**Service Specification**

| Version | Date | Issue Status | Changed by | Reason for Change |
| --- | --- | --- | --- | --- |
| V1 | 27.10.15 | Draft | S Mullarkey Matthews |  |
| V2 | 18.04.16 | Final | S Mullarkey Matthews |  |
| V3 | 19.06.17 | Final | S Mullarkey Matthews | Update for 2017/18 contract period |
| V4 | 30.05.17 | Final | S Mullarkey Matthews | Update for 2018/19 contract periodChange to service provision |
| V5 | 16.07.19 | Final | A Sayer | Update for 2019/20 contract period |
| V6 | 07.01.20 | Final | A SayerS Mullarkey | Update for 2020/21 contract periodChange to Pharmoutcomes and ordering provision |
| V7 | 01.04.21 | Final | A SayerS Mullarkey | Update for 2021/22 contract period |
| V8 | 07.06.22 | Final | A Sayer | Update for 2022/23 contract periodChange to clinical waste provider |
| V9 | 27.03.23 | Final | A Sayer | Update for 2023/24 contract period |

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| **Service** | **Needle Syringe Scheme** |
| **Contract Lead** | **Alison Sayer** |
| **Provider Lead** | **Pharmacies in Blackpool** |
| **Period of Service** | **1st April 2023 – 31st March 2024** |

**1.General Overview**

The population of Blackpool experiences poorer health and lower life expectancy than much of the rest of the country and this is seen across a range of health indicators including the prevalence of chronic conditions, hospital admissions for self-harm and alcohol related harm and early deaths from heart disease and cancer.

Lifestyles are a major determinant of health and are considered to account for 30-50% of what makes us healthy (or unhealthy), alongside our genetics, our environment (including social, economic and physical environment) and access to health care.

In Blackpool, major causes of shorter life expectancy are:

* Higher levels of harmful drinking and drug use
* Smoking
* Unhealthy diets and excess weight and
* Inactive and sedentary lifestyles
* Mental Ill Health

Not only does the population of Blackpool experience higher than average levels of poor health but within the town stark differences are apparent.  Life expectancy for men living in the most disadvantaged parts of the town is more than 13 years shorter than that of those in the least deprived areas.

**2. SERVICE**

**2.1 Overview of Service**

Pharmacies will provide access to sterile needles and syringes, and sharps containers for return of used equipment. Associated materials, for example service literature, citric acid and swabs, to promote safe injecting practice and reduce transmission of infections by substance misusers will also be provided.

Pharmacies will offer a user-friendly, non-judgmental, client-centred and confidential service.

The pharmacy will provide support and advice to the service user, including referral to other health and social care professionals and specialist drug and alcohol treatment services where appropriate.

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.

To support this pharmacies are expected to build good working relationships with the HORIZON service and avail themselves of its support through appointed staff liaison and available forums, training and news briefs. Equally supporting HORIZON campaigns and warning messages communication and working collaboratively to support treatment engagement and retention.

**2.2 Aims**

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.

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 including safe sex advice and advice on overdose prevention (e.g. risks of poly-drug use and alcohol use)

**2.3 Expected Outcomes**

* To improve the health of local communities by preventing the spread of blood-borne infections by ensuring the safe disposal of used injecting equipment. Support service users to access treatment by offering referral to specialist drug and alcohol treatment centres and health and social care professionals where appropriate.
* Maximise access and retention of all injectors, especially the highly socially excluded.
* To help service users access other health and social care and to act as a gateway to other services (e.g. key working, prescribing, hepatitis B immunisation, hepatitis and HIV screening, primary care services etc)
* Provide service users with regular contact with health care professionals and to help them access further advice or assistance. The service user will be referred to specialist treatment centres or other health and social care professionals where appropriate.

**2.4 Rationale for commissioning this service**

Ensuring a safe and consistent approach to needle exchange in Blackpool that will standardise the process and result in a high level of service throughout the participating pharmacies.

