

**SERVICE CONTRACT  
SPECIFICATION FOR  
SUPERVISED METHADONE AND  
BUPRENORPHINE  
CONSUMPTION IN  
WORCESTERSHIRE**

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## **1. PURPOSE**

- 1.1.1 This specification is part of the contractual relationship between Swanswell Charitable Trust, (“the Commissioner” on behalf of Worcestershire County Council) and community pharmacies (the Service Provider) for the delivery of supervised methadone and buprenorphine consumption (the Service).
- 1.1.2 The Service requires pharmacists to supervise the consumption of methadone and buprenorphine to Service Users at the point of dispensing by the pharmacy, ensuring that the correct dose has been administered to the Service User and that it has been consumed in its entirety.
- 1.1.3 The aims of the Service are to:
- Increase Service User compliance with the prescribing regime that they are on as part of an agreed treatment plan, and to increase retention in structured drug treatment
  - Reduce the overuse or underuse of prescribed substitute opiate medications
  - Reduce the diversion of prescribed medications on to the illicit drugs market, by ensuring that the prescribed medication is consumed by the Service Users for whom it was intended.
- 1.1.4 The effective date of the agreement is 1 June 2019
- 1.1.5 The contract terminates on 31 March 2020

## **2. BACKGROUND**

- 2.1 Methadone and buprenorphine have been found to be suitable substitutes for withdrawal from opiates, and beneficial in terms of harm reduction.
- 2.2 Drug misuse and dependence: UK guidelines on clinical management (2017) recommends that supervised consumption should be available to all patients to support induction on to opioids, and provided for a length of time appropriate to their individual needs and risks.
- 2.3 In the early stages of being prescribed a substitute medication, supervised consumption can provide structure for the Service User and enables regular contact with healthcare professionals who can support Service Users in their movement away from chaotic and risky behaviour, supporting their stabilisation on a prescribing regime. The Drug Misuse and Dependence guidelines 2017 advises that supervised consumption should be viewed as a situation where therapeutic relationships can be built with patients and for using supervision is to ensure the safety of the patient and to minimise the risk of toxicity; it should not be used or viewed as punishment.
- 2.4 Guidelines state that supervised consumption should only be stopped when the prescriber is satisfied that the Service User is able to maintain compliance with their prescribing regime.
- 2.5 Despite the fact that methadone and buprenorphine have a relatively low street value there is still an illicit market for methadone and buprenorphine. Supervised consumption of methadone and buprenorphine reduces the likelihood that prescribed methadone and buprenorphine will be diverted onto the illegal market.

## **3. SERVICE PROVISION**

- 3.1 Prior to a Service User first presenting for the Service, the terms on which the Service is being provided to the Service User will be agreed between the GP or Swanswell worker

(as appropriate), the Service User and the Service Provider.

*\*Details of the 4 way agreement are to be confirmed with Swanswell.*

- 3.2 The Service Provider will ensure that the supervision takes place with a pharmacist at the point of the medication being dispensed in the pharmacy, ensuring that the dose has been consumed in its entirety by the Service User. This should be confirmed by the Service User speaking or having a drink of water.
- 3.3 Prior to dispensing the medication to the Service User, the pharmacist must check the Service User's identification against the details shown on the prescription and be satisfied that they are dispensing to the correct Service User.
- 3.4 The pharmacist will check prescriptions to confirm that they are legal and that the quantities of methadone or buprenorphine to be dispensed and the Service User details are correct. Where the pharmacist is under any doubt about these details, they should contact the prescriber or key worker as appropriate.
- 3.5 The Service Provider will ensure that the methadone or buprenorphine is presented to the Service User in a suitable receptacle and will provide water to facilitate administration of the medication and/or reduce the risk of doses being held in the mouth.
- 3.6 The Service Provider will provide support and advice to the Service User, which may include referrals to other primary care providers or specialist treatment services as appropriate.

Swanswell Hub locations are:

- Worcester
- Redditch
- Kidderminster

You can contact these offices via the Single Point of Contact telephone number: **0300 303 8200**

In addition to the above Hub Locations, key working/group sessions in community locations/shared care settings cover the Bromsgrove, Droitwich, Evesham and Malvern localities.

For pharmacies in the following localities, the keyworkers for patients will fall under these team locations:

<b>Area</b>	<b>Contact Hub</b>
Bromsgrove	Redditch
Droitwich	Worcester
Evesham	Worcester
Malvern	Worcester

- 3.7 When the service user's prescription includes 'take-home' doses for dispensing (e.g. when a pharmacy is not open on a public holiday or weekend) and the person collecting a Controlled Drug is a patient's representative, the pharmacist should ask for proof of identity. Pharmacists have the discretion to decide whether to supply the CD.
- 3.8 The Service Provider will ensure that appropriate notes are recorded on the Controlled Drugs Register, on the prescription and on PharmOutcomes.

