NHS Highland Community Pharmacy

Injecting Equipment Provision
Service Specification
General

Service Level Agreement
March 2026

SOP NUMBER / NAME: Needle Exchange	*CONTROLLED DOCUMENT*		*Page*
Prepared by: Community Pharmacy Services Team, Harm Reduction Team in North Highland and Argyle & Bute.		*Version: 9*	*Date of last review: December 2025*
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Contents Page:

1. Introduction – Page 3
2. Background to the Service – Page 3
3. Service Aims – Page 3
4. Roles and Responsibilities – Page 4
5. Maintaining Confidentiality and Compliance with GDPR Regulations – Page 7
6. Service Outline and Standards – Page 7
7. Assessment, Information and Data Collection – Page 9
8. Training – Page 10
9. Environment – Page 11
10. Provision of Equipment – Page 11
11. Payment Arrangements – Page 11
12. Health & Safety – Page 12
13. Monitoring & Evaluation – Page 13
14. Termination – Page 13
15. Background Information (Not Part of Service Specification) – Page 13
16. Version Control – Page 14
17. Abbreviations – Page 14
18. Appendix 1: Service Level Agreement Signing Sheet – Page 15
19. Appendix 2: Current IEP Providers – Page 16
20. Appendix 3: NEO 360 Backup Transaction Form – Page 17
21. Appendix 4: Window Sign – Page 19

Throughout this document there will be reference to the following:

The **Community Pharmacy Contractor:** the party agreeing to provide the service.

The **Community Pharmacy Services Team:** the party who set up the service and own it.

The **Nominated Pharmacist:** the party responsible for the service daily in the Community Pharmacy

The NHS Highland **Alcohol and Drug Advice Support Service (HADASS):** the party who supports with the delivery of the service and support the Pharmacy Contractor and the Community Pharmacy Services Team.

1. Introduction

1.1 This Service Level Agreement (SLA) acts as a contract between NHS Highland and the Pharmacy Contractor and commits the Pharmacy Contractor to provide the services as defined. The SLA must be read in conjunction with the Appendices provided. Services will be provided within the legal and ethical framework of pharmacy as a whole and in line with the Scottish Government's national guidance framework for supporting consistent delivery of high-quality injecting equipment services across Scotland.

2. Background to the service

2.1 Individuals who inject drugs are at increased risk of blood borne virus (BBV) infection, bacterial infection, thrombosis, wounds and other associated harms. In order to reduce the risks of harm, individuals are encouraged to access clean and sterile injecting equipment, for each injecting episode and to avoid sharing both injecting equipment and associated paraphernalia. In addition to clean equipment, individuals can access safer injecting and harm reduction advice and foil provision. To reduce the risk of injecting related litter and to support safe disposal of used equipment, IEP sites provide sharps bins and provide safe disposal of these bins.

2.2 Injecting equipment providers (IEPs) are therefore critical in reducing both injecting and other related harms. Community pharmacies are well placed to support people who inject drugs due to:

- location at the heart of local communities
- the wide range of general health services available
- ability to provide "drop in" access to a health care professional
- existing relationships with people accessing the pharmacy for other services

3. Service aims

The aims of the Injecting Equipment Provision (IEP) service are:

- 3.1 To prevent and reduce harms associated with injecting drug use, including acquiring the hepatitis C virus and other BBV transmission, skin and soft tissue infections (SSTIs) and other related complications to individuals who inject a wide range of street drugs, including anabolic steroids.

- 3.2 To provide non-judgemental access to injecting equipment and paraphernalia for people who inject drugs.

- 3.3 Provide safer injecting and harm reduction advice to individuals accessing the service.

- 3.4 Onward signposting and referral as required to health and social care services for the benefit of the health and well-being of the service user e.g. for BBV and specialist services, GP and A&E etc.

- 3.5 Encourage access to and provide wider pharmacy services such as NHS Pharmacy First Scotland, emergency hormonal contraception etc.

4. Roles and responsibilities

4.1 The **Community Pharmacy Contractor** will:

- Take full responsibility for ensuring compliance with all aspects of the Service Outline and Standards for each element of the service they opt to participate in **(Section 6)**.

- Act as Data Controller when delivering services.

- New Intellectual Property is not expected to be generated but any IP that is created needs to be owned by the Pharmacy Contractor to allow creation of business specific SOPs or communications.

