

WHAT'S NEW IN THE UNSCHEDULED CARE – PHARMACY GUIDE V 23?

Inclusion/Exclusion criteria change following consultation

The inclusion and exclusion criteria within the PGD for urgent provision of repeat medication have been reviewed and changed. The changes made will allow Pharmacists to further maintain continuity of medication supply and care to patients when their prescriber is unavailable.

The PGD for urgent provision of medication has been in place now for over 11 years and the contribution that community pharmacy has made to patient care is well recognised and appreciated, over 24,000 items a month are supplied urgently to patients using the PGD. The inclusion and exclusion criteria however have not been reviewed since it was initially established and the agreed changes could potentially contribute even further to improving patient care.

The recommended changes are being made after consultation with Primary Care Lead Pharmacists, Community Pharmacy Scotland, Community Pharmacists and Out of Hours (OOH) partners.

Changes are as follows:

1. **Removal of the requirement for the medication to be on a repeat prescription**

The removal of the requirement for the medication to be on a repeat prescription will allow additional situations where patients have run out of their medication to be addressed. This will bring the PGD in line with existing emergency supply regulations, which do not have this restriction, providing pharmacists with the opportunity to further maintain continuity of care.

Below are some scenarios where removing the requirement to be on a repeat prescription will help support patient care (not an exhaustive or prescriptive list):

- Patient recently discharged from hospital with new medication and has not organised a further supply of medication with their own prescriber who is now unavailable
- Acute prescribed medication lost, stored incorrectly, smashed bottle etc
- Medication is prescribed regularly but may not be on a repeat prescription - for example antidepressants
- Patient has been prescribed an acute medication but prescription not forwarded/received in the pharmacy and prescriber unavailable – information held on Emergency Care Summary(ECS) obtained through NHS 24 would enable supply
- Patient prescribed medication which they cannot swallow and requires liquid preparation

- Alternative flavour of same antibiotic if child unable to tolerate dispensed medication, or indeed capsule or tablet formulation if this resolves the situation
- Supply alternative formulation if dispensed medication is not suitable for other reasons e.g. allergy to excipient, religious reason e.g. beef gelatine
- Acute supplies of rescue antibiotic for COPD patients, many patients keep rescue antibiotic prescription but may have used the last one without renewing it
- Dispense remaining balance of antibiotic when original dispensing pharmacy is closed

2. Removal of the exclusion criteria which prevented successive supplies

Scenarios which occur where removing this requirement will help (not an exhaustive or prescriptive list):

- Patient supplied with medication using the PGD until prescriber is available however surgery unable to provide a prescription for another 48 hrs
- Patient unable to make an appointment to see own prescriber before medication provided on PGD runs out

3. Removal of example within PGD of what prescriber unavailable means

An example used to describe prescriber unavailable as “surgery closed” within the PGD led to some interpretation that the PGD could not be used unless the OOH period was in operation. The PGD can be used at any time where the prescriber is unavailable. The patient's prescriber will always be unavailable in the OOH period but there may be circumstances where they may also be unavailable “in hours”. Pharmacists may wish to discuss with their local GP Practices what the definition of the “prescriber unavailable” means at a local level and when it is appropriate to use the PGD in the “in hours” period.

Unscheduled Care Guide Update

All section of the Unscheduled care guide held on the community pharmacy SHOW website have been updated to reflect the PGD changes and refresh the guidance, please make yourself familiar with these documents:

http://www.communitypharmacy.scot.nhs.uk/unscheduled_care.html

New medication excluded in the PGD version 23 and **cannot** be supplied

- Loxapine is for specialist use only
- Ataluren is for specialist use only
- Sufentanil is a controlled drug

Individual Authorisation Forms

When completing this form please add the pharmacy name and contractor code of your normal work location, tick the Health Board you work in, indicate your position within the pharmacy and fax or post to the relevant Health Board number (Section 11). You can use a single form for up to three Health Boards. If doing so, tick up to three boxes and fax or post to each Board you have selected. This will ensure you are authorised to use the PGD in the Boards indicated.

Contractors must ensure that at least one pharmacist has named their premises or payment cannot be made for a supply under the PGD. Pharmacists have until **31st January 2018** to sign version 23 or payment for supplies made will be stopped (unless the PGD is signed and faxed immediately before a supply is made). Individual pharmacists are reminded that they **must sign** the most recent version of the PGD, which is usually issued twice every year. If you do not sign and fax or post each time the PGD is issued, and continue to use the CP(US) forms for supply under this PGD, you will be acting illegally.

Use your GPhC number on the Authorisation form and on CP(US) forms.

Unscheduled Care Folder and PGD available online only

The Unscheduled care pharmacy guide is now **ONLY** available in electronic format. It is the responsibility of each individual and contractor to ensure they are operating to the current, up to date version of the PGD. Health Boards will continue to issue the signed authorisation form required for the PGD to each community pharmacy, and communicate any changes related to confidential information. It will also be the responsibility of each contractor/employer to ensure the NHS Community Pharmacy internet site can be accessed by staff and locums from within the pharmacy for reference when required.
http://www.communitypharmacy.scot.nhs.uk/unscheduled_care.html

Please do not hesitate to contact NHS 24 Regional Pharmacy Advisors at pharmacyenquiries@nhs24.scot.nhs.uk if there are any queries using PGD version 23.