



# Newsletter

## Minor Ailments roll-out

Pharmacy First – the minor ailments scheme funded by Gloucestershire CCG – is rolling out across the whole county from 1st December! You should have received an expression of interest form in your pharmacy. If you have not already done so, please complete both sides of the form and return it to the CCG. They will then prepare a contract to allow you to deliver the service.



There are slight changes from the existing service in Gloucester and Tewkesbury localities.

- The fee has increased from £4.50 to £5.50 per consultation.
- All pharmacists must complete the CPPE E-assessment “Minor Ailments – a Clinical Approach” as part of their declaration of competence. Please remember this is an OPEN BOOK assessment, and you are expected to consult a BNF and other resources while taking the assessment.

The LPC and CCG intend to run support evenings for the service, most likely w/c 11th January

in Cheltenham and w/c 1st February in Forest of Dean. However you do not have to wait for training before starting to offer the service. Details will be circulated in the weekly “what’s on” email when exact dates and venues are known.

*If you don't currently receive these weekly event updates, email [lis.jardine@gloslpc.co.uk](mailto:lis.jardine@gloslpc.co.uk)*

The service works best where patients are referred from local GP Practices – please talk to your local practice managers to tell them that you are offering the service, and discuss how they can identify suitable patients who would otherwise take up appointments.

*Fiona*

## Keep going on flu

Community Pharmacies have worked exceptionally hard to land the new Advanced Service – Seasonal Flu Vaccination. Well done everyone! At the time of writing over 450 000 NHS flu vaccinations had been delivered by Community Pharmacies – an average of around 60 per participating pharmacy.

It is important, however, not to be complacent throughout December. Please continue to ask all eligible patients “Have you had your flu jab?” Last year only 50% of those aged under 65 years and at risk because of a long term condition took up the offer. You will need to be pro-active in order to encourage the rest to do so.



## December 2015

### Things to do:

- Keep an eye out for non-medical prescribed scripts (from e.g. nurses, podiatrists and physios)
- Help older people stay 'Warm and Well' this winter
- Talk to your local practice managers to tell them that you are offering the MAS
- Think about how you can prepare your pharmacy for a crisis
- Make sure your locums have access to PGDs, and that your branch staff can support with PharmOutcomes and referral to other pharmacies when necessary
- Keep an eye out for the EPS changes and make sure you send off the dispensing notification of the previous batch BEFORE the next one is due
- Make sure you document your actions on the PMR re clinical judgment on supply of CDs

### Inside this issue:

Montpellier celebrates Neetan	2
Cleeve School outreach	2
HLP update	3
Health bus	3
CPPE Sexual Health training	4
Independent Non-Medical Prescribing	4
Warm and Well	5
Emergency Planning	6
Installation prescriptions	6
Controlled drugs update	7
Locums	7
EPS changes to batch dispensing	8

## Neetan awarded by his community



**A true pharmacy champion...  
Neetan Jain**

The Gloucestershire Echo recently reported on a heartwarming success for Neetan Jain, the owner and pharmacist at Spa Pharmacy in Cheltenham.

Neetan was nominated by his customers for the first ever 'Montpelier Hero Award'. These were set up by another Montpelier business owner, Mondo Guidetti, who wanted to celebrate the people who give so generously of their time and resources to the community.

Mondo said that Neetan had deserved the award because of how he made people feel. "I've had many elderly clients that also go into the pharmacy, and if he doesn't have what they need he'll always get it for them. You can tell if someone has been in the chemist because they come out with a big smile on their face".

Another local shop owner, Margaret Cavanagh, said: "He's always smiling and checking up on people. He is

a generous and considerate person... It's people like him which make Montpelier special".

Neetan said "It's quite overwhelming to have won this award — it's a very nice surprise."

The Echo article was followed up by Cotswold Life, where Neetan will be featured in a big spread.

Well done Neetan for flying the CP flag!

## Outreach at Bishops Cleeve School



**I don't believe I've ever seen a teenager look this enthusiastic about anything**

The whole concept behind the Healthy Living Pharmacy Programme is to engage with clients in the pharmacy, and also outside of the pharmacy to prompt "Pharmacy First".