- Nominate a **pharmacist** (usually the Responsible Pharmacist) and **technician/dispenser** who will have accountability for provision of each individual element of the service on a day-to-day basis from that pharmacy. Ensure all members of the pharmacy team are fully trained on the specifics of the Needle Exchange Service. For pharmacies open over extended hours and particularly on a Sunday, the Pharmacy Contractor must also ensure that the Locum/Relief manager and technician/dispenser on duty at these times has a full understanding of the SLA and Service Outline & Standards **(Section 6)** to be competent to maintain continuity of service.

- Ensure the Standard Operating Procedures (SOPs) in place governing each element of the service fully covers the main principles of the provision specific to the service standards operating within the pharmacy and that all involved in providing the service are fully conversant with the content of each SOP. The pharmacy contractor is allowed to follow their own SOPs in relation to this service.

- Ensure that appropriate staffing arrangements are in place for the operation of this service.
  The Health and Care (Staffing) (Scotland) Act 2019 ("the Act") places requirements on the Health Board stating that:

  "In planning and securing the provision of health care from another person under a contract agreement must have regard to:
  a) The guiding principles for health and care staffing, and
  b) The need for the person from whom the provision of health care is to be secured to have appropriate staffing arrangements in place"

- Ensure that the pharmacist and all pharmacy staff offer a user-friendly, non-judgmental, person-centred, confidential and trauma informed service.

- Ensure that the services are operated from premises providing a level of confidentiality and privacy which is acceptable to the individual patient.

- Ensure that the service is available to patients for the full contracted opening hours of the premises unless there are exceptional circumstances. The service should be available from Monday to Saturday providing full cover. It should be clearly advertised that the pharmacy operates a "needle exchange" service. The "needle exchange" window sticker should be displayed.



- Ensure you have adequate stock to provide the service. The HADASS Team in North Highland or the A & B DARS HR team should be contacted without delay if there are any issues obtaining supplies (refer to section 7.3.2). A quarterly expiry date check must be carried out as a minimum requirement on relevant items.

- Keep and maintain appropriate records, including patient care records to enable verification of service provision and training requirements, and provide to Community Pharmacy Service Team for internal and external audit, evaluation, monitoring service development and payment verification purposes. NEO 360 should be updated after each needle exchange transaction ensuring the reporting tool has a live update. This will be monitored for internal and external audits. Appendix 3 can be used to report the transaction as a back up if the NEO 360 system is down. This information should be updated on NEO 360 as soon as possible.

- Ensure staff are able to provide information, advice and signposting when required on a range of harm reduction issues including how to access local treatment services.

- Ensure that staff are provided with any updates or changes to the service.

- Ensure that all GPhC Standards are upheld during the provision of this service – in particular ensuring that children and vulnerable adults are safeguarded.

- An electronic copy of the SLA will be forwarded to the Participating Pharmacy Contractor each time the service is reviewed and agreed with Community Pharmacy Highland. The Participating Pharmacy Contractor (or nominated representative) will electronically sign a copy of the SLA as a record of acceptance of the terms and conditions of the SLA for the provision of this additional service. The signed copy requires to be returned to nhsh.cpsoffice@nhs.scot, by the date specified to ensure that all relevant payments can be made.

4.2 The Nominated Pharmacist will:

- Ensure the safe and effective provision of pharmacy services in line with GPhC (Standard 9).

- Maintain their competency to practice in this speciality by successfully completing all specified training requirements especially the mandatory element of this SLA (Section 8).

- Ensure that all pharmacy staff providing the service maintain their competency to practice in this speciality and relevant staff successfully complete all specified training requirements, especially the mandatory element of this SLA (Section 8).

- Ensure that all pharmacy staff deployed when the pharmacy is open are fully conversant with the principles of providing the service when a referral is received (Section 6).

- Ensure that the support and reference materials provided for information, remain current, (Section 8) are retained in the pharmacy and are readily available to all pharmacy staff, particularly locum pharmacists and dispensing staff.

- Provide information and advice (and signposting as appropriate) on:
    - Blood borne virus prevention, testing and treatment
    - Overdose prevention and Naloxone provision
    - Wound care
    - Sexual health advice and condom provision (where appropriate)
    - Drug & Alcohol Recovery Services
    - Local recovery groups

- Provide referral and/or signposting to other health services and agencies e.g. GP, A&E.

- Consider and, where appropriate, to act on any child protection concerns coming to their attention because of providing the service. Further information can be found on this link.

- Develop and maintain CPD cycles related to substance use, treatment and harm reduction.

