**Key Messages 07/04/2020**

Dear Colleagues,

This sort of feels like the calm before the storm but I am aware that there are still lots and lots of planning, organising and arrangements going on behind the scenes – for us as well as for you too.

A few things to bring to your attention today:

**MESSAGE FROM GAIL CALDWELL DIRECTOR OF PHARMACY**

Thank you to all our pharmacy staff who are working hard on many occasions on very different issues that are not routinely part of the day job! Staff are demonstrating pragmatism, flexibility, team working and innovation in the most challenging circumstances that I think we will ever face in our careers.

I recognise the pressure staff are under to balance the challenges of working during the pandemic with their personal responsibilities and emotional well-being and urge everyone to look after their own well-being and that of their colleagues.  Everyone will find different ways to cope with the challenges and to that end we will aim to share a range of useful resources in these updates.  Anything you would like to share that might help others would be welcomed.

The field hospital NHS Louisa Jordan is being set up on the Scottish Exhibition Centre site.  Susan Roberts, Associate Postgraduate Pharmacy Dean at NES, and previous interim Director of Pharmacy at NHS Dumfries and Galloway has been appointed as Chief Pharmacist and we will share any details relevant to NHS GGC pharmacy staff as we have them.

**FREQUENTLY ASKED QUESTIONS**

To help support our community pharmacy colleagues, we have put together an FAQ document (see attached). Content is correct as of today (7th April) and any updated advice will be posted via this email route and posted on the CPDT website so please ensure that you check the most recent communications for any updates.

**EASTER WEEKEND OPENING**

Please refer to a communication from Alan Harrison earlier today with regards to opening on Easter Monday. As Good Friday is not a public holiday in Scotland, most of the network will be open anyway.

**IMPROVING COMMUNICATIONS**

Alan has also shared an email earlier today with regards to arrangements for payment of a Pay-As-You-Go mobile to help improve communications between GP practice/Addiction Services/Eagle Couriers etc and community pharmacy contractors during the current situation. This phone number should not be used for patient/public calls.

All that we would ask is that you return the completed claim form (see original email) for the £20 payment for the phone and a note of the relevant phone number that will be used in this way. You should then contact your local GP surgery with this number and we will ensure that other services e.g. Addiction Services etc are provided with it. The mobile will remain your property.

More information is contained within the original email.

Regards

Elaine

Elaine Paton | Senior Prescribing Adviser | NHS Greater Glasgow and Clyde

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**COMMUNITY PHARMACY**

Frequently Asked Questions – COVID-19

***Please be aware this information is correct at the time of issue. We will strive to keep this up to date; however, given the rapidly evolving situation it would be important to remain alert to emerging as well as changing information. The document is to support professional decision making and should not be substituted for your own professional judgement.***

**Have the GP surgeries closed?**

No. GP surgeries remain open, but most are operating via telephone triage and only seeing emergency patients. If you are struggling to contact a practice due to increased volume of calls it may be appropriate to discuss alternative methods of communication with them such as emailing your clinical mailbox.

**Are GP surgeries issuing prescriptions early?**

Most GP surgeries are encouraging patients to only order what the need when they need it. However, it is appreciated that it may take patients longer to receive their prescription due to pharmacy workload and relying on deliveries or family members collecting medicines for those self isolating. Most surgeries have, therefore, relaxed their ordering slightly to allow patients to order up to 2 weeks earlier than we would expect them to need it.

**Can I reduce my pharmacy’s opening times?**

The Health Board has agreed a revised set of Model Hours which is the minimum level that community pharmacies are expected to provide during the COVID-19 crisis. They have asked pharmacies to operate within the Model Hours of Service Scheme which are:

**Monday – Saturday 10.00am – 5.00pm**

**Lunchtime - One Hour**

If you can operate within the above hours there is no need to inform the Health Board. If you feel you need to reduce your hours further than this **OR** if you are an extended hours pharmacy (e.g. would normally be opened after 6pm) you **must** inform the Health Board using the pro-forma - link below.

<https://www.communitypharmacy.scot.nhs.uk/media/2401/model-hours-interim-measures-20032020.pdf>

If you are operating reduced hours, please allow access to colleagues supporting an NHS or HSCP name badge out with the new hours and if phone calls are coming into the pharmacy in what are the normal core hours then the call is answered.

**Can I reduce what Community Pharmacy Services I make available to patients?**

NHS Greater Glasgow and Clyde acknowledge that during the COVID-19 pandemic community pharmacies will be experiencing increased workload and as a result may have to reduce / stop core services.

Harry McQuillan from CPS has acknowledged this and advised CP that they should focus on dispensing and the Minor Ailment Service. Which should include delivery of Unscheduled Care, EHC, Paracetamol, UTI and Impetigo PGD’s when necessary.

Advice on reducing or altering some services has been made available in the CPDT COVID-19 Key Messages of the Day. <https://www.communitypharmacy.scot.nhs.uk/nhs-boards/nhs-greater-glasgow-clyde/>.

