**Alcohol and Drug Recovery Services (ADRS)**



**Pharmacy Frequently Asked Questions (FAQs) Information V6.2 August 2024**

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| **Please find below information regarding responses to FAQs frequently raised by Community Pharmacists and contact information for ADRS Pharmacy support and ADRS teams.** | | |
| **Appropriate / start dates on prescriptions**  In general ADRS teams supply 2x28 day prescriptions for patients, which are delivered directly to the pharmacy in advance of the start date to allow preparation. Prescriptions will have been printed / signed prior to the treatment start date (the appropriate date). In some cases the date of printing / signing may be more than 28 days before the start date. These prescriptions are legal, as prescription validity is **28 days from the appropriate start date**. However, if you have any concerns regarding the clinical appropriateness of a patient’s medication, please contact the team who issued the prescription to discuss. | | |
| **Home Office wording** **for Controlled Drugs**  All ADRS prescriptions will contain the relevant Home Office wording which enables take home doses to be supplied on an appropriate day, in advance of pharmacy closures.  Medication intended for use on the days that the pharmacy is closed, can be supplied in advance providing that a legally valid prescription is in place and contains the Home Office approved wording *“****Please dispense instalments due on pharmacy closed days on a prior suitable day”****,*or similar.  Medication may be supplied in advance of the prescription start date providing that the prescription has been signed and dated by the prescriber. No supply should be made before the date on which the prescription was signed. Please refer to the CD governance team briefing attached for further guidance.  For example, an instalment from a prescription that is due to start on December 25th or 26th can be supplied on December 23rd / 24th or earlier providing that the prescription has been signed on the 23rd or earlier and that the Home Office wording or equivalent is included. Similarly an instalment from a prescription that starts on January 1st or 2nd can be supplied before that date provided that the prescription has been signed on the 30th / 31st Dec or earlier. | |  |
| **Patient focused care**  Please ensure that when deciding on the appropriate day to dispense instalment medication over the festive period / bank holiday / emergency closure that you consider each patients individual circumstances and take these into account where possible e.g.   * Do patients have children at home? Discuss safe storage and utilise the safe storage stickers for take home doses. * Patients may struggle to attend on certain days (e.g. 26th December and 2nd January) if the pharmacy is only open for reduced hours and there is limited public transport. | | |
| **Requests to amend instalments on Opioid Substitution Therapy (OST) prescriptions**  Instalment directions on a controlled drug (CD) prescription are a legal requirement and must be adhered to. Minor amendment regulations do not apply. Therefore instalment directions on a CD prescription must not be altered by phone / email request from a prescriber or care manager e.g. “Patient is going away at the weekend can you supply Sat / Sun doses on Friday”. Any such requests for changes to instalments must be accompanied by a replacement prescription detailing the new instalment. | | |
| **Requests to amend supervision on OST prescriptions**  The majority of ADRS prescriptions will direct that the OST dose should be supervised on the day of collection. The supervision direction is a request from the prescriber rather than a legal direction. A patient representative can collect an OST instalment if a patient is unable to do so e.g. if self-isolating or due to illness. A new prescription is **not required** and details of the representative does not have to be written on the prescription by the prescriber. It is good practice to discuss requests with prescribers / care managers and appropriate records should always be maintained. |  | |
| **Missed doses of OST**  Allpharmacies must havea robust system and Standard Operating Procedure (SOP) in place to identify when patients have missed OST doses.It is vital that the patients’ ADRS / GP is notified at the earliest opportunity following 3 missed doses or sooner if pharmacists have concerns about a patient. More urgent contact may be required following risk assessment of vulnerable patients, for example, in the high risk initial titration period of OST, following recent discharge from hospital, prison liberation or prior to a weekend / public holiday.  The NEO OST Module reporting tool is the preferred option for contact with the ADRS teams about missed doses, prescription queries or to raise concerns about patients. Messages should be sent by 10am each weekday morning, Mon to Fri. The ADRS professional to professional phone lines can also be utilised to facilitate contact if the issue is urgent. NEO **cannot** be used to contact prescribers within GP shared care practices, the GP surgery should be contacted directly by telephone. |  | |
| **Disulfiram**  Pharmacies who participate in the supervision of disulfiram are required to report any **single** missed dose of disulfiram within 24 hours via the NEO Alcohol module.  The ADRS team should respond within 24 hours to provide guidance, however, if a response is urgently required, the ADRS team should be contacted directly by phone / email in addition to logging the missed dose on NEO.  The use of breathalysers is **currently suspended**, however, if supervision is requested on a disulfiram prescription, this should continue to be undertaken without the use of the breathalyser until further advice is issued.  Please note: Disulfiram prescriptions do not require the home office wording (not a CD); the day of supply of a bank holiday dose is at the discretion of the pharmacist. Either provide the patient with the bank holiday dose(s) on the previous day of supervision or on the last day of opening prior to closure. |  | |
| **NEO Troubleshooting**  Pharmacy staff frequently request support to assist with access to passwords or to register / remove members of staff. In the first instance they should refer to the housekeeping manual (attached) which will guide them through the process. The manual is also available by clicking the “Help” tab in NEO. |  | |
| **Submission dates for payment**  Claims for OST, IEP, Disulfiram and Naloxone must be **submitted via NEO by 6th of each calendar month.** Claims must be submitted by an individual with current GPhC registration, using their own unique NEO username and password. Claims must **not** be submitted using the generic IEP or pharmacy manager log on. |  | |
| **Community Pharmacy OST Self Audit**  This is a helpful tool to review and develop existing processes within the pharmacy. The self-audit should be completed on an annual basis, following a dispensing incident/near miss or when significant changes have been made to the OST dispensing processes within the pharmacy. Pharmacists newly in post may additionally find it helpful to complete.  On completion the ADRS Pharmacy Team will be notified of responses and pharmacies can print and save their submission for future reference. The ADRS pharmacy team will also review the audit and send recommendations for consideration. | Link to Audit:  [CP OST Self Audit Form](https://forms.office.com/Pages/ResponsePage.aspx?id=veDvEDCgykuAnLXmdF5JmtwY27yifnVGj7VXVUnhtfdUNDY5VUI1TkRJMzg4UlBIUkhTR0xJMjBBQS4u) | |
| **Emergency Closures**  On the rare occasion when a pharmacy fails to open or has to close in an emergency, the ‘Responsible Pharmacist’ must inform the Board of the nature and likely duration of the closure by telephoning 0141-232-1726 or 0141-232-1727.  **It is important that every effort is made to ensure that patients attending on a daily basis have access to their prescribed therapy; however, for Opioid Substitution Therapy patients in particular, Pharmacists should also link in with their local ADRS team and ADRS Pharmacy Team (0141-303-8931) to co-ordinate arrangements for these patients attending for instalment dispensing**. |  | |
| **ADRS Teams contact details and opening times**  Contact details for ADRS teams include a direct line for professionals and email contacts for each team. |  | |
| **ADRS Guidelines**   * NHS GGC OST Prescribing Guideline * NHS GGC ADRS Guideline for the use of Alcohol Protective Medication |  | |

