

Welcome to the **Kent & Medway** Medicines Optimisation (MO) news update.

Articles in this edition include:

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Safe Use of Emollients (MHRA Guidance)



The MHRA has launched a [campaign](#) to raise awareness of the fire risk and the precautions that need to be taken by users of emollient skin products.



The campaign follows research showing that the risk arises, even if the products do not contain paraffin.

Healthcare professionals are advised to continue to recommend them for chronic dry skin conditions and those using them should continue to do as directed, while staying alert to the risk of fire when on to fabric. Patients should be advised to care when using creams to treat dry skin conditions as they can easily dry onto clothing, bedding and bandages making them more flammable.

Further guidance and resources available [here](#)

National Patient Safety Alert - Steroid Emergency Card to support early recognition and treatment of adrenal crisis in adults

On 13th August 2020 a **National Patient Safety Alert** ([here](#)) was issued introducing a new patient-held **Steroid Emergency Card**.

The alert lists the following **Required Actions**:

- **Practices and prescribers** are advised to review organisational policies, processes and digital alert systems to ensure all eligible patients prescribed steroids have been assessed, and have been issued a Steroid Emergency Card (as outlined in the new guidance).
- **All providers** are advised to review their admission/assessment/examination/clerking documentation to ensure it includes prompts to check for risk of adrenal crisis and to establish if the patient has a Steroid Emergency Card.
- **Pharmacies** are advised to ensure they can source and supply Steroid Emergency Cards to replace lost or damaged cards for patients.

For further reading please see the links in the patient safety alert ([here](#)), including: “*Guidance for the prevention and emergency management of adult patients with adrenal insufficiency*” ([here](#)). This guidance outlines which patients should be given a Steroid Emergency Card.

EMIS Web practices: New Electronic Notifications for the Urgent Supply of Medicines

EMIS practices will soon be able to receive electronic notifications from pharmacies about the urgent supply of medicines made as part of the [NHS Community Pharmacist Consultation Service](#) (CPCS). This will inform you that a patient registered with your practice has received an urgent supply of medicine from a community pharmacy. EMIS will inform you of your specific switch on date for this new functionality.

The notifications arrive as a workflow task within the EMIS Web system, prompting you to add the information to a patient’s record. Please note, if you use a third-party product such as Docman for your patient document management you will need to [configure your Document Management task settings in Workflow Manager](#). You should still continue, however, to check for notifications received via NHSmail, fax or post.

System guidance is [available from EMIS](#). Information is also available on the [NHS Digital website](#). Please note; as of yet, such notifications are not available to Vision practices.

Opioids Aware: A Structured Approach to Opioid Prescribing

The KMCCG Medicines Optimisation Scheme has outlined an opioid prescribing quality improvement project designed to target patients with opioid regimes over 120mg oral morphine equivalent/24 hours. Increasing opioid load above this dose is unlikely to yield further benefits but exposes the patient to increased harm.

The [Opioids Aware toolkit](#) produced by the Faculty of Pain Medicine lists the following points to consider when reviewing [long term prescribing](#):

- The [assessment of chronic pain](#) needs to be wide-ranging and comprehensive.
- If a patient continues to have pain despite taking a number of medications, drugs should be sequentially [tapered or stopped](#) to establish continued effectiveness.
- Similarly, if a patient reports reasonable pain relief from a medication regimen in the longer term, it is also necessary to taper medications intermittently to assess the continued efficacy of medication.
- Ensure [suitable arrangements](#) are in place for monitoring, follow-up and reviews,
- The goals of opioid therapy, including functional goals, should be agreed between the prescriber, the patient and their carer(s).
- Calculating total daily doses of opioids in morphine equivalents is helpful, especially with combinations of opioids.
- The decision/plan to taper or stop an established opioid regimen needs to be discussed carefully and in detail with the patient.

For more information regarding the Medicines Optimisation Scheme please contact your local medicines optimisation team.

Alfentanil Safety Focus

The NHS England and NHS improvement Controlled Drugs Accountable Officers have issued a caution with regards to Alfentanil administration errors. Alfentanil solution for injection is available in either 500 micrograms/ml or 5 milligrams/ml (10-fold increase in strength). Incidences may occur resulting in severe harm and/or death as **there is a risk of 10 times overdose when using Alfentanil preparations.**

Practice points to reduce this risk:

- Different strengths may have very similar packaging. Where boxes are similar stop and double check the box selected is the correct medicine and strength. Confirm with a colleague where able.
- A wide dose range exists for Alfentanil meaning doses may be written either in MICROgrams or MILLigrams. Prescribers should write clearly and **not** abbreviate micrograms due to risk of misreading.

Pharmacy Bank Holiday Openings

For information (including details of opening hours) on which Kent and Medway pharmacies will be open this coming bank holiday (31st August 2020) please click [\(here\)](#)

Updating GP Contact List

Please could you inform your local Medicines Optimisation team when a member of staff (GP/Practice manager/other primary care clinician) has joined or left your practice so we can update our email distribution list.

The regular **Medicines Supply, Shortages and Alerts update** is attached as a separate document to accompany this newsletter.

