



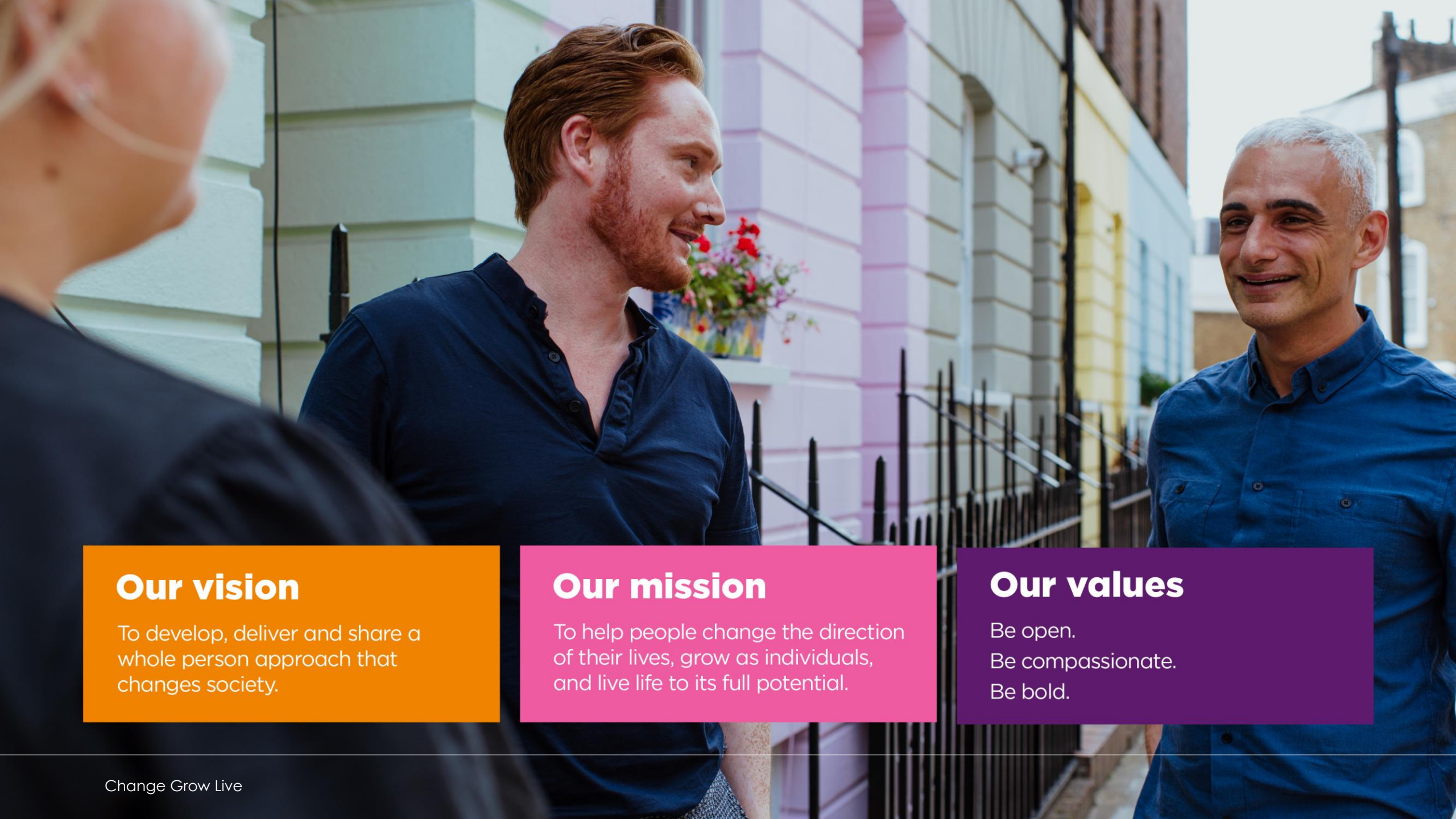
Improving our work with pharmacies in the community

Tina Fowler – Pharmacy Liaison Lead



Change
Grow
Live

Believe in people



Our vision

To develop, deliver and share a whole person approach that changes society.

Our mission

To help people change the direction of their lives, grow as individuals, and live life to its full potential.

Our values

Be open.
Be compassionate.
Be bold.