**What is happening to patients who want to return unwanted medicines during the Covid situation?**

NHS inform have issued advice that patients do not return medications until the Government has removed the instruction for everyone to stay at home. When this has been lifted, patients can return unused medications to their community pharmacy for disposal.

Patients can only return medicines if they don’t have symptoms or aren’t self-isolating for 14 days. When returning medication patients are advised to:

* wipe the outside of the bottle or packaging with a damp cloth using usual detergent
* place in a plastic bag
* separate any medicines with needles or controlled drugs from other medicines

In the event of the stay at home restriction being lifted, normal patient return of unwanted medication processes should be re-instated. The GPhC has previously highlighted good practice in handling returned unwanted medicine where a pharmacy:

* used a large tray, gloves and forceps to avoid handling the medicines
* immediately recorded patient-returned CDs in a separate book kept for the purpose and placed them in a clearly labelled bag in a segregated section of the CD cabinet for subsequent disposal
* separated hazardous medicines (e.g. cytotoxic and cytostatic preparations) into a separate hazardous waste bin for disposing of them safely
* the rest of the returned medicines were placed in a separate area of the pharmacy, away from other stock, before having any patient details removed and being placed in the approved containers for disposal
* the pharmacy also took steps to ensure that people only requested what they needed.

**Are GP practices allowed to phone or email prescriptions even though they may take longer than 72 hours to provide the prescriptions?**

In the current situation, if there are concerns that the follow up prescription may not be received within the specified timeframe of 72 hours, the pharmacist should seek

confirmation (written, if possible, but this may be difficult to do!) that the prescriber will supply the prescription as soon as is reasonably practicable. The pharmacist should make a record of any such supply, as usual, and retain the communication with the prescriber and follow up after the supply to ensure the prescription is received. The key bit is to try and get the prescription as soon as reasonably possible.

**Are primary care pharmacy teams supporting community pharmacy?**

Pharmacy Services have developed a process for community pharmacies requiring support. This ensures that any NHSGGC staff resource available to help can be used to the best effect.

Prior to contacting Pharmacy Services, please ensure you have actioned any contingency plans, discussed with your area manager/owner/superintendent pharmacist where applicable and discussed available support with your ‘buddy’ pharmacy. If you still required support Pharmacy Services can be contacted using details below:

* 0141 201 6047 (first point of contact)
* 07772 586 994 (if main number busy)
* gg-uhb.cpdevteam@nhs.net (if no reply from either number)

Issues should be reported by phone between 8am - 9am Monday to Friday where same day response is required. These contact phone numbers and email address will be staffed

Monday to Friday from 8am – 2.00 pm. The full process can be accessed below:

<https://www.communitypharmacy.scot.nhs.uk/media/2424/covid19-poster-for-pharmacies-requiring-support.pdf>

**How do I deliver consultations for EHC and Pharmacy First while maintaining social distancing?**

It is acknowledged that during the COVID-19 pandemic there may be circumstances where an EHC or Pharmacy First consultation cannot take place face to face. The pharmacist should assess any such requests and may wish to consider carrying out consultations via the phone. The pharmacist should make full use of any PGDs and their own professional judgement.

**Minor Ailment Service (MAS) – who is now eligible?**

MAS has now been extended to anyone who is registered with a GP practice in Scotland on a permanent basis or who is registered with Defence Medical Services. It should be noted that residents of care homes and people who are registered with a GP practice on a temporary basis are **not eligible** for MAS. The patient still needs to be registered and every new patient who historically could not access MAS should be registered as having a War Pension exemption certificate (Exemption F). All claims should be submitted electronically via PMRs as normal. You can find further information on extended MAS at

[https://www.sehd.scot.nhs.uk/pca/PCA2020(P)06.pdf](https://www.sehd.scot.nhs.uk/pca/PCA2020%28P%2906.pdf)

Roll out of the new pharmacy first service has been paused at the moment.

**What can I do if I encounter medicines supply issues?**

We are aware that an increase in demand has caused a shortage of some medications. You should continue to follow Community Pharmacy Scotland [Shortages Guidance](http://www.staffnet.ggc.scot.nhs.uk/Clinical%20Info/Documents/CP%20Medicines%20Shortages%20Guidance.pdf%22%20%5Ct%20%22_blank).

Where available, NHSGGC advice on specific shortages will be posted on the [Staffnet Current Medicine Supply Problems and Shortages page](http://www.staffnet.ggc.scot.nhs.uk/Acute/Division%20Wide%20Services/Pharmacy%20and%20Prescribing%20Support%20Unit/Medicines%20Information/Pages/MedSupplyProbs.aspx).

Please also continue to use the NHSGGC Pharmacy Services generic email address (PRESCRIBING@ggc.scot.nhs.uk) to report shortages and seek advice. This email inbox continues to be regularly monitored during the Covid-19 pandemic.