I am a member of the Stoke Road Patient Participation Group and we arranged a Health Promotion Event in the main hall of Cleeve School in Bishops Cleeve in October.

The driver for the event was to engage with young people who may not always seek the advice and support of their surgery, pharmacy and other agencies.

In the hall were tables and displays from Badham

Pharmacy Ltd, Gloucestershire Young Carers, Gloucestershire CCG, Gloucestershire 2gether nhs, Sexual Health Team, Smoking Champion Youth Co-ordinator, Infobuzz, School Nurse, National Citizen Service, Gloucestershire Telecare, Share Counselling Service, GP and Nurse representatives from Stoke Road Surgery.

The School co-ordinated the event for us, in that they arranged for over 500 pupils to come to the hall in class order.

We had manageable numbers of pupils to have consultations with and also we knew the age of the

clients we were talking to.

We used the opportunity to engage with these young people on all of the services we provide, in particular sexual health, smoking cessation, good lifestyle, alcohol abuse and weight management.

If it was appropriate we gave out Chlamydia tests, free condoms, alcohol and smoking scratch cards and leaflets from the LPC detailing the services pharmacy does provide, without an appointment, and in some cases seven days a week.

Mandy, one of our Healthy Living Pharmacy Champions, came with me, and we had a great time, at the end of which we were totally exhausted!

*Peter Badham*

**Great work Peter and Mandy! Perhaps you might be inspired to suggest something similar in your neighbourhood—teenagers are the demographic most likely to use and appreciate pharmacy services, but they need to know what they are and where to go!**



## Healthy Living Pharmacy update

Congratulations to the pharmacies who were awarded their HLP1 Status at the steering group meeting earlier this month. Since then several others have achieved HLP1 status too. Our new HLPs are:

- Badham Prestbury
- Badham St Georges
- Tesco Cirencester
- Hawkes Pharmacy
- Badhams Newnham
- Co-op Cinderford
- Badham Sixways
- Boots Gallagher

And these pharmacies are very nearly there!

- Spa Pharmacy
- Badham Kingsway
- Day Lewis Newent
- Dudley Taylor Chipping Campden

All the champions who attended the training on 12th November have passed their Understanding Health Improvement exams! Well done to:

- Theresa Rawlings, Emma Gazzard and Mandy Shurmer, Drybrook Pharmacy
- Jenny Smart, Morrisons, Greatfield Park
- Lizzie Frith, Boots, Cam
- Laura Miles, Boots, Quedgeley
- Vanessa Vieira, Tesco, St Oswald Rd
- Kathy Whitting, Lloyds, Winchcombe
- Kathryn Hodgson and Olwen Tringham, Painswick Pharmacy,
- Cassie Hughes, Boots, Gallagher Retail Park
- Claire Spillan, Morrisons, Upper Hatherley



HLC trainees on 12 November

All future HLP training will be arranged in accordance with demand.

To this end I have set up a form on the website for any staff needing Champion training or Leadership training. Please visit

<http://psnc.org.uk/gloucestershire-lpc/healthy-living-pharmacy/training/>

Fill in your name and contact details, and let us know which days of the week (if any) are preferable. We will get back to you as soon as we've got enough candidates to make the training viable.

Lis

## Health bus for Ask Your Pharmacist Week

This year, Ev Beech, our very own Local Pharmacy Ambassador, borrowed a bus and took community pharmacy staff out to encourage the public in Cheltenham and Gloucester to come in for a chat!

Sonya Gregory, a pharmacist who took part in the Cheltenham event on 10th November, said: "The event was very professional with



Pharmacists Charles, Sonya and David in Cheltenham

the use of the excellent CCG Health Bus; lots of posters were put up, and lots of leaflets handed out. The public engaged easily with us and some even approached us. I thoroughly enjoyed it. The event and interaction was on the whole positive about pharmacy services the public are receiving."

Ev said: "They did an amazing job... thanks Team Cheltenham!"