- 3.9 Where the Service User has missed more than one consecutive dose, the Service Provider will inform the prescriber or key worker as appropriate.
- 3.10 Should the Service User miss three consecutive doses, in line with NICE guidance, the pharmacist **should ensure that they contact the prescriber to confirm suitability of continued collection before dispensing**. This is due to the risk of loss of tolerance and increased risk of overdose to Service Users who miss three consecutive days collection and as such may require reassessment by the prescriber. Clinical guidance around Buprenorphine and Methadone use as part of Opiate Substitute Treatment can be found at:  
<https://www.gov.uk/government/publications/drug-misuse-and-dependence-uk-guidelines-on-clinical-management>
- 3.11 Where the Service has been discontinued for a Service User for whatever reason, the pharmacist should indicate 'not dispensed' for any remaining days on the current prescription. Any prescriptions which have yet to be started should be destroyed and a record kept of their destruction
- 3.12 The Service Provider will use every opportunity to ask Service Users questions to find out about their underlying health needs and deliver brief advice to improve health and wellbeing. Key issues are to encourage individuals to:
- Stop smoking
  - Eat healthily
  - Maintain a healthy weight
  - Drink alcohol within the recommended daily limits
  - Undertake the recommended amount of physical activity
  - Improve their mental health and wellbeing.
- 3.13 The Service will be provided in a non-judgemental and confidential manner.
- 3.14 The Service will be provided in a consultation room.
- 3.15 All waste whether clinical or confidential will be disposed of appropriately.
- 3.16 All resources and equipment (including maintenance thereof) for the delivery of the Service will be the responsibility of the Service Provider.
- 3.17 The Service Provider will have in place Standard Operating Procedures for the delivery of the Service, which they will send to Swanswell Charitable Trust, upon request, for disclosure to the Council.

#### **4. NATIONAL & LOCAL GUIDANCE**

- 4.1 The Service Provider shall deliver the Service in line with the NHS (Pharmaceutical Services) Regulations 2013 and any other relevant professional standards.
- 4.2 The Service Provider will work within the legal framework for controlled substances (the Misuse of Drugs Act 1971) as well as the British National Formulary (BNF) and be compliant with current guidance from the National Institute for Health and Clinical Excellence.
- 4.3 The Service Provider shall comply with the Department of Health (2017), *Drug Misuse and Dependence: UK Guidelines on Clinical Management*.
- 4.4 The Service Provider will deliver the Services in accordance with best practice in health care and shall comply in all respect with the standards and recommendations contained

in:

- National Service Frameworks and National Strategies
- National Patient Safety Agency alerts and guidance
- Human Medicines Regulations 2012
- And such other quality standards agreed in writing between the Service Provider and the Commissioner.

4.5 The Service Provider will at all times comply with the most recent guidance on medicines from the Medicines and Healthcare products Regulatory Agency (MHRA).

## **5. SERVICE STANDARDS AND PRINCIPLES**

5.1 The Service Provider will ensure that their Standard Operating Procedures (SOPs) are reviewed on an annual basis, and that all pharmacists and members of staff involved in delivering the Service are aware of them and work in accordance with them.

5.2 The Service Provider will ensure that they comply with all statutory employment legislation, and health & safety requirements and regulations, including Human Medicines Regulations (2012).

5.3 Service Users will be seen as individuals, and the Service will be personalised to the needs of the individual and dedicated to promoting the independence, well-being and dignity of every Service User who engages with the Service.

5.4 Service Users will be supported to make their own choices and to be fully involved in all decisions regarding their support.

5.5 The Service will be accessible to all and will take account of culture, religion, race, gender, age, disability and sexuality. The Service Provider will ensure that it meets legal obligations with regards to all relevant equality and human rights legislation.

5.6 Any documentation relating to the Service will not be left unattended, and will be stored securely within the pharmacy to maintain confidentiality.

5.7 The Service Provider will ensure that there are necessary safeguards for, and appropriate use of, Service User and personal information to ensure that such information is dealt with legally, securely, efficiently and effectively, in order to deliver the best possible high quality care. This will be in accordance with relevant legislation and best practice guidelines including the Data Protection Act (1998) until 25th May 2018; thereafter, the General Data Protection Regulation (GDPR), and Caldicott Principles.

## **6. ACCESS AND ELIGIBILITY**

6.1 The Service will be available during the Pharmacy's opening hours, according to the restrictions it has under the Contractual Framework Agreement with the NHS Commissioning Board.

6.2 The Service Provider will maintain an acceptable level of staffing at all times, and will provide suitably skilled, trained and experienced paid staff to provide the Service.

6.3 The Service Provider will ensure that the consultation room of the pharmacy in which the Service is delivered provides a sufficient level of privacy and safety to the Service User.

- 6.4 The Service will be open to anyone aged 18 or over, who is a Worcestershire resident and for whom the Service Provider has received notification from either a prescriber or key worker that the Service Users prescription requires supervision.

