



The Services

Provision of Community-Based Needle Exchange Services

Reference DN110880

Contents

The Contract

Appendix A – Contract Specific Specification

Appendix B – Quality Outcome Indicators

Appendix C – Service User, Carer and Staff Surveys

Appendix D – Charges

Appendix E – Incidents Requiring Reporting Procedure

Appendix F – Information Provision

Appendix G – Service Quality Performance Report

The following have already been provided within Dynamic Purchasing System for Community Health Improvement Services and as such, along with the above, will form the full contract when awarded:

- Contract Terms and Conditions
- Appendix A – General Specification
- Appendix H - Dispute Resolution
- Appendix I - Definitions and Interpretation
- Appendix J - DBS Check Documents

The Contract

Provision of Needle Exchange Services

1. Terms and Conditions

- 1.1. The terms and conditions ('Contract Terms and Conditions') are as agreed by entering into the Dynamic Purchasing System (DPS) for Community Health Improvement Services.
- 1.2. The document titled "Procurement Documents" and this document titled 'The Services' along with appendices listed below in 1.2.1 form part of the General Terms and Conditions of Contract ('General Conditions' - Section B) and the Special Terms and Conditions ('Special Conditions' – Section C) that apply to the contract awarded for the Services pursuant to the further competitive from DPS for Community Health Improvement Services.
 - 1.2.1. Appendices as follows:
 - Appendix A
 - General Specification ①
 - Contract Specific Specification ②
 - Appendix B Quality Outcome Indicators ②
 - Appendix C Service User, Carer and Staff Surveys ②
 - Appendix D Charges ②
 - Appendix E Incidents Requiring Reporting Procedure ②
 - Appendix F Information Provision ②
 - Appendix G Service Quality Performance Report ②
 - Appendix H Dispute Resolution①
 - Appendix I Definitions and Interpretation①
 - Appendix J DBS Check Documents①

① As provided within the Dynamic Purchasing System

② As provided in this document with the further competition

2. Commencement and Duration

- 2.1. In accordance with clause A3:
 - 2.1.1. The Contract shall take effect on 1st April 2016 (the 'Commencement Date')
 - 2.1.2. The Provider shall provide the Services from 1st April 2016 (the 'Service Commencement Date')

- 2.1.3. The Contract shall expire automatically on 31st March 2017 (the 'Expiry Date', unless it is extended in accordance with clause 3 below or terminated earlier in accordance with the provisions of the Contract.

3. Extending the Duration of Contract

- 3.1. The Council may extend the term of the Contract by a further 2 years (the 'Extension Period') within 1 year increments, equating to a potential Contract term of 3 years. (1 + 1 + 1). If the Council wishes to extend this Contract, it shall give the Provider at least 3 months written notice of such intention before the Expiry Date.
- 3.2. If the Council gives such notice, the Expiry Date will be extended by the period set out in the notice.

4. Service Review

- 4.1. The Contract will may be subject to future changes in policy or legislation. Such changes to be subject of Reviews in accordance with clause B18 ('Service Review') and clause ('Review Meetings').
- 4.2. The service specification will be subject to an annual review that may be updated to reflect changes in any future changes in national or local policy, for example, government guidance and legislation, industry professional standards, NICE guidance, Public Health England or Dorset County Council policy. Adequate notice will be given to the provider of any signification changes which may impact on the service provided and will ensure sufficient transition arrangements are secured to ensure service continuity

5. Charges and Payment

- 5.1. In accordance with clause B8 ('Charges and Payment') the shall be as set out in Appendix D ('Charges')
- 5.2. The frequency of claim for Charges and method to make claim for Charges shall be as set out in Appendix D ('Charges').

