

Practice No



This contract is between NHS Lothian and

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PATIENTS SUFFERING FROM DRUG MISUSE

Service Outline

A. The following elements of the service would need to be in place already for the purpose of this service:

- (i) An accurate register of patients
- (ii) Good knowledge of, and effective liaison with, local drug services and other agencies, including non-statutory services
- (iii) Links between local pharmacies, primary care support workers, social services and local mental health services.
- (iv) Systems to record prescribing, interventions and review.
- (v) Safe and secure practice

B. This service will fund practices to be able to:

- (i) Develop and co-ordinate of the care of drug users and develop practice guidelines. Practices must have knowledge of local and national treatment guidelines, and provide care in keeping with the Lothian handbook, Managing Drug Users in General Practice. Practices must have knowledge of local detoxification procedures.
- (ii) Treat dependent drug users with support. This will be with support from, for example, nurses with specialist interest and specialist providers. It includes the prescribing of substitute (opiate and non-opiate) drugs and/or other treatments in keeping with best practice and local prescribing guidelines.
- (iii) Ensure that prescribing takes place within a context in which the co-existing physical, emotional, social and legal problems are addressed as far as possible.
- (iv) Maintain awareness of relevant child protection guidelines and procedures including the need for appropriate sharing of information.
- (v) Participate in audit of prescribing practice (see clinical audit guidance below)
- (vi) Demonstrate additional training and continuing professional development. This should be commensurate with the level of service provision expected of a clinician in line with any national or local guidance to meet the requirements of revalidation

- (vii) Maintain the safety and training of clinical and non-clinical staff.
- (viii) If a practice has agreed to provide care for patients outside their own registered list they will be funded to do so. There must be an effective means of communication with the registered doctor regarding these patients.

C An annual review of service will be made and reported by the Primary Care Facilitator Team (PCFT), based on audit data submitted by participating practices. This will include the following:

- (i) attendance rates
- (ii) treatment interventions
- (iii) outcomes

D The following audit data must be submitted by practices to the PCFT in the prescribed format every six months. The minimum standards of care and the data collection criteria are defined by the NES for Drug Misuse Monitoring Group on behalf of NHS Lothian.

- (i) Patient's ten digit CHI number
- (ii) Date of completion of SMR24/25 by practice
- (iii) Number of attendances
- (iv) Details of substitute medication prescribed, including doses, dispensing arrangement and dates of supervised consumption methadone.
- (v) Date of most recent toxicology
- (vi) Injecting status and discussion of blood borne viruses
- (vii) Hepatitis B screening and immunisation data relevant to this patient population

Practices are also encouraged to submit the following data which is relevant to best practice in caring for this patient group.

- (i) Data relating to Hepatitis C and HIV prevention activity including testing.
- (ii) Christo inventory scores and completion dates.

E Skills – A practitioner providing enhanced services in drugs and substance misuse should have the skills to:

- (i) carry out an assessment of a patient's drug use
- (ii) assess and refer appropriately, patients for drug misuse
- (iii) provide harm reduction advice to a current drug user or his or her family
- (iv) discuss and test (or refer for testing) for blood borne viruses, including HIV
- (v) carry out immunisation for Hepatitis A and B according to current guidelines
- (vi) utilise the range of commonly used treatment options available for treatment including pharmacological interventions
- (vii) identify and treat the common complications of drug misuse
- (viii) provide drug information to carers and users as to the effects, harms and treatment options for various common drugs of use
- (ix) work in an appropriate multidisciplinary manner

F CPD requirements

It is expected that the level of training required for a GP providing an enhanced service is identified in the GP's personal development plan and, where additional training is required, local mechanisms are found to address this.

G Payment

Each practice contracted to provide these services will receive a fee of £372.92 per qualifying patient, per annum paid quarterly in arrears. As data is submitted six monthly rather than quarterly, this means that two of the quarterly payments will be estimated on previously submitted data. Any over or underpayment will be rectified at the next payment date by Finance.

H Patients qualifying for NES payment

Claims for payment **cannot** be made for patients who are receiving ongoing maintenance care and prescribing from a specialist service, maintenance clinic or who are subject to a Drug Treatment and Testing Order. Claims may be made for patients who are undergoing assessment or titration by a specialist service, subject to the criteria below and the agreement of the practice to resume drug related care on discharge from the specialised service.

Qualifying criteria:

- (i) Patient seen twice or more in 6 month period regarding their drug use
- (ii) Date of completion of SMR 24/25 by practice documented
- (iii) Recorded toxicology in preceding 12 months
- (iv) Patient recorded as having received **at least** one Hepatitis B vaccination **or** has been recorded as having had past infection **or** recorded as having declined vaccination.

The first three criteria **must** be fulfilled for payment to be made in respect of that patient. Patients fulfilling all criteria except (iv) will attract a lower payment equivalent to 80% of the full rate. No payment will be made in respect of patients not fulfilling criteria, (i), (ii) and (iii).

Signed _____
(For and on behalf of NHS Lothian)

Date _____

Signed _____
(For and on behalf of The Practice)

Date _____