. London: Department of Health Clinical Guidelines

This Service is for anyone aged 16 years and above. Any person aged under 16 years can access the Company’s[[2]](#footnote-2) specialist substance misuse service and should be referred through local offices (see appendix B for further details). Contractors are also reminded that their own safeguarding policies need to be followed.

1. **Supply (Service Description)**

* People employed or engaged in the provision of drug treatment services including community pharmacy staff can supply Prenoxad® or Nyxoid® that has been obtained by their pharmacy to supply to others for the purpose of being available to save life in an emergency.
* This service aims to be counter-staff led, with pharmacist leadership, that is it is expected that the majority of interventions will be made by medicines counter assistants (MCA) and not by pharmacists or other dispensary staff. Concerns or uncertainties should be referred to a pharmacist, but ordinarily the intervention is delivered by MCAs.
* As a matter of good practice, it is advocated that all pharmacy team staff who have a patient-facing role complete the training.
* Community pharmacy staff issuing supplies of Prenoxad® or Nyxoid® to individuals must as best practice:
  + Be authorised by name to make Prenoxad® and Nyxoid® supplies (individuals are authorised to make supplies once they have completed training as detailed in Appendix B and signed the training record in Appendix A)
  + Know where to refer to for further information and advice (see appendix B).
  + Keep up to date with any changes to the service. Any changes to the service will be communicated via Turning Point.
  + Attend/undertake refresher training at least every 12 months[[3]](#footnote-3).
  + If registered with a professional body, adhere to any relevant standards.
* The pharmacy should retain a training record for each member of staff completing the training (Appendix A).
* Authorisation to supply using this service only allows supplies to be made as specified; it does not cover supplies issued on prescription or by Patient Group Direction (PGD). Where these exist, supplies under PGD or on prescription must be made by the appropriate professional.
* A label should be applied to each Prenoxad® or Nyxoid® unit confirming supply by the named pharmacy only. See appendix C
* Contractors will offer a professionally welcoming, non-judgmental, client-centred and confidential service.
* The inclusion of Nyxoid® in this iteration of the scheme is for a 12 month pilot period initially and continued supply of Nyxoid® under this scheme will be subject to review.

1. **Information for Monitoring**

* The staff member making the supply must:
  + Ensure that the individual is 16 years of age or over.
  + Ensure that the individual is not knowingly allergic to Prenoxad® or Nyxoid® or any of the ingredients.
  + Check that the individual knows how to use Prenoxad®or Nyxoid®, if they are unfamiliar deliver a brief intervention to show them and emphasise this is a first aid medication to be used in conjunction with calling 999 for emergency support.
  + Issue a Prenoxad® assembly and administration leaflet or Nyxoid® information leaflet (in the box) to support this and signpost to the Prenoxad® or Nyxoid® information websites.
  + If they are unfamiliar, recommend that the client reads the leaflet and watches the video on the websites which shows them how to administer. There are also demonstration videos and information on the Carry Naloxone Somerset website (QR code on posters which you are supplied with and can be downloaded from LPC website).
  + If you have any concerns then refer the client to Turning Point services.
* Details of the supply should be recorded on PharmOutcomes.
* Quarterly submissions and payment will be provided through automated PharmOutcomes report to Turning Point in a timely manner.
* Pharmacies supplying Prenoxad® or Nyxoid® as part of their drug treatment service must have an SOP in place which covers the ordering, storage, access, supply, monitoring and disposal arrangements for Prenoxad® or Nyxoid®.

1. **Accreditation**

* Pharmacists and pharmacy staff involved in the provision of THN should have relevant knowledge and be appropriately trained in the operation of the Service to a standard agreed with the Company. Training in the operation of the Service is provided by the Company in the form of the locally approved training for supply under this service (See appendix B).
* Delivery of these support services will be determined locally between the Company, Local Pharmaceutical Committee (LPC), local commissioners and any other organisation or group that are considered to be a valid stakeholder in the service delivery e.g. service user group.
* Not mandatory, but recommended: All pharmacy staff should be encouraged to complete the free online training courses from SMMGP at http://www.smmgp-elearning.org.uk (registration required). This e-learning programme is free and supports learning and development in the subject.
* Pharmacy staff involved in the provision of THN are aware of and operate within local protocols agreed with the Company. The Pharmacies SOP must be based on local protocols and must be regularly reviewed.
* Contractors will be invited to attend at least one meeting per year[[4]](#footnote-4) with the Company to promote Service development and update the knowledge of pharmacy staff. This includes an awareness raising session about the drug and alcohol treatment and support services available locally and an opportunity to raise questions and/or concerns about practice. Although attendance is not mandatory, the Company would encourage engagement from Contractors to support both Service development and as a CPD update for pharmacy staff.

