Standard Operating Protocol

*between*

York Drug and Alcohol Service

*and*

Primary Care Networks in York Place

Background

Substance and alcohol use affects many people in the city of York. The government’s 10-year strategy ‘From Harm to Hope’ (2021) lays out several aspirations which aim to reduce the harm caused by drug and alcohol use, and local partners have a number of key objectives including to increase capacity within drug and alcohol treatment services (in particular for those with alcohol dependence), reduce drug and alcohol related deaths, increase access to residential rehabilitation, and improve quality including by reducing caseloads and increasing the professional staff mix across many agencies.

Individuals successfully completing drug / alcohol treatment programmes demonstrate a significant improvement in health and well-being in terms of increased longevity, reduced alcohol related illnesses and hospital admissions, reduced blood-borne virus transmission, improved parenting skills and improved physical and psychological health.

Purpose of this SOP

York has higher rates of drug-related death and higher hospital admissions relating to alcohol than other comparable areas. A key element of reducing drug and alcohol-related harm / death is integration between healthcare services so that this particularly vulnerable group of patients receive optimising physical, mental health care and prescribing.

Since 2015, there has been no shared care arrangement in York. In the absence of a formal commissioned arrangement for the care of substance users within primary care, this SOP is intended to act as an informal but agreed framework by which YDAS and the five Primary Care Networks (PCNs) work together to improve communication and processes for YDAS service users using primary care services.

Agreed specialist provider (YDAS) responsibilities

The responsibility of the service provider of YDAS is to:

* Write to GP on patient initiation of OST using template letter
* Write to GP on when there is continuation of OST post release from Prison
* Write to GP at 3 monthly review point, at restart or new start and at any significant noted changes in clinical presentation, with a medicines update and request for GP medication update including
  + Any changes in medications currently prescribed by YDAS / GP
  + Active problems
  + (If known) patient goes off script
* Conduct a yearly audit sample of 10 Theseus patient records to check if letters have been sent to protocol

Agreed primary care responsibilities

The responsibility of each GP practice is to provide a patient record summary to YDAS following any scheduled health review or significant change for a patient identified as having substance misuse issues, including information on:

* Opioids/DFM issued in the last 3 Months
* Mental Health/ Safeguarding Active Problems
* Vaccination History
* Last LFTs/ FBC/ BBV results
* Preferred Pharmacy

Additionally GP should:

* Aim to identify and address risks associated with drug misuse, both to patients and others, including coding patients appropriately
* Ensure patients’ primary healthcare needs are identified and addressed, including provision of long-term condition management; opiate withdrawal symptomatic relief management; BBV testing, pre and post-test counselling and referral to specialist services, and BBV vaccinations
* assess likelihood of benefit for other prevention e.g. vaccination, NHS healthcheck, LARC / contraception
* make contact with YDAS if any immediate overdose risk is suspected, or if naloxone is used on the patient within the clinical setting

See Appendix for a simplified communications pathway between York GPs and YDAS

Quality and Standards

[NICE CG115](https://www.nice.org.uk/guidance/CG115) (Alcohol-use disorders: diagnosis, assessment and management of harmful drinking (high-risk drinking) and alcohol dependence

[NICE NG64](https://www.nice.org.uk/guidance/ng64) (Drug misuse prevention: targeted interventions)

RCGP [Management of Drug Misuse](https://elearning.rcgp.org.uk/course/info.php?id=130) Level 1

RCGP [Management of Alcohol in Primary Care](https://elearning.rcgp.org.uk/course/info.php?id=119)

Key points of contact

|  |  |
| --- | --- |
| **GP practice** | **Key contact email** |
| Priory Medical Group | Patient Records Team  [hnyicb-voy.pmg-patientrecords@nhs.net](mailto:hnyicb-voy.pmg-patientrecords@nhs.net)  Secretarial Team  [hnyicb-voy.priorysecretaries@nhs.net](mailto:hnyicb-voy.priorysecretaries@nhs.net) |
| MyHealth | [hnyicb-voy.myhealthadmin@nhs.net](mailto:hnyicb-voy.myhealthadmin@nhs.net) |
| Pocklington | [hnyicb-voy.reception.pgp@nhs.net](mailto:hnyicb-voy.reception.pgp@nhs.net) |
| Haxby | [Haxbygroup.york@nhs.net](mailto:Haxbygroup.york@nhs.net) |
| Dalton Terrace | [Daltonsurgery.reception@nhs.net](mailto:Daltonsurgery.reception@nhs.net) |
| Elvington Medical Pratice | [hnyicb-voy.empsecretary@nhs.net](mailto:hnyicb-voy.empsecretary@nhs.net) |
| Old School Medical Practice | [oldschoolmedicalpractice@nhs.net](mailto:oldschoolmedicalpractice@nhs.net) |
| York Medical Group | [hnyicb-voy.yorkmedicalreception@nhs.net](mailto:hnyicb-voy.yorkmedicalreception@nhs.net) |
| Front Street Surgery | TBC |
| Jorvik Gillygate | [hnyicb-voy.jorvikmedicalpractice@nhs.net](mailto:hnyicb-voy.jorvikmedicalpractice@nhs.net) |
| Unity Health | [admin.unityhealth@nhs.net](mailto:admin.unityhealth@nhs.net) |

