Note from the Editors
Welcome to the latest edition of the Fife Pharmacy News. As we look forward to enjoying the summer, we have a special feature on E cigarettes and Controlled Drugs, the development of CMS within Fife, the launch of the new Fife Formulary Abbreviated List, and updates from Pharmacy Services.
If you have any news/features you would like included in future issues, please contact Fiona Forsyth or Natalie Bate, Communications Specialists - Fiona.forsyth@nhs.net or Natalie.bate@nhs.net, or phone 01383 565375.

Pharmacy Bake-off for Comic Relief
The Pharmacy Services team at Lynebank held a Bake Sale on Wednesday 13 March 2013 with all proceeds going to Red Nose Day. The team baked various nibbles, Florentines, cheese straws, cakes, traybakes and cupcakes, and most of the goodies had been bought and/or eaten by lunchtime!!

At the centre of the bake sale was an amazing Red Nose red velvet cake, which made a fantastic raffle prize.

The day raised £135.55, and the event proved so popular that the team hope to repeat the event next year, but with even more baking, so that no one will be left disappointed!

New Fife Formulary Abbreviated List
Look out for your copy of the new NHS Fife Formulary Abbreviated List – for a quick at-a-glance check of all formulary medicines approved for use in NHS Fife.

This list is ideal for all pharmacy staff, medical students, GPs, nurses, PCES staff and anyone who deals with medicines and/or prescribing.

An online version (available to download to any smartphone or PC/laptop desktop) is available by clicking here: www.fifeadtc.scot.nhs.uk.

The NHS Fife Abbreviated Formulary List includes the names of medicines recommended within the Fife Formulary and is structured in line with the BNF classification. The full version of the NHS Fife Formulary should be referred to for further information, local prescribing points or for referral to local and nationally approved guidelines.

The list was updated on 1 July - if you have the April version on your phone, please download the updated version (see link above) and ensure you use the most up to date version of the list.

Further prescribing information can also be accessed from the Fife ADTC website at www.fifeadtc.scot.nhs.uk.
Stop Smoking Service
- All paperwork should be completed correctly using the current version.
- Large number of clients are “lost to follow-up” – why?
- Information and supporting paperwork to be available online.

Controlled Drugs Information
- Information and incident reporting procedures now available on the SHOW website.
- This should be highlighted to increase awareness (focusing on independents) and to direct to the correct resources to help.

Medicines Waste
- Campaign is ongoing – £147,000 saved so far.
- Further advertising materials such as Rx bag stickers and leaflets will be sent to each pharmacy soon.

Generic Email Accounts
- Please ensure these are checked regularly – nominate a “responsible” person to inform the pharmacist on duty of drug alerts, SG circulars etc.
- All information is sent out via email – paper correspondence no longer used.

Serial Prescriptions & CMS

Chronic Medication Service Serial Prescription Component—It’s Here!
As you will be aware the final component of the Chronic Medication Service (CMS), the ability to produce and dispense serial prescriptions, has been tested nationally for the past 18 months. The Scottish Government now require all Scottish community pharmacies and GP practices to be ‘enabled’ to provide serial prescriptions by December 2013.

These CMS leaflets were published some time ago but most of the information is still relevant.

The main change being that as prescriptions no longer attract a charge, all patients with a long term condition registered for CMS could be eligible for a serial prescription if deemed appropriate by their GP.

Pharmacists may also want to start to review their registrations to identify patients on stable drug regimes who might be possible candidates for serial prescriptions so that these can be identified to GPs for consideration as this has been found to be useful immediately prior to practice enablement.

Alec Murray - CMS and the future
Alec will be taking on a new seconded role at pharmacy services as CMS Implementation Pharmacist. The role will mainly focus on engaging pharmacies and surgeries in serial prescribing and will include training and facilitating meetings between the two.

"The serial prescribing element of CMS has had an sluggish start", he says, “but as the Scottish Government has committed to all surgeries and pharmacies being enabled to supply the service by Dec 2013 I look forward to the challenges of this role and the benefits of its implementation to the profession”.

