

**NHS GRAMPIAN
SERVICE LEVEL AGREEMENT**

Take Home Naloxone – Training and Supply

SLA Reference	SLA "Take Home" Naloxone - Training and Supply
Version	6
Review date	March 2028
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Approved By	David Pfleger Director of Pharmacy

Revision Chronology		
Version Number	Effective Date	Reason for Change
1	April 2020	New SLA
2	April 2021	Annual Update
3	April 2023	Annual Update
4	April 2024	Annual Update
5	April 2025	Annual Update
6	April 2026	Annual Update

Summary of Changes from Previous Version	General minor changes to wording and grammatical alterations.
Supersedes	Version 5 – April 2025
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1. Introduction

This Service Level Agreement (SLA) acts as a contract between NHS Grampian and the pharmacy contractor and commits the contractor to provide the services as defined by the current supporting documentation which must be read in conjunction with this SLA.

Take home Naloxone supply is mandatory for those pharmacies signed up to deliver Level 1 Substance Misuse Service from Community Pharmacy.

Staff should have completed the approved naloxone training (section 5) prior to signing up to this SLA. Services will be provided within the legal and ethical framework of pharmacy as a whole.

A three months' notice period must be provided if either party wishes to terminate this contract. Where a breach in terms of the SLA has occurred the 3 month notice period may not apply.

Please note the CPS "holding a supply in the pharmacy and emergency supply" of Naloxone is covered by community pharmacy Public Health Service as part of National service for all pharmacies.

Please note the CPS "Naloxone emergency supply" is a separate service and is a mandatory service for all pharmacies in Scotland. This is covered by community pharmacy Public Health Service and further information on this service can be found at [Naloxone Emergency Supply Service Update | Community Pharmacy Scotland](#)

This SLA agreement is for the period 1st April 2026 – 31st March 2028, however, remains valid and must be adhered to as per the agreement whilst under review.

2. Background to service

In 2025 [1133 people in Scotland lost their lives as a result of a drug related death](#), 105 of these deaths were in Grampian. This has more than doubled since 2014. 881 of those who died had opioids in their system which means that, if naloxone had been available, 881 of these lives could have been saved.

- Naloxone is a medication which can temporarily reverse the effects of opioid drugs. Accidental overdose is a common cause of death among people who use heroin, morphine and similar drugs. These drugs are also referred to as opioids.

[The Scottish Naloxone Take Home Programme](#) aims to prevent fatal overdoses by training the following groups on how to identify and respond to overdose, and administer naloxone:

- people at risk of opioid overdose
- people in contact with those at risk (e.g. family members)

- services in contact with those at risk of opioid overdose

The overall aim of [Scotland's National Naloxone Programme](#) is to prevent fatal opioid overdoses. Administration of naloxone provides time for emergency services to arrive and for further treatment to be given. Following suitable training, take home naloxone kits are issued to people at risk of opioid overdose, their friends and family and service workers in order to help prevent overdose deaths.

Opioid overdose may be a risk for people prescribed opioid medications for any indication including pain or opioid dependence and/or addiction. Professionals should make naloxone available to those at risk of accidental overdose regardless of the indication of the opioid prescribed

Naloxone supply for people that use substances is part of NHS Grampian and Alcohol and Drug Partnerships' goals to reduce harm and promote recovery. Community Pharmacies participation in Naloxone Supply to reduce fatal opioid overdose is a key part of this.

In 2025, a significant number of overdoses and deaths have been linked to [nitazenes](#). Synthetic opioids, some of which are 100 times more potent than heroin. Overdose with nitazenes often requires substantially more naloxone doses than other opioids. Due to this emerging risk it is beneficial for patients to be encouraged to carry at least 2 naloxone kits. Nitazenes have been found in drugs where the purchase intention was not opioids (for example the person may have expected to be taking benzodiazepines) and because of this, naloxone can be supplied to anyone taking any illicit drugs.