Our Services covering Sussex:



**West Sussex Drug and Alcohol
Wellbeing Network (WSDAWN)**

westsussex.scriptadmin@cgl.org.uk

westsussex.firststep@cgl.org.uk



Brighton and Hove Recovery Service

brightonadmin@cgl.org.uk

brighton.info@cgl.org.uk



East Sussex STAR

eastbourneadmin@cgl.org.uk

hastingsadmin@cgl.org.uk

eastsussex.firststep@cgl.org.uk

How closer working with pharmacies can save lives and improve our communities

- We prescribe Opiate Substitute Treatment (OST) to our service users with opiate dependence.
- Evidence shows that risk is reduced for those who are prescribed OST and further reduced when they become more stable on an optimum dose.
- Service users start out attending the pharmacy daily for supervised consumption of their medication.
- With stability, regular reviews and risk assessment the aim is for the service user to be able to collect unsupervised, less frequently and eventually achieve a point where they are able to consider detoxing from OST.
- **Pharmacies are key to this work, and this is why we have created our new service level agreement – we value your role in this.**
- You see the service user on a regular basis.
- You are in an ideal position to offer additional harm reduction advice, information and materials such as Naloxone (Prenoxad) and needle and syringe programme materials.
- You can let us know when you notice changes in presentation and especially when doses are missed.
- Missed dose notifications are very important as after three consecutive missed doses we need to stop the prescription and re-assess the service user. Risk increases at this time. If we can engage them again before the third missed dose there is a better outcome opportunity for the service user and time saved for professionals.

How do we communicate?

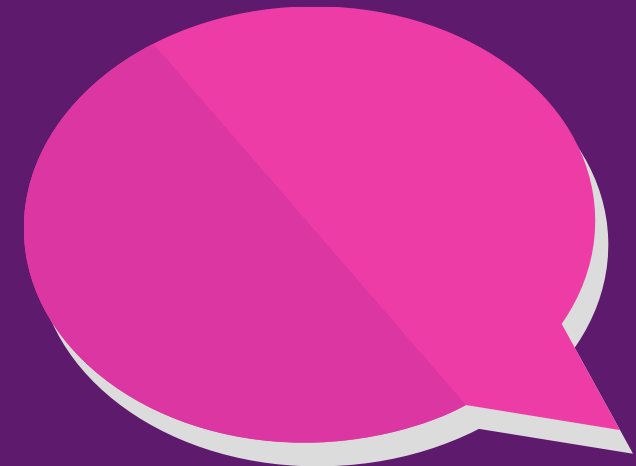
Communication is key to us working well together. We have a database designed to support this, telephones and email. To make this even more effective you have a Pharmacy Liaison Lead – Me!

My contact details are:

Tina Fowler

Email: tina.fowler@cgl.org.uk
Tina.fowler6@nhs.net

Mobile: **07789 414270**



How do we start?

Firstly we need to have a **Medication-Assisted Treatment (MAT) Core Service Service Level Agreement**

You will have hopefully received this already and many of you have already signed up.

The benefits of having this agreement is not only a clear pathway to working together, but also some financial benefits for the pharmacy.

You have a CGL pharmacy liaison lead who is there to coordinate and support the way we work together.

The financial benefits to pharmacies are:

Service	Payment
Core MAT offer	£10.00 per person prescribed MAT per calendar month for provision of the service detailed above.
Supervised consumption – methadone (all brands)	£2.00 per supervised dose
Supervised Consumption - Espranor	£2.00 per supervised dose
Supervised consumption – sublingual buprenorphine (all brands)	£2.50 per supervised dose

The Database:

PharmOutcomes

An accurate and complete data collection and recording system relating to the core MAT services

Information recorded by community pharmacies providing the MAT core offer will be integrated directly into our Change Grow Live service user clinical record.

This will drive the quality of care and treatment provided and enable us to identify and action more targeted support for the individual as part of their treatment and recovery journey.

A clear recording system for all interventions offered by the pharmacy as part of the service level agreement, enabling accurate and prompt settlement of fees due for each service delivered.

Streamlining the way we work together and helping us to do things better.

What do we need you to tell us, when and why



Data	Timeframe	Data Use
Missed Supervision/Collection	Reported within 24 working hours	To enable more prompt intervention by case workers, provide assurance of adherence and reduce diversion
Late Collection	Ideally reported within 24 hours	To build a longer term picture of adherence to support service user treatment plans
Monthly Supervised/Unsupervised dispensing	Reported at the end of each month	Confirmation that all missed pick-ups have been notified, support monthly payments per service user, and enable individual supervised consumption fees were applicable
Quarterly MAT reviews	Reported quarterly	To support prescriber reviews and recovery worker case/risk management

What next?

Contact me to arrange for me to come and visit you or talk with you on the telephone about the benefits of us working together under this Service Level Agreement

**Let's work together to make a
difference!**
Saving lives together.



Make a difference



**Change
Grow
Live**