



Medicines and Prescribing

North Cumbria CCG

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Welcome 😊



- Housekeeping



Aims for the day



- Why does prescribing matter?
- What happens when it goes wrong?
- What does it mean to a person when you get it right?

Objectives for today

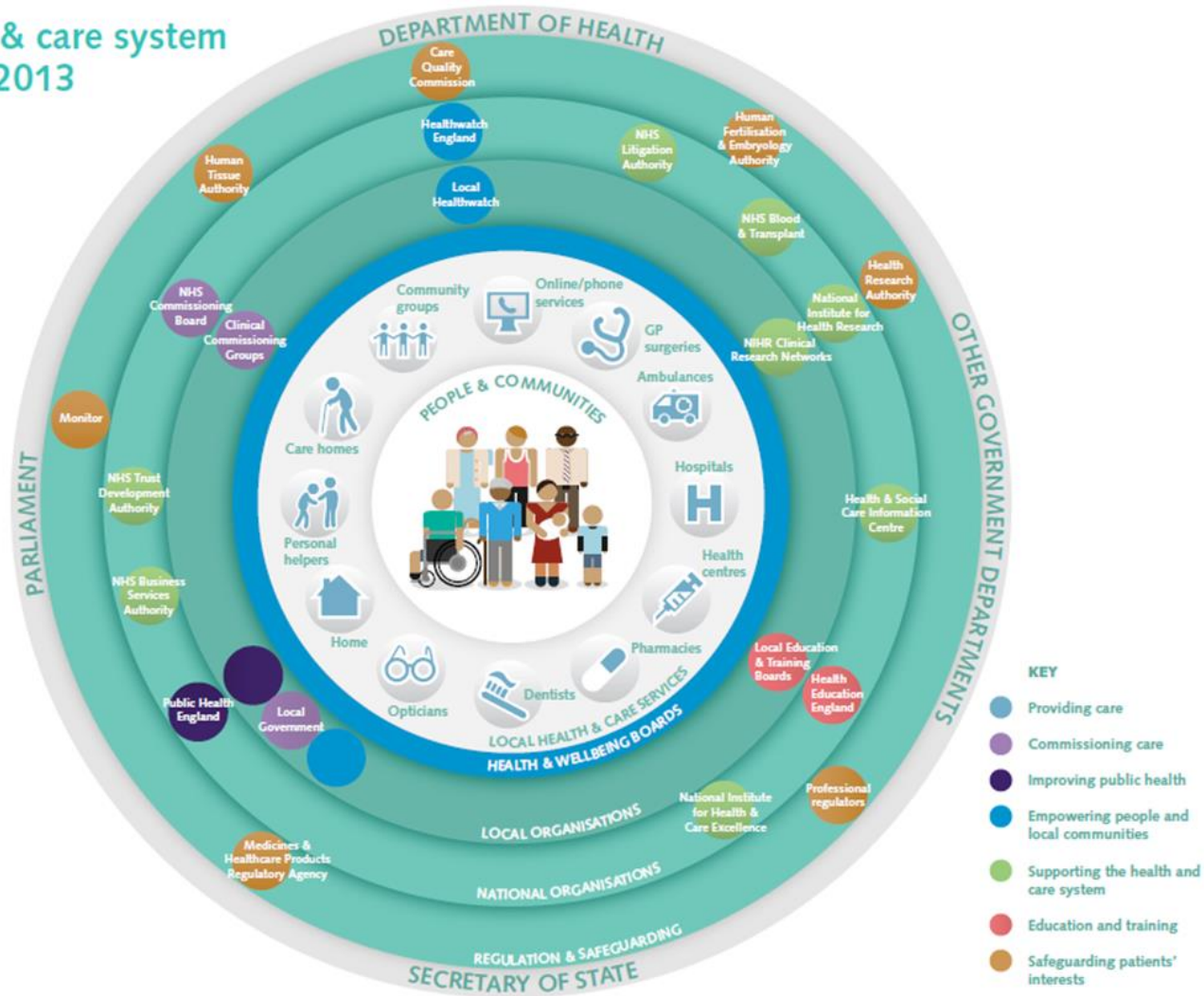


- Identify legal and clinical issues using prescription scenarios.
- Demonstrate how good prescribing systems can support patient care.
- Develop techniques for discussing treatment plans with patients.
- Create a prescribing resource toolkit to support you in practice.

Where do we fit into the NHS?



The health & care system from April 2013



What is prescribing?



‘Prescribing’ is used to describe many related activities, including:

- supply of prescription only medicines.
- prescribing medicines, devices and dressings on the NHS.
- advising patients on the purchase of over the counter medicines and other remedies.
- describe written information provided for patients (information prescriptions) or advice given.