|  |  |
| --- | --- |
| York Drug and Alcohol Service | [York-info@changinglives.org.uk](mailto:York-info@changinglives.org.uk)  01904 464680 |
| Oaktrees (York community recovery) | 01904 621776 |
| North Yorkshire Horizons | 01723330730 |
| East Riding Partnership | 01482 336675 |

Resources

**#1 Template Practice Letter – YDAS to GP**

Ref: Patient’s NHS number

Name

Team/Department

Address 1

Postcode

Telephone

Email address

Date

**Recipient’s name**

Address 1

Address 2

Address 3

Address 4

Postcode

**Private and confidential**

Dear [GP/ Community Pharmacist]

**Date of Clinic Attendance:**

**Diagnosis:** Illicit Drug Use/ Alcohol Use/ Polydrug use.

**SMS Medications:** Methadone/ Subutex/ Acamprosate etc. **Dose:** 80ml

**Registered Pharmacy for Collection:** Monkgate/ Priory/ Boots

**Risks:** DSH/ Past OD

**BVB Status:** Hep B/ Hep C/ HIV

**Annual Health Check:** Due date

**Actions for GP:** Organise LFTs/ Referral for Fibroscan/ Consider CMHT referral/ Stop Pregabalin.

**Clinic Summary:**

Narrative from consultation. Including health and social concerns.

**Patient Care Plan:** key working/ group support sessions/ community detox.

**Key Worker Name/ Contact Details:** Joe Bloggs

**Generic Queries: admin@changinglives....**

Please send 3 monthly GP Summary (including medication and active problem list) to: admin@cls....

**#2 Template Letter – GP to YDAS**

|  |  |  |  |
| --- | --- | --- | --- |
| **GP to YDAS Information Sharing Template**  **Please note:** This template will automatically populate with information where this is available and coded. The below suggestions are not exhaustive and should be reviewed for data quality before sharing outside of the practice. | | | |
| **Patient Details** | | | |
| **Name** | <Patient Name> | **NHS Number** | <NHS number> |
| **Date of Birth** | <Date of Birth> | **Gender** | <Ethnicity> |
| **Language** | <Main spoken language> | | |
| **Contact Details** | | | |
| **Current Home Address** | <Patient Address> | | |
| **Preferred Tel.** | <Patient Contact Details> | | |
| **Mobile Tel.** | <Patient Contact Details> | | |
| **Home Tel.** | <Patient Contact Details> | | |
| **Registration Details** | | | |
| **Usual GP** | <GP Name> | | |
| **PDS Registered Practice** | <GP Details> | | |
| **Usual Branch** | <Usual Branch Address> | | |
| **Opioids/DFM issued in the last 3 Months** | | | |
| <Medication(table)> | | | |
| **Active Problems (inc. Mental Health/Safeguarding)** | | | |
| <Problems(table)> | | | |
| **Vaccination History** | | | |
| <Medication(table)> | | | |
| **LFTs/ FBC/ BBV results in the last year** | | | |
| <Pathology & Radiology Reports(table)> | | | |

Template letter is available on SystmOne via membership to organisation group: **York Place BI Resource Sharing**

Signatures

Phillip Elliott (Service Manger)..……………….On behalf of YDAS

…………………………………………………….On behalf of PMG PCN

…………………………………………………….On behalf of WoNE PCN

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Description automatically generatedJames Murray 20.7.23.On behalf of York City Centre PCN

…………………………………………………….On behalf of York East PCN

…………………………………………………….On behalf of York Medical Group PCN

Appendix

**York Drug and Alcohol Service & York Priory GP communication Pathway**

Using the agreed Template YDAS to forward a GP summary letter after the client’s 12-week clinical review, a restart or new start and at any significant noted changes in clinical presentation. Requesting an updated summary of client’s conditions and current medication regime. Where possible these are to be sent electronically through to Practices

GP to forward requested information as agreed noting any identified current health issues to address or be aware of.

Annual Health Care summary to be shared by email

**Future plans,** when required YDAS and Priory GP’s to discuss client’s presentation and any concerns at the earliest MDT session, either Complex Case Review meeting or an individual MDT.

Any clinical outcomes to be reported in clinical notes.