**2.5 Evidence Base**

This specification adheres to the principles and standards laid down in the key national guidance documents and any subsequent documents published during the duration of the contract. The key documents that support the service specification are detailed below, but this is not an exhaustive list

* National Drug Strategy (2021)
* Blackpool Alcohol Strategy 2019 - 2022
* National Treatment Agency for Substance Misuse: July 2012; Medications in recovery Re-orientating Drug Dependence treatment
* Department of Health-A Framework for National Sexual Health Improvement in England 2013
* NAT- HIV and Injecting Drug Use 2013

**2.6 Service Delivery**

**2.6.1 Location(s)**

This service is for residents of Blackpool identified as under the care of Blackpool Council commissioned substance misuse services. The service will be delivered in the community pharmacy only

**2.6.2 Days / hours of operation**

During pharmacy opening hours

**2.6.3 Referral criteria and sources**

Any person, over 18 years old, with a drug (excluding steroids) and/or alcohol problem, who resides in the Blackpool area. If a client is under 18, the pharmacist should attempt to engage the young person and refer immediately to young people’s services, Blackpool Young Peoples Services Tel: 01253 754840. Staff to follow the Fraser Guidelines and if required, direct young person to Needle Exchange at 102 Dickson Road.

Any person over 18 can be referred to HORIZON (Delphi Medical 01253 205156) if they wish to access treatment.

H0RIZON Harm Reduction and Needle Exchange referrals Tel: 01253 311431

**2.6.4 Exclusion criteria**

Where the client lives (excluding those of no fixed abode) outside of Blackpool Local Authority boundaries

The service should expect zero tolerance and clients can be excluded for behaviour that has breached accepted rules and standards, at the discretion of the service, but within a structure of users' rights and responsibilities.

People using injecting equipment for steroid and performance enhancing substances, tanning injections and any other cosmetic use.

**2.6.5 Response time**

Immediate response to requests for needles and injecting paraphernalia to anyone over the age of 18 years. In the event of an under 18 year old requesting needles, the pharmacist should attempt to engage the young person and refer immediately to young people’s services, 01253 754840. Staff to follow the Fraser Guidelines and if required, direct young person to Needle Exchange at 102 Dickson Road.

 **2.6.6 Priority Groups**

* Homeless and Street Homeless injectors
* Street Sex Workers
* MSM Injectors
* Pregnant injectors
* Initiating injectors
* MLD/ reading challenged
* English Language challenged
* Prison released

**2.7 Essential links to other services**

The service will be required to work with the Horizon partners, Public Sector bodies such as the NHS, Police, Probation, and alongside the private and third sector organisations.

The service will ensure:-

* Collaborative and effective operational links with the Harm Reduction and Assertive Outreach Manager, key workers and prescribers within the HORIZON treatment system in pursuit of a fully integrated seamless service for Blackpool’s injecting drug using population
* Effective links and signposting with service users, self-help groups, criminal justice partners and other stakeholders
* Pharmacies support clients to engage with all relevant agencies e.g. health, family support, education and access to non-vocational learning and training, employment services and housing support
* Clients are signposted to appropriate harm reduction and BBV screening services as appropriate
* Pharmacy staff to attend a half day training session with Horizon once annually to include Motivational Interviewing, Drug Awareness, Horizon partnership and how to refer. All training offered by Horizon will be available to pharmacy staff.

**3. SERVICE REQUIREMENTS**

**3.1 Operational**

* A Standard Operating Procedure (SOP) for the service must be in place in the pharmacy, and the pharmacist must ensure that all dispensary staff, including locums, are aware of the content of the SOP, and have signed to confirm their understanding
* The part of the pharmacy used for provision of the service must provide a sufficient level of privacy and safety.
* Participating pharmacists should be familiar with current National, Regional and local guidance including ‘Drug misuse and dependence – guidelines on clinical management’ issued by Department of Health, 2007 and ‘Best practice guidance for commissioners and providers of pharmaceutical services to drug users’ issued by RPSGB, PSNC & NTA
* The pharmacist 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 allocate a safe place to store equipment and returns for safe onward disposal. The clinical waste bins provided by the current needle exchange provider should be used to store returned used equipment. These must be filled to three quarter level, and then securely sealed and stored in the designated area for clinical waste, until collection by the commissioned clinical waste disposal service (Principal Hygiene)
* The pharmacist should ensure that their staff are made aware of the risk associated with the handling of returned used equipment and the correct procedures used to minimise those risks. The needle stick injury procedure (Management of Incidents with Blood/Other Body Fluids) must be clearly displayed, and should be followed in the event of an injury
* Appropriate protective equipment, including gloves, overalls and materials to deal with spillages, should be readily available close to the storage site. Staff involved in the delivery of this service will be offered immunisation for Hepatitis B, which can be obtained from their GP. Most GP’s will carry this out for free upon explanation of their job role.
* The Harm Reduction and Assertive Outreach Manager, commissioned by Blackpool Council, will provide the exchange with associated materials.
* Clients must be encouraged to return used needles in the sharps bins provided in the exchange packs. **Clients should never be refused any safer injecting packs**
* The Harm Reduction and Assertive Outreach Manager will commission a clinical waste disposal service (Principal Hygiene Ltd) for each participating pharmacy. Collections will be available on demand to ensure there is not an unacceptable build-up of clinical waste on the pharmacy premises. Requests for collections must be made to the Harm Reduction and Assertive Outreach Manager. **The pharmacy must ensure that waste associated with the needle exchange service is kept separate from other pharmaceutical waste**
* The Harm Reduction and Assertive Outreach Manager will provide the ordering process for equipment attainment
* The pharmacist will ensure timely and accurate completion of the agreed monitoring and performance tools, e.g. PharmOuctomes to support service administration and agreed payment mechanisms for activities
* The pharmacist, to aid the identification of changing injecting practice and identifying unmet needs, support the Harm Reduction and Assertive Outreach Manager with the completion of an annual Injecting Risk Questionnaire
* The pharmacy should clearly display the national scheme logo indicating participation in the service