Appendix A – Contract Specific Specification

Provision of Needle Exchange Services

1. INTRODUCTION

- 1.1 This Service Specification is intended for the purchase of open access community pharmacy Needle Exchanges to people who inject drugs (PWID) in Bournemouth, Dorset and Poole, whether they are permanent or temporarily resident in the area. People who inject drugs will require sterile injecting equipment, information and advice around changing lifestyles, minimising the complications associated with drug misuse and accessing resources within the Community.
- 1.2 The Service provided through this specification will form part of the overall Bournemouth, Poole and Dorset Alcohol and Drug Strategy.
- 1.3 The Provider shall work alongside health, voluntary and independent sector agencies, involved in treatment interventions, is important in establishing a continuity of support to the service user.
- 1.4 Service Users of either gender, under the age of 18, who are dependent on drugs and/or alcohol, must be referred onto an appropriate young person's service or a Level 2 / Central Needle Exchange service.
- 1.5 The provision of this Service shall be commissioned via a targeted approach via Public Health Dorset and based upon locally defined needs.

2. BACKGROUND

- 2.1 Local authorities commission services to support the operation of a Drug and Alcohol Intervention and Treatment System to help people achieve a goal of recovery and to enable them to lead drug and/or alcohol free lives.
- 2.2 It is recognised that not all drug and/or alcohol users are at a stage when this is an option for them. A harm reduction approach is therefore applied. It does not seek to support a drug using lifestyle but, takes a non-judgmental approach to engage and build relationships with people who are placing themselves and others at potential risk.
- 2.3 It uses a broad range of approaches which include:
 - 2.3.1 Actions to the risk of reduce drug related deaths

- 2.3.2 Overdose awareness training
 - 2.3.3 Access to Hepatitis and HIV testing
 - 2.3.4 Access to Hepatitis A/B inoculation
 - 2.3.5 Provision of a range of sterile injecting equipment and paraphernalia
 - 2.3.6 Provision of safer injecting information and other health promotion information
 - 2.3.7 Sexual health information and condoms as some blood borne viruses can also be transmitted to sexual partners
 - 2.3.8 Building trusting relations aiming to motivate drug users towards seeking help in coming off drugs and/or alcohol where dependent on them
- 2.4 All services within the Intervention and Treatment System are mindful of the potential need to reinforce Harm Reduction at any part of person's treatment journey.
- 2.5 Needle & Syringe Programmes (NSP) delivery is based on the philosophy of providing injecting drug users with sterile hypodermic needles and associated injection equipment at no cost. The aim of these services is to reduce the damage associated with using unsterile or contaminated injecting equipment.
- 2.6 Pharmacy Needle Exchange schemes operate within the context of a model of recovery from drug and alcohol dependency as part of an integrated Drug and Alcohol Intervention and Treatment system commissioned by local authorities.

3. AIMS AND OBJECTIVES OF THE SERVICE / SERVICE OUTCOMES

- 3.1 Reduce the need for people who inject drugs to share non-sterile equipment.
- 3.2 Reduce the potential harm related to blood borne virus transmission and bacterial infection amongst Service Users who inject drugs, through the provision of sterile injecting equipment.
- 3.3 Provide a Pharmacy based Needle Exchange Service, which is an easy to access and user-friendly service and which respects the confidentiality of the injecting drug user.
- 3.4 Encourage people who inject drugs to return used equipment for safe disposal.
- 3.5 Assist people who inject drugs to remain healthy until they are ready and willing to cease injecting through the provision of accurate, current and non judgemental health advice and information. This shall include handing out written information where appropriate.

- 3.6 Minimise the risk of exposure to members of the public from contaminated needles and syringes by offering a safe used needle disposal point.
- 3.7 Proactively signpost people who inject drugs to a Central / Level 2 needle exchange service who can provide wider services including a broader range of injecting paraphernalia, wound checking, the promotion of safer injecting or alternative drug taking practices, Blood Borne Virus testing and inoculation to reduce the risk of blood borne virus infection and access to overdose awareness and basic first aid training.
- 3.8 Proactively signpost people who inject drugs direct to a drug treatment service if they are ready to receive that level of intervention.
- 3.9 Provide accurate, up-to-date and non-judgemental health advice relevant to people who inject drugs.
- 3.10 Encourage multi disciplinary working and collaboration in the provision of services within the community for drug users.

4. DESCRIPTION OF THE SERVICE

Policy and Standard Initiatives

- 4.1 The Provider shall acknowledge the significance of the following policies and standard initiatives and work in partnership to achieve them.