4.3 The NHS Highland Alcohol and Drug Advice Support Service (HADASS) and Argyle & Bute Drug and Alcohol Recovery Service Harm Reduction Nurse will:

- Provide IEP training on an annual basis to pharmacy contractors.

- Review and update the contents of the support material on a regular basis to remain relevant to practice.

- Provide specialist harm reduction advice and peer support where appropriate.

- Support participating contractors with accessing and maintaining injecting equipment via the Orion website.

- Monitor data reporting and client feedback on the service.

Contact details for HADASS are as follows:

Drug & Alcohol Recovery Service (Highland Alcohol & Drug Advice and Support Service)
Tel: 01463 717594 based at 57 Church Street, Inverness, IV1 1DR. nhsh.hadass.churchst@nhs.scot

Contact details for A&B DARS HR Nurse are as follows:

Argyll & Bute Drug & Alcohol Recovery Service Harm Reduction Nurse, Market Street Centre, Market Street, OBAN, Argyll PA34 4HR Tel: 01631 571294

- A&B DARS HR Nurse will also supply pharmacies with equipment if they do not require the large amounts which are ordered via Orion.

4.4 The NHS Highland Community Pharmacy Service Team will:

- Facilitate access to training for pharmacy staff.
- Provide advice and practical support to Participating Pharmacy Contractors during normal working hours (09:00-17:00 Mon-Fri excluding public holidays).
- Liaise with the Specialist Pharmacist for Substance Use and HADASS for any necessary changes to the service in line with national guidance.
- Advise Pharmacy Contractors of any relevant updates / changes to service delivery.
- 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.
- Provide local guidelines to Participating Pharmacy Contractors on the management of needle stick injuries.
- Audit the Needle Exchange Service annually as a whole and individually where needed to ensure correct delivery of the service. Annual payment will be based off NEO recording of the previous year.
- Review NEO 360 claims against monthly claims sent in by contractors to ensure consistency between the different sections of the service. Payment for service will depend on the NEO 360 recording, not the monthly claim sheet. Both must be filled in for monthly payment to be received by contractor.
- Work with employers to facilitate vaccination for Hepatitis B, free of charge, for all staff who are responsible for delivering an IEP service.

5. Maintaining Confidentiality and Compliance with GDPR Regulations

5.1 All parties will maintain patient confidentiality and comply will all relevant GDPR regulations.

The General Data Protection Regulation (GDPR) (EU) 2016/679 [13] and Data Protection Act 2018 [14] came into force on 25 May 2018. All organisations that process personal data are required to comply with the requirements of this legislation.

This means that personal information will be:
- Processed lawfully, fairly, and in a transparent manner.
- Collected for specified, explicit and legitimate purposes.
- Only collected so far as required for our lawful purposes.
- As accurate and up to date as possible.
- Retained for a reasonable period, in accordance with retention policies.
- Processed in a manner which ensures an appropriate level of security.

6. Service outline and standards

6.1 IEP services will be carried out in accordance with the Injecting Equipment Provision in Scotland - Good Practice Guidance 2021

6.2 IEP related incidents or issues should be reported to the Community Pharmacy Services Team. The report should be made as soon as reasonably practicable after the incident is identified.

6.3 All needles, syringes, sharps bins and other paraphernalia supplied under the pharmacy IEP scheme must be accessed from the approved supplier and product list as specified by NHS Highland. This should include water for injection and foil in addition to injecting equipment, paraphernalia and sharps bins. Equipment will be provided free of charge to both service provider and client. Sufficient IEP stock should be maintained at all times, to prevent disruption of service availability under normal operating conditions.

6.4 Clients should be provided with the volume and type of equipment appropriate to the frequency of injection and type of substance(s) used. There is no upper limit on the amount of equipment that may be supplied. Individuals should be encouraged to return used injecting paraphernalia in a suitable sharp's container. A sharps container should be offered at each transaction.

6.5 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.

6.6 The premises must be able to provide a level of confidentiality and privacy that is appropriate to the nature of the service, and which is acceptable to the individual using the service.

6.7 Ensure there are robust processes within the pharmacy to ensure the safe return of used injecting equipment. Clients should be directed to place their returned needles, syringes and equipment directly in the disposal bin themselves.

6.8 All premises must have appropriately sized sharps containers available to accept returned injecting equipment and paraphernalia. Returned equipment must be stored in a secure, discrete area to ensure quick and efficient disposal and to prevent accidental access by staff or the public.