If anyone would like to contact Alec with serial prescribing related issues or to register your interest in supplying this service with your surgery then please e-mail: alec.murray@nhs.net
Healthy Start Vitamins service started in May 2013, with the introduction of Healthy Start multivitamins being available from local pharmacies, giving increased access and awareness for people eligible for these vitamins.

Is it too late for community pharmacies to sign up for this service?

No, Scottish Government is allowing community pharmacies to sign up throughout the year – by returning a completed opt in form (Annex B from 1 March 2013 Scottish Government letter - see web link below) pharmacies will receive a £200 opt in fee.


Are HSV available from non-community pharmacy sites in NHS Fife?

Yes, a list of the participating Health Centres & Clinics can be found via the following web link


What happens when a patient presents a HSV voucher to a participating pharmacy?

On receipt of a Healthy Start Vitamin voucher from a patient the contractor should supply 8 weeks of vitamins and, using their PMR system, label the product.

To claim reimbursement, contractors must complete a CPUS form in the usual manner specifying whether adult or child vitamins were supplied. They should also submit to PSD with the CPUS form, the Healthy Start Coupon supplied by the patient. The Coupon must be marked with:

- Patient’s Name
- Date of dispensing
- Contractor Code

What about patients not eligible for HSV vouchers?

Patients not eligible for HSV vouchers have the option to purchase Healthy Start vitamins from contractors.

Other useful web links

The Community Pharmacy Scotland website has a podcast & a key facts sheet on HSV that can be accessed via;

http://www.communitypharmacyscotland.org.uk/nhs_care_services/

Public Health Campaigns
Summer 2013

MMR Catch-Up
17 June - 28 July

Asthma
29 July - 1 September

Medicines Safety talk to Carleton Kids

Children at Carleton Nursery, Glenrothes were given a talk on medicines safety as part of their Health Month. Natalie Bate, Communications Officer spoke to the children on the importance of only taking medicines which are meant for them, explaining that medicines may be bright colours and taste sweet but they are not sweets or for playing with. The children were also shown that every prescription medicine from a pharmacy has a label on it with their name, showing the medicine is only for them. The children left with stickers stating “only order the medicines you need” and a Just Ask your Pharmacist Beach ball.

Parents of the children were also given Minor Ailment leaflets and details of the No Butts Fife pharmacy stop smoking service. Feedback from parents and children was very positive after the talk, with medicines safety being an important message to give to children, even at a young age.

Farewell to John Wilson Dispensary Manager

John Wilson, Dispensary Manager for VHK Pharmacy department retired in May 2013. John has enjoyed a long career within NHS Fife, and has worked there for over 15 years! A farewell lunch at the Staff Club, VHK was held. We wish him well in his retirement.
In June the MHRA announced all nicotine-containing products (NCPs), such as electronic cigarettes, are to be regulated as medicines in a move to make these products safer and more effective to reduce the harms of smoking. The UK Government has decided that the Medicines and Healthcare products Regulatory Agency (MHRA) will regulate all NCPs as medicines so that people using these products have the confidence that they are safe, are of the right quality and work.

To date the limited evidence we have about e-cigarettes shows that the majority tested have significant levels of nicotine in them, therefore risking ‘ overdosing’ if used alongside NRT products or leading to difficulties in dose reduction of NRT.

**Single Client Record Form**

We get regular requests for this form which allows pharmacy staff to document the stages & events of the 12 week stop smoking course by the client. The Single Client Record Form is for pharmacy use only & does not need to be sent to the CHP services. It can be downloaded from the NHS Fife page of the SHOW website along with the other resources for the Stop Smoking Service, [http://www.communitypharmacy.scot.nhs.uk/nhs_boards/NHS_Fife/stationery/stop_smoking.html](http://www.communitypharmacy.scot.nhs.uk/nhs_boards/NHS_Fife/stationery/stop_smoking.html).

**Return of Minimum Data Set (MDS) Forms**

Please note that all three CHP Stop Smoking Services now request that all community pharmacies send a copy to them of the MDS form immediately after the initial client consultation in week one of the service. Please ensure that consent & quit date are completed prior to submission to CHP services. Pharmacies should retain a copy of the MDS form for audit purposes.

