



Welcome to the second edition of “PRN” the publication produced by the HSCB Pharmaceutical Services Team specifically for community pharmacists and pharmacy staff. With this edition, an additional supplement has been included, focusing on the **Minor Ailments Service**. If you would like to submit an article to PRN or have any comments or ideas, please contact any member of the Pharmaceutical Services Team. **Pharmaceutical Services Team Contact Details:** please refer to PRN Volume 1 Issue 1 available at <http://www.hscbusiness.hscni.net/services/2685.htm>

Do you order repeat prescriptions for patients?



If so, are you ensuring the best pharmaceutical care for patients by implementing best practice guidance issued by HSCB and complying with the requirements for repeat medication services outlined in PSNI Standards?

Do you have a SOP for this procedure?

HSCB advises that in the majority of cases, patients should contact their GP surgery directly to order their prescriptions. There may be exceptional circumstances where the community pharmacist is the most suitable person to provide support for patients with ordering

Does your Repeat Medication Service comply with the following requirements included in the PSNI Standards for the Sale and Supply of Medicines (Standard 5)ⁱⁱ?

- ⇒ Is your repeat medication service operated in co-operation with local prescribers?
- ⇒ Do you obtain patient consent before requesting a repeat prescription from a surgery?
- ⇒ Do you establish, at the time of each request, which items the patient or carer considers are required and ensure that unnecessary supplies are not made?
- ⇒ Do you ensure that an audit trail exists to identify each request and supply?
- ⇒ Do you use professional judgement to decide whether concordance or other problems encountered by the patient may require early reference to the prescriber?
- ⇒ Do you record all interventions in order to be able to deal with any queries that may arise?

i <http://www.medicinesgovernance.hscni.net/primary-care/medicines-safety-advice-letters/> Adverse Incidents: Requesting and dispensing repeat medications, August 2014

ii http://www.psni.org.uk/wp-content/uploads/2012/09/standards_on_sale_and_supply_of_medicines-2015.pdf

UKMi Database

- The UKMi Medicines in Compliance Aid Database has been reviewed over recent months and new guidance has been uploaded.
- This database makes recommendations on the suitability of solid dose forms for transfer from the manufacturers’ packaging to multi-compartment compliance aids.
- Available at <http://www.ukmi.nhs.uk/applications/mca/>

Medicines Use Review (MUR)



Getting started and keeping going...

By now, most community pharmacists have completed an MUR. Many have reported how rewarding they have found it and how beneficial patients have felt it was. Now the challenge is to keep going, using your professional skills and expertise in identifying patients who will benefit most from an MUR.

Remember a MUR is designed to:

- Improve patient knowledge and understanding
- Improve patient adherence
- Improve use of a patient's medicines
- Reduce medicines wastage

It's not:

- Discussion about changes to drug treatment or the effectiveness of treatment based on test results
- Discussion about the medical condition beyond the drug treatment
- Full clinical medication review

Top tips for doing an MUR:

- Reinforce messages already received
- Target patients who will benefit most - work with your local surgery
- Use your clinical skills
- Build your confidence

And remember...

- Consider **all** the patient's medicines, not just the respiratory and/or diabetes ones
- Identify patients who are not being seen by anyone else
- The service helps to reach patients who don't attend appointments with GP/nurse.

The full guidance for conducting MURs can be accessed at:

http://www.hscbusiness.hscni.net/pdf/Guidance_for_conducting_MURs_v4.pdf

Medicines Safety Update – sharing learning across community pharmacy in Northern Ireland

Missed Opioid Substitute Therapy (OST) Doses

A Community Addiction Team (CAT) recently highlighted two cases when they did not know that a patient had failed to present at their community pharmacy for their daily methadone for 3+ days. Methadone tolerance falls quickly, meaning a dose adjustment is required if a patient misses 3 or more daily doses.

In both cases the patient had not attended the pharmacy due to hospital admission. The assumption was made by the community pharmacist that CAT would have been informed by the hospital of the patient's admission.

Action for community pharmacists:

- Review your OST prescriptions on a daily basis and note any missed doses.
- Make contact with CAT if a patient has missed two consecutive doses, so an attempt can be made to prevent a third missed dose. Do not assume that someone else e.g. hospital or prison service has already done this.
- Depending on circumstances contact the patient's keyworker or the prescriber - keep a telephone number for both on record.