**3.2 Social Value: Accessibility, fairness and equity of provision**

The commissioning of this service will reflect The Public Services (Social Value) Act 2012. Blackpool Council support this Act and will not seek just to assess the implications of commissioning decisions regarding the risk to groups of people but will look for opportunities (social value) to advance opportunities to those people.

The service:

* will be non-stigmatising and non-discriminatory, providing fair and equitable access. The service will comply with the Equality Act 2010
* will work in a way that it does not discriminate against individuals on the grounds of gender, race, disability, sexual orientation, sexual practices, gender reassignment, age, pregnancy or maternity, marriage/civil partnership or belief system and will ensure that all applicable legislation is adhered to
* is accessible to people who have had difficulties accessing support to become well, including people with mental health problems, from black and minority ethnic communities, people with sensory impairments, and people with learning disabilities or learning difficulties and people from the Gypsy / Romany / travelling communities
* will consider the needs of those not in training, education and employment (NEET), including employment, apprenticeships and training opportunities.
* will promote supply chain opportunities to local companies, in particular new and small enterprises

**3.3 Registration, Competencies and Training**

When required, the provider must be registered with the appropriate body, e.g. CQC

The service will ensure all staff are appropriately qualified and supported in their work so as to realise their potential, work positively with service users and positively promote the service. All staff will be supported to continuously update skills and techniques relevant to their work. Where required, qualified staff must be registered with a professional body.

Staffing and management structures will be streamlined and efficient with all staff having clear areas of responsibility and remits.

Staff should be trained in brief intervention and/or motivational interviewing techniques.

Staff to avail themselves for Horizon Harm Reduction and Needle Syringe Service training and any additionally available learning as sexual health and BBV training and overdose prevention.

Staff should have completed Royal Society of Public Health – Understanding Health Improvement Level 2 and Health Promotion Level 2 to provide wider health advice and support to clients, but this is not essential.

All staff to undertake training on the safe handling of injecting equipment <https://training.exchangesupplies.org/NSP_L2-launch>

All training costs relating to the provision of the needle exchange service will be met by the provider.

**3.5 Business Continuity**

The Service Provider ensures that sufficient staffing is available for the effective running of the service, including contingency planning for times of sickness, absences or any other occurrence that may jeopardise the delivery of the service to service users at levels sufficient to meet the performance objectives and service standards of the service as outlined in this agreement.

**3.6 Buildings and Accommodation**

The provider will be responsible for sourcing buildings that have the appropriate planning permission for delivering services.

The service provider will be responsible for the maintenance costs of any buildings occupied for delivering treatment services, which includes fittings, equipment, repairs and alterations. The provider will be responsible for any costs associated with the replacement of furniture, and provide consumables required for the smooth operation of the building.

**3.7 Additional Costs**

All additional costs will be met by the provider.

**3.8 Communication and Marketing**

All marketing/media tools must be approved by the Commissioner prior to use or publication. The Blackpool Council logo must be used in any communications and/or marketing in line with the Corporate Branding guidelines and agreement should be made with the commissioner prior to use. All costs in relation to communication and marketing will be met by the provider.

Providers will have the responsibility for ensuring interpreter services are available when required.

The pharmacy has appropriate harm reduction material and HORIZON treatment system information available for the user group and promotes its uptake.

