

# NHS Lanarkshire

## Service Level Agreement

<b>SLA Reference</b>	<b>Opioid Substitute Treatment</b>
<b>Version</b>	1.0
<b>Effective Date</b>	1 <sup>st</sup> April 2026 – 31 <sup>st</sup> March 2028
<b>Next Review date</b>	Annual Financial Review
<b>Approved By</b>	Lead Pharmacist, Substance Use Management, NHS Lanarkshire

Revision Chronology		
Version Number	Effective Date	Reason for Change

Contents	
Background to Service	Page 2
Service Aims	Page 2
Roles & Responsibilities	Page 3
Training Requirements	Page 5
Claims & Payments	Page 6
Monitoring & Evaluation	Page 6
Confidentiality	Page 7
Health & Social Care Act	Page 7
Contacts	Page 7

## Introduction

This Service Level Agreement (SLA) acts as a contract between NHS Lanarkshire and the pharmacy contractor and commits the contractor to provide the services as defined by, and using documents provided in, this Service Level Agreement. Should there be any variations made to the contract, the pharmacy contractor will have the right to agree to any variations or withdraw from the contract.

Any intellectual property rights belonging to either Party before the Agreement remains with that Party

A three-month 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 months' notice period may not apply.

This 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

### 1. Background to service

Over the last decade, Scotland has had a higher drug death rate than other parts of the UK, therefore making it a national priority to implement standards and services to aid a reduction in Drug Related Deaths. The Drug Deaths Taskforce was set up in September 2019 and prioritised the introduction of the [Medication Assisted Treatment \(MAT\) standards](#) to help reduce deaths, harm, and to promote recovery across Scotland. Community Pharmacies play a key role in delivering the MAT standards and reducing drug related death by ensuring patients have the necessary access, choice and support to quality treatment & care.

### 2. Service Aims

To provide holistic pharmaceutical care to patients receiving Opioid Substitute Treatment (OST, also known as Opioid Agonist Treatment (OAT)) and promote patient's recovery by:

- i. Providing close liaison with prescriber and treatment services
- ii. Dispensing OST as prescribed according to the assessed patient needs.
- iii. Ensuring each supervised self-administration dose is consumed in accordance with the appropriate Standard Operating Procedure
- iv. Providing general health advice including pharmaceutical public health services and signposting for access to further advice or assistance.
- v. Promoting patient safety and appropriate harm minimisation strategies.

To reduce the risk to local communities of:

- vi. Overuse or underuse of medication
- vii. Diversion of prescribed medication

### **3. Roles and Responsibilities**

#### **The Specialist Substance Misuse Service will:**

Advise Pharmacy Contractors of any relevant updates/changes to service delivery

Facilitate & support access to training for pharmacy staff

Review and update service support materials, reflecting on national & local guidance

Provide practical advice during normal working hours Mon-Fri excluding public holidays)

Process payment claims made via NEO by the 9<sup>th</sup> of the month

If notified via NEO or telephone of a missed dose via the service provider, will initiate welfare checks for service user

#### **The Pharmacy Contractor will:**

Sign and return the SLA agreement prior to service implementation

Will notify NHS Lanarkshire of any changes in circumstances whereby they can no longer deliver the service effectively or safely

Take full responsibility for ensuring staff involved in the provision of the service are aware of and operate within the service specification

Take full responsibility for ensuring staff involved in the provision of service are trained in the operation of the service as outlined in subsection 4

Remain accountable for delivery of their professional responsibilities and standards

Ensure the site has enough skilled and qualified staff to provide a safe and effective pharmacy service as detailed in the GPhC Guidance for contractors: Guidance to ensure a safe and effective pharmacy team

Ensure where appropriate, appropriate indemnity insurance is in place for premises/staff delivering service

Provide premises that protect the privacy, dignity and confidentiality of patients and the public who receive pharmacy services

Ensure service is available to service users throughout opening hours. This may require requesting service users to call back if the service provider is currently unavailable however the service should not be restrictive to set hours within the day

Ensure staff hold and are competent to deliver x2 naloxone kits for use in an emergency situation as per [national specification](#)

The pharmacy contractor will identify a nominated person(s) responsible for delivering the service and where applicable ensure Standard Operating Procedures (SOPs) are in place to ensure service is delivered as stipulated in the SLA

### **The nominated person(s) responsible for delivering the service will:**

Provide a user-friendly, non-judgemental, patient-centred and confidential service

Ensure children and vulnerable adults are safeguarded & follow local processes if a concern is to be raised.

Consult the patient/carer or family member of the signs and symptoms of overdose; [Signs & Symptoms of an overdose](#)

Discuss opening hours as well as arrangements for closures, including public holidays. Pharmacy staff may discuss the hours which may be better to avoid however the service should not be restrictive to set hours within the day and should be available to service users at all times when medications can be supplied.

Keep a record of the service users contact number within the Patient Medication Record (PMR) in the case of an emergency pharmacy closure

Some service users may struggle to read and/or understand printed materials such as Patient Information Leaflets and key messages, these should be reinforced verbally.