National

- Home Office 2010, Drug Strategy 'Reducing Demand, Restricting Supply, Building Recovery: Supporting People to live a drug-free life'
- NICE Guidance PH4 – Interventions to reduce substance misuse among vulnerable Young People (Mar 2007)
- NICE Clinical Guidance 51 – Drug Misuse Psychosocial Interventions (Jul 2007)
- NICE Guidance PH18 – Needle Exchange and Syringe Programme (Feb 2009)
- NICE Guidance PH24 – Alcohol-Use Disorder – Preventing harmful drinking (Nov 2010)
- Department of Health 2010 - Healthy lives, healthy people: our strategy for public health in England
- NICE quality standards 23 – Quality Standard for drug use disorders, 2012

Local - Pan Dorset Local Authorities

- Pan Dorset Adult Protection Procedures;
- Pan Dorset Inter Agency Safeguarding Procedures – Children;
- Pan Dorset Inter Agency Sharing Information Policy.

Local – Pan Dorset Drug & Alcohol Action Teams

- Bournemouth, Poole and Dorset Drug and Alcohol Strategy 2016-2020
- Pan Dorset Drug Related Death Pan Dorset Drug Related Deaths Confidential Inquiry Panel (CIP) Action Plan
- Pan Dorset Service Governance Strategy 2015 - 2018
- Pan Dorset Workforce Strategy 2015 - 2018

Service Description

- 4.2 The Community Pharmacy Needle Exchange Scheme shall offer a confidential service to Service Users who inject drugs for the provision and return of injecting equipment. Pharmacies across the Bournemouth, Dorset and Poole participating in the scheme ([Appendix 1](#)), will work together to reduce the practice of sharing equipment amongst drug users.
- 4.3 Pharmacies shall provide people who inject drugs with a Level One service which will include:
- 4.3.1 the provision of sterile injecting equipment
 - 4.3.2 information and advice around changing lifestyles
 - 4.3.3 basic information on minimising the complications associated with drug misuse
 - 4.3.4 signposting information on how to access drug and alcohol open access or treatment services within the community

Carrying Out the Needle Exchange Transaction

- 4.4 In practice, the transaction is simple and generally takes only a few minutes. Where a Service User who injects drugs is presenting to the Service for the first time, a simple registration process shall be undertaken using the approved Registration Card ([Appendix 6](#)) followed by the issuing of a Membership Card ([Appendix 5](#)).
- 4.5 When people who inject drugs access the Pharmacy Needle Exchange they shall show a Membership Card or quote their individual reference number, the Provider shall carry out the following:
- 4.5.1 Oversee and guide the Service User to place any returned 'used' equipment into the Pharmacy 30 litre Yellow Sharps Container.
 - 4.5.2 Identify the pack(s) the person who inject drugs requires.
 - 4.5.3 Enter the details of each transaction onto PharmOutcomes
- 4.6 An appropriate number of the most suitable packs are to be provided depending on the needs of the person who inject drugs. According to local statistical monitoring as an average, most service users in practice tend to only request one or two packs per visit. However, there may be occasions where a

service user may be collecting and distributing for friends/other members of the family and request more packs. It would be expected that equivalent numbers of the black personal sharps containers would be returned on follow up visits.

People Who Inject Drugs

- 4.7 Pharmacy Needle Exchanges are open access, low threshold services which operate during the pharmacy's normal opening hours.
- 4.8 Pharmacy Needle Exchange Schemes shall only be used by people who inject drugs over the age of 18.
- 4.9 The Service shall be strictly confidential. People who inject drugs using the Service must be guaranteed that their dealings with the Service will at all times be kept confidential. A basic data set as detailed on the Registration Card shall be collected. Some of the information requested on the initial visit may be shared with the Purchaser to help plan services to meet local need.
- 4.10 People who inject drugs shall be treated with courtesy and respect, as would be the case for any other individuals within the Pharmacy and be afforded privacy when using the service.
- 4.11 The Provider shall ensure that Employees shall be friendly and supportive with an understanding and professional attitude.
- 4.12 The Provider retains the right to refuse or exclude people who inject drugs at any time during the Service take up where behaviour is unacceptable.
- 4.13 If a Provider excludes or refuses to work with a Service User, the Provider must advise the relevant local authorities' Harm Reduction Co-ordinator of the service user's registration number and inform them about alternative Needle Exchanges in the area.