3. Service aims

The aims of the service are:

- To provide overdose awareness and naloxone training and supply to people at risk of, or who are likely to witness and opioid overdose
- To respond to public health alerts that highlight an increased risk of overdose and promote naloxone accordingly ([See RADAR alerts](#))
- To make naloxone as widely and easily available as possible and hold stock of naloxone.
- For this reason all community pharmacies who deliver level 1 SMS must sign up to this SLA. It is strongly recommended that all community pharmacies, including those who do not deliver level 1 SMS, sign up to this SLA.
- To supply naloxone in line with the NHS Grampian ["Guidance for Services in Grampian to Supply Naloxone to People at Risk"](#)

- [Prenoxad® intramuscular](#) injection or [naloxone nasal spray](#) (naloxone 1.26mg or Nyxoid® nasal spray) may be supplied.

4. Service outline and standard

Pharmacy contractors must ensure that pharmacy staff are able to deliver this service throughout opening hours and will:

- Offer the service to all eligible people attending the pharmacy and anyone likely to suffer from, or witness an opioid overdose. This includes patients who are not prescribed ORT.
- Where supply is requested, make this **supply at the time of request** wherever possible.

4.1 Check the status of any existing supplies e.g. is the naloxone still in date, opened, needles used etc. and resupply where necessary.

4.2 Use the “Take Home Naloxone Key Points Sheet” (appendix 2) or the manufacturers product risk materials e.g.

- [Nyxoid 1.8 mg nasal spray, solution in a single-dose container - Risk Management Materials - \(emc\) \(medicines.org.uk\)](#).
- [Prenoxad 1mg/ml Solution for Injection in a pre-filled syringe - Risk Management Materials - \(emc\) | 3054](#)
- [Nyxoid 1.8 mg nasal spray, solution in a single-dose container - Risk Management Materials - \(emc\) | 9292](#)

to ensure those who are supplied with naloxone have a basic understanding of:

- the risks, signs and symptoms of drug overdose
- how naloxone works and how to use each of the naloxone products (Videos can be accessed here www.prenoxadinjection.com/video/admin.mp4, www.nyxoid.com/uk and <https://naloxone.uk/>)
- basic life support and the recovery position
- the importance of calling an ambulance

4.3 Provide advice and support to anyone who returns having used the training and/or naloxone supply.

4.4 Make a new or replacement supply of naloxone as appropriate. **You should add a pharmacy address label to the product and annotate the date this item was issued.**

4.5 Display a suitable poster to advertise the fact you can supply naloxone and maintain a supply of Prenoxad®, Naloxone 1.26mg nasal and Nyxoid® information leaflets. Available with the links above and from : www.nhsghpcat.org; Email: gram.resources@nhs.scot; Telephone: 01224 558504

4.6 Stock and display copies of:

- [Public health Scotland “how to save a life “ leaflet](#)
- [What to expect after a near fatal overdose](#)
- [How to support someone after a near fatal overdose](#)

4.7 Take home Naloxone supplies must be directly entered into the approved data collection system (currently NEO360) or by completing the Grampian "Record of Naloxone Training. Supply and Resupply" (appendix 1) and subsequently entered into NEO 360. For more information on NEO360 please see the [CP Grampian website](#).

5. Training requirement

5.1 Any member of the pharmacy team can be trained to deliver this service it does not have to be a pharmacist. The service works better where it is not solely reliant on the pharmacist and where multiple members of the pharmacy team are trained.

5.2 It is the contractor's responsibility to ensure all staff delivering the service have completed appropriate training, are competent and have the required personal and technical skills to provide this service at all times the pharmacy is open.

5.3 The Following TURAS courses are available:

Use the search function on TURAS for below courses:

Pharmacy Naloxone Service - Lesson 1 - Drug Related Deaths in Scotland | Turas | Learn (nhs.scot) (all three sections to be completed)

Pharmacy Naloxone Service- Lesson 2- Identifying an overdose

Pharmacy Naloxone Service-Lesson 3- Naloxone and its administration

Training should be kept up to date as per updated TURAS guidelines.