"The Gloucester City public came onto the Bus on Friday 13th - out of the rain! - to chat with me and Peter Badham. Such a variety of questions were asked and answered...and really great to hear folk really do value their pharmacy team!! Yay! Peter engaged in sooo many



Peter and Ev in Gloucester

conversations - Thanks Peter, you were a star!"

Pharmacy staff on the buses gave blood pressure measurements, spoke to members of the public about the NHS Minor Ailments scheme coming in December 2015, gave out Antibiotics Awareness quizzes, and had numerous general conversations about community pharmacy.



HLP is really taking off in Gloucestershire

[www.nhs.uk/staywell/](http://www.nhs.uk/staywell/)  
**Look out for the NHS BUS over the next 2 weeks... It will be coming to a centre near you. Jump on board for an hour to talk pharmacy, MAS, MURs/NMS and HLP!**

## Sexual Health training from CPPE

We recommend the new CPPE e-learning course on Sexual Health in Pharmacies.

The course includes new information on consultation skills and advice around safer sex – these are important issues for our commissioners and co-providers.

It also includes a workbook to support pharmacists in discussions with support staff.



## Independent Non-medical Prescribing



**A spoonful of medicine makes the sugar go down. Or something.**

Since 2014 Physiotherapists and podiatrists have been allowed, as a result of changes in legislation, to train and practice as independent non-medical prescribers in the same way as nurses and pharmacists. As independent non-medical prescriber nurses, pharmacists, physiotherapists and podiatrists are responsible and accountable for the assessment, diagnosis and treatment of a patient's condition and for decision about the clinical management required, including prescribing.

Physiotherapists, podiatrist, nurses and pharmacist all have the same independent non-medical prescribing qualification and this can be checked on the following websites

- Nursing and Midwifery Council (NMC) website: [www.nmc.org.uk](http://www.nmc.org.uk)
- General Pharmaceutical Council (GPhC) website: [www.pharmacyregulation.org](http://www.pharmacyregulation.org)
- Physiotherapists and podiatrists on the Health and Care Professions Council (HCPC) [www.hpc-uk.org/check/](http://www.hpc-uk.org/check/)

Nurse and pharmacist independent non-medical prescribers can prescribe any license or unlicensed medicines including controlled drugs provided it is within their agreed and evidences area of prescribing competency.

Physiotherapist and podiatrist independent non-medical prescribers can prescribe any licensed medicines (currently excluding controlled drugs) that is within their individual area of competence and respective scope of practice which is defined as follows

- A physiotherapist independent prescriber may prescribe any licensed medication within national and local guidelines for any condition within their area of expertise and competence within the over-arching framework of human movement, performance and function.
- A podiatrist independent prescriber can prescribe only those licensed medicines which are relevant to the treatment of disorders affecting the foot, ankle and associated structures, in

line with current practice and consistent with published professional guidance.

Gloucestershire Care Services NHS Trust runs the 7 community hospitals across the county and delivers services in the community including community nursing, physiotherapy, podiatry, musculoskeletal and a number of specialist services such as community IV therapy, rapid response, community respiratory and heart failure. We have a number of independent non-medical prescribers working across all these services with physiotherapist and podiatrist prescribers currently in the community respiratory team, musculoskeletal and podiatry services with more professionals currently undertaking training so you can expect to see increasing numbers of prescriptions from these professions.

If you have any questions about any prescribing issues relating to Gloucestershire Care Services please contact Laura Bucknell, Head of Medicines Management [laura.bucknell@glos-care.nhs.uk](mailto:laura.bucknell@glos-care.nhs.uk) or 07909533414

## Warm and Well

Exposure to the cold can have devastating impact on the health of older people. Each winter across the UK, one older person dies every seven minutes from the cold weather.

The number of excess winter deaths is much greater in the UK than in other, colder countries. Research indicates that older people are largely unaware of the impact that the cold weather has on their health. This is exacerbated by deep-seated behavioural patterns such as sleeping with the windows open at night and misconceptions that breathing in cold air is good for your health, whereas the opposite is true – breathing in cold air lowers body temperature which raises the risk of cold related illness.