Working with Young People (under 18 years)

- 4.14 Policy guidance states that minimum contact Needle Exchanges, such as pharmacy based schemes, are unlikely to have sufficient resources or training to assess or provide a needle exchange within the ten key policy principles to be applied when working with young people who take drugs. Therefore, it is recommended that Pharmacy Needle Exchanges do not provide the Service to those under, or who appear to be under 18 years of age.
- 4.15 The course of action to a young person presenting to a Pharmacy Needle Exchange will be as follows:

- 4.15.1 request proof of the young person's age before making a decision whether or not to provide injecting equipment;
- 4.15.2 provide details of specialist local services working with young people with addictions, which will offer advice, information and specialist assessment

Giving Advice and Information

- 4.16 The Provider shall ensure that their Employees take every opportunity to engage with people who inject drugs and provide advice/information on general health promotion such as diet, health, exercise, smoking reduction and oral hygiene where opportunities permit.
- 4.17 Healthcare and treatment advice leaflets shall be readily available to all.
- 4.18 Signposting - as relationships of trust develop with Service Users, opportunities shall be taken to promote the contact telephone numbers of specialist drug and alcohol services, information and advice services and alternative Needle Exchange facilities.
- 4.19 Needle and syringe packs shall include information leaflets within them - these are rotated on a quarterly basis. Information leaflets are produced by the Harm Reduction Co-ordinators and consultation carried out with the Pan Dorset Prevention Group and people who inject drugs on the contents before distributing within the packs.
- 4.20 Drug Health Alerts (CASCADE) - Occasionally, Drug Health Alerts are issued by Dorset Police on behalf of the local authorities and co-operation in helping to get the message across to people who inject drugs is paramount at these times. These types of alerts are issued across the Drug and Alcohol Intervention and Treatment Systems so that all services that may have contact with drug users can make them more aware of the current risks identified.

Membership Card Registration System

- 4.21 Every Service User accessing the Needle Exchange Scheme in the Bournemouth, Dorset, and Poole areas will be issued with a Membership Card with a unique registration number when first presenting at a needle exchange service. The Service User shall then show their issued Membership Card ([Appendix 5](#)) or quote their service user registration number when obtaining injecting equipment.
- 4.22 If the Service User does not have a Membership Card, the Provider shall issue a new membership card and record any transaction details as required on Pharmoutcomes secure database (e.g. new member). Any pharmacist may

also ask for details such as; Initials, DOB, and a part postcode which is captured for statistical purposes only and is non identifiable.

- 4.23 If the Service User does not have a Membership Card, the Provider shall complete a Registration Card ([Appendix 6](#)) and return as required by the local commissioner and;/or Harm Reduction Coordinator for each locality. The pharmacist will then explain to the service user that the card allows access to any Needle Exchange in the Bournemouth, Dorset and Poole areas.

Training and Staff Requirements

- 4.24 Pharmacists and their Employees providing the Service shall be competent to provide the service and have some knowledge on the range of drugs injected, including heroin, cocaine, crack cocaine, amphetamines and steroids and in particular the range of local Drug and Alcohol Intervention and Treatment Services available to sign post Service Users to.