6.9 NHS Highland 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.

6.10 Full sharps containers must be sealed and labelled appropriately before being stored in a suitably secure and safe designated area until uplifted by the appropriate agency.

6.11 A SOP must be in place to instruct staff on the necessary actions to be taken in the event of blood or bodily fluid spillage/exposure or needle stick injury.

6.12 NHS Highlands will provide local guidelines on the management of needle stick injuries.

6.13 All staff working in the service should be aware that an IEP service is delivered from the premises. Those directly involved in delivery of IEP should be given the opportunity to access Hepatitis B vaccination. This is provided free of charge to pharmacy staff (Section 13).

7. Assessment, Information and Data Collection

7.1 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 at appropriate intervals:

- What drugs are being injected and where?
- How often they are injecting?
- Whom are they collecting supplies for?
- Enquire if patient has a supply of Naloxone and supply if required and safe storage.
- Escalate for further support to HADASS if necessary

7.2 Pharmacy staff should provide safer injecting and harm reduction advice specific to the patient's requirements. This would include the following harm reduction approaches:

- Washing their hands with soap and water before injecting
- Using a new set of injecting equipment and paraphernalia for every injection
- Using the smallest needle size appropriate to the injecting site and substance used
- Awareness of the different types of substances used and tailoring harm reduction advice accordingly (e.g. need for vitamin C with opioids but not with steroids)
- Importance of cleaning and rotating the injecting site
- How to use the different items of paraphernalia e.g. addition of vitamin C in small amounts, risks associated with non-sterile water sources etc.
- Reducing risk of overdose. Responding to overdose and administering naloxone
- The need for regular BBV testing and providing, or linking clients in, with testing services
- Advice on returning equipment and associated danger to self and wider public of not returning, publicly disposing equipment.
- Ask if patient has any questions

7.3 Data Collection. The pharmacist is responsible for ensuring that staff collects the minimum data set as agreed nationally and additional information as agreed locally:

All IEP services must collect the following minimum data set:

- the number of needles distributed
- the number of items of other injecting paraphernalia distributed
- an estimate of the number of needles returned
- the number of transactions
- an estimate of the number of clients
- the proportions of male and female transactions and clients
- post code sector of residence, i.e. the first half of the post code and the first digit of the second – IV2 7..

There are also **two essential questions** that will be added to NEO 360 in accordance with this SLA that are required on each transaction.

- Are you currently injecting cocaine?
- Are you currently smoking crack or freebase cocaine?

7.3.1 The service provider is responsible for entering all IEP transactions onto the approved IT system (currently neo360®). **Direct entry of data into neo360® at point of exchange is required to ensure maximal data accuracy**. This may be undertaken by use of PC, laptop or tablet at the point of exchange.

7.3.2 All communication between the community pharmacy and the Highland Alcohol & Drug Advice and Support Service via email should be via the generic mailbox and no other email address. nhsh.hadass.churchst@nhs.scot

8 Training

8.1 All nominated pharmacists involved in the service must complete the following training:

TURAS Learn TURAS Learn Sign In (or equivalent e.g. Royal College of General Practitioners Certificate in the Management of Drug Misuse in Primary Care, Part 1 or CPPE):

- Substance Use: Core Module
- Substance Misuse: The principal drugs used in Scotland and their associated risk

IEP Module - available via online training https://orionmedical.co.uk/nsp-booklet/

For access to the Orion Medical **NSP Handbook and Integrated Exam** the password is: **orionmsl**.

NHS Highland will ensure that relevant training is made available to pharmacy staff involved in IEP services on an annual basis and a nominated member of the pharmacy team must attend.

8.2 All Community Pharmacy Staff involved in providing the service must complete the following training:

IEP Module - available via online training https://orionmedical.co.uk/nsp-booklet/

For access to the Orion Medical **NSP Handbook and Integrated Exam** the password is: **orionmsl**.

Are aware and understanding of Injecting Equipment Provision In Scotland- Good Practice Guidance

Complete The Scottish Drug Forum e-learning modules - "Bacterial Infections and Drug use", "How are your sites" and "Overdose Prevention, Intervention and Naloxone" Please note, a FREE account will need to be created to access these modules.

9 Environment

9.1 For the IEP service to work well, a user-friendly, non-judgemental, person-centred approach should be maintained by all staff. IEP services should provide the necessary level of privacy and confidentiality to clients, for example, a private area or consultation room. However, particular consideration should be given to the safety of IEP service staff using a completely closed consultation room.