Cold weather causes a massive increase in associated health problems: heart attacks, strokes, pneumonia, depression, worsening arthritis and increased accidents at home (associated with loss of strength and dexterity in the hands).

Gloucestershire has been identified as having an average of 18 preventable winter deaths per year. Recent

research has highlighted how people like you and your colleagues can positively influence older people to keep warm and well. This winter we would like your help to make a real impact to the lives of older people living in Gloucestershire.

### What to look out for when you come into contact with an older person:

- Does the older person have a prescription to treat lung or heart conditions, or do they complain of ill-health?
- Has the older person had a fall or been admitted to hospital recently?
- Is the older person wearing multiple layers?

### How you can help

Keeping warm is often seen as 'common sense'. However, the ability to judge temperature changes lessens with age and the longer someone is exposed to the cold, the more at risk they are from the cold.

There are simple steps that older people can take to keep warm and well. If you have identified an older person at risk recommend:

- The ideal temperatures to keep their bedroom (18°C) and living room (21°C) and suggest they use a room thermometer to monitor temperature changes.
- They shut their bedroom window at night to ensure the health risks posed by the cold are reduced.
- You can also display and distribute our free posters, myth buster leaflet and room thermometers. ID202404 08/15
- Recommend Age UK Gloucestershire's range of services:
  1. Info & Advice: Free support on age-related issues, including benefits checks and claims
  2. Clean Sweep Plus: Practical support at home
  3. Magic Mouse: Individual tablet, iPad & laptop tuition
  4. Home from Hospital: Free support for those recently discharged from hospital to get back on their feet

Contact Age UK Gloucestershire to find out how they can help. Call 01452 422660, email [enquiries@ageukgloucestershire.org.uk](mailto:enquiries@ageukgloucestershire.org.uk)



Leaflet available on our website under 'resources'.

Older people are largely unaware of the impact that the cold weather has on their health

## Improve your Home, Improve your Health Campaign

Stroud District Council are working in partnership with the Gloucestershire Local Pharmaceutical Committee (LPC) on a new promotional campaign to raise awareness of the financial assistance available to home owners and tenants to help improve their homes. We recognise that improving peoples housing conditions will help to improve their health and wellbeing and prevent illness and injury.

Flyers have been sent out for your distribution to clients with their prescription. We would appreciate your help in either attaching them to dispensing bags or handing them out.





**Make sure nobody is indispensable (pun intended)**

## Emergency planning

At our November meeting, LPC members received an interesting and entertaining presentation on business continuity and emergency planning.

### Things we learnt to think about

For each member of staff do you know:

- What they do?
- Why they do it?
- What would happen if it didn't get done?

Is there a "single point of failure" in your staffing?

- Is there a pharmacist owner or manager who is the only person who knows certain things (like where the key is)?
- Is your "locum file" up to date with everything a pharmacist new the pharmacy might need to know?

The best laid plans can go awry, and we do just "cope". But what do you need to prepare or think about to make it just a little bit easier in a crisis?

*Fiona*

**Xmas present idea spotted on ebay**



## New approved wording for instalment prescriptions



**New approved wording – look out for it**

A Home Office Circular introducing the new mandatory requisition form for Schedule 2 and 3 controlled has been published—see Julie's update on page 7 for details. This circular also introduces a new set of approved wording for instalment prescribing. The new wording can be used immediately and can also be mixed and matched to express the prescriber's intention. However, as usual where this intention is not clear it may be necessary, subject to the professional judgment of pharmacy teams and dispensers, to contact the prescriber.

The Home Office recognises that it may take some time for the introduction of the new wording to be implemented via prescribing software systems and hence all legal prescriptions which incorporate the old wording and clearly establishes the intentions of the prescriber should be accepted and dispensed as is currently the case, unless in the professional judgment of pharmacy teams and

dispensers, there are reasons why these prescriptions should not be accepted.

Prescribers must therefore use either the new wording or the old wording but not a combination of both or an amended version of the old wording.