**3.9 Intellectual Property Rights (IPR)**

IPR, existing and improvements, used by the provider which is relevant and necessary to the performance of the service will be owned by or licensed to Blackpool Council.

**3.10 Health & Wellbeing**

Foresight (2008) project on Mental Capital and Wellbeing - This report recommends five ways to well-being.  It presents the evidence and rationale between each of the five ways, drawing on a wealth of psychological literature. In line with similar messages for healthy eating, these are Connect, Be active, Take Notice, Keep learning and Give. The provider will be highly encouraged to promote wellbeing in the workplace.

**3.11 Safeguarding Children and Vulnerable Adults**

Pharmacists should act in accordance with Blackpool Safeguarding Adults/Safeguarding Children’s procedures.

For children residing within Blackpool boundaries:

Contact Children’s Social Care on: - **01253 477299**

For Out of Office Hours and at weekends ring: - **01253 477600**

For vulnerable adults residing within Blackpool boundaries:

Contact Adults Social Care on: - **01253 477592**

**3.12 Incident Reporting**

All serious incidents must be reported to Renaissance and the authority in accordance with the Public Health Serious Incident policy.

**3.13 Geographic coverage / boundary**

This service is for residents of Blackpool only.

**3.14 Asset Register**

The provider will be expected to maintain an asset register of needle exchange stock (fixed and information) to record resources associated with this service. The Harm Reduction and Assertive Outreach Manager can check stock levels for audit purposes. Pharmacy to ensure only stock required is ordered to avoid stockpiling. To ensure against stockpiling and overspending of budget, in some instances Renaissance will restrict the ordering of stock.

**3.15 Insurance**

## The Provider must at its own cost effect and maintain with a reputable insurance company the Required Insurances. The cover shall be in respect of all risks which may be incurred by the Provider, arising out of the Provider's performance of this Contract, including death or personal injury, loss of or damage to property or any other such loss. Such policies must include cover in respect of any financial loss arising from any advice given or omitted to be given by the Provider.

**3.16 Audit**

The provider will undertake periodic audits to the requirements of the organisation to understand the adequacy, effectiveness and compliance of the service being provided. This will include ad hoc client experience surveys and will be arranged by the Renaissance Harm Reduction and Assertive Outreach Manager.

**4. KEY PERFORMANCE INDICATORS**

**4.1 Data Collation/Reporting**

PharmOutcomes must be used to record all activity; no other reporting method will be accepted.

Data will be shared with other organisations e.g. Horizon, Public Health.

To ensure that our budget forecasts are as accurate as possible, we are asking all pharmacies to ensure that all PharmOutcomes paperwork is submitted on a monthly basis. Final invoices will need to be received within one month of all transactions. To this end, all data needs to be input by the last day of each month for data pertaining to that month e.g. December transaction inputting needs to be submitted on PharmOutcomes by the last day of December at the latest. Any transactions inputted after this date will no longer be paid.

**4.2 Contract Review Meetings**

Contract review meetings will be held on a 6 monthly or annual basis.

**4.3 Consequence of Breach**

Failure to comply with the requirements of Section 4 may result in the implementation of the Renaissance Poor Performance policy

**5. CONTRACT VALUE**

* 1. **Value**

The pharmacy needle exchange scheme is a vital scheme preventing the spread of blood borne viruses and preventing unnecessary needle waste on the streets of Blackpool. The values for the scheme are set largely in line with other schemes nationally.

Renaissance acknowledges the values for needle exchange were historically set and the pharmacy landscape has changed. Therefore, as of the 1st April 2016, Renaissance will increase the contract value of each return (regardless of the number of needles returned) from £0.25 to £0.60. The increase will be observed for a 12 month period and may or may not continue dependent upon the financial climate in subsequent years.

Public Health and HORIZON (Renaissance at Drugline Lancashire) anticipate pharmacies continue to encourage the return of needles and needle bins during the course of 2023-24.

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| Each Contact regardless of number of needles distributed | £1.00 | Each return regardless of the number of needles returned | £0.60 |

* 1. **Method of Payment**

BACS

* 1. **Frequency**

Monthly

**5.4 Local Point of Contact**

 Horizon, 102 Dickson Road, Blackpool, FY1 2BU Tel : 01253 311431

 For Contract, Operational or General Queries

 Alison Sayer asayer@ren-uk.com

 For Ordering/Stock Queries

 Ruth Hannibal rhannibal@ren.uk.com

**Pharmacy:**

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Renaissance at Drugline Lancashire:**

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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