# PHARMACEUTICAL SERVICES (SCOTLAND) ADDITIONAL SERVICES

**Injecting Equipment Provision Service**

1. **Service aims and Objectives**
   1. To protect individual and public health by reducing the incidence of blood- borne virus (BBV) transmission and drug-related harm amongst patients by:
      * Providing sterile injecting equipment and related paraphernalia as agreed locally
      * Reducing the rate of sharing and other high-risk injecting behaviours.
      * Promoting safer injecting practices
      * Providing and reinforcing harm reduction messages including safe sex advice including condom provision and advice on overdose prevention including Naloxone training and/or supply
   2. To protect the health of local communities by preventing the spread of BBV by promoting and providing facilities for safe disposal of injecting equipment
   3. To help patients to access other health, voluntary and social care services where appropriate to facilitate behaviour change as part of the wider recovery systems of care.

# Service outline and standards

## Service Provision

* + 1. NHS Forth Valley will undertake needs assessment for injecting equipment provision to determine the scope and geographical distribution of IEP services
    2. Pharmacy IEP services will be provided by community pharmacies in selected geographical locations according to need
    3. The service will be provided under the direct supervision of the pharmacist, by appropriately trained staff, and will be available during all opening hours
    4. The community pharmacy team will be responsible for offering a user-friendly, non-judgemental, patient-centred, confidential and trauma informed service.
    5. The pharmacist will be responsible for developing and maintaining a close working relationship with the staff of local harm reduction services and Drug Treatment Services. This should include a process to allow information sharing where required
    6. The community pharmacy team will provide support, advice and information to patients who use this service, including signposting or referral to other broader health and social support services. These will include:
       - Injection risk advice
       - Referral to Harm Reduction Service drop-ins
       - Referral to Local drug and alcohol treatment services
       - Advice on Hepatology services for BBV testing and treatment
       - Sign posting to Recovery Groups
    7. A standard operating procedure should be in place in the pharmacy and cover all aspects of service provision
    8. NHS Forth Valley will provide local guidelines on the [management of needlestick injuries](https://staffnet.fv.scot.nhs.uk/wp-content/uploads/2022/06/Blood-Borne-Virus-Exposure.pdf)
    9. All staff working on the premises should be aware that an Injecting Equipment Provision service is being operated and those directly involved offered Hepatitis B immunisation by NHS Forth Valley occupational health service.
    10. The pharmacist will consider and, where appropriate, act on any child protection concerns coming to their attention as a result of providing the service. Further information can be found [here](https://staffnet.fv.scot.nhs.uk/departments/wp-content/uploads/sites/16/2022/05/Guidelines-for-making-a-Child-Protection-Referral-With-Flowchart.pdf)

## Equipment

* + 1. The NHS Board will provide injecting equipment as agreed locally and a safe disposal system for the return of used injecting equipment. The pharmacist will provide access to sterile injecting equipment and associated paraphernalia. Patients should be actively encouraged to take sufficient equipment to meet their needs with the aim of providing one set of equipment per injection. There are **no legal limits** on the number of sterile needles and syringes that Injecting Equipment Provision (IEP) services can give out to their patients.
    2. Secondary distribution should not be discouraged. Those patients who supply equipment to others should be encouraged to bring the other injector to the IEP service so they can benefit from the advice and information
    3. The community pharmacy staff providing the service under direct supervision of the pharmacist should be able to advise patients, if required, of the different equipment available and it’s use. Specifically, they should be able to advise on needle type and size, and less risky injection sites.
    4. The pharmacist must promote and encourage return of used equipment for safe disposal. There is no legal requirement for patients of IEP services to return used injecting equipment before new equipment can be distributed. However when a patient fails to return any used equipment counselling should be provided on the importance and need to return used equipment to minimise risk to the public
    5. Only in exceptional circumstances should a supply be refused. Professional judgement should be used and individual patient risk should be assessed. Risk of not supplying should also be considered.
    6. Patients must place used syringes and needles directly into the sharps bin provided. Pharmacy staff should never handle loose returned injecting equipment. Patients should be asked to estimate the number of returned needle/syringe sets in the sharps bin and directly added to the NEO system.
    7. NHS Forth Valley will provide pharmacies operating an injecting equipment provision service with appropriate “special waste” containers and regular uplifts. Any problems with pick up should be reported to fv.communitypharmacysupport@nhs.scot

