

## Movianto Stocking of Paediatric 'Specials'

**Reminder: HSC recommended paediatric "specials" available from Movianto at competitive prices**

In February 2018, communication was issued to the service around a piece of work to standardise commonly prescribed paediatric liquids. The key aim of this guidance is to ensure continuity of supply between primary and secondary care, helping to reduce the likelihood of errors occurring due to incorrect dosing / strengths (enhancing patient safety), and will also ensure that Health and Social Care (HSC) Northern Ireland secures good value from its expenditure.



This guidance can be found at <http://niformulary.hscni.net/Formulary/Adult/specials/Pages/default.aspx>.

Victoria Pharmaceuticals (ordered via Movianto Northern Ireland) hold stock of the unlicensed liquids ("specials") on the agreed HSC list. Community pharmacists can access this stock at a competitive price.

Full details are available at: <http://niformulary.hscni.net/Formulary/Adult/PDF/Specials/Victoria%20Pharmaceuticals%20Flyer%20June%202018.pdf>.

### Victoria Pharmaceuticals Unlicensed liquids on the Agreed HSC list:

- Melatonin 1mg/ml Oral Solution SF and Alcohol Free (Kidmel) £17.63 for 200ml
- Omeprazole 10mg/5ml Oral Suspension (Quzole powder and diluent for oral suspension) £28.65 for 100ml (when reconstituted)
- Sodium chloride 5mmol/ml Oral Solution (St Mary's) £8.13 for 100ml
- Spironolactone 25mg/5ml Oral Suspension SF (Birchwood) £37.63 for 100ml.

## Supply Issues: Monthly Update Newsletter

**For the latest information on supply issues affecting medicines in primary care**

Every month, the Department of Health and Social Care (DHSC) Medicine Supply team in England produce a report for the PrescQIPP network, to update on current primary care medicine supplies issues.

The PrescQIPP monthly update newsletter on drug shortages and drug discontinuations will now be available for community pharmacists to view on the HSCB internet:

<http://www.hscboard.hscni.net/our-work/integrated-care/pharmacy-and-medicines-management/correspondence-pharmacy-medicines-management/prescqipp-newsletters/>.



## Contact details

This newsletter has been produced for community pharmacists and pharmacy staff by the Regional Pharmacy and Medicines Management Team. Previous edition of the newsletter can be found at

<http://niformulary.hscni.net/PrescribingNewsletters/Pages/default.aspx>.

If you have any queries or require further information on the contents of this newsletter, please contact one of the Pharmacy Advisors in your local HSCB office:

Belfast Office: 028 9536 3926

South Eastern Office: 028 9536 1461

Southern Office: 028 9536 2104

Northern Office: 028 9536 2845

Western Office: 028 9536 1008



**Every effort has been made to ensure that the information included in this newsletter is correct at the time of publication. This newsletter is not to be used for commercial purposes.**



## Pharmacy Regional Newsletter

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Care Board

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## European Antibiotic Awareness Day



The European Antibiotic Awareness Day is an annual European public health initiative that takes place every year on 18<sup>th</sup> November to raise awareness about the threat to public health of antibiotic resistance and the importance of prudent antibiotic use. The latest data confirms that across the European Union the number of patients infected by resistant bacteria is increasing and that antibiotic resistance is a major threat to public health.

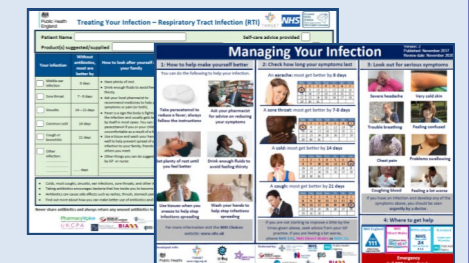
Prudent use of antibiotics can help stop resistant bacteria from developing and help keep antibiotics effective for the use of future generations.

## Self Care Resources for Coughs and Colds

Resources are available in the Patient Zone section of the Northern Formulary to help counsel patients on how to self manage self-limiting or viral infections: <http://niformulary.hscni.net/PatientZone/YourMeds/Pages/default.aspx>. Paper copies are available from your local HSCB offices.

TARGET (<http://www.rcgp.org.uk/clinical-and-research/toolkits/target-antibiotic-toolkit.aspx>) has been endorsed by the PHA and HSCB for use in Northern Ireland to complement our existing resources. HSCB will be posting printed copies of the following TARGET patient resources, which you may find useful during consultations:

- Pharmacy Treating your infection - Respiratory tract Infection
- Managing your infection



## Want the Most Up-to-date Antibiotic Guidelines?

Download the Northern Ireland Management of Infection Guidelines App now. Search for Microguide App and select 'Northern Ireland Primary Care' when prompted.



## Drug Name Confusion: Clomipramine

HSCB continues to receive reports of patients receiving the wrong medicine due to confusion between similarly named or sounding medicines (brand or generic names).

### Adverse Incident 1

A prescription was issued by the GP following a referral from a fertility clinic. The intended medicine was: Clomid® (clomifene) 50mg tablets. The prescription was issued as: clomipramine 50mg capsules. The directions were: "1od days 1 - 5 of cycle for 6/12". Clomipramine was dispensed with the directions as per the prescription.