Provide opportunistic interventions and/or referrals which may include but not limited to (Information for North and South services can be found on the [CP webpage](#));

- Safe storage and disposal of medicines
- Overdose prevention and naloxone provision
- Alcohol awareness
- Injecting Equipment Provision and Harm Reduction
- Blood Borne Virus (BBV) prevention, testing and treatment
- Advice on polypharmacy of prescribed medications
- Smoking cessation where appropriate
- Healthy eating and exercise
- Sexual health advice and condom provision where appropriate
- Oral health (Please see [Methadone Treatment Dental Advice](#))
- referral and/or signpost to other health services and agencies e.g. Harm Reduction Service.

Display a range of relevant information available from NHS Lanarkshire with details of local services including voluntary agencies

Advise service users to keep medicines out of reach of children and any medication dispensed into child proof containers should remain in these containers.

Complete the Controlled Drugs register in accordance with legal requirements & report any incidents and/or CD concerns to the CD Governance team via the [CD incident Reporting Form](#)

Will monitor and feedback on service users adherence to prescribed treatment to the service users care worker or prescriber & notify them if a service users has failed to attend/collect medicines for 3 days, allowing them to contact the service users to check on their wellbeing and if necessary plan to review the service users prescription

- **The NEO system can now be used to communicated dose adherence and trigger a welfare check. [NEO User Guides](#) can be found on the [Community Pharmacy webpage](#).**

Service user's adherence to medication should be readily available to allow different staff e.g. reliefs, locums, to readily see previous advice and/or administrations given.

Deliver Emergency Naloxone as per [National Specification](#) to individuals suspected of opioid overdose. See Subsection 4 - Pharmacy Naloxone Service.

Signpost patients/carers/family members to NHS Lanarkshire Take Home Naloxone services and/or additional support/training.

Consult service users of the risk of BBV when sharing needles e.g. Hep C and direct them to the nearest [IEP site if required](#). Service users can be referred the to Harm Reduction Team for [BBV testing](#)

- Emphasising the importance of using sterile injecting equipment
- Encouraging use of a new set of injecting equipment for every injecting episode
- Discouraging sharing of paraphernalia with others, including sexual partners
- Rotating site of injection

#### **4. Training requirements**

The nominated person(s) responsible for service delivery should complete the following NES training prior to service delivery, **you do not have to repeat modules if already completed as part of another service delivery:**

- NES Turas Learn - [Substance use training](#)
- NES Turas Learn - [Trauma informed training](#)
- Pharmacy Naloxone Service; [Drug Related Deaths in Scotland](#)
- Pharmacy Naloxone Service; [Identifying an Overdose](#)
- Pharmacy Naloxone Service; [Naloxone and its administration](#)

- MAT Standards Webinar: [MAT Standards Recording](#)

## **5. Claims and payment**

A package of care fee will be paid for per service user per month.

Payment will be made in arrears on submission of the monthly claim via the NEO 360 system. Any claims submitted after 9<sup>th</sup> of the subsequent month will be paid the following month.

Contractors are responsible for monitoring fees paid and have a 3-month window to raise any concerns regarding a missing payment from the month it should have been paid. Any claim queries raised after this time will be deemed as an historical claim and will only be considered by the Pharmacy Performance and Governance Group for payment.

Service liability of the contractor to NHS Lanarkshire will remain capped at the total service fee paid under the Community Pharmacy Opioid Substitute Treatment service agreement. Service liability does not extend to medicines obtained in error, this will remain the contractor's responsibility.

General business costs such as insurance, servicing finance, banking charges, business administration, payment tracking etc. are reflected in national arrangements for community pharmaceutical services and as such do not form part of local arrangements/ service level agreements.

## **6. Monitoring & evaluation**

Both the Health Board and the pharmacy contractor will be independent Data Controllers for personal data processed for quality assurance, performance management, and contract management. 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. These records may be used for information for internal and external audit and evaluation purposes.

NHS Lanarkshire regularly monitors service provision across all contractors. Data is submitted on an annual basis for service review & evaluation.

Where requested, participating pharmacies will be required to participate in service evaluation and audit. . The Pharmacy Contractor will be given 28 days' notice.

Post-payment verification checks will be undertaken in line with the process established and agreed via National Services Scotland. Pharmacy Contractors

participating in the service should support this exercise by providing information if requested.

## 7. Confidentiality

The [General Data Protection Regulation \(GDPR\) \(EU\) 2016/679](#) and [Data Protection Act 2018](#) 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.

## 8. The Health and Care (Staffing) (Scotland) Act 2019

The Health and Care (Staffing) (Scotland) Act 2019 (“the 2019 Act”) places requirements on the Health Board stating that: “In planning and securing the provision of healthcare 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 levels in place.”

The Pharmacy Contractor will ensure that they have taken into consideration provisions set out in the Health and Care (Staffing) (Scotland) Act 2019 so that the level of support available to operate the service is in line with the aims of the Act and that sufficient staff are available to safely and effectively provide the service.

## 9. Contacts

**Any queries relating to individual service users should be raised with their prescriber.** Any queries relating to NEO/payments should be directed to :

**Substance Use Management – Specialist Pharmacist**

[Duncan.Hill@lanarkshire.scot.nhs.uk](mailto:Duncan.Hill@lanarkshire.scot.nhs.uk)