



Pharmacy Services

NHS Ayrshire & Arran

Community Pharmacy Script

Friday 9th May 2025.

No: 10

CONTENTS

Pause For Thought

Communications Summary:

This Week's Key Messages:

RPS Scotland Conference August 2025

CP PLT

Final Reminder: CPIP IP Mandatory & Desirable Courses

Cessation Corner #3

Pause For Thought: Using Appropriate Prescribing to Support Patient Care & Ease System Pressures during Periods When GP Practices Are Closed

With Bank Holiday season upon us, system pressures can feel challenging for all sectors, particularly for our community pharmacies who may be closed an extra day or operating on a bank holiday with reduced hours and staffing. For those pharmacies who do operate on a bank holiday, there may be an increased number of "out of hour" prescriptions being issued and patient requests for unscheduled care. In addition to feeling unwell, patients often have to travel further distances to collect acute medication on these days if their regular community pharmacy is closed.

During a recent Bank Holiday, a patient had been prescribed Stemetil tablets as an "out of hour" prescription. What the patient thought was a straight forward prescription request that could be fulfilled easily, turned out to be a very challenging experience during a period when they were feeling particularly unwell. The patient attended a number of pharmacies who were open on the bank holiday but due to the pharmacy having no stock of Stemetil, the patient was told the prescription could not be fulfilled and directed to try another pharmacy. The patient eventually managed to obtain a generic supply of Prochlorperazine from a pharmacy with the pharmacist completing an unscheduled care for this medication.

Reflecting on this scenario and your practice ahead of the upcoming Bank Holiday on the 26th May, if you were faced with a similar situation to above, would you be confident to prescribe the generic version of Stemetil to the patient or would you send them away to try to obtain from another pharmacy?

Would you contact ADOC/"Out of Hours" and request a new prescription to be written?

How would you have felt if you were the patient or someone trying to collect this medication on behalf of a family member or friend?

For prescribing guidance during Bank Holiday periods or when GP Practices or the patient's regular pharmacy is closed, the following links can provide guidance and support as to how to support patient care and ease system pressures:

[Unscheduled Care – Community Pharmacy](#)

[Emergency Care Summary – NHS Ayrshire & Arran](#)

RECENT COMMUNICATIONS SUMMARY

Friday 25th April - ClincialPCT – Weekly Communication

Tuesday 29th Apr - aa.cpteam – Drug Alert Class 4 Pregabalin

Friday 2nd May – ClinicalPCT - Circulars PCA2025-(P)-07 and PCA2025-(P)-08

- Product Recall Patient Monitoring Devices and Wall Systems; Manual Blood Pressure Gauges and Cuffs FA-2025-007

aa.cpteam – PGD Extensions

Wednesday 7th May – aa.cpteam – REPORTING KNOWN OR SUSPECTED ILLICIT SUPPLY OF OBESITY MEDICINES SEMAGLUTIDE (WEGOVY®) AND TIRZEPATIDE (MOUNJARO®)

Thursday 8th May - ClincialPCT – Circular PCA2025-(P)-09

Friday 9th May – aa.cptem – Class 4 Medicines Defect Alert Blumont Pharma Ltd Chloramphenicol 1% eye ointment

This Weeks Key Messages

RPS Scotland Conference August 2025

The RPS Scotland Conference, is taking place in Glasgow on Friday, 22nd August 2025. As part of the agenda, there is going to be a 'trailblazer' session to highlight innovative work and inspiring voices across the profession. RPS would be delighted if you would consider if there is anyone within your area who you would like to put forward for this exciting part of the agenda.

If you would like to suggest someone or know of anyone who would be interested in being involved, please complete the expression of interest form below or forward to the individual and ask them to complete by 28/05/2025.

[Friday 22nd August - RPS Regional Conference Glasgow Trailblazer Talk: Nomination Form](#)

For more details about the session and the wider conference, please see the webpage below:

<https://events.rpharms.com/website/16536/>

Community Pharmacy Protected Learning Time – CP PLT

Following on from the success of last year's first cycle of CP PLT, we are pleased to announce its return for 2025. We plan to run this much in the same way as last year with pharmacies given the choice of days in which to close for a morning or afternoon to undertake training or activities much in the same way as has been long established for GP surgeries. We will send out more detailed information in due course alongside feedback received from the network on their experiences and suggested activities to consider for this next cycle of CP PLT. For multiples, we will liaise with owners, area managers or superintendents in the first instance.

Reminder - CPIP Mandatory and Desirable Courses (CPIP Only)

As per email sent 11th April 2025, a reminder for all community pharmacy independent prescribers to please complete the following form by **Wednesday 14th May** detailing if they have completed the IP NES mandatory and desirable courses.