Pharmacy Induction

- 4.25 Following agreement to proceed, Pharmacies will receive an initial visit from a Public Health representative and/or Harm Reduction Co-ordinator to advise on setting up the Service and to give practical advice on how the needle exchange transaction can take place within a Service User pharmacy setting.
- 4.26 An on-site induction will be arranged to ensure that Employees involved in the scheme are suitably trained in:
- 4.26.1 The scheme context
 - 4.26.2 The ethics and principles of a Pharmacy Needle Exchange Scheme, Blood borne virus awareness and basic awareness about substance use
 - 4.26.3 Service operation - carrying out the transaction and recording activity.
 - 4.26.4 Confidentiality
 - 4.26.5 Safety and risk management precautions within the Pharmacy to ensure the prevention of injury to Employees and members of the public:
 - 4.26.6 Dealing with spillage and contamination with potentially infected blood or body fluids.
 - 4.26.7 Processes and what to do in the event of needle stick injury
 - 4.26.8 Reporting of incidents/accidents
 - 4.26.9 Handling Conflict; dealing with difficult situations; what action to carry out if a Service User becomes threatening
 - 4.26.10 Safeguarding children and vulnerable adults (reference to other training)
 - 4.26.11 Signposting to specialist services available in the area
 - 4.26.12 Expected action in an overdose situation – dial 999

- 4.27 This will be complemented with onsite training negotiated on an individual pharmacy basis and it is expected that as many Employees will attend as possible. Cascading of the training shall take place for Employees who have been unable to attend and this will be agreed.

Training Requirements

- 4.28 Pharmacist and/or registered pharmacy technician - To ensure that the regular Pharmacist and/or registered pharmacy technician overseeing the running of the Service has successfully completed the CPPE Substance Misuse 2012 training (open learning 10 hours) which is available as a download from the CPPE website, prior to the commencement of the provision of the Service.
- 4.29 Locum Pharmacists - All locum pharmacists must be made aware that the Needle Exchange operates within the pharmacy and that the Standard Operating Procedure (SOP) must be adhered to.
- 4.30 Additional free evening workshops will be made available according to need and demand and publicised by Public Health Dorset and local authority commissioners during the year. These will aim to enhance understanding, build operational practice and create an opportunity for networking.
- 4.31 All Pharmacy Employees delivering the Service shall receive the initial induction training and shall be encouraged to attend the additional local training workshops organised jointly by Public Health Dorset and local authority commissioners each year.

Hepatitis B Vaccination of Employees

- 4.32 All Pharmacists and pharmacy Employees shall be encouraged to access a Hepatitis B vaccination if they are not currently vaccinated.

Premises, Equipment and Stock

- 4.33 The Pharmacy will need to have a suitable area for storage of stock and returned items.
- 4.34 The Pharmacy layout will allow for discreet requests for packs and well as for returns of used needles, syringes and other injecting paraphernalia.

Product Details (Injecting Equipment packs)

- 4.35 Within the Pharmacy Needle Exchange Scheme, sterile injecting equipment is made available to Service Users in the form of the following pre-packed packs:

Red pack containing: (Order code: X114)	15 x 1ml WEGO fixed needle/syringe 0.45L Sharpsafe Exchange Container 15 x sterile wipes Information leaflet
Blue pack containing: (Order code: X034)	10 x 2ml syringes 10 x blue Terumo needles (23x1) 0.45L Sharpsafe Exchange Container 10 x sterile wipes Information leaflet

Ordering, Stock Maintenance and Stock Control

- 4.36 Provision is made for the Pharmacy to be responsible for and to order directly from the local authorities' authorised supplier as identified on the FAX order form - Frontier Medical Products. ([Appendix 4](#)). Frontier will then invoice the relevant local authority directly. Orders for stock must be placed with the approved supplier (Frontier Medical Products) by Monday 10.00am for a guaranteed delivery that week.
- 4.37 Supplies of injecting equipment are ordered at the Pharmacy's discretion on the number of packs to be delivered in line with the amount of storage space available.
- 4.38 Packs are provided in cartons of 50 packs and Frontier is normally able to deliver within 3-4 working days.

Pharmacy Sharps Bins Waste Collection Disposal of injecting equipment

- 4.39 Pharmacy 30 litre Yellow Sharps Containers are available from Frontier Medical Products (Order Code: 4180) and shall be ordered along with the Needle Exchange Packs. These are to be made available for the return of the individual sharps containers issued within the packs.
- 4.40 The Pharmacy 30 litre Yellow Sharps Container shall be sited in a designated area of the pharmacy (usually agreed on the initial visit), where Employees and members of the public will not have inadvertent contact with it. These arrangements will vary according to the practicalities of the Pharmacy lay out.
- 4.41 It is recommended that the Pharmacy has several bins available at any one time. One shall be set up as a sealed bin ready to operate in day to day exchanges. It is possible that very occasionally a Service User may return

used equipment in larger quantities such as a carrier bag. In this type of situation, the Service User shall be directed to place the bag in an open bin and then the lid sealed with care afterwards.

