



NEWS/OPPORTUNITIES



Winters Coming: Winter season is fast approaching- we encourage pharmacies to start their winter planning. Now is a good time to refresh your teams knowledge of winter illness; ensure your teams and weekend staff have access to ECS and clinical shared mailboxes; take a look at your business continuity plans in case of adverse weather; know the process for unplanned closures to the board (this is on CP Lan website); & communicate with local surgeries over the festive period & public holidays. We would also encourage pharmacy teams to “get to know their pharmacy neighbours” (that is their fellow pharmacies) nearby over this winter period.

Free Flu & Covid Vaccines: We remind all community pharmacy staff that they are eligible for free NHS winter covid & flu vaccinations- please take a name badge/evidence of your role in community pharmacy to your appointment.

Pharmacy Opening hours over the Festive Public Holidays: We thank everyone for responding to the survey monkey with their preferred opening hours over the festive period, and thank those pharmacies planning to open over the public holidays providing vital access to pharmaceutical services in Lanarkshire. We will be releasing this information soon with details once collated and confirmed.

GP Practice Opening hours over the festive period: Similar to previous years, a select number of GP practices will be open on Boxing Day, the 2nd January, and on Saturdays in January 2024 to help relieve pressures on out of hours. The full list of practices due to open will be cascaded to the network as soon as they are confirmed. We encourage local communication with GP practices around these openings.

New Forms: Please be aware there are new forms updated on CP Lanarkshire website, a Joiners/Leavers/Movers Form, and a Claims Summary Form, both with helpful reminders of processes and claim dates & contacts for working within NHS Lanarkshire. We hope you find these helpful.

CD Incidents top tips: There has been an increase in reported CD incidents from community pharmacy in the last quarter. We welcome this increase in reporting and encourage this to continue. From this learning we have created a “Top Tips” document to help teams identify common causes of these incidents to prevent them from occurring. This document is at the bottom of this newsletter. We hope you find this helpful.

LET’S CELEBRATE: GOOD NEWS STORIES



THANK YOU

We had a fantastic lunch and learn “Recognising Sepsis” session for pharmacy first plus prescribers, delivered by A&E Consultant Dr Silvia Ruiz- Buitrago. The event was well attended and generated good feedback. We will endeavour to make the presentation and slides and any resources available to the full pharmacy network-



details to follow. If the network has any suggestions for another lunchtime learning session in a topic they would find useful, please email your suggestions to lauren.gibson@lanarkshire.scot.nhs.uk.

We continue to welcome our fantastic Pharmacy Champions (below in order), Alex Thurlow, Heather Donaldson, Rebecca Cowie, Hayley Henderson, Matthew Hayley & Rebecca Hills to the pharmacy network in Lanarkshire. They will be speaking with you all at our Pharmacy Update Evening on Wednesday 1st November- see you then.



All the champions contact details and pharmacy allocations are available on CP Lanarkshire's Website, we would encourage you to check which champion is allocated to your store and reach out to them. [NHS Community Pharmacy Website \(scot.nhs.uk\)](https://www.scot.nhs.uk/nhs.uk/community-pharmacy)

PHARMACY FIRST UPDATES

Winter Illness Resources We encourage teams to refresh winter illness learning & resources- a good webinar to watch is : "Pharmacy Management of Winter Illness" by Scott Jamieson TURAS <https://learn.nes.nhs.scot/44029>

Nitrofurantoin for UTI Reminder

- Nitrofurantoin treatment for UTI PGD in Community Pharmacy has been adopted for second line use within NHS Lanarkshire.
- Trimethoprim will remain the antibiotic of choice for treatment of acute uncomplicated urinary tract infection (UTI) in non-pregnant female patients over 16 years of age via community pharmacies, but nitrofurantoin will be available for consideration in patients who have significant drug interaction with trimethoprim or have a history of allergy or adverse effects to trimethoprim.
- Nitrofurantoin can only be used if a renal function assessment is undertaken and Appendix 1 of the assessment form shows how this should be done.
- At this stage we do not yet have clinical portal access for community pharmacists so nitrofurantoin can only be provided after contact with the GP surgery or OOH.
- Compared with the supply of trimethoprim this is a more complicated process for pharmacist, GP staff and patient but it is still more likely to be a better pathway than patient referral to the GP or OOH service.
- It is also expected that a high proportion of patients will be suitable for trimethoprim so this route will not often be required.