The expectation is that prescribers will take steps to move from using the old approved wording to the new set of approved wording in the coming months. The Home Office will review this position over the next three to six months.

New wording:

1. Please dispense instalments due on pharmacy closed days on a prior suitable day.
2. If an instalment's collection day has been missed, please still dispense the amount due for any remaining day(s) of that instalment.
3. Consult the prescriber if 3 or more consecutive days of a prescription have been missed.

4. Supervise consumption on collection days.

5. Dispense daily doses in separate containers

### **New contact email for controlled drug incidents or concerns**

Please remember to report any controlled drug incidents or concerns to the Controlled Drug Accountable Officer (Julie McCann) via [england.southcentralCD@nhs.net](mailto:england.southcentralCD@nhs.net) (note this new generic email address - the old emails of BGSW and Thames Valley remain active currently but healthcare professionals should ensure that and Standard Operating Procedures are updated to reflect this new email address).

As previously, relevant incidents should also be reported via the National Reporting and Learning System (NRLS) <https://report.nrls.nhs.uk/nrlsreporting/>

*From an NHS England information notice sent 24/11/2015*

## Controlled drugs update

Please note that **standardised requisition forms (FP10CDF)** for schedule 2 and 3 CDs must be used from 30th November.

Pharmacies should also ensure they have the relevant licenses if supplying CDs, for example to GP practices. To obtain supplies of the form, contact **england.southcentral-CD@nhs.net** in the first instance.

**Private CD prescriptions (schedule 2 and 3):** These are only legal on the standardised FP10PCD form.

Both CD requisitions (FP10CDF) and private CDs (FP10PCD) need to be submitted to the NHS BSA at the end of the month so that these supplies can be effectively monitored.

**Using professional judgement:** Pharmacists

frequently face dilemmas when CD prescriptions are not legally correct. In these circumstances, please make **every reasonable effort** to rectify the situation particularly in end of life care. Remember your **GPhC professional standards: *Make patients your first concern; In an emergency, consider all available options and do your best to provide care and reduce risks to patients and the public.***

Every situation is different and you must use your professional and clinical judgement to ensure that the clinical needs of the patient are met. Make sure you document your actions on the PMR.

**Excessive quantity and long term repeat medication:** Pharmacists are reminded that the maximum quantity for Schedule 2,3 and 4 CDs should not exceed 30 days

and prescribers should justify prescribing more than this. If, after contacting the prescriber, a pharmacist is concerned about excessive prescribing, please contact the Controlled Drug Accountable Officer (CDAO) to highlight the concern. In the interim, the prescription can still be dispensed as appropriate. Also, make sure that regular repeats are not being requested too frequently and highlight to the prescriber if this is occurring and the need for regular review. Again, alert the CDAO if deemed appropriate.

All CD incidents including discrepancies, dispensing errors, prescribing errors, prescribing for self or family, excessive prescribing or fraud should be reported to the CDAO.

Email: **england.southcentral-CD@nhs.net**

*Julie McCann*



**Drugs kept under rigorous control**

**In an emergency, consider all available options and do your best to provide care and reduce risks to patients and the public**

Following Capita taking over responsibility for the delivery of NHS England's primary care support services (now named PCSE) in September 2015, PCSE has sent out a user satisfaction survey to a cross section of contractor pharmacy premises in England – if you have received a copy of this survey, please complete and return.

## Are your locums aware of local services...

... and do they react appropriately?

Commissioned Pharmacies now receive referrals for:

- Urgent Repeat Medicines
- Minor Ailments (Pharmacy First)
- Emergency Hormonal Contraception

It is important for our reputation that ALL pharmacists working in the area either provide the

services, or patients are appropriately referred to the nearest pharmacy which is able to provide the service.

Please ensure someone working in the branch at all times, has access to PharmOutcomes to support locums in recording provision of these services

Urgent Repeat Medicines Service does not require any additional training or competence assessment – if a pharmacist is going to be

working in the branch who has not yet signed the PGD, please leave a printed copy for them to read and sign.

