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| **Rationale of Checklist** | | | |  |
| This checklist will be completed by the CPHIOW sub-committee for every new or recommissioned service specification sent to CPHIOW for comment/consultation. The response summary is completed after consultation and agreement by the sub-committee.  The Checklist contains the CPHIOW sub-committee’s comments/recommendations for any requested changes to the proposed/draft service specification in order to achieve / improve further the green rating. It will be sent to the service commissioner for consideration of amendments ideally prior to go-live of the service.  CPHIOW’s purpose is to work positively with commissioners to ensure high quality outcomes from the service, which are both professionally and commercially viable for contractor participation. | | | |  |
| **Service and Commissioner** | | | |  |
| **Provision of Needle and Syringe Exchange Service**  **Southampton City Council** | | | |  |
| **Response summary feedback from CPHIOW** | | | |  |
|  | | | |  |
| CPHIOW has rated this service specification as AMBER based on the comments made below. Our recommended actions to further improve the service are:   1. Appropriate funding for Pharmacy staff time | | | |  |
| **Time-line & Next Steps for CPHIOW** | | | |  |
| CPHIOW will publish this service participation rating to contractors in **10 days’ time.**  Publication of this recommendation will be via individual email and posting on our website.  Commissioners are asked to please respond promptly with feedback / proposed changes so that they can be included within CPHIOW’s recommendation to its contractors. | | | |  |
| **Commissioners response to CPHIOW feedback** | | | |  |
| Please enter response here, returning promptly to [alison.freemantle@CPSC.org.uk](mailto:alison.freemantle@CPSC.org.uk) | | | |  |
| **Point Covered** | | | **Action or Notes** |  |
|  | | **CPHIOW Consultation** | |  |
| CPHIOW Consulted? | | | Yes |  |
| CPHIOW Consulted with sufficient time to comment? | | | Yes |  |
|  | | **Remuneration** | |  |
| Does remuneration include/cover set up costs, backfill, consumables etc..? | | | No set up cost inclusion.  No backfill to allow for pharmacist training time. |  |
| Does the payment structure use a system that is suitable for all contractors and are the payment terms acceptable? | | | Yes, PharmOutcomes  Payment is Monthly. |  |
| Where equipment is required who provides/calibrates/services this? If contractor, does remuneration sufficiently cover the cost of this? | | | NX equipment provided to pharmacies free of charge.  Returned sharps collection included. |  |
| Is remuneration fair? | | | Yes  Fee per transaction increased +29% |  |
|  | **Is/does the Service.....** | | |  |
| Sustainable? | | | Maybe |  |
| Start/ end date | | | One year 1/4/25 – 31/3/26 |  |
| Clinically sound and in line with appropriate National or local guidance? | | | Yes  Reducing the rate of sharing and other high-risk injecting behaviours and reducing the spread of BBVs are local and national priorities. |  |
| Enhance patient care? | | | Yes |  |
| Have suitable monitoring arrangements and termination clauses? | | | Yes  Reporting and feedback will be via PharmOutcomes.  Notice period 1 month |  |
| Enhance relationships with other HCPs? | | | Yes  Especially with other substance misuse service providers. |  |
| Equality, diversity, and inclusion considered? | | | Service available to any person who is intending to inject themselves. |  |
| Deliverable? | | | Yes |  |
| Delivery impact on staff (High/ Medium/Low) | | | Low |  |
| Attractive enough for contractors to consider it worthwhile? | | | Maybe |  |
| Have performance criteria that supports a quality service? | | | No performance criteria. |  |
|  | **Service Delivery** | | |  |
| Are the performance measures reasonable and achievable? | | | Yes  Activity will be monitored monthly through PharmOutcomes, to help inform service and budget management. |  |
| Is the administration proportional to size or service and remuneration? | | | No |  |
| Are any reporting systems suitable to all contractors? | | | Yes  PharmOutcomes |  |
| Is the training required for the service reasonable? Consider accessibility to CPPE for non-pharmacist/technician staff. | | | Pharmacists will be expected to have completed the CPPE Substance Use and Misuse within three months, if not previously completed. Enrolment will be required via CPPE Declaration of Competence on PharmOutcomes. |  |
| Does record keeping or sharing of information requirements meet current IG regulations. | | | Yes  PharmOutcomes |  |
|  | **Miscellaneous Information** | | |  |
| Any other information specific to this service. | | | Fee increase 29% |  |
| Suggested RAG Rating | | |  |  |