1. **Champion role**

It is recommended that each pharmacy should nominate a lead practitioner (Champion) to support this work. Their role should include ensuring that new staff and locums are aware of the service and have access to the LPC recording of the latest Take Home Naloxone training webinar. They are *not* expected to make all the supplies. **Take Home Naloxone scheme is designed to be delivered by any trained member of staff.** They do not need to be a pharmacist but should be someone who works regularly in the pharmacy and can make contact with other staff.

**Schedule 1**

**Payments**

**Payment process**

PharmOutcomes has been commissioned by the Company to act as an agent for processing THN claims. Under this agreement

* PharmOutcomes is funded to provide access to Contractors commissioned to provide the THN Services and process Service payments on behalf of the Company
* Monthly claims are completed via PharmOutcomes

Claims will be paid in line with the Payment Terms outlined in section 7 of the Company “Services Agreement” Part A document

Paper-based claims will not be processed for payment.

For queries relating to the use of PharmOutcomes please contact PharmOutcomes directly

**Payment rates**

THN payments will be made to the Contractor at the following rates:

* £5 per service user transaction (not per individual units) (This is currently the standard cost for the intervention and is not negotiable)
* The cost of the Prenoxad® IM injections and Nyxoid® nasal spray will also be met by the Company, pharmacies do not need to be out of pocket for supplies obtained for supply under this Take Home Naloxone scheme. Pharmacies should order supplies for this scheme from Exchange Supplies, the local Needle and Syringe Programme equipment provider, not via their pharmaceutical wholesaler.

***Appendix A:* Prenoxad® or Nyxoid**® **Supply Framework Training Record for Pharmacies**

* I have read and understood the Prenoxad® /Nyxoid® Supply Framework and SOP.
* I have completed the training as described in appendix B and have the necessary competence, training and knowledge to apply the Framework.
* A copy of the Framework will be retained in the pharmacy for reference.
* I know who to contact for further support and advice concerning the Framework.
* I will try to attend the refresher training session every year or watch the recording, and keep up to date with developments concerning the Take Home Naloxone programme.

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| --- | --- | --- |
| **Staff Member (please print)** | **Signature** | **Date** |
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**This training record should be retained and kept up to date by the pharmacy**

***Appendix B - Locally approved training options for Pharmacy staff and Contact Details***

All staff involved with the supply must have relevant training on the use and supply of take home naloxone:

**Mandatory:** 1 hour Turning Point online training session.

Note: If the pharmacy staff member is **unable to attend this live online training session** they can view the training webinar available through the LPC website.

*Recommended*: SMMGP Free-learn “Prenoxad Saves Lives” http://www.smmgp-elearning.org.uk (registration required)

**Contact details**

*Ongoing support may be provided through:*

* Exchange Supplies. Contact: Nick Wilson nick@exchangesupplies.org
* Ethypharm (Prenoxad®) representative. Contact: Ken Sutherland, 07736-798833 [kenneth.sutherland@ethypharm.com](mailto:kenneth.sutherland@ethypharm.com)
* Turning Point Safer Lives lead Deb Hussey, 07890 067099, deb.hussey@turning-point.co.uk

**Local support services**

**Somerset Drug & Alcohol Service (SDAS)** accepts referrals from health professionals as well as self-referrals from members of the public. **SDAS** can be contacted through the following routes:

* Telephone: 0300 303 8788
* Web site: turning-point.co.uk/services/sdas
* Email: sdas@turning-point.co.uk

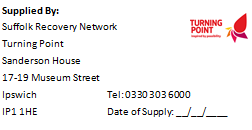
**Appendix C – Label example**

Below is an example of a label we use at our Suffolk service.

When producing a pharmacy label please just label as ”Supplied by” with your contact details

Please **do not add the client name**. If your blank labels already contain your pharmacy name, address and contact details, you will only need to add the date of supply.

Pharmacies who use blank labels, may want to consider pre-printing these labels, and adding the date by hand to support an efficient supply model.



1. The term “Contractor” is used throughout this Agreement to represent Community Pharmacies [↑](#footnote-ref-1)
2. The term “Company” is used throughout this Agreement to represent Turning Point [↑](#footnote-ref-2)
3. This may include online training [↑](#footnote-ref-3)
4. This may also be delivered as an online meeting [↑](#footnote-ref-4)