5.4 Read and Understand - [Guidance for Drug Treatment Services in Grampian Undertaking Supply of Naloxone to People at Risk of Opioid Overdose, Significant Others And Services In Contact With Those At Risk \(nhsgrampian.org\)](#)

5.5 A suitable area in the pharmacy should be identified to ensure privacy and confidentiality is maintained whilst delivering the service.

5.6 gram.pharmaceuticalcareservices@nhs.scot should be contacted to set new naloxone pharmacies up on the electronic database (neo360®) or to add/update staff names on NEO360.

6. Monitoring & evaluation

6.1 It is a requirement of the service that appropriate records are kept and maintained by the pharmacy contractor, to enable verification of service provision and training undertaken by staff members.

6.2 The Record of Training and Supply should be stored securely and confidentially (where information is not entered directly into neo360® at point of transaction). Data entered into NEO 360 will be used for payment verification purposes.

6.3 Data is monitored both locally by NHS Grampian and the Alcohol and Drug Partnerships and nationally by Information Services Division through analysis of neo360® data. ([See CP Grampian website](#) for additional neo360 guidance)

- Details of training/supply will be recorded and held confidentially on the NHS Grampian electronic database (neo 360).
- Data will be shared anonymously with the NHS for purpose of reporting and research.

When consent is gained the “Data Sharing Consent” tick-box at the bottom of the patient details tab on neo must be ticked as follows.

DATA SHARING CONSENT

☒ Please indicate whether consent to share their personal data, with named services, has been given.

6.4 Pharmacies may be required to participate in service evaluation and audit.

7. Claims and payment

- 7.1 Supplies made to individuals that you supply with opioid substitution therapy through the Level 1 SMS provision SLA in community pharmacy are reimbursed for this service through their monthly patient fee for SMS patients.
- 7.2 Payment for supplies made to individuals you do not supply with opioid substitution therapy in the community pharmacy can be claimed using the PCCT claim workbook by 7th of the following month for payment. Payment is awarded at £15,60 per training and supply of naloxone made.
- 7.3 For all, Wholesaler invoices should be submitted for the reimbursement of Naloxone stock costs, this includes out of date stock for such supplies.
- 7.4 Payments will be subject to periodic verification by PCCT and PCS team.

8. References

“Guidance for Services In Grampian to Supply Naloxone to People at Risk of Opioid Overdose, Significant Others and Services in Contact with those at Risk” Available from: https://www.nhsgrampian.org/globalassets/services/medicines-management/policies/guide_naloxones.pdf

[National naloxone programme Scotland - monitoring report 2021/22 and 2022/23 - National naloxone programme Scotland: annual - Publications - Public Health Scotland](#)

[National Naloxone Programme - Search the datasets - National Datasets - National Data Catalogue - Health intelligence and data management - Resources and tools - Public Health Scotland](#)

Opioids: risk of dependence and addiction - GOV.UK ([Opioids: risk of dependence and addiction - GOV.UK](#))

[How to save a life: emergency response to an overdose - Publications - Public Health Scotland](#)

[How to save a life. Emergency response to a drug overdose, and harm reduction advice](#)

Appendix 1

Naloxone Take Home Program Grampian - Record of Training and Supply

TRAINING (ONE TO ONE CHECKLIST COVERED WITH PERSON)

Name of Service:

Staff Member

Name:.....

☐ Person at risk ☐ Family Member/Friend ☐ Service Worker

☐ M ☐ F Trainee Name:

.....

CHI/Date of Birth: Unit Number (SMS
only).....

Address:

.....

..... Postcode:

Prison Release date (prison only):

Training checklist completed ☐ Training Declined ☐

Reason.....