Please send all medicines queries relating to the articles written to: kmccg.wkmedman@nhs.net

Medway and Swale Local ICP Update

Valproate use in women of child bearing potential

MHRA guidance states that women of child bearing potential taking sodium valproate or valproic acid for any indication are required to complete an annual risk acknowledgement form with a specialist (1). If valproate is to continue, the patient needs to be enrolled on the Pregnancy Prevention Programme so that ongoing valproate prescriptions in primary care are licensed.

In order to help fulfil the MHRA requirements locally, we are working with an epilepsy specialist pharmacist, Trudy Thomas, at Medway Hospital.

Trudy's initial focus will be to work with the Medway neurologists to make sure that women taking valproate undergo the annual risk assessment and to ensure the required paperwork is completed and sent to the patient's GP following the annual risk assessment review. After the review, Trudy will liaise with the patient's GP practice team to facilitate arrangements for appropriate highly effective contraception where needed.

Trudy will also work with the practice and PCN pharmacists to identify those patients who are not under secondary care or who are being cared for outside Medway, or who are taking valproate but not for epilepsy, to ensure MHRA guidance is being adhered to.

We are asking practices to give the CCG permission to run the necessary searches to identify all the affected patients and share the data with MFT, so please sign up to help us to help you manage your female valproate patients.

The CCG GP Data Protection Officer has approved this process to allow for the review of this group of patients.

In order for the remote search to take place and to share the data with MFT, we need your permission. If you have not already given your authorisation for this, please email medwayswale.meds@nhs.net to do so.

If you have any questions regarding the reviews, please contact Trudy on trudy.thomas2@nhs.net

- 1) MHRA. Valproate use by women and girls. <https://www.gov.uk/guidance/valproate-use-by-women-and-girls>
[Updated May 2020.](#)

Electronic Repeat Dispensing

As you will be aware the Medicines Optimisation Team have been working with GP Practices and Pharmacies to increase the use of Electronic Repeat Dispensing (eRD) within Medway and Swale for some time but in particular during the COVID-19 pandemic.

We have seen some really positive increases in Practice eRD figures and we hope that you will have noticed a drop in your day to day repeat prescription workload.

The NHS Business Services Authority (BSA) are offering all Practices additional support by directly helping to find ways to identify and manage your eRD patients. To make full use of this opportunity Practices will need to nominate an eRD champion to help focus and drive the continued use of eRD, however all the surgery staff will need to be supportive of this work and contribute accordingly.

We would highly recommend you make full use of this resource and if you have any questions or wish to know more, please email the BSA directly on Nhsbsa.epssupport@nhs.net

2019/2020 Incentive Scheme Payment

If you have not already submitted your invoice for last years Incentive scheme please ensure you do this by **Friday 4th September**. It is highly important to complete last years payment now the new Incentive scheme has started. For support with this please email our generic medwayswale.meds@nhs.net

Communication Regarding Kent and Medway Preferred Branded Generics August 2020

Following the recent CCG mergers the Kent and Medway Medicines Optimisation Team have reviewed and developed an updated list of GP preferred branded/generic medicines to ensure a consistent approach across the county.

As part of this review all manufactures were contacted to ensure that stock levels would be sufficient to meet the rise in demand and to advise them of an expected increase timeline. Only those manufactures that have provided assurance that their stock levels will be able to meet demand have been included within this final list.

Each area of Kent will take a slightly different approach to implement this change due to work on their previous priorities. Within Medway and Swale we will begin actively reviewing and switches patients from September-20, as part of your Incentive Scheme support.

The current list can be found below and will be reviewed/updated on a regular basis

Brand / Generic	K&M Preferred Branded Generic
Ascorbic Acid Tabs	Ascorb Tabs
Cyanocobalamin 50mcg Tabs (NEW)	CyanocoMinn Tabs
Dexamfetamine Tabs	Amfexa Tabs
Isosorbide Mononitrate MR	Monomil XL Tabs
Lidocaine plasters	Ralvo Plasters
Macrogol/Movicol Sachets	Cosmocool or Laxido
Mesalazine (Asacol) MR Tab	Octasa MR Tabs
Methylphenidate (Concerta) XL Tabs	Xaggitin XL Tabs
Metformin MR Tabs	Sukkarto MR Tabs
Oxycodone Liquid	Shortec 5mg/5ml Oral Sol
Procyclidine	Kemadrine Tabs
Rivastigmine	Alzest Patches
Tiotropium Inhaler	Braltus Inhaler
Tolterodine MR	Neditol XL Tabs
Tramadol MR Tabs	Marol MR Tabs
Venlafaxine XL	Vencarm XL

If you have any queries or issues please contact your local Medicines Optimisation Team.

Queries

Please note the Medicines Optimisation Team aim to investigate and respond to all queries sent to our generic email within three working days; be assured we do our utmost to respond as soon as possible.

Lloyds Pharmacy Closure

We have now been given confirmation that Lloyds Pharmacy – Hempstead Valley in Sainsburys is permanently closed with effect from Monday 7th August. Any issues regarding EPS/ERD that you are unable to solve please contact our generic medwayswale.meds@nhs.net for support.

Useful Contacts

Primary Care Medicines Queries – Medwayswale.mds@nhs.net

Medway Hospital Medicines Queries - medwayft.medsqueries@nhs.net

Patient Complaints – kmccg.complaints@nhs.net

Community Pharmacy Issues - England.southeastcommunitypharmacy@nhs.net

Controlled Drugs – england.southeastcdao@nhs.net