Kent and Medway Medicines Optimisation Team

Prescribing Newsletter Issue 16

Date: 07/10/2020

Kent and Medway Clinical Commissioning Group

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

Articles in this edition include:

- Fraud Alerts in Kent and Medway
- Anticoagulant Safety Concerns
- Monitoring Recommendations for Direct Acting Oral Anticoagulants (DOACS) for patients with Non-Valvular Atrial Fibrillation in Primary Care
- Palliative Care Chart survey from Virgin Healthcare
- Electronic Repeat Dispensing Supporting Information
- Local Update

SPOTLIGHT ARTICLE

Fraud Alerts in Kent and Medway

We have recently been made aware of individuals who have targeted GP practices in the Kent and Medway area with the intention of accessing controlled drugs.

Please refer to the fraud alert email sent to practices on **30th September 2020** for more information.

We would like to remind all healthcare professionals to exercise caution when dealing with requests for emergency prescriptions especially for new patients registering as temporary residents and for those accessing services out of hours.

Any concerns of suspected fraud should be reported to the TIAA Fraud team or the National Fraud & Corruption Reporting Line 0800 028 40 60.

The contact details for the TIAA Fraud team are as follows:

- *Ruth Goddard, Fraud Specialist* *ruth.goddard3@nhs.net* *07979 645 948*
- *Debbie Crawford, Counter Fraud Support* *debbie.crawford@nhs.net* *07827 230 516*
- *Melanie Alflatt,* Director of Fraud and Security *melanie.alflatt@nhs.net* *07899 981 415*

If there are concerns about patient safety, then clinicians may need to consider a safeguarding referral for the patient concerned (link: https://www.kentandmedwayccg.nhs.uk/about-us/access-to-information/safeguarding-declaration).

Anticoagulant Safety Concerns

We have previously highlighted the risk of patients inadvertently taking warfarin and a DOAC together as a result of both drugs appearing on the active repeat list and being issued concurrently. National guidance (here) was issued to support switching from warfarin to DOACs where appropriate during the COVID-19 pandemic. However, it is necessary to emphasize the potential for error to occur when switching from warfarin to DOACs or vice versa.

Across Kent and Medway CCG we are aware of two incidents where both drugs were issued, but fortunately, were not taken by the patients. There have also been three near misses where both drugs appeared on the active repeat lists but were not issued. Organisations, professionals and patients need to be alert to this risk.

- To reduce the risk of this error occurring, practices are advised to:
- Ensure that warfarin is promptly removed from the repeat medicines list when a DOAC is prescribed.
- Ensure that the patient or carer is fully informed about the changes to their treatment. The national guidance on safe switching during COVID-19 advises that written instructions are provided and that clinicians involve family members / carers where possible to minimise the risk of patients taking both warfarin and a DOAC concurrently. Particular care should be taken where patients are using medication compliance aids, to minimise the risks of incorrect dosing.
- Consider undertaking a regular search to ensure that warfarin and a DOAC are not on patients' repeat medication lists at the same time.
- Where a patient's medication has been switched, the patient should be advised to return any unused tablets to their community pharmacy.

The MHRA recently issued a drug safety update (here) reminding prescribers about the bleeding risk associated with Direct- acting oral anticoagulants (DOACs) and availability of reversal agents.

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Monitoring Recommendations for Direct Acting Oral Anticoagulants (DOACS) for patients with Non-Valvular Atrial Fibrillation in Primary Care

The KMCCG Medicines Optimisation team has produced a prescribing recommendation document on the monitoring of Direct Oral Anticoagulants (DOACs) in primary care for patients with Non-valvular Atrial Fibrillation (NVAF). The document, based on national guidance, has been approved by the Kent and Medway Joint Prescribing Committee and ratified by the CCG's Clinical Cabinet. It aims to support primary care prescribers in meeting their responsibilities around necessary ongoing monitoring requirements for apixaban, dabigatran, edoxaban and rivaroxaban; including general review of patients, frequency of drug monitoring and correctly assessing renal function for dosing. The 20/21 Medicines Optimisation Scheme includes an option for practices to participate in an audit aimed at driving sustainable improvement in DOAC monitoring and dose review processes within practices. The guidance will go some way in supporting this work and is attached with this newsletter. For further questions please contact your local medicines optimisation team.

Palliative Care Chart survey from Virgin Healthcare

As part of Virgin Healthcare's review of the way the different palliative care charts within Kent are used, there is an opportunity for all clinicians who use them to share their views. Virgin Healthcare have designed a survey with 10 simple questions which will help ensure the chart re-design is useful to all and only contains relevant and necessary information. The survey can be accessed through this link: https://www.surveymonkey.co.uk/r/X325BHP and will close on 12/10/2020. Apologies for the short notice.

Your feedback will be invaluable and will help to create a truly collaborative piece of work that improves patient care. Please forward the link on to any others who you feel will be able to provide valuable feedback.

Electronic Repeat Dispensing Supporting Information

Due to the COVID-19 outbreak, NHS England and NHS Improvement are advising practices should consider putting all suitable patients on electronic repeat dispensing (eRD) as soon as possible. As cases continue to rise across England, the temporary suspension of the requirement for individual patient consent (in certain circumstances) has been extended to 31 March 2021; in order to encourage increased use of electronic repeat dispensing (eRD). More information (here). We wish to highlight once more the benefits of eRD. Since the early stages of the pandemic NHSBSA Prescription Services have encouraged Practices to transfer clinically suitable patients to eRD (here). The KMCCG Medicines Optimisation Team has built upon this request, by including this as an option in the 20/21 Medicines Optimisation Scheme. The NHSBSA website has a library (here) of supporting documents to help tackle issues associated more commonly with the early stages of eRD implementation including

- eRD patient suitability guide (here)- Suitable eRD candidates include: Patients with a stable list of medication, stable medical conditions and up to date monitoring. Practices can request a list of registered patients that the NHSBSA has identified as potentially being suitable for eRD. This list will not have been assessed for clinical or practical suitability of patients; however, it may serve as a good starting point. More information available here.
- eRD cancelling and synching prescriptions (here) – The prescriber retains the ability to cancel single items, or whole prescriptions at any time; which will cancel all subsequent issues on the Spine. If the prescription is already with the dispenser, the prescribing system will receive a message to contact the dispenser. The dispenser must return the issue to the Spine for the cancellation to take place.
- eRD patient pathway (here)- includes steps for GP practices and community pharmacies to aim to improve the process of eRD.

We recognise that initially there may be a need to set aside time for training in eRD use and identifying suitable patients. However, the potential benefits of a simplified repeat dispensing process and reduced waiting times when eRD systems are well established and routinely used, are substantial for practices, pharmacies and patients.

For more information please contact your local medicines optimisation team.

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

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