The form can be accessed via the adjacent QR Code or on the following link:

<https://forms.office.com/e/BtupcQsZre>



Cessation Corner - #3

I'm Kerry Ingram and I work for Quit Your Way (QYW) in Ayrshire. Over the next few issues, I'm going to be writing about all things smoking-related, with the purpose of helping you to better support your smoking cessation clients.

If you have any questions, please contact me. My email address is Kerry.Ingram@aapct.scot.nhs.uk

piCO Smokerlyser

What is it? A Smokerlyser is used to measure the amount of CO (carbon monoxide) levels in exhaled breath. If someone smokes, the amount of CO in their breath will be much higher than someone who doesn't smoke. Using an e-cigarette (vape) does not produce CO.

A smokerlyser reading should be taken and entered on to PCR at:- the day of sign up, at the 4-week follow-up and at the 12-week follow-up.

What does the reading mean? As a rule of thumb, the higher the CO reading, the more nicotine dependent the client is likely to be. It's also common for people who smoke the same amount, to have different CO readings. One person may inhale deeper than someone else and their CO level will show higher if they've recently smoked a cigarette, rather than having smoked one a few hours previously.

Many clients like getting their CO level taken regularly as it shows their progress. It only takes 24-48 hours for the CO level in the breath of a smoker to drop to that of a non-smoker.

How can it benefit your clients? A smokerlyser is a good tool for starting a conversation about how smoking directly affects health. You can't smell it, see it or taste it however carbon monoxide stops blood from carrying as much oxygen. This means organs in the body don't get the amount of oxygen they need, and the heart must work harder to supply the body with oxygen. This increases the risk of heart disease and stroke. The good news is that when someone stops smoking within the first 24-48 hours, they will have improved blood circulation and more oxygen being delivered around their body meaning they could feel less tired, more energetic.



Component parts

The D-Piece. The D-piece (see Fig. 1) fits directly into the front of the Smokerlyser and should be replaced monthly.

The Mouthpiece (see Fig. 2). The single-use mouthpieces fit directly into the D-piece. This is what you will ask your client to blow into to take their CO reading. After the client has used it, it should be disposed of.

Wipes. Clinell wipes can be used to clean the surface of the unit. Each wipe should only be used once. Never use wipes containing alcohol as these can interfere with the unit readings.

Batteries. Each piCO Smokerlyser takes 3 x AA batteries. These will be supplied with the initial unit. Additional batteries can be purchased by Community Pharmacy.

Fig. 1



Fig. 2



Understanding the Readings

If your client blows a reading between 1-6, it means they are a non-smoker and have less than 2% CO in their blood.

If your client blows a reading between 7-10, then they are likely to be light smoker or have spent some time with someone who smokes, and this has resulted in "passive smoking". Explore this with your client.

If your client blows a reading between 11-30, then they are likely to be a regular smoker with high levels of CO in their blood.

If your client is adamant, they haven't smoked then test the smokerlyser on a non-smoking staff member. If the reading is low then explore where the client may have breathed in CO e.g. a faulty gas boiler, a friend smoking in their car.



How to use the piCO Smokerlyser

1.	Attach a D-piece to the front of the <u>Smokerlyser</u> .
2.	Make sure the hole in the D-piece faces outwards.
3.	Put the <u>Smokerlyser</u> on by pressing the power button at the top.
4.	The screen will show a person blowing in to a unit.
5.	Open a new <u>Steribreath</u> mouthpiece.
6.	Insert it into the hole in the D-piece.
7.	The unit is now ready to use with a client.
8.	Press the screen firmly once.
9.	It will show an hour glass & slowly count down from 15 seconds.
10.	Ask your client to hold their breath.
11.	At 2 seconds to go, the unit will ring.
12.	Ask the client to put the tube to their mouth and blow slowly.
13.	The CO reading will now show.
14.	Make a note of the number.
15.	Switch the unit off by pressing the power button for 3 seconds.
16.	Discuss the <u>Smokerlyser</u> reading with your client.

piCO Smokerlyser issues & ordering supplies

Every Community Pharmacy was issued with a new piCO Smokerlyser, box of D-pieces, box of mouthpieces and packet of Clinell wipes in 2023. Your In-house "Smoking Champion" signed for these.

If however you have misplaced your smokerlyser or your smokerlyser is showing an error message and isn't working properly then please email HIRS@aapct.scot.nhs.uk to secure a replacement.

Additional supplies of D-pieces, mouthpieces and wipes can be ordered from here too.

KEY COMMUNITY PHARMACY CONTACTS

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