Good practice in prescribing and managing medicines and devices, General Medical Council 2013:
http://www.gmc-uk.org/Prescribing_guidance.pdf_59055247.pdf

Prescribing Decisions



- Guidelines – NICE, APC, PHE, BNF
- Generic unless otherwise advised eg. modified release, devices.
- Cost effective
- Avoid unlicensed specials unless there is a documented specific patient need

Prescribing Decisions



- Guidelines – National Institute of Health and Care Excellence, Local Area Prescribing Committee, Public Health England, British National Formulary
- Generic unless otherwise advised eg. modified release, devices.
- Cost effective
- Avoid unlicensed specials unless there is a documented specific patient need

Check first if not sure

To prescribe or not to prescribe?



Following a shared decision making process, as part of a patient's management plan:

- Right person
- Right reason
- Right medication
- Right form
- Right dose
- Right quantity



FP10 prescriptions



Pharmacy Stamp	Age if <12 year	Name (including forename) and address Name Address	
Dispenser's endorsement	Number of days' treatment N.B. Ensure dose is stated	NP	Pricing Office
Pack & quantity	<ul style="list-style-type: none">• Drug• Strength or dose• Quantity or treatment length• Directions		
Signature of Doctor <i>Signature</i>		Date Date	
For dispenser No. of Prescrip. on form	Name of Prescriber Address of Prescriber		
NHS PATIENTS - please read the notes overleaf			

- ## Requirements under Human Medicines Regulations 2012:
- Written in indelible ink
 - Valid for 6 months.

Controlled drug prescriptions



Pharmacy Stamp

Age
if
<12
year

Name (including forename) and address
Name
Address

Dispenser's endorsement
N.S. Ensure dose is stated

Number of days treatment
NP

Pricing Office

Pack & quantity

Controlled drugs

- Name, strength and form of drug
- Dose
- Quantity in words and figures
- Valid for 28 days

Signature of Doctor
Signature

Date
Date

For dispenser No. of Prescrib. on form

Name of Prescriber
Address of Prescriber

NHS PATIENTS - please read the notes overleaf

FP10NC1000

- All requirements under Human Medicines Regulations 2012
- Plus those under Misuse of Drugs Act 2001

Good practice:

- Limit to 30 days supply.
- If left at reception for collection, sign it out of practice.
- Pharmacies will require identification unless they know the patient.

EPS2 prescriptions



- Electronic Prescription Service – release 2.
- Electronic message sent via same pathways as paper FP10s – trackable audit trail.
- Advanced electronic signature from prescriber.
- Dispenser prints tokens.

MR A DISPENSER	Age 33	Title, Forename, Surname & Address MR ANDREW CHARLTON	
PHARMACY ADDR1 PHARMACY ADDR2 PHARMACY ADDR3 POSTCODE	D.o.B 20/03/1973	ADDRESS LINE 1 ADDRESS LINE 2 ADDRESS LINE 3 ADDRESS LINE 4 ADDRESS LINE 5	POSTCODE
PHARMACY CODE		NHS Number:	NHS NUMBER
Prescribed Medication		DISPENSING TOKEN	
MEDICATION ITEM DESCRIPTION 1 QUANTITY 1 DOSAGE/FREQUENCY 1			

MEDICATION ITEM DESCRIPTION 2 QUANTITY 2 DOSAGE/FREQUENCY 2			

MEDICATION ITEM DESCRIPTION 3 QUANTITY 3 DOSAGE/FREQUENCY 3			

MEDICATION ITEM DESCRIPTION 4 QUANTITY 4 DOSAGE/FREQUENCY 4			

		X X X X X	
DISPENSING TOKEN – Not to be used as a prescription, even if signed by an authorised prescriber.		Date	20/02/2009
DR A JONES	GP CODE		
GP ADDRESS LINE 1 GP ADDRESS LINE 2 GP ADDRESS LINE 3 TELEPHONE NUMBER	POSTCODE		
PCT NAME	PCT CODE		
	FP10DT0407		

ERD prescriptions



Electronic repeat dispensing :

- Uses EPS2
- Authorises and issues a batch of repeatable prescriptions for up to 12 months with just one digital signature.
- Dispensers ask patients if they have had any changes to their condition.
- Allows the cancellation at item or whole prescription level.

Clinical topics 1



Review your resources!

- Urinary tract infection
- Chest infection and respiratory
- Gastro-oesophageal reflux disease (GORD)
- Depression and insomnia
- Knee pain and opioids

Prescription writing



- Explain your scenario
- Is the prescription written legally?
- Does it meet best practice recommendations for prescription writing?
- Does it follow guidance for the patient's condition?
- If not, what would you add or change?
- What else might you want to find out?
- What will you do next for this patient?
- How will you explore this with them in the consultation:
 - What questions will you ask?
 - What information will you give?

