

**Calderdale Substance Misuse Programme  
Joint Commissioning Team Substance Misuse**

**CALDERDALE  
PHARMACIST SUPERVISED METHADONE DISPENSING PROTOCOL\***

(see also notes on second page)

***\*Locums need particularly to refer to parts in bold bullet points***

- 1 The prescriber will agree with each new patient participating in the shared care scheme the pharmacist by whom his/her methadone will be dispensed and will notify the pharmacist accordingly.
- 2 All patients who are to receive daily methadone should agree and sign a patient contract (sample in file). If the patient is new, the pharmacist on duty should explain the contract and their own procedure and countersign the contract. A copy of the contract should be given to the patient, together with a practice leaflet.
- 3 The pharmacist should introduce the patient to the counter staff so that the patient can be dealt with promptly each day.
- 4 When a prescription is presented the pharmacist should check that the prescription is legally correct and that the patient has an existing contract with the pharmacy.**
- 5 Daily doses should be prepared in advance and stored in the Controlled Drugs Cabinet to avoid undue delay when the patient presents in the pharmacy.**
- 6 Daily doses should be prepared as follows:**
  - 6.1 Measure, double-check and dispense in a suitable container.**
  - 6.2 Attach dispensing label to container detailing patient name, directions, quantity and date of dispensing.**
  - 6.3 Ensure that any take home doses are fitted with child-resistant closures.**
  - 6.4 The pharmacist should mark the date and quantity measured on the prescription at the time of dispensing. Leave blank when doses have not yet been prepared.**
  - 6.5 These should be initialled at the time of collection/supervised self-administration.**
  - 6.6 Clients on escalating doses must collect every day as specified on the prescription**

**Patients who have missed TWO consecutive days' medication may still receive medication if they attend pharmacy on the third day.**

**Patients will be referred back to the prescriber if they miss THREE days substitute medication.**

**The Prescriber can specify on the prescription that the remainder of an instalment may be supplied if not collected on the specified day (see notes for specific wording). This can only be done when clearly stated on the prescription.**

- 7 Unless a 'take home' dose is required, the methadone must be consumed on the premises under the supervision of the pharmacist or pre-registration pharmacist. This should take place in a quiet, private area: it should never take place in the dispensary. The pharmacist must be satisfied that the dose has actually been swallowed, either by observing water being swallowed after the dose, or by conversing with the patient to ensure that the methadone is not retained in the mouth. All containers should be discarded after self-administration.**
- 8 All daily dispensing must be entered in the CD register on the day of supply.**

### **Notes**

- 1 The daily dispensing and supervision of methadone is only one aspect of a broader harm minimisation strategy. Patients may be undergoing stabilisation and will be calling into the pharmacy every day - this service should therefore be as discreet as possible and the patient treated with respect and courtesy.
- 2 Supervised methadone dispensing should begin no earlier than an hour after opening time of the pharmacy - to allow sufficient time for the preparation of the day's doses - and finish no later than an hour before the pharmacy closing time - to permit the completion of dispensing records.
- 3 All occasions on which a patient fails to attend should be recorded on the prescription.
- 4 The Key Worker or prescribing agency should be contacted in any of the following circumstances:
  - Patient missing three consecutive days' substitute medication
  - Any doses missed during the titration period then the patient must be referred back to the prescriber
  - All missed doses should be reported to the prescriber so they have accurate information on whether clients are collecting regularly
  - Breach of patient contract
  - Unacceptable behaviour when visiting the pharmacy
  - Evidence of increasing health, emotional or other problems
  - Requests for help that the pharmacist is unwilling or unable to meet
- 5 Wording to be used on the prescription to allow supply of an instalment to a patient if not collected on the specified collection day: "Supervised consumption of daily dose on dispensing days; the remainder of the supply to take home. If an instalment prescription covers more than one day & is not collected on the specified day, the total amount prescribed less the amount prescribed for day(s) missed may be supplied".

Additionally the pharmacy will promote the uptake of health promotion material to service users, made available to them by the PCT and offer harm reduction

information and advice eg HIV, Hepatitis C transmission and Hepatitis B immunisation.

- 6 A copy of this protocol should be included with any briefing given to locum pharmacists brought in to cover holidays or other absences.**