**Can I change my daily dosage system (DDS) patients to original packs?**

If you have risk assessed your patient and feel they are able to take their medicines as prescribed from an original pack, without prompting, you can use your professional judgement to remove them from DDS dispensing. Please inform the practice so the prescriber is aware of this decision and be mindful of patients who may have home care support. You may need to consult your local HSCPs medication policy.

**Do I have to supervise my patients receiving opiate substitution therapy?**

Supervision frequency has been reduced for many patients however some patients continue to require daily supervision. A short guidance document prepared by NHS GGC Alcohol and Drug Recovery Service on the instalment and supervision of opiod substitution therapy in community pharmacies can be found at: <https://www.communitypharmacy.scot.nhs.uk/nhs-boards/nhs-greater-glasgow-clyde/>

**Should I be breathalysing patients who receive disulfiram?**

No. You should assess the patient objectively as you would for opiate substitution therapy.

Doses should still be refused if in your professional judgement a patient is under the influence of alcohol. Concerns should still be reported to the Alcohol and Drug Recovery Service within 24 hours.

**How can I minimise risk of COVID-19 transmission within/outside my pharmacy?**

Please refer to the joint letter issued by the Royal Pharmaceutical Society (RPS), Association of Pharmacy Technicians UK (APTUK) and the pharmacy regulatory bodies across the UK: <https://www.rpharms.com/Portals/0/RPS-SocialDistancing-Letter-002.pdf>

* Discourage patients to wait in groups for the pharmacy to open – ensure you have clear signs advising social distancing.
* Discourage patients to wait in the pharmacy for prescription and consider measures such as texting to advise when scripts are ready for collection.
* Restrict the number of people entering the pharmacy at any one time.
* Tape marks on floor to highlight 6 feet/2 metre safe distance from the counters and from each other.
* Consider all available options to protect your teams – for example Perspex screens, visors etc.
* Regularly clean counters and any waiting areas as airborne viruses can settle on hard surfaces and remain infectious.
* Ensure staff wash hands/use alcohol hand gel regularly.
* Reduce access to the consulting room- only use when absolutely necessary and ensure it is cleaned after any use.

**What Personal Protective Equipment (PPE) should I be using?**

PPE – Gloves and aprons have been delivered out to every community pharmacy in Scotland. These are for the purposes of deep cleaning.

Instructions for deep cleaning can be found here:

<https://www.hps.scot.nhs.uk/web-resources-container/covid-19-guidance-for-primary-care/>

Where community pharmacy staff are working in an area with possible or confirmed case(s) of COVID-19 and are unable to maintain 2 metres social distance, then Health Protection Scotland recommends that these staff members should use Fluid-resistant (Type IIR) surgical mask for single session use , where a single session refers to a period of time where a health care worker is undertaking duties in a specific care setting/exposure environment.A session ends when the health care worker leaves the care setting/exposure environment. PPE should be disposed of after each session or earlier if damaged, soiled, or uncomfortable

**Can I be tested for COVID-19?**

Staff who develop symptoms consistent with Covid-19 **MUST** stay at home for 7 days from the start of your symptoms, even if you think your symptoms are mild and if you would normally continue to work. If you develop symptoms whilst at work, you should stop seeing patients and return home immediately in order to self-isolate there.

If you are a healthcare worker **without symptoms** but with a **symptomatic household member:** Inform your manager. Testing of the symptomatic household member may be provided where needed to maintain service provision, as a negative result may enable the staff member to discontinue isolation and return to work sooner than 14 days.

An application for testing can be accessed via the form circulated by the community pharmacy development team.

Please note testing is for symptomatic household members of healthcare workers **without symptoms. Testing is not for healthcare workers with symptoms**.

**Am I still expected to submit my revalidation records?**

The GPHC have released the following statement:

*‘Due to the challenges and pressures on the pharmacy sector at this time, and the increasing number of cases of COVID-19, we have decided to postpone the revalidation submission date for those registrants who are due to submit between 20 March and 31 August 2020 (inclusive).*

*Those registrants with a submission date between March and August 2020 will not be required to submit their four CPD records, one peer discussion and one reflective account on their normal submission due date. Instead, they will be required to submit their full revalidation record on their normal submission due date in 2021; i.e. with their renewal in 2021.*

***Please note that all registrants will be expected to renew their registration as normal in 2020; the postponement only applies to the submission of revalidation records.***

*We will review the situation for registrants due to submit their revalidation records after 31 August 2020 at a later date and will keep you updated.’*

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**Further information and useful links**

GPhC Website

<https://www.pharmacyregulation.org/contact-us/coronavirus-latest-updates>

Health Protection Scotland Website

**<https://www.hps.scot.nhs.uk/a-to-z-of-topics/covid-19/>**

Community Pharmacy Website – NHS GGC

**<https://www.communitypharmacy.scot.nhs.uk/nhs-boards/nhs-greater-glasgow-clyde/>**

In particular, the Index of Communication, daily key messages and CPS videos.

RPS has opened some of its most popular reference sources to non members

<https://www.rpharms.com/about-us/news/details/MEP-and-our-most-popular-Pharmacy-Guides-now-available-for-whole-profession>