

Community Pharmacy Communication Update



Thursday 18th April 2024

REMINDER	Chronic Obstructive Pulmonary Disease (COPD) Exacerbation
	The COPD SLA has been updated on the CPDT website here.
	V6 contains minor changes as per the Version Control at Section 15 (Page 12).
	These changes do not constitute any material change to the Service Specification within the SLA and as such this notification is provided for information only, and there is no need for Participants in the service to resubmit their agreement to Participate.
	Thank you for your continued co-operation.
	Janine Glen 15/04/2024

REMINDER	Valproate Risk Assessment - sample form
	Last November the MHRA updated its <u>guidance</u> on the dispensing of valproate containing products for both male and female patients.
Valproate Risk CP Assessment Exempti	If it is felt that a patient is not suitable for original pack dispensing, a risk assessment should be undertaken to confirm this.
Attached	Attached is a sample risk assessment that you may wish to use for this purpose."
	Pamela Macintyre 15/04/2024

REMINDER	OST- Patient choice
	The <u>Prescribing Guidelines for Medication Assisted Treatment with Opioid Substitution</u> <u>Therapy (OST)</u> were updated in June 2023.
	As stated in these guidelines, there should be <u>no barrier</u> to a patient's choice of OST preparation. This includes a patient's choice to be prescribed sugar free methadone.
	If you experience any issues obtaining stock of OST medication please do not hesitate to contact a member of the ADRS Central Pharmacy Team via adrs.pharmacyteam@ggc.scot.nhs.uk
	Jennifer McDaid 15/04/2024

REMINDER	Arrangements For The Uplift Of Patient's Returned Medicine Waste
	During our visits to community pharmacies, we have heard anecdotal evidence of pharmacies being approached by patients asking for them to take returned medicine waste citing that other nearby pharmacies have declined to accept the waste because their bins are full.
	We thought it might be helpful just to reiterate the current arrangements for the uplift of patient's returned medicine waste.
	Every pharmacy receives an uplift either every 12 weeks, or every 8 weeks (depending on historical volume and storage capacity). Where a pharmacy requires an uplift outwith this schedule, they should make contact with the CPDT to arrange an ad hoc uplift.
	The contact details for arranging an ad hoc uplift can be found on the Useful Contact Sheet (that every pharmacy should have on display).
	It is important that patients are able to dispose of their medicine waste via every community pharmacy in the GGC network and refusal to accept should be a last resort.
	Thank you for your continued co-operation.
	Janine Glen 15/04/2024

REMINDER	UPLIFT TO FEES – 2023/2024: BACK PAYMENT
	We recently communicated that Pharmacy Services was successful in securing an uplift of 5% to the fees for some locally negotiated services, and that a back payment would be made in April to reflect the new fees from 1st April 2023.
	The back payment was planned to be made in April 2024 (dispensed February 2024).
	Unfortunately this has been delayed by one month, and will now be paid in May 2024.
	Apologies for any inconvenience this may cause.
	Janine Glen 15/04/2024

REMINDER	UPDATE: Submission Of PGD Authorisation Sheets
	As you will be aware, the Community Pharmacy Development Team (CPDT) have introduced an Electronic Form for all PGD submissions with effect from 1 st April 2024. The form can be accessed <u>here</u> , The link can also be accessed from the front and PGD pages of the CPDT <u>website</u> .
	A pharmacist contacted the Board recently to ask what should be done if one of the PGDs below was selected in error. In this situation, pharmacists should click on the rubber icon (circled below) to clear the selection and start again.
	Mani Narwan 16/04/2024

IMPORTANT INFORMATION	FairWarning – Appropriate Access to Clinical Records
	The Board has a moral and legal responsibility to protect the confidentiality of the data it holds and patients expect the information we retain about them will be kept secure and confidential. Your job role may give you access to patients' clinical information and you are reminded of your responsibility to access only the information that is required to allow you to carry out your legitimate duties.
Fairwarning.pdf	To protect against inappropriate access to records, the Board continues to use an audit system called FairWarning which was put in place to provide assurance that clinical information is kept safe. The system provides the Information Governance Team with
Attached	daily audit reports from clinical systems which allows them to monitor and investigate any potential inappropriate access to records, including staff accessing their own records and those of family members. If, after investigation, a record is found to be accessed inappropriately, then a formal discussion between the member of staff and manager will take place and depending on the severity of the breach, there could be a number of consequences including refresher training and/or formal disciplinary action. Some good practice tips are:
	 Never share passwords with other colleagues or managers. Keep your LearnPro Safe Information Handling Training up to date. <u>learnPro NHS - Login (learnprouk.com)</u> Be familiar with the FairWarning guidelines:
	Staff are reminded that if they wish to access their own health information, they should submit a subject access request. The Board's Subject Access Policy provides the relevant information and forms needed and can be found here <u>Subject Access Policy</u>
	If you have any questions on FairWarning or data protection in general, including training, please visit our Information Governance Knowledge Hub here Information Governance Knowledge Hub or contact the Information Governance Team at: data.protection@ggc.scot.nhs.uk.
	Catherine Scoular 08/04/2024

IMPORTANT INFORMATION	Sharing of identifiable information
	In light of incidents that have occurred in relation to the misappropriation of prescriptions by staff to obtain controlled drugs I would be grateful if you could circulate the following information received from the information governance team to all practices please.
	'It is important to share information to alert other organisations to misuse of controlled drugs incidents. Initial sharing can take place, including a description of the incident, drugs involved and action taken however care should be taken not to identify any individual directly. There may be scope to share minimum personal data based on individual circumstances but further advice should be sought from the Information Governance Team before any identifiable data is shared'.
	It is important to note that each situation should be looked at individually and engagement with the Information Governance team should be made early to discuss what can and can't be shared.
	Further work will be investigated with the Regional Intelligence network around engaging with contractors to sign up to data sharing agreements.
	Alan Harrison 08/04/2024