**4 Week Follow Up**

In two of our CHP Stop Smoking Services (GNEF and K&L) if the client is still attending the community pharmacy service at the time of the four week follow up, pharmacy staff should ask "Has the client smoked at all (even a puff) in the last 2 weeks" plus complete the relevant four week follow up sections of their copy of the MDS form. In DWF, community pharmacy staff are not required to complete this four week follow up section.

**Series of Fortunate Events**

On Monday 10 June from 6.30pm a Series of Fortunate Events evening on Stop Smoking - Common Challenges and their Solutions was held in the Education Centre at Victoria Hospital, Kirkcaldy.

This event was open to all grades of community pharmacy staff and attendees were encouraged to bring along examples of their own challenges from the Stop Smoking Service. Another SFE session will be held on stop smoking in September.
Pharmacies & Services
What can you help raise awareness of your services?

Pharmacies are often the first point of contact with the NHS for patients, and can see hundreds of people in a day/week.

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<tr>
<th>Barriers to raising awareness of Services in the Community Pharmacy</th>
<th>Methods and Ideas to help raise awareness of services</th>
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<tr>
<td>Patients’ unawareness of the role the pharmacist and pharmacy staff can play outside dispensing medications</td>
<td>Encourage staff to use every opportunity to promote the values of pharmacies and their unique position to provide services with no need to make an appointment.</td>
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<td>Patients’ belief they do not need clinical services</td>
<td>Expand the pharmacist-patient relationship into an opportunity (e.g. if you hear them cough, ask if they are a smoker or not, then educate them about Stop Smoking Service)</td>
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<td>Patients’ unwillingness to pay a pharmacist for services/ask for advice when always visited GP in past.</td>
<td>Target specific patient populations who have a need for the service (e.g. those who continually purchase pain relief may have issues with controlling their pain)</td>
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<td>Develop relationship marketing (e.g. Use “chat” as a way of finding out how patients really are, and if there is anything they would like more information on/help with)</td>
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<td>Take part in local and national pharmacy and health promotional campaigns (e.g. NHS Fife Medicines Waste campaign)</td>
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<td>Incorporate new innovative awareness raising ideas (e.g. Talks to local care homes/schools, Window displays, prompting staff)</td>
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Patients have always listened to their pharmacists, as they are experts in medicines and educated to degree level. People pay attention to information within a pharmacy, as they peruse leaflets while waiting for a prescription, or search the rows of OTC medicines for first-aid kit items.

People are used to searching the internet for questions on healthcare, but trust information from their pharmacist when it comes to medicines. This gives pharmacies a unique opportunity to help with both ongoing health conditions, and pre-emptive conditions, and provide healthcare advice and medicines, all with no need for an appointment and in confidence.

Community pharmacies have traditionally been involved with increasing the public’s understanding of medicines; however, the awareness of a service to patients presents a new challenge for many pharmacists. Below are some tips and ideas on how to help promote Pharmacy Services (such as Minor Ailments, CMS and Stop Smoking) within your Pharmacy.

Allergies - Fife Pharmacies can ease symptoms

With summer finally here (in between the heavy rain) people with hay fever are likely to experience symptoms such as headaches, stuffy nose, itchy throat and streaming eyes.

However, there is a way to ease the “flu-like” symptoms that come with hay fever and it does not require a trip to the doctor; your local pharmacy is on hand to help.

A wide range of medicines are available from your pharmacy for the treatment of hay fever. Community pharmacists are ideally placed to advise on choice and appropriate use of hay fever medication such as eye drops and antihistamines and on when patients need to be referred to their GP.

With convenient access to advice, information and medication, why not take advantage of your local pharmacy in order to keep allergies, including hay fever under control this summer?

PGD for Unscheduled Care

The latest PGD for Unscheduled Care has now been released - Version 15. When signing both the Authorisation form and your CPUS scripts you must now use your GPhC number, not your RPSGB number.