- 4.42 Arrangements are in place for a contracted waste collection provider to collect and dispose of full Pharmacy Sharps Containers. Pharmacies are required to oversee these collections and ensure that only full bins are taken by the waste collection service. Providers can arrange access to this provision by contacting their local substance misuse commissioner.
- 4.43 A schedule will be agreed with the Pharmacy as to how often the collection visits are made. Quantity and frequency of returned equipment and available space in the pharmacy will be taken into consideration when agreeing the schedule. Local authorities will set the schedule up with the recognised waste collection service provider and invoiced directly for this service.
- 4.44 Any changes to the frequency of collections must be authorised by the relevant local authority who shall be notified of any required increase needed.

Policy on Returning Used Equipment

- 4.45 People who inject drugs shall be advised about the risks to themselves and others which are posed by used syringes and needles. This particularly includes risks to children and young people. The Service User shall be proactively encouraged to return used equipment in a properly sealed sharps container (provided within each pack) for safe disposal in the pharmacy. The recommendation is at "every visit".
- 4.46 However, Service Users shall not be refused a pack if they do not return used equipment. (If it is their first visit they are unlikely to have anything to return). The Return Policy shall be discussed with them and individuals shall be reminded of the need to return used equipment.
- 4.47 For Service Users who repeatedly fail to return used equipment, the Provider shall consider giving only one pack of injecting equipment for their use, until they start returning equipment for safe disposal on a regular basis. However, this shall be considered alongside the recommendations in the NICE Public Health Guidance 52 for Needle and Syringe Programmes.
- 4.48 The Provider shall ensure that the Service User is instructed and directed to place their used equipment in the Pharmacy Sharps Container themselves. No Employee is expected to handle returned sharps.

Standard Operating Procedure

- 4.49 A Standard Operating Procedure (SOP) (An example can be found in [Appendix 2](#) which can also be made available electronically for an easy completion template) must be put in place prior to commencing delivery of the Service. All relevant Employees must have received training on this and a sign-off sheet must be completed to show this. This shall be kept in the Pharmacy Needle Exchange Folder.
- 4.50 A system for reviewing and updating the SOP every year must be in place. A named person must be identified with the responsibility for implementation and monitoring the SOP.
- 4.51 The Needlestick Injury Flow Chart (showing what to do in the event of a needlestick injury) is to be on display in a visible dispensary location. ([Appendix 3](#)).

Promotion and Advertising of the Service

- 4.52 Pharmacies participating in the Service shall be readily identifiable to people who inject drugs by displaying the nationally recognised window and/or wall sticker at the commencement of offering the service:



- 4.53 This will be provided by the relevant Harm Reduction Co-ordinator from whom further copies can be obtained in the event of any damage to the logo or pharmacy refit.
- 4.54 Other advertising will utilised at the discretion of the local authorities and/or Harm Reduction Co-ordinators

Links with other Harm Reduction Services

- 4.55 The Pharmacy shall ensure they maintain links with other Harm Reduction Services ([Appendix 1](#)) in their area to enable people who inject drugs to access complementary Level 2 services / Central Needle Exchanges who can provide more specialist harm reduction advice (such as safer injecting practices, access to Hepatitis B vaccination and Overdose Awareness Training) and further equipment.

Records

- 4.56 The Provider shall use the PharmOutcomes on-line platform to record and provide accurate information.

- 4.57 If the Provider cannot enter the information onto PharmOutcomes at the time of the time of the consultation, the information shall be recorded on a photocopied Monthly Activity Sheet ([Appendix 8](#)) and entered onto PharmOutcomes as soon as possible after the consultation.
- 4.58 At end of each month all completed Registration Cards shall be posted to the local commissioner and/or Harm Reduction Coordinator as requested by each local substance misuse commissioner. Replacement stationery is also available from these contacts.
- 4.59 Pharmacies shall submit for payment in line with the relevant local authority's requirements.