If a pharmacist is not yet accredited for Minor Ailments or EHC, please ensure that a member of staff knows which other local pharmacy will be able to provide the service on that day – and refer patients if the service is requested.

*Fiona*



**Locums need support from branch staff**

Gloucestershire LPC represents contractors locally and nationally to create an environment for community pharmacy to flourish.

Please contact us if you have any questions or issues that we can help you with.

#### Committee members:

**Chair:** Mike Powis  
Chris Gifkins Thomas Banning  
**Vice-Chair** Wayne Ryan  
Sian Willams Peter Badham  
**Treasurer** Phillip Lewis  
Aitzol Calleja Peter Arthur  
Pat Quinn  
Gary Barber Iqbal Topia  
Rebecca Myers

#### Chief Officer

Fiona Castle  
Tel/Fax: 01684 298459  
fiona.castle@gloslpc.co.uk

#### Administrator

Lis Jardine  
Tel/text: 07985 308539  
Fax: 0808 1890757  
lis.jardine@gloslpc.co.uk

#### Community Pharmacy Ambassador

Ev Beech  
Tel: 07850 531 239  
evelyne\_beech@hotmail.com



HTTP://PSNC.ORG.UK/  
GLOUCESTERSHIRE-LPC/

**Tell us what you think!**  
We'd love to know what you think of our newsletter; if you have any comments on this edition, or suggestions for the next one, please contact Lis: lis.jardine@gloslpc.co.uk

## Changes to EPS next year

HSCIC expect to make the following change in Feb 2016.

**Under the current eRDS logic:**



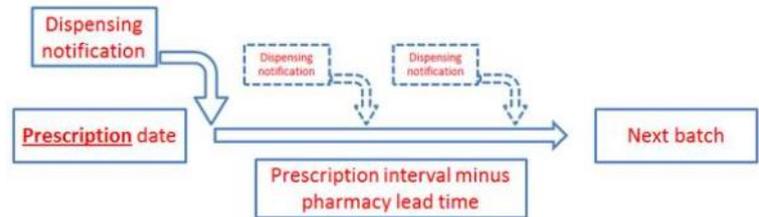
For example, if the prescription is for 28 days and the pharmacy lead time is 7-day (default lead time), then you can expect the following to happen:

- If you send the dispensing notification (authorise the eRx) on day **1**, you can expect the next batch to come down on day **22** [1+(28-7)]
- If you send the dispensing notification (authorise the eRx) on day **5**, you can expect the next batch to come down on day **26** [5+(28-7)]
- If you send the dispensing notification (authorise the eRx) on day **9**, you can expect the next batch to come down on day **30** [9+(28-7)]
- If you never send the dispensing notification, you will not receive the next batch

At present then, the later you send the dispensing notification, the later you will receive the next batch.

**Under the new eRDS logic:**

For example, if the prescription is for 28 days and the pharmacy lead time is 7-day



(default lead time), then you can expect the following to happen:

- If the prescription is dated on day **1** and you send the dispensing notification (authorise the eRx) on day **1**, you can expect the next batch to come down on day **22** [1+(28-7)]
- If the prescription is dated on day **1** and you send the dispensing notification (authorise the eRx) on day **5**, you can expect the next batch to come down on day **22** [1+(28-7)]
- If the prescription is dated on day **1** and you send the dispensing notification (authorise the eRx) on day **9**, you can expect the next batch to come down on day **22** [1+(28-7)]
- If the prescription is dated on day **1** and you send the dispensing notification (authorise the eRx) on day **24**, you can expect the next batch to come down immediately
- If you never send the dispensing notification, you will not receive the next batch

To summarise - all remaining batches will come down on a fixed date, providing the dispensing notification of the previous batch is sent BEFORE the next one is due. **The timing of sending the dispensing notification is irrelevant, the important thing is to send it!** We have successfully tested the new logic and we have not encountered any issue such as double scripts coming down.

All guidance/policy covering electronic repeat dispensing is likely to be updated. HSCIC will also issue some documents to community pharmacies. However there is still no plan to communicate with prescribers.

Charlie Wu, Lloyds