Stoma Regulations

Stoma fees are currently under review. Check the Community Pharmacy Scotland website for the latest information. If you need to claim any customisation and / or delivery fees you must complete and return a Stoma Application Claim form to Moira Hanley at the end of each month. If you are part of a large multiple or a small pharmacy chain please ask your head office if they claim centrally. Remember to endorse the script Cust (customise), Del (deliver) or Cust & Del (if you do both). Send completed forms either by post to: Moira Hanley at Practitioner Services or by scanning and emailing to NSS.psd-cp-claims@nhs.net.

NHS Inform - Mental Health Medication

When people are diagnosed with a mental health condition there is often a lot of information that they will need to take on board both about their prognosis and its treatment.

NHS Inform, Scotland's national health information service, helps to support people facing this type of diagnosis through it’s Mental Health and Wellbeing Zone. The zone is designed to increase understanding of a wide range of topics by providing high-quality, trustworthy information on different aspects of mental health and wellbeing. A key element of this is understanding the treatment of mental health conditions and the types of medications that are available. The Zone has now been fully updated to offer this additional information to patients.

Dr John McAnaw, NHS 24's Head of Pharmacy, explains the changes to the Mental Health and Wellbeing Zone: "One of the key questions a patient wants answered when they are diagnosed with a mental health condition is about the type of treatment they will receive and specifically about their options regarding medication. NHS Inform has now partnered with 'Choices & Medication' to provide answers to these key questions.

"By clicking on the link at http://www.nhsinform.co.uk/MentalHealth people will find a useful resource that will guide them through all aspects of medication use – what the medicine is, what it’s used to treat, how to use it, and possible side effects. We hope that both patients and professionals working in this area of health and wellbeing will find it a useful resource."
Deaf Awareness

National Deaf Awareness Week took place in May this year and highlighted the different ways of communication people use when they are hard of hearing or deaf, and ways that staff and the public can help.

Deafness or hard of hearing affects over 9 million in the UK, that is 1 in 7 of the total population. Deaf Awareness Week is a unique awareness campaign bringing together over 100 deaf charities and organisations under the umbrella of the UK Council on Deafness.

Local pharmacies are often the first port of call for healthcare advice and over the counter medicines, and with long opening hours and no appointment necessary, are one of the most accessible point of contact with the NHS on the high street.

There are many reasons why someone might be deaf or lose their hearing including age, noise-induce hearing loss, or genetics.

To highlight this year’s Deaf Awareness Week, questionnaires will be sent to all Fife pharmacies asking them questions such as:

- When was the Induction Loop installed?
- Have staff been trained in how to use it?
- Is the Loop tested regularly?
- Does the Loop work, and how do you know?

The questionnaire will be sent by Surveymonkey by email (or PDF for those pharmacies unable to access the survey), and results gathered at the end of June. Look out for it in your Inbox. If you’ve not received the email, the survey can be accessed by clicking here: www.surveymonkey.com/s/x2mlzex

Many thanks in advance for filling out this survey - its important that pharmacies in Fife are accessible for all - including those who are deaf or hard of hearing.

Controlled Drugs

Interim RPS and Home Office advice is to treat lisdexamfetamine (brand name Elvanse or Vyvanse) as a schedule 2 controlled drug when transporting, safe custody, record keeping and supply to patients until the Home Office has confirmed its legal status.
Common Themes
The following is a few common topics which have been noted during both GPhC inspections and CD inspections of GP practices.

Requisitions
- If CD stock is being transferred from one pharmacy to another with a signed requisition, the supplying pharmacy should stamp, copy and submit the original to PSD for processing.
- Pharmacies should keep a copy of all requisitions for CDs, including GP10As.
- A standard form (CDRF) has been designed for private schedule 2 & 3 CD requisitions. If anyone receives a request from a healthcare professional on any other paperwork – please contact Geraldine Smith for advice.

On occasion, some GPs have ordered and been supplied with part-packs of injections. Pharmacies are reminded that when supplying medicines in response to stock requisitions this is classed as a wholesale transaction and only whole packs can be supplied.