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| **ADRS Pharmacy Team Contacts**  **Please use the ADRS pharmacy team mailbox if you require any assistance and a member of the team will respond to your email**  [**ADRS.PharmacyTeam@ggc.scot.nhs.uk**](mailto:ADRS.PharmacyTeam@ggc.scot.nhs.uk)   |  |  |  |  |  | | --- | --- | --- | --- | --- | | ADRS Glasgow City 1st Floor, Festival Business Centre  150 Brand St  G51 1DH | | 0141 303 8931 | Admin Support:  sharon.dolan3@nhs.scot  [margaret.bailey2@nhs.scot](mailto:margaret.bailey2@nhs.scot) | | | Name | Job Role | Tel. No. | Mobile | Email Address | | Mary Clare Madden | Lead Pharmacist ADRS | As above | 07557 012877 | maryclare.madden@nhs.scot | | Amanda Laird | Senior Advanced Pharmacist | As above | 07557 012879 | amanda.laird3@nhs.scot | | Lindsey Devlin | Advanced Pharmacist  (Mon/Tues) | As above | 07974 588151 | lindsey.devlin@nhs.scot | | Carron Grogan | Advanced Pharmacist | As above |  |  | | Debbie Thomson | Advanced Pharmacist  (Tue/Wed/Thur/Fri) | As above | 07929092947 | debbie.thomson7@nhs.scot | | Jennifer McDaid | Advanced Pharmacist  (Mon/Wed/Thur/Fri) | As above | 07812704911 | jennifer.mcdaid2@nhs.scot | | Diane Watson | Advanced Pharmacist  (Clinical) | As above | 07966 280629 | diane.watson2@nhs.scot | | John Campbell | IEP Improvement and Development Manager | As above | 07557 012871 | john.campbell14@nhs.scot | | Liz Donaghy | Drug Deaths Support Manager | As above | 07890 966964 | liz.donaghy@nhs.scot | |