IMPORTANT INFORMATION	Medicines savings
	As you are may be aware, medicines costs are rising significantly and there is also an increasing volume of prescriptions as we recover from the pandemic. Alongside this, demand and complexity of care across NHS GGC is increasing post-pandemic and the population is increasing. All of this is resulting in a significant financial pressure to NHS GGC where the savings required to close the current gap between funding and costs in the 2024/25 financial year is growing all the time. The primary care team are working on efficiency savings projects and polypharmacy reviews which will result in some savings, but this will not close the gap to the extent needed. So we need your help too.
	 Some actions in Community Pharmacy which may help are listed below: Recommend the most cost-effective alternative available when medicines are in short supply. See medicines-shortages-guidance.pdf (scot.nhs.uk) Encourage patients/prescribers to adhere to generic medicines prescribing policy and NHSGGC formulary medicine choices Please do not create an expectation that a branded or non-formulary medicine will be prescribed by an NHS prescriber. e.g. medicines initiated within a private episode of care. Check what items a patient needs prior to requesting repeat prescriptions within managed repeat services, do not assume they need all items e.g. GTN sprays, Salbutamol inhalers, emollients Check what 'prn' items a patient needs at each serial prescription supply, only supply what the patient needs and requests. Request GP practice remove any medicines a patient is no longer taking if active on repeat list. Highlight to the primary care Pharmacy team if you are receiving a high volume of avoidable returns from care homes Discourage NHS supply of medicines that are cheap to purchase and don't offer NHS supply to patients on Pharmacy First when seeking to buy OTC e.g. paracetamol, antihistamines especially when made as a direct request
	If you have any other suggestions for how we can reduce spend on medicines, please let us know by emailing ggc.cpdevteam@nhs.scot
	Alan Harrison 08/04/2024

IMPORTANT INFORMATION	NES Frailty event
	Frailty - Know the Score! Interactive Webinar - Wednesday 24th April 19:00-
	20:30pm
	Link to Book - Frailty: Know the Score! Turas Learn (nhs.scot) (please log in to Turas
	then click link!)
	Would you like to know more about frailty?
	Would you like to understand the impact of medicines linked to frailty?
	Would you like to support patients living with frailty?
	We know that frailty impacts on a large percentage of the population, and this is growing
	exponentially. Patients living with frailty need support in all healthcare settings to live
	with long term conditions and the pharmacy team have a key role in supporting
	medicines review.
	This webinar is designed to open up conversations with pharmacy teams to better
	understand frailty and improve knowledge on the medicines that impact on this condition.
	To deliver this we will use case studies and provide a list of useful resources that support
	this learning.
	Learning aims:
	To help pharmacy teams improve their knowledge and understanding of people living
	with frailty and the impact of medicines on frailty.
	Learning outcomes:
	At the end of the event you will be able to:
	1. Understand what frailty looks like in different healthcare settings.
	2. Explain the different tools used to identify frailty and how to apply them in practice.
	3. Understand the impact that medicines have on patients living with frailty.
	4. Demonstrate the principles of polypharmacy review and medicines de-prescribing for
	patients living with frailty.
	Lynsey Boyle 08/04/2024

IMPORTANT INFORMATION	Smoking Cessation recording on PCR
	The smoking cessation support tool assessment in the Pharmacy Care Record (PCR) has been updated and improved.
Smoking Cessation PCR.pdf	Details of the changes are in the document attached.
	The PCR User Guidance has been updated to reflect the changes and is available on the 'News' page of the Community Pharmacy Scotland Website or from the Pharmacy Health Improvement Team email pharmacyhit@ggc.scot.nhs.uk or call us on 0141 201 4945
Smoking Cessation recording.pdf	Assesta Dabb
5.	Annette Robb
Attached	08/04/2024

IMPORTANT INFORMATION	Specials A-Z GGC CP December 2023 – March 2024 REVIEW DELAYED
PDF	PLEASE NOTE: This resource has exceeded its review date. Please exercise caution in the current use of the resource.
Specials A-Z.pdf	Alison McAuley
	Central Prescribing Team
Attached	08/04/2024

IMPORTANT INFORMATION	FOR FLU PARTICIPATING PHARMACIES ONLY: End Of Flu Service 23/24
	I would like to take this opportunity to thank you for the part you have played in the Flu Vaccination programme for 2023/24.
	6624 vaccinations have been completed throughout the CP network over the 6- month period that the service has been in place. We had 102 pharmacies actively take part covering all parts of NHS GGC.
	The current programme ceased on Friday 29 th of March , with no access to flu vaccines for patients available thereafter. With this in mind I would like to ask that all residual stock of vaccines after this date are placed within your normal patient returned waste bins for destruction.
	Can all pharmacies also ensure that all vaccinations administered have been recorded through VMT?
	Our team is currently liaising with our waste contractors to arrange the uplift of the clinical waste bins that were provided for depositing administered vaccines. Further information will be sent out in due course.
	There will now be a review period for the whole vaccination programme with a view to deciding what 2024/25 will look like.
	We are looking to determine the number of unused vaccines within the Community as part of our review period. If you could please complete the Electronic Form: <u>https://forms.office.com/e/wJzPujReeu</u> , this will allow us to forecast for the 24/25 programme.
	Once again, a huge thanks for your input this flu season.
	Mani Narwan 04/04/2024

Any queries should be directed to the contact provided – where no specific contact is shown, queries should be directed to <u>ggc.cpdevteam@nhs.scot</u>

We are keen for any feedback you have about this Update. Please submit your comments/suggestions to: cpdt@ggc.scot.nhs.uk