Extemporaneous Methadone
You may be aware that the General Pharmaceutical Council (GPhC) has approved new standards for registered pharmacies. The Council has also agreed that the supply of extemporaneously prepared methadone, as an alternative to an available licensed preparation, is incompatible with the law. An ‘exemption’ was previously granted by the RPSGB, which was adopted on an interim basis by the GPhC.

The GPhC is working with pharmacies and advising that this practice should cease by the end of September 2013 and only licensed preparations should be used.

Pharmacists should be aware that serious incidents causing harm to patients have occurred as a result of pharmacy errors in the preparation of extemporaneous methadone.

Reporting Incidents and Concerns
We have received a number of reports of wrong strength errors over the last couple of years. For example Zomorph 60mg being supplied against a prescription for Zomorph 10mg. Often the error is not noticed until a running balance check was done after the patient had collected the prescription.

The following are lessons learnt to avoid incidents happening in future:
- Dispense from the prescription – not from the label.
- Undertake a running balance check at the point of dispensing.
- Follow SOP regarding checking of CD’s.
- Ensure where possible 2 people are involved in dispensing and checking of CD’s.

If you have any concerns about the management and use (including prescribing) of controlled drugs, these may be raised in confidence with Geraldine Smith (lead Pharmacist for controlled drugs) at Geraldine.smith3@nhs.net or call 01383 565867 or Evelyn McPhail (Accountable Officer).

Methadone Dispensing Errors
A number of methadone dispensing errors, resulting in patients taking the wrong dose, receiving an additional supply or receiving a dose before the prescription is legally due to start, have been reported to the Accountable Officer (AO). The errors mainly involved the supply of the wrong patient’s medication, which is in itself a breach of confidentiality. For example siblings have received each other's or patients with similar names have responded to the request to collect their medication.

Pharmacists and their staff require to be extremely vigilant as any such error could have serious consequences for the patient.
- Pre-prepared dose of methadone is checked against the original prescription.
- Supply records for that day are checked to ensure the patient has not already been supplied with their daily dose.
- Patient is asked by the person supplying the methadone to state their name plus date of birth or address.
- Patient is asked what dose they normally take and confirm this is the same as the dispensed dose immediately prior to supply.
- Patient is asked to verify labelled bottle before administration / supply.
- Prescriptions are highlighted and double checked to confirm start date and finish date.

Should the wrong dose be given to a patient, every attempt must be made to contact them to inform them of the error and to ensure their safety. The prescriber must also be contacted as well as the AO.

*Learning from events - Situation
A patient was able to obtain several months supply of excessive amounts of a Schedule 2 Controlled Drug from two pharmacies within Fife, with valid prescription from England and Fife running concurrently.

Background
A patient who was registered in a practice in England, but due to family reasons was spending several months in Fife over a few years. The patient became well known to the temporary resident (TR) practice in Fife, and continued to write prescriptions for the patient, without doing the usual checks with the English practice. The permanent practice supplied a month’s quantity, as patient stated that they were going on holiday, instead of usual 2 weeks supply. In doing so the practice unfortunately permanently changed the repeat order to a months supply every 2 weeks. The Accountable Officer (AO) from the English trust reported the incident to the AO in Fife.

Learning from Events
- Neither the Fife GP practice or the community pharmacy reported the incident to the AO. All incidents involving CD’s must be reported to the AO in order to learn from the event and any resulting actions that require to be put in place. It allowed us to send out a yellow peril alert in case the patient was registered with more than one Fife GP practice.
- Community Pharmacy had phoned the GP practice in England to confirm he still wished the supply to be dispensed as the patient had just received a supply from the Fife practice. The Fife practice at that time was not informed that the patient was receiving a supply from the English practice- could the supply chain from the 2 GP’s have stopped then?
- The patient used two pharmacies within Fife, so was never identified as being supplied with excessive quantities. The patient was also using a Fife address and an English address, but that was not picked up until several months of supply. Do identical names for the same medication in the CD register raise an alert? Usually prescriptions from outwith Fife are dispensed on a one off occasions. Do prescriptions dispensed on a regular basis raise a red flag to be discussed with the AO?

Learning from this events specific to GP practices have also been circulated

Geraldine Smith, Lead Pharmacist Controlled Drugs