9.2 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 Highland Alcohol and Drug Partnership

10 Provision of equipment

10.1 **Ordering of Equipment:**

Ordering of injecting provision equipment is through Orion. Please contact HADASS to arrange log in access to Orion. Highland Alcohol & Drug Advice and Support Service via email should be via the generic mailbox and no other email address. nhsh.hadass.churchst@nhs.scot

A&B DARS HR Nurse will also supply pharmacies with equipment if they do not require the large amounts which are ordered via Orion.

Sharps Container – Sharps container will be provided

A sharps container will be provided and pick-ups arranged by Rentokil.

11 Payment Arrangements

11.1 The payments for the provision of the IEP service as specified will be split into an annual fee and a transaction fee.

The Provider Category will be set for each contractor at the start of the provision of the service and reviewed annually. The payments will be made on an annual basis, and the provider fee will be altered according to the previous year's recording from NEO 360.

Provider Category	Transactions per Month	Annual Provider Fee
Large	over 100 monthly transactions	£950
Medium	21 to 100 monthly transactions	£800
Small	1 to 20 monthly transactions	£450
Retained	limited, or no activity	£200

11.2 The transaction fee will be claimed by checking against NEO 360 recording for accurate claiming. Transactions to be paid monthly by a tiered payment scheme on the following basis: -

Transactions per month	Transaction Fee	Rate
1 to 30	£15	per transaction
31 to 70	£10	per transaction
71 and over	£5	per transaction

11.3 The contractor must inform the Health Board if they cease to provide the IEP Service for any reason on either a temporary or a permanent basis.

11.4 The liability of each party should be capped to the total fees paid or payable.

11.5 Indirect losses should be specifically referenced as excluded.

11.6 All fees are exclusive of any applicable VAT.

12. Health & safety

12.1 NHS Highland Board will work with employers to facilitate vaccination for Hepatitis B, free of charge, for all staff who are responsible for delivering an IEP service. This will be co-ordinated via the Occupational Health Service. If you ask any Pharmacy staff requiring Hep B to contact 01463 704499 or nhsh.ohadmin@nhs.scot we would be more than happy to arrange Hep B vaccinations. If anyone has proof of previous Hep B vaccinations this would be extremely helpful.

To enable us to arrange appointments, we would need the following information:

Name
Date of Birth
Personal Email Address
Home Address
Contact Number
Pharmacy Location

12.2 Needlestick injury

If a needlestick injury is incurred follow the following basic first aid; –

- Immediate: promote bleeding if small wound
- Gently wash with soap and water (irrigate mucous membranes with water).
- Do NOT scrub or suck area.
- Seek urgent medical review at the nearest Emergency Department

HIV Post-exposure prophylaxis (PEP/PEPSE) supporting guidelines (Guidelines) | Right Decisions (scot.nhs.uk)

13 Monitoring & evaluation

13.1 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 Highland for internal and external audit and evaluation purposes.

13.2 Information collected from the payment system will be used for the purposes of payment verification, audit and service improvement. By signing to participate in the service, Pharmacy Contractors agree to this use.

13.3 A standard operating procedure should be in place in the pharmacy and cover all aspects of service provision.

13.4 NHS Highland will ensure effective monitoring and audit of the service and will include user survey access here. Feedback will be shared to the pharmacy on a regular basis.

13.5 NHS Highland 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.

14 Termination

14.1 Should either party require to terminate this arrangement, they will only do so after three months' notice has been provided, in writing. However, the Community Pharmacy Services team reserves the right to withdraw this arrangement immediately should there be a failure to comply with the terms of the Service Level Agreement.

15. Background Information – not part of the service specification

Useful references

RPSGB Medicines, Ethics and Practice Guide (current edition)

NHS Scotland Turas Learning modules - Child Protection Learning Resource Pack

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

15. Version Control

Version Number	Date implemented	Brief Description of Change
Version 6	11/11/2025	Added in Required SLA wording, version control, checked links, added additional points regarding auditing, NEO 360.
Version 7	04/12/2025	Added Appendix 3 and essential transaction questions into main body.
Version 8	22/12/2025	Altered the termination of contract section to add the cps reserves the right to remove service with non-compliance.
Version 9	09/03/2026	Signed off by CPHi and A&B DARS HRN, made last changes to fee structure with 6% uplift.

