
Public Health Agreement

Community Pharmacy Specification - Needle Exchange Scheme

1 Introduction

1.1 Drug Misuse and its complications pervade every part of society and social classes and are a problem found across the whole country

1.2 (158,976 and not engaged with treatment services. *Source: National Drug Treatment Monitoring System and Estimates of OCU Use in England*)

1.3 Surrey County Council commission enhanced services for people who inject drugs, through the provision of needle exchange programmes in community pharmacies and specialist fixed sites within the Integrated Drug Service

2 Background

2.1 Needle and Syringe Programmes (NSPs) supply needles and syringes, and often other equipment, used to prepare and take illicit drugs. NSPs reduce the transmission of Blood-Borne Viruses (BBVs) and other infections caused by sharing injecting equipment. Many NSPs also aim to reduce the harm caused by injecting drugs through providing information and advice and acting as a gateway to other services, including drug treatment such as Opiate Substitution Therapy (OST). NSPs may be the only contact that some people (for example, those who inject Performance and Image-Enhancing Drugs (PIEDS)) have with health services. NSPs in England are based across a range of services including specialist services, pharmacies, outreach/mobile services, police custody suites, walk-in centres and accident and emergency departments. However, over 70% of NSPs are provided by pharmacies

2.2 The above estimated figures relate to people who inject heroin, other opiate drugs or crack



5.9 To reduce the number of drug-related

directly from the equipment provider. If there is a delay in delivery, local needle exchange pharmacies engaged in the scheme will help out if possible. If both of these fail, Surrey County Council must be informed immediately

- 6.11 A collection service for each participating pharmacy will be arranged with the subcontracted waste collection service as required
- 6.12 Surrey County Council will obtain and produce health promotion material relevant to the service users and make this available to pharmacy. It is the responsibility of the pharmacy to



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information with other health care professionals and agencies in line
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- 10.3 By providing this public health service you agree to sharing of anonymised activity data with Surrey LPC for the purposes of service development.

11 Critical Incidents

In the event of a critical incident such as violent, aggressive or threatening behaviour towards pharmacy staff and the public, or theft, the pharmacist and their staff are not to put themselves in any risk of injury. It is not expected that pharmacy staff will accept threatening, violent or other abusive behaviour from needle exchange service users

In the event of such an incident the service user should be asked to leave the premises with a verbal warning. The Pharmacist has the right to refuse a service user access to the service on behavioural grounds

If the service user returns subsequently and there are no changes in behaviour the Pharmacist has the right to withhold services

If a service user does not leave voluntarily when requested, the pharmacist should call the police to escort the service user from the premises

All critical incidents must be reported to the scheme manager at the time of the event

12 Safeguarding

- 12.1 The Provider shall adopt Safeguarding Policies in compliance

Safeguarding children / child protection policy⁵

Safeguarding adults multi-agency procedures, information and guidance⁶

Young Persons Needle Exchange Policy⁷

13 Payment Arrangements

- 13.1 Payment will be made to the Provider for the provision of the needle exchange scheme on a monthly basis in arrears using the activity information entered onto PharmOutcomes

⁴ <http://www.rpharms.com/support/mep.asp>

⁵ <http://surreyscb.procedures.org.uk/>

⁶ <https://www.surreycc.gov.uk/social-care-and-health/care-and-support-for-adults/raising-concerns-and->