Naloxone supply

Kit 1: Prenoxad ☐ Nyxoid ☐ Naloxone Nasal Spray 1.26mg ☐

Batch no.: Expiry Date:

Spare: Prenoxad ☐ Nyxoid ☐ Naloxone Nasal Spray 1.26mg ☐

Batch no.: Expiry Date:

1st supply ☐ Spare supply ☐ Used on self
(Complete reverse) ☐ Used on other
(Complete reverse)

☐ Expired ☐ Confiscated ☐ Damaged ☐ Lost ☐ Not known

Or declined supply of naloxone ☐ State Reason

I consent to: -Details of this training/supply being recorded on the electronic database

-Anonymous sharing of data with the NHS for purpose of reporting and research

Signed (trainee):

Signed (staff): Date:

NALOXONE RESUPPLY – Where the naloxone kit has been used on somebody

When did the overdose occur? (Approximate date):.....

Who administered the naloxone?

☐ Self ☐ Paramedic ☐ Another person ☐ Unknown

Where did the overdose occur?

☐ My own home ☐ Somebody else's home ☐ Another indoor location

☐ Outdoors ☐ Other

(state).....

What was the outcome?

- ☐ Opioid reversed, person went to hospital
☐ Opioid reversed, person did **not** go to hospital
☐ Person did not survive
☐ Kit not used
☐ Not known

Additional Information:

Appendix 2

NALOXONE KEY INFORMATION - Be Prepared For An Opioid Emergency

WHO IS AT RISK OF OPIOID OVERDOSE?

- People who use prescription opioids, in particular those taking higher doses (equivalent to 50 milligrams of morphine or more per day)
- People who use any type of opioid in combination with other sedating substances such as benzodiazepines or alcohol
- People who use any type of opioid and have medical conditions such as HIV, liver, lung disease or who suffer from depression
- People with opioid dependence, in particular following reduced tolerance (following detoxification, release from prison, breaks in or stopping treatment)
- People who inject opioids
- Anyone in contact with people who use opioids (including prescription opioids)

KNOWS THE SIGNS OF OPIOID OVERDOSE

- **UNCONSCIOUS OR NOT RESPONDING:** Not waking up or responding to voice commands or touch. Shake shoulders. Speak clearly in both ears
- **APPEARANCE:** Blue/grey skin and lips. Clammy. Very small/pinpoint pupils
- **BREATH:** Very slow or irregular breathing or no breathing at all. May also be a rasping or snoring sound

KNOWS HOW TO RESPOND

- Call 999 and ask for an **AMBULANCE** - give location
- Let them know that the person is:
 - **"UNCONSCIOUS BUT BREATHING"** - Put them into recovery position
 - **"UNCONSCIOUS AND NOT BREATHING"** - Start CPR
- Administer naloxone
- Stay with the person
- Bust myths - DO NOT walk person around, put in shower/bath, slapping etc

KNOWS HOW NALOXONE WORKS

- Reverses the effects of opioid drugs but starts to wear off after 20 to 30 minutes
- Only works on opioid drugs (safe to use even if unsure what has been taken)
- Give a dose every 2-3 minutes until either: -
 - Person comes round **OR** Emergency services arrive and take over **OR** there is no naloxone left

CHOOSE PRODUCT TO SUPPLY. USE PRODUCT LEAFLET TO GO OVER ITS USE

HOW TO USE PRENOXAD[®] INJECTION

- Keep sealed until ready to use
- Twist cap off syringe and twist on needle
- Inject into outer thigh or upper arm muscle
- Give one dose at a time. Repeat every 2 to 3 minutes if no response
- Place in yellow box between injections and after used (sharps bin)

HOW TO USE NALOXONE NASAL SPRAY

- **DO NOT TEST THE SPRAY FIRST – THERE IS ONLY ONE SPRAY IN EACH NASAL SPRAY (2 sprays per pack)**
- Tilt head back
- Put the nasal spray into the nostril and press the plunger
- If no response after 2 to 3 minutes give another dose in the other nostril
- Note: There are 2 brands of nasal spray "naloxone nasal spray 1.26mg" and "Nyxoid nasal spray" Nyxoid is slightly stronger

IF YOU HAVE TO USE A KIT OR IT IS OUT OF DATE – REMEMBER TO GET ANOTHER ONE