16. Abbreviations

A&E Accident and Emergency
A&B Argyle and Bute
A&B DARS HRN Argyle and Bute Drug and Alcohol Harm Reduction Nurse
BBV Blood Borne Virus
HADASS Highland Alcohol and Drug Advice Support Service
GP General Practitioner
IP Intellectual Property
IEP Injecting Equipment Providers
SLA Service Level Agreement
SSTIs Skin and Soft Tissue Infections
SOP Standard Operating Procedures

Appendix 1: Service Level Agreement Signing Sheet

In signing this document, I declare that the below named community pharmacy agrees to provide the Injecting Equipment Provision Service in line with the NHS Highland Service Specification dated March 2026, as agreed in conjunction with the Highland Pharmacy Contractors Committee.

A copy of the Service Specification referred to above and this agreement shall be retained on the pharmacy premises at all times and be readily available for all pharmacy staff involved in the provision of this Service.

Community Pharmacy:

Name :	
Address :	
Contractor Code :	
Nominated Pharmacist	
Nominated Pharmacy Technician	

Name : ……
(Please print)

Signed : …… Date : ……

Please return this signed form to : nhsh.cpsoffice@nhs.scot

Or

Community Pharmacy Service Office, Assynt House, Beechwood Park, Inverness. IV2 3BW

Appendix 2 – Current IEP Providers

North Highland

- Boots, Dingwall
- Boots, Eastgate, Inverness
- Boots, Wick

- Well Pharmacy, High St, Fort William

- Boots, Southside Road, Inverness
- Well, Alness
- Well, 23-25 High St Tain

- Sutherlands, Thurso
- Superdrug, Inverness
- Rowlands Pharmacy, Grant Street
- Rowlands, Balloan Park, Inverness
- Kinwell Pharmacy, Nairn
- Boots, Aviemore
- Alness Pharmacy
- Boots, Portree
- Kyle Pharmacy

Argyll & Bute

- Boots, George St, Oban
- Well, Dunoon
- Bute Pharmacy, Montague St, Rothesay
- Boots, 13 Sinclair St, Helensburgh
- TruHealth Pharmacy, Lochgilphead
- Campbeltown Pharmacy, Campbeltown

Appendix 3: NEO 360 Back Up Transaction Form

(See Next Page)

https://scotland.neo360.systems/Secure/Login.aspx							
NEO Reporting Form – Injecting Equipment							
Month:				Base:			
Patient	EXAMPLE	1	2	3	4	5	6
Gender	*M*						
Client ID: Name - Paul Smith DOB - 07/09/1996	*PST07/09/1996*						
*1st initial of first name, 1st initial of surname and 4th initial of surname. If no 4th initial of surname a * can be used followed by date of birth (dd/mm/yyyy)							
Postal District	*IV1*						
Additional Information							
Substance(s) used	*Heroin*						
Route of administration	*IV*						
Frequency	*Daily*						
Paraphernalia sharing	*Occasionally*						
Needle sharing	*Never*						
Needle reuse	*Frequently*						
Collecting on behalf of	*Self & others*						
Are you currently injecting cocaine?	*Yes/ No*						
Are you currently smoking crack or freebase cocaine?	*Yes/ No*						
One Hit Kits							
Orion 1ml OHK	*10*						
Orion 2ml Blue OHK	*5*						
Orion 2ml Orange OHK	*5*						
Packs							
Orion IPED Sports Pack 1ml	*1*						
Orion IPED Sports Pack 2ml	*1*						
Single use items							
Orion 1 ml Fixed Head Needle and Syringe							
Orion 2ml syringe							
Orion Green needle							
Orion Blue needle (Long)							
Orion Blue needle (Short)							
Orion Orange needle (Long)							
Orion Orange needle (Short)							
Paraphernalia							
Sterile Water	*20*						
Vit C Sachet							
Alcohol Swab							

Citric Acid (A&B only)							
Foil Pack							
Disposable Steri Cup							
Sharps Bins							
0.3L Bins Dispense / Return (A&B only)							
0.6L Bins Dispense / Return (A & B only)							
0.45L Bins Dispense / Return	*1*						
1L Bins Dispense / Return	*0*						
Harm Reduction Interventions							
Naloxone offered and refused							
Overdose related advice							
Wound Care							
Injection sites checked & dressings supplied							
Injection sites checked & no action taken							
Injection sites checked & PGD321 used/antibiotics supplied							
Onward referral made to alternative provider							

Appendix 4: Window Sign