## **7. OUTCOMES**

- 7.1 The Service will contribute towards the following outcomes:
- An increase in the number of Service Users being retained in treatment, and maintaining compliance with their prescribing regime
  - A reduction in the diversion of methadone and buprenorphine onto the illegal drugs market.

## **8. INFORMATION REQUIREMENTS**

- 8.1 The Service Provider will, on a monthly basis, submit to the Commissioner information regarding the number of doses of methadone and buprenorphine they have supervised. Completed prescriptions are to be entered onto PharmOutcomes by the end of the second day of the month
- 8.2 The Service Provider will participate in any surveys as directed by the Commissioner.
- 8.3 The Service Provider will participate in any audits of the Service as directed by the Commissioner.
- 8.4 The Service Provider will provide information to the Commissioner in the format set out on PharmOutcomes.

## **9. TRAINING AND DEVELOPMENT**

- 9.1 The Service Provider shall ensure that all pharmacists and staff involved in the provision of the Service have relevant knowledge and have completed the training (including the maintenance of any accreditation as appropriate to the Service).
- 9.2 The Service Provider will ensure that all members of staff involved in the delivery of the Service are able to demonstrate their participation in training, and that the education and training needs of staff providing the Service are supported.
- 9.3 The Service Provider will ensure that all pharmacists who provide or supervise the Service have completed the most recent version of the Substance Use and Misuse open learning programme delivered by the Centre for Pharmacy Postgraduate Education (CPPE). Any relevant information should then be disseminated to all staff involved in the provision of the Service.
- 9.4 All staff involved in the delivery of the Service must attend any additional training as directed by the Commissioner.
- 9.5 The Service Provider shall provide evidence of the completion of the above training upon request by the Commissioner.

## **10. QUALITY STANDARDS**

- 10.1 The Service Provider will have robust risk management process in place, including:
- Incident reporting and investigation processes
  - Complaints processes.
  - Report to the CD LIN

- 10.2 The Service Provider will report all serious untoward incidents following national and local reporting processes and frameworks e.g. National Reporting and Learning System (NRLS) or CD LIN. They will provide details of recommendations and actions taken as a result.

## **11. TERMINATION**

11.1 The Service Provider shall give three months notice for any agreed change to the contract or termination of the agreement. This is to allow sufficient time for alternate arrangements to be made to ensure continuity of service to service users.

11.2 Swanswell reserves the right to immediately suspend the contract for supervised consumption service should the pharmacy be found to be in serious breach of the agreement or if there are significant patient safety concerns with the pharmacy that will pose a significant risk to service users.

## **12. PAYMENT**

- Payment per supervision of methadone - £2
- Payment per supervision of Espranor (buprenorphine oral lyophilisate) - £2
- Payment per supervision of buprenorphine sublingual tablets - £3.50
- Pharmoutcomes will automatically generate an invoice which will be sent to Swanswell for payment on the third day of the month. Payments will be made within the month.

## **QUERIES**

All queries should be directed to Swanswell Charitable Trust, by email at:  
[worcsadmin@swanswell.org](mailto:worcsadmin@swanswell.org)



## Appendix 1: Acceptance of Service Contract for Supervised Methadone and Buprenorphine Consumption – Worcestershire

(Please sign two copies of this acceptance and one copy of the supplier request form to send to finance. We will sign and return a copy to you).

Service to be provided	Supervised Methadone and Buprenorphine Consumption - Worcestershire
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Pharmacy details	
Pharmacy name	
Pharmacy address	
Phone number	
Fax number	
Name of pharmacist/authorized signatory signing Contract	
RPSGB number	
Signature	
Date	

Swanswell details	
Name	Swanswell Charitable Trust
Address	Cranstoun, Thames Mews, Portsmouth Road, Esher, Surrey, KT10 9AD
Phone number	0208 335 1830
Email	<a href="mailto:swaccountspayable@cranstoun.org.uk">swaccountspayable@cranstoun.org.uk</a>
Name of person signing SLA	Annie Steele
Position	Operations Director
Signature	
Date	

## Supplier information request form



Please complete this form and e-mail a signed copy to [swaccountspayable@cranstoun.org.uk](mailto:swaccountspayable@cranstoun.org.uk)

### Supplier details

<b>Company name</b>	<b>Type</b> Limited company/sole trader/partnership <i>Delete as appropriate</i>
<b>Company no</b>	<b>Contact name</b>
<b>Address</b>	<b>Contact e-mail</b>
<b>Post code</b>	<b>Contact number</b>

### Bank details

<b>Name of bank/building society</b>	<b>Sort code</b>
<b>Account name</b>	<b>Account number</b>
<b>Bank/building society address</b>	<b>Building society roll no. (if applicable)</b>

<b>Signed</b>	<b>Date</b>
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### Internal use only

<b>Contract</b>	<b>Cost centre</b>
<b>Entered to Finance System (date)</b>	<b>Entered to Finance System (by)</b>
<b>Supplier reference</b>	