Responsibilities of the Pharmacy Contractor

- 4.60 Pharmacies shall offer a user-friendly, non-judgmental, person centred and confidential service.
- 4.61 The Pharmacy shall provide support and advice to Service Users, including signposting to primary care or specialist drug and alcohol services where appropriate. (A services guide can be found in [Appendix 1](#))
- 4.62 By complying with the terms of this specification and contract, the pharmacy will be complying with the Commissioner's strategies on:
- 4.62.1 Drugs and Alcohol
 - 4.62.2 Reduction of Drug Related Deaths
 - 4.62.3 Workforce Training
- 4.63 Co-operation from Pharmacies participating in the Needle Exchange Scheme may on occasions be required by the local authorities to take part in surveys, research or initiatives relevant to improving the accessibility, quality and effectiveness of needle exchange Services, and to distribute questionnaires to people who inject drugs.
- 4.64 The Pharmacy shall have internet access in place at all times and shall use PharmOutcomes to fully record all consultations and activity and make claims for payment for provision of this service.

Responsibilities of the Commissioner

The Commissioner shall:

- 4.65 Consult on the needs of drug and alcohol users
- 4.66 Ensure service provision meets identified needs

- 4.67 Oversee, direct and consult on Service development
- 4.68 Be available to give advice where needed to the Service Provider on the delivery of the service

5 QUALITY STANDARDS

The Provider shall;

- 5.1 Review its Standard Operating Procedures and the local referral pathways for the Service on an annual basis.
- 5.2 Demonstrate that all Pharmacists and Employees involved in the provision of the service have successful completion of CPD relevant to the provision of this service.
- 5.3 Participate in organised audit of service provision.
- 5.4 Co-operate with any locally agreed assessment of Service User experience.
- 5.5 Demonstrate that clear and accurate records are kept.
- 5.6 Comply with the Pan-Dorset's Multi agency Safeguarding Adults Policy and the Pan Dorset Local Safeguarding Children's Board Inter-Agency Procedures for Children and Young People.
- 5.7 Ensure that thorough recruitment and selection processes are in place for all Employees which include full tracking of previous employment history, checking of qualifications and two written references.

6 CONTRACT MONITORING

Community Pharmacy Contractual Framework

- 6.1 The Provider must remain compliant with all the essential services under the Community Pharmacy Contractual Framework as part of this agreement.
- 6.2 No part of this specification by commission, omission or implication defines or redefines essential or advanced services.

Monitoring and Review

- 6.3 The Provider shall ensure that the necessary documentation, as detailed in this Service specification, is maintained and made available to the Purchaser to enable the Service to be monitored and for the purpose of post payment verification.

- 6.4 The Commissioner and/or Harm Reduction Coordinator may undertake a visit to the Pharmacy to inspect the provision of the service and to ensure that the Provider is meeting the Service Specification.

Use of PharmOutcomes

- 6.5 The Provider shall ensure that all consultations are logged on PharmOutcomes to enable the Commissioner to monitor activity and verify payments for Services provided.

7 SERVICE SPECIFICATION REVIEW

- 7.1 It is recognised within this specification that the Service may be subject to change due to a range of national and local policy initiatives. For example, government guidance and legislation, industry professional standards, NICE Guidance, Public Health England or local authority policies.
- 7.2 The Service Specification shall be reviewed annually and updated to reflect the changes in legislation. Adequate notice will be given to the Provider of any significant changes which may impact on the service provided and will ensure sufficient transition arrangements are secured to ensure service continuity.

