

Controlled Drugs Newsletter

NHS England Central Midlands

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Welcome to the NHS England Central Midlands Controlled Drugs Newsletter.

EPS and Schedule 2 & 3 Controlled Drugs Update

- New legislation was passed to make it legal for Schedule 2 and 3 Controlled Drugs to be prescribed and dispensed via EPS Release 2 on 1 July 2015.
- System suppliers are now required to update their systems to include both words and figures in the EPS messaging for CDs to make it a reality.
- All EPS enabled pharmacies in England must have the new controlled drug functionality before any prescribing sites can send Schedule 2 or 3 CDs.
- Based on latest plans from suppliers, it is looking like CDs won't be available in all dispensing sites until the end of 2018.
- CDs cannot be sent until this point, as a CD cannot be sent to a site which doesn't have the functionality.

CQC Update

- The third issue of the Controlled Drugs (CDs) Vigilance newsletter, has now been produced by the CQC National CD Vigilance subgroup.
- The newsletter focuses on the theft of CDs and prescription forms from vehicles. Available at: https://www.cqc.org.uk/sites/default/files/20160609_controlled_drugs_national_group_vigilance_v1_no3.pdf.

Sodium Oxybate

- Sodium Oxybate is a **Schedule 2 CD**.
- Therefore the usual Schedule 2 CD requirements apply e.g. prescription requirements, CD register entry etc.
- Any incidents involving Sodium Oxybate should be reported to the CDAO team via the CD online reporting tool.

Sharing learning from incidents

Case 1

A patient with chronic knee pain requested a home visit from a GP. The GP refused and provided a telephone consultation to the patient. The patient requested morphine but the GP prescribed 5mg methadone. The patient had chronic renal failure (CKD5) and was also taking pethidine. When the patient took the methadone he/she was rushed to hospital and had to receive emergency treatment and spent five days in hospital. The patient was discharged and is recovering at home.

Lessons Learned

- When taking telephone consultations ensure that patient details and list of any illnesses and current medication are available.
- Ensure the patient is questioned appropriately.
- The prescriber should refer to Cancer Pain Management Guidelines and prescribing and drug choices in patients with Chronic Renal failure to be reviewed and updated.
- There should be a careful assessment not only of bioequivalent doses, but also the effect of impaired hepatic or renal clearance.

Case 2

A patient attended their regular pharmacy for supervised consumption of Buprenorphine 12mgs. The pharmacist watched him put the medication (1 x 8mgs and 2 x 2mg tablets (12mgs total dose) into his mouth) then turned her back to finish a job she was doing, then checked his mouth which was clear. When patient left the pharmacy passer -by saw him spit the medication out and reported to the pharmacy.

Lessons Learned

- Consumption did not take place in a consultation room - Access to the consultation room improved,
- Ensure all new locum pharmacists and new staff members are made aware of the access to the consultation room
- Reiterate the importance of closely following the SLAs, SOPs and guidelines.
- Brief staff in staff meetings and keep them updated.
- Supervised Methadone & Buprenorphine - follow the SLAs from commissioners.
- Hold a pharmacist meeting to review the concerns arising from this incident and implement appropriate changes.
- Inform local Drug & alcohol team of issue.

Case 3

In a dispensing practice 32 morphine 30mg tablets, 14 morphine 10mg tablets and 4 diamorphine ampoules missing on 3 separate occasions. CDAO was **not** informed. Police were called in following the CQC inspection which uncovered these incidents that were not correctly reported to the CDAO.

Lessons Learned

- All incidents involving CDs should be reported online to www.cdreporting.co.uk to the NHS England Central Midlands CDAO.
- Dispensaries must have standard operating procedures to cover CDs and what to do if the balance in the CD register does not match the stock.
- Staff must be aware of their individual responsibilities.
- Significant events should be a standing item for discussion at a regular practice/pharmacy meeting.
- Regular CD stock checks must be completed and fully documented, and discrepancies investigated and reported to the CDAO.
- Locality events for dispensing practices could be arranged to prevent professional isolation and share good practice