PHARMACY FIRST PLUS + UPDATES

Starting Pharmacy First Plus We encourage those qualified as an IP and interested in starting the service to check in with CP Lanarkshire Website- this contains all the information needed on getting started, ordering forms, instructions on joining the peer review group. [NHS Community Pharmacy Website \(scot.nhs.uk\)](https://www.scot.nhs.uk/nhs.uk/community-pharmacy-website)

CLINICAL SERVICE UPDATES

Addiction Services: There has been an increase in pharmacy teams reporting they have lost/misplaced prescriptions to the addictions team. This creates delays and missed doses for patients, as requires a replacement script to be written and checks taken. We ask all methadone and controlled drug prescriptions are carefully managed in your pharmacies.

Smoking Cessation: The smoking cessation section of the CP Lanarkshire website has been refreshed and updated- please take a look at the most up to date resources on here. Thank you.

Palliative Care: leaflet update – A reminder that an updated Palliative Care Network Leaflet is now live and on CP Lanarkshire’s website, there have been some changes to pharmacy names and opening times of members of this network, so we encourage teams to take a look at this leaflet. Thank you.

Controlled Drugs: There has been an increase in reported CD incidents from community pharmacy in the last quarter. Please see the “top tips” document attached below.

Gluten Free Foods Service: Formulary Update now available- please see CP Lanarkshire website.

CONTACTS

Pharmacy/Prescribing Admin Team
NHS Lanarkshire Headquarters
Kirklands, Fallside Road, Bothwell
G71 8BB
Pharmacy.AdminTeam@lanarkshire.scot.nhs.uk

Lauren Gibson
Lead Pharmacist for Community Pharmacy Services
NHS Lanarkshire
Kirklands Hospital- Bothwell
lauren.gibson@lanarkshire.scot.nhs.uk



CD Update October 23: Common Incidents and Themes

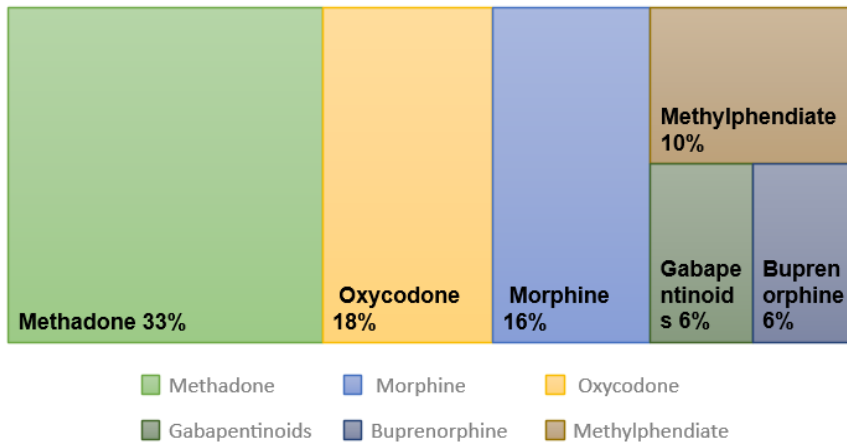
There has been an increase in the number of reported CD Incidents from Community Pharmacy (Jan – June 2023). We welcome these reports. It is by sharing these experiences that we can collectively improve.

Please continue to log incidents via the **NHS Scotland CD incident Reporting Form** – this can be accessed on NHS Lanarkshire's Community Pharmacy Homepage. Ongoing reporting and learning is vital as well as a legal requirement: The Controlled Drugs Accountable Officer (CDAO) must be informed, by law, of all incidents that involve CDs.

We have identified some common themes which we are sharing with you in this update.