Appendix B – Quality Outcome Indicators

Provision of Needle Exchange Services

In accordance with clause B3 (Service and Quality Outcome Indicators) of the Contract, the Provider must comply with the Quality Indicators below:

Quality Indicators - General		
Performance Area	Performance Criteria	Target [if applicable]
Fit for Purpose	Providing service level in accordance with the Contract	100%
Continual Improvement / Innovation	Identify and/or work with Council in identifying opportunities to introduce / implement innovation to the Contract delivery	100%
Change Management	Respond effectively / pro-active approach to change management	100%

Cost Indicators - General		
Performance Area	Performance Criteria	Target [if applicable]
Pricing Stability	Pricing in accordance with the Contract	100%
Invoice Accuracy	Invoices provide accurate cost information	100%
Cost Reduction Initiatives	Identify and/or work with Council in identifying initiatives which could result in cost reductions being achieved	100%

Social Value Indicators - General		
Performance Area	Performance Criteria	Target [if applicable]
Economic, Social and Environment	Identify opportunities and/or work with Council to support social value in terms of the local economy, local communities and environment.	100%

Service Indicators - General		
Performance Area	Performance Criteria	Target [if applicable]
Responsiveness	Consistently good response to Council enquiries and requests.	100%
Complaints	Complaints or disputes are minimal. Where they occur they are dealt with effectively without the need for escalate and corrective action is taken if required.	100%
Management Information	The required management information is provided in the agreed format and within the agreed timeline.	100%
Communication	Maintains effective communication channels with the Council.	100%

The Parties must review and discuss performance of the Contract including Quality Outcome Indicators and consider any other matters reasonably required by either Party at Review Meetings which shall be held in the form and intervals determined by the Council; in accordance with clause B19 (Review Meetings)

Appendix C – Service User, Carer and Staff Surveys

Provision of Needle Exchange Services

In accordance with clauses B4 (Service User Involvement) and B7 (Staff) of the Contract the Provider shall:

Carry out Service User Surveys and Staff Surveys, as and when requested by the Council.

Appendix D – Charges

Provision of Needle Exchange Services

In accordance with clause B8 (Charges and Payment) of the Contract, the Provider shall information in respect of payment (see Appendix F) is provided to the Council.

Frequency of Invoices / Claims

The Provider shall provide information in respect of payment to the Council as a minimum at the end of each of the following questers; [OR either at the end of each calendar month or at the end of each of the following quarters, as agreed with the Council].

1st April – 30th June

1st July – 30th September

1st October – 31st December

1st January – 31st March

The Council will make payment of the Charges based on the information provided as set out below on a quarterly basis:

Activity and Charges

Description of Activity	Charge
Needle exchange quarterly fee 1 to 5 customers	£ 30.00
Needle exchange quarterly fee 6 to 12 customers	£ 62.61
Needle exchange quarterly fee 13 to 50 customers	£ 125.22
Needle exchange quarterly fee 51 customers +	£ 187.82

A fee of £1.04 will be paid to the Provider for each pack distributed.

Funding arrangements and tariffs are agreed annually through the Pan Dorset Prevention Group (a joint partnership comprised of Public Health, Local Authority Commissioners, Police and Local Pharmaceutical Committee representatives) and the current tariff for 2016/17 shown above

No claim shall be submitted more than one month after the end of this agreement.

Claims for activity more than 6 months (2 quarters) old will not be paid.

Appendix E – Incidents Requiring Reporting Procedure Provision of Needle Exchange Services

No additional requirements in respect of clause B11 (Incidents Requiring Reporting).

Appendix F – Information Provision

Provision of Needle Exchange Services

In accordance with clause B14 (Information) of the Contract, the Provider must provide the Council the information specified below to measure the quality, quantity or otherwise of the Services.

The Provider shall have internet access in place at all times and shall use appropriate electronic systems to record all consultations and activity and ensure that claims for payment for provision of this service can be collected through the electronic system as stipulated by the Council below.

Pharmacies

Such organisations shall access PharmOutcomes (link below); unless otherwise stipulated by the Council.

<https://www.pharmoutcomes.org/pharmoutcomes/>

General Practice and Other Providers

Such organisations shall access Outcomes4Health (link below); unless otherwise stipulated by the Council.

<https://outcomes4health.org/o4h/>

Appendix G – Service Quality Performance Report

Provision of Needle Exchange Services

In accordance with clause B18 (Service Review) of the Contract the Provider provide the following:

The Provider shall ensure that the necessary documentation, as detailed in the specification, is maintained and made available to the Council to enable the service to be monitored and for the purpose of post payment verification.