The patient received and used this medication as prescribed. Two months later, another prescription was received and during the clinical check the pharmacist identified a potential error. The pharmacist spoke to the patient who confirmed she should be taking Clomid® for fertility treatment and she had recently been advised to increase dose to 100mg. The pharmacist spoke to the GP and the error was confirmed.

### Adverse Incident 2

A patient was prescribed clomipramine 50mg capsules. In the pharmacy, a label was generated as such but on dispensing the incorrect medication was selected and the patient received chlorpromazine 50mg tablets. Chlorpromazine and clomipramine were highlighted by warning stickers on the shelf, however this did not prevent the error. The clomipramine has since been moved to a separate shelf which has been marked 'red'.

### Lessons learned

- Take extra care on the clinical check and be aware of look-alike / sound-alike products.
- It is important to discuss any new medication with the patient. This gives an opportunity for the patient to say if the medication is not one that they are expecting.
- While warning stickers on shelves can help to prevent errors, sometimes the effect is lost as it becomes familiar.



## Controlled Drugs Assurance Visits in General Practice – Information for Community Pharmacists

In order to seek assurance that adequate procedures are in place for the safe management and use of controlled drugs (CDs) within GP practices, and that arrangements comply with legislation, HSCB commenced the implementation of a 3 year rolling programme of CD assurance visits to GP practices across NI in May 2017. By September 2018, 111 CD visits have been completed (33% of practices in NI).

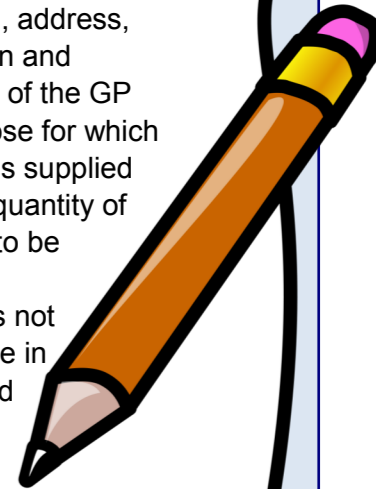
### The following key points that have been identified during the visits:

#### Health service stock order forms (HS21S forms)

- Supplies made against a faxed / photocopied requisition are not acceptable.
- All stock requisitions should be for complete original packs.
- Stock requisitions for quantities less than an original pack should be amended by the prescriber before supply.
- If a drug requested on the stock requisition is not available to dispense, this should be coded as 88888/1.
- When the GP writes a requisition, the yellow copy of the HS21S triplicate form should be retained by the GP practice, the white copy is sent from the pharmacy to BSO for payment and the pink copy is kept in an agreed location in the pharmacy for 2 years.
- Note: only GPs can sign HS21S requisitions. There currently isn't any provision in the legislation to allow non-medical prescribers to sign HS21S forms.

#### Requisitions must include:

- the name, address, profession and signature of the GP
- the purpose for which the drug is supplied
- the total quantity of the drug to be supplied (this does not have to be in words and figures).



#### Supply of CD stock to GPs

- GPs should order and collect their own CDs in person.
- If a messenger is used to collect schedule 2 or 3 CDs, the messenger must produce to the pharmacist a statement, signed by the GP indicating that he/she is empowered to receive the drugs. This statement must be held by the pharmacy for 2 years.
- It is good practice for the community pharmacist to sign the CD register when GPs collect their schedule 2 CD stock.
- If it is necessary for schedule 2 or 3 CDs to be delivered by the pharmacy, the CDs should be delivered directly to the GP making the requisition or, if not possible, to a member of staff authorised by the GP. The GP should inform the pharmacist of the name of this person in advance. A pharmacy delivery note should be signed by the GP / authorised person to confirm the delivery. This should be retained by the pharmacy for 2 years.

#### Destruction of CDs

- Out-of-date / obsolete schedule 2 CDs held as GP stock must be returned to a pharmacy for destruction. It is good practice for the GP to return all other schedules of CD stock requiring destruction to the pharmacy.
- For schedule 2 CDs, the GP must make an entry in his/her register of the CD returned for destruction. It is good practice for the entry to be signed by the GP and the pharmacist accepting the drugs.
- Destruction of schedule 2 CDs returned by GPs must be witnessed by an authorised person, e.g. a pharmacy inspector.

Any queries should be directed to your local prescribing support pharmacist (PSP) or HSCB pharmacy adviser (PA) or Department of Health Medicines Regulatory Group. Contact details for PSPs and PAs can be found on the primary care intranet:

<http://primarycare.hscni.net/pharmacy-and-medicines-management/contact-us/>.

## Reminder: Adrenaline Aujo-injectors in Schools

There has been an amendment to the Human Medicines Regulations 2012 which permits the supply of adrenaline auto injectors (AAIs) from a pharmaceutical supplier, such as a local community pharmacy, to schools.

Community pharmacies can supply AAIs to schools provided they obtain an order signed by the principal or a head teacher stating:

- the name of the school for which the medicinal product is required,
- the total quantity required, and
- that the medicinal product is required for the purpose of supplying or administering to pupils at the school in an emergency.

If pharmacists make supplies in this way they must ensure appropriate records of the transactions are made in the prescription book, and must retain the signed order for a period of two years.

The amendment also permits the administration of AAIs in an emergency by staff of the school, who are trained to administer the medicine, to pupils who are known to be at risk of anaphylaxis and require such medication.

For further information please see: <https://www.health-ni.gov.uk/sites/default/files/publications/health/hss-md-21-2017.pdf>