Morphine, Methadone, Oxycodone & Methylphenidate <i>most common drugs involved</i>	Blister pack assembly-tablets /capsules jumping	Errors in Quantities dispensed
Balance discrepancies	Care Home Deliveries	Hospital Discharges/Changes
Instalment dispensing	Delays in updating CD Register	Interruptions & lapses in concentration

% of all incidents by BNF Drug Name

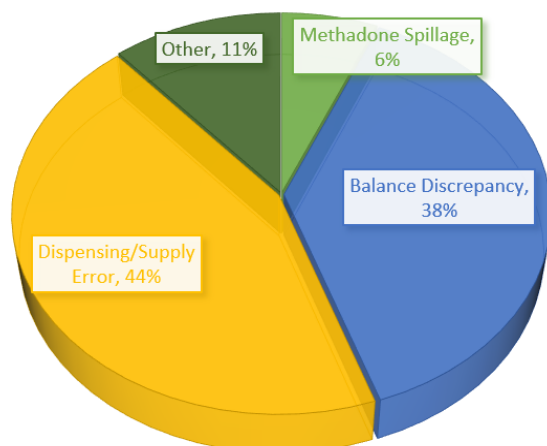


Methadone, Oxycodone, Morphine, Methylphenidate then Gabapentinoids and Buprenorphine are **most commonly reported**.

Increases in the actual number of incidents reported relating to **Oxycodone and Morphine**. The proportion of errors related to oxycodone and morphine however remains relatively fixed as there was an overall increase in reporting.

2023 saw a really significant increase in the reporting rates relating to **Methylphenidate**.

INCIDENTS BY CATEGORY JAN-JUNE 2023



The bulk of incidents relate to

- Dispensing or supply errors
- Balance discrepancies

Combined these comprise 82% of all reported incidents (38%+44%).

We have identified some common findings & themes. These are discussed overleaf.



Common themes

- Morphine, Methadone, Oxycodone, Methylphenidate- **most common drugs**
- Balance discrepancies.
- Instalment dispensing.
- Blister pack assembly.
- Care Home Deliveries
- Delays in updating CD Register.
- Quantities dispensed.
- Hospital Discharges
- Interruptions & lapses in concentration

Issue	Background	Advice & Resources
<p>Methadone: Supply errors /Dispensing errors</p>	<p>(1/3 of total incidents)</p> <p>35% of these relate to supply errors</p> <p>(wrong patient, wrong amount dispensed /handed out)</p>	<p>Best practice suggestions from colleagues include:</p> <ul style="list-style-type: none"> • Don't get complacent • Following SOPs to the letter every time means errors are less likely • Ask the patient to confirm name & DOB before each supply. • Confirm dosage • Review SOPs as a team regularly.
<p>Balance discrepancies due to one or two capsules/tablets being thrown away</p>	<p>Potential sources include tablets or capsules being lost / thrown out</p> <ul style="list-style-type: none"> • when making up Multi-Compartmental Aids (MCAs) • tablets/ capsules being cut from main blister strip and being loose in the box. 	<p>Best practice suggestions from colleagues include:</p> <ul style="list-style-type: none"> • Carry out a balance check after dispensing MCAs with CDs. • Check before binning 'empty' containers /rubbish. • If there is a split pack with loose tablets/capsules left : consider the use of a clear plastic bag to contain the whole pack
<p>Balance discrepancies going undetected for long periods</p>	<p>When investigating discrepancies, a common issue is when regular balance checks are not performed.</p> <p>The Health Act 2006 requires that anyone holding stock of CDs has SOPs in place for the use and management of CDs.</p>	<p>Follow SOPs and perform balance checks regularly and at the point of handout.</p> <ul style="list-style-type: none"> • The GPhC advises that the physical amount of CDs should be checked at least weekly in a community pharmacy. SOPs may vary – but checks should be regular. • The date on which a stock check is carried out should be recorded. • Checks on the expiry date of stock should also be carried out at regular intervals.
<p>Safe Storage of Controlled Drugs</p>	<p>Some instances reported whereby CDs subject to safe custody regulations were left out overnight or stored outside the CD cabinet.</p>	<p>Follow SOPs:</p> <ul style="list-style-type: none"> • CDs requiring safe custody should be stored in the locked CD cabinet. When not in the cabinet (for example during the dispensing process) they must be under the direct personal supervision of a Pharmacist. • <i>Access to CDs (including handling CD keys) should be documented in a policy which prevents unauthorised access to CDs (MEP July 23- 3.6.9)</i>

Adapted with thanks & permission from NHS Fife CD Governance Team