

Suggested action plan for Community Pharmacy OTP dosing points – Contingency planning for the potential impacts of COVID-19

The following are strategies provided for your consideration and implementation as appropriate.

Co	nsider ways to ensure continuity of service for the opioid treatment program:
	Ensure adequate stock and storage of opioid agonist treatment (methadone and
	buprenorphine). Review all current prescriptions for opioid agonist treatment and for those prescriptions that are due to expire soon, advise the patient to make contact with their doctor or practice by telephone initially to organise a new prescription. The doctor may determine if a clinical review
	is necessary, or if a new prescription will be sent directly to the pharmacy.
	Ensure patient records are up to date, e.g. contact information / address and current prescriber.
	Ensure that you have contact details for prescribers, any nominated locum prescribers, and drug and alcohol services in the local health district to help you plan in case of service disruption at short notice.
	Some prescribers may increase the number of take away doses temporarily as a strategy to reduce contact by the patient with others. Guidelines around the number of takeaway doses doctors may prescribe will be relaxed during this time. Ensure instructions are in writing and a new prescription is issued where necessary. Maintain good communication with prescribers and discuss any concerns you have to ensure ongoing patient safety.
	Consider extending or staggering dosing times if necessary to reduce congregation or overcrowding of patients. Advise patients to keep a distance of 1.5m from others.
	Work together with prescribers to ensure patients can continue to receive doses if they are diagnosed with COVID-19 or are symptomatic and awaiting results. The Ministry is working closely with prescribers, local health districts and service providers around strategies to prioritise continued access to opioid treatment medications for patients.
	Where observed dosing is not possible due to self-isolation, discuss treatment options and interim measures with the prescriber to enable safe treatment, which may include changes to the patient's treatment, e.g. switching to unsupervised sublingual buprenorphine/naloxone, switching to depot buprenorphine, or agreeing on whether a nominated person could pick up (and sign for) doses on the patient's behalf during the isolation period.
tra	r temporary transfers of dosing sites as a result of COVID-19 service disruption, ensure that nsfer of care notes are clearly documented, including last dose details. Long term transfers must reported to the Pharmaceutical Regulatory Unit by the prescriber.
Ot	ther contingency planning considerations
Ha	rm minimisation initiatives:
	The <u>Australian Government pilot</u> providing free take home naloxone to patients who are at risk of an overdose, without a PBS prescription. Register for the Pilot at https://ppaonline.com.au/
	Provide take home naloxone to all patients on OTP, providing advice on how to respond to an opioid overdose. This is especially important for patients who may be accessing increased numbers of take away doses.
	If you do not offer the needle syringe program, ensure you have list of local providers.

☐ Recommend influenza vaccination and refer vulnerable populations to their GP where indicated.

Strengthen infection control strategies:		
	Infection control training for staff and guidance for patients. See <u>NSW Health website</u> for resources and updates on COVID-19.	
	Provide alcohol-based hand sanitiser for patient use in the pharmacy.	
	Ask patients receiving supervised doses to remain 1.5m from staff and other customers	
	Disposable cups must be used and discarded immediately directly into a waste bin.	
	Increase the frequency of environmental cleaning, e.g. clean the counters, pens and other high-	
	touch surfaces more regularly. Guidance is available from <u>NSW Health</u> .	
W	orkforce:	
	See guidance now available: Community pharmacy pandemic preparedness for COVID-19.	
	Promote staff influenza vaccination.	

Keep your patients informed of any changes to service provision, and reassure them that you are communicating with their medical team to continue to provide safe treatment.

☐ Additional information about the NSW OTP, including how to register as a dosing point is

available at **Pharmaceutical Services**.

24 hour telephone clinical support regarding drug and alcohol treatment is available for health care professionals through the Drug and Alcohol Specialist Advisory Service (DASAS): (02) 9361 8006 (Sydney) or 1800 023 687 (rural)