## Assessment & Information

* + 1. All patients attending the service for the first time should be welcomed and asked a minimum dataset of information about injecting practice to ensure their needs are met. This information should be updated at least twice a year. The discussion should take place in a private area to ensure confidentiality and should include the provision of both verbal and written information about safer injecting practices and safe disposal of used equipment. The following questions should be asked on first presentation and repeated at suitable intervals or at least every six months:
       - What drugs are being injected and where
       - How often they are injecting
       - Who they are collecting supplies for (see 2.2.1)
       - Enquire if patient has a supply of Naloxone and supply if required and safe storage.
    2. The pharmacist will be responsible for providing information in a variety of formats on blood-borne viruses, safer injecting practice, wound management and overdose prevention including naloxone supply where appropriate
    3. When providing injecting equipment pharmacy staff should, as a minimum, educate patients about the following:
       - Washing their hands with soap and water before injecting
       - The correct use of each item of injecting equipment
       - The risks of sharing injecting equipment
       - The correct methods of disposing of used injecting equipment
       - Ask if patient has any questions

## Data collection

* + 1. The pharmacist is responsible for ensuring that staff collects the minimum data set as agreed nationally and additional information as agreed locally
    2. Data collection systems should be used in accordance with local protocols and direct entry into NEO system. Confidentiality and data protection must be maintained.

# Training

* 1. NHS Forth Valley will ensure that relevant training is made available to pharmacy staff involved in IEP services on an annual basis and a member of the pharmacy team must attend. Additional training can be found on Scottish Drugs Forum website
  2. The community pharmacy contractor will ensure that staff involved in delivering the scheme, participate in a local training programme as identified by NHS Forth Valley in accordance with agreed local standards
  3. All staff should have an awareness and understanding of **Injecting Equipment Provision In Scotland-** Good Practice Guidance
  4. It is mandatory that the pharmacists and staff providing this service should complete Substance Use Core Module on TURAS~~.~~
  5. The pharmacist supervising the service will ensure that they, and their staff involved in the provision of the service, have up-to-date knowledge, are aware of

local arrangements and are appropriately trained in the operation of the service.

# Monitoring and evaluation

* 1. It is a requirement of the service that appropriate records are kept and maintained by the pharmacist to enable verification of service provision and training requirements, and to provide information to NHS Forth Valley for internal and external audit and evaluation purposes
  2. A standard operating procedure should be in place in the pharmacy and cover all aspects of service provision
  3. The pharmacist is responsible for participating in local and national evaluation and facilitating local customer feedback initiatives
  4. NHS Forth Valley will ensure effective monitoring and audit of the service and will include user survey access.
  5. NHS Forth Valley reserves the right to give notice to withdraw the service from a community pharmacy based on closure history, failure to engage with other locally negotiated services and/or failure to record clinical information as stated in the SLA.

# Claims and Payment

* 1. A fee will be paid for providing this service. This will include the provision of equipment with written and verbal advice to patients. Fees paid will be as defined by NHS FV ADP and agreed by FV contractors committee
  2. All pharmacies providing the IEP service must ensure that all transactions for the previous calendar month are logged electronically on NEO before the 10th day of the following month to allow NHS Forth Valley to remunerate pharmacies for providing the IEP service. Payment for the IEP service will be listed on the monthly payment schedule from PSD
  3. A service retainer fee of £813.24 per annum is paid to contractors. This is paid as a monthly fee of £67.77. A payment of £2.51 is made per transaction.

# Pharmacy Premises Criteria

* 1. Community pharmacies providing this service must have a private, enclosed clinical consultation area suitable within the community pharmacy
  2. Key requirements are:
     + Appropriate space to store IEP equipment and Paraphernalia
     + Chair(s)
     + Wheelchair/disabled access
     + Safe storage of documentation
     + Access to NEO system
     + Availability of promotional literature on access to drug treatment and recovery support supplied by Forth Valley Alcohol and Drug Partnership

**Background Information – not part of the service specification**

# Useful references

RPSGB Medicines, Ethics and Practice Guide (current edition) NHS Turas Learning modules Child Protection Learning Resource Pack

NHS Forth Valley Data Protection and Confidentiality Policy for personal information

**Injecting Equipment Provision In Scotland-** Good Practice Guidance

<https://www.sdf.org.uk/new-good-practice-guidance-on-the-provision-of-injecting-equipment-published/>

**Medication Assisted Treatment (MAT) standards: access, choice, support** <https://www.gov.scot/publications/medication-assisted-treatment-mat-standards-scotland-access-choice-support/>

National Trauma Training Programme- <https://learn.nes.nhs.scot/37898>

Harm reduction elearning available from Vernacare Academy. <https://www.vernacare.com/training-academy>

Appendix 1