Feedback



Urinary tract infection



Pharmacy Stamp	Age 47 D.o.B 12.04.71	Name (including forename) and address <u>Glennis Golightly</u> 4 Any Street <u>Anytown</u>
By not to stamp over age box		
Dispenser's endorsement	Number of days' treatment N.S. Ensure dose is stated	NP
Pack & quantity		Prising Office
Trimethoprim tablets 200mg One to be taken <u>Twice</u> a day X 6 tablets		
Signature of Doctor		Date 20.09.17
For dispenser No. of Prescrip. on form		
NHS PATIENTS - please read the notes overleaf		
32 1768		

This patient came to see you in clinic

You record in the consultation notes:-

“polyuria and dysuria. Nitrate and leuco++. MSU to be sent. Start ABX”

Urine is cloudy.

No allergies recorded

Last recorded EGFR = 87ml/min/1.72m² (02.01.2014)

First presentation, no previous UTI within last 12 months

Chest infection



Pharmacy Stamp	Age 50 G.M.B. 12.04.67	Name (including forenames) and address Greta Golightly 4 Any Street <u>Anytown</u>
By not to stamp over age bar		
Dispenser's endorsement Pack & quantity	Number of days' treatment N.B. Ensure dose is stated NP	Pricing Office
Amoxycillin 500mg One to be taken THREE times a day X 21 capsules Salbutamol inhaler 4 to 8 puffs when needed 2 x 200 dose inhalers		
Signature of Doctor		Date 20.09.17
For dispenser No. of Prescrib. on form		
NHS PATIENTS - please read the notes overleaf		

32 111111 768

You have had a telephone consultation with this patient.

She has no previous history of asthma or COPD

You note in the consultation records that she has picked up a chest infection, and sounds congested.

You have issued an acute prescription for the patient to collect from the surgery.

Any thoughts?

GORD



Pharmacy Stamp	Age 80 D.O.B 12.04.37	Name (including forename) and address Gladys Golightly 4 Any Street <u>Anytown</u>
By not to stamp over age box		
Dispenser's endorsement	Number of days' treatment N.S. Ensure dose is stated	NP
Pack & quantity	Pricing Office	
Lansoprazole 30mg gastro resistant capsules. One to be taken <u>Twice</u> a day X 56 capsules Maalox Plus oral suspension One or Two 5ml <u>spoonfuls</u> Four times daily (after meals and at bedtime) or when required X 500ml		
Signature of Doctor		Date 20.09.17
For dispenser No. of Prescs. on form		
NHS PATIENTS - please read the notes overleaf		

32111111768

This prescription is in your pile of repeats to sign.

Upon further checking her records:

Gladys Golightly is a care home resident

Lansoprazole dose was increased in hospital April 2016 (GORD secondary to large hiatus hernia)

Maalox Plus suspension – initially prescribed February 2017 as the patient was buying this preparation at that time (pre- admission to care home)

Knee pain



Pharmacy Stamp		Age 50 D.o.B 12.04.67	Name (including forename) and address George Golightly 4 Any Street <u>Anytown</u>	
To not to stamp over age box		NP		Pricing Office
Dispenser's endorsement (N.S. Ensure dose is stated)	Number of days' treatment	Pack & quantity		
Oxycodone 40mg MR tablets x 56 (fifty-six) As directed.				
Diclofenac 50mg tablets X 28 One to be taken when required.				
Signature of Doctor		Date 20.09.17		
For dispenser No. of Presc. on form	123456 Dr Doctor My Surgery <u>Anytown</u>			
NHS PATIENTS – please read the notes overleaf				

32 110009 768

This prescription is in your pile of repeats to sign.

Upon further checking his records:

George Golightly was diagnosed with knee pain 6 years ago and osteoarthritis earlier this year.

Oxycodone has been prescribed regularly for 4 years – previous prescriptions were for Codeine.

Diclofenac has been prescribed infrequently for 8 years, using 28 tablets every 3 months.

He is not currently prescribed any other medication for his knee pain.

His BMI is $36\text{kg}/\text{m}^2$, which has remained stable for 3 years. He has type 2 diabetes, has declined group sessions and not been offered exercise advice.

He also has: acne, depression, type 2 diabetes, gastro-oesophageal reflux disease and asthma.

Depression and insomnia



Pharmacy Stamp	Age 50 D.o.B 12.04.67	Name (Including forename) and address George Golightly 4 Any Street Anytown
By not to stamp over age box		
Dispenser's endorsement	Number of days' treatment (N.S. Ensure dose is stated)	NP
Pack & quantity		Pricing Office
Dosulepin capsules 25mg x 56 Two at night		FP10NC1000
Temazepam tablets 10mg x 28 One to be taken at night when required		
Signature of Doctor		Date 20.09.17
For dispenser No. of Prescrip. on form	123456 Dr Doctor My Surgery Anytown	
NHS PATIENTS - please read the notes overleaf		

32 68

This prescription is in your pile of repeats to sign.

Upon further checking his records:

George Golightly was diagnosed with moderate depression four years ago and since then has had difficulty sleeping.

Dosulepin has been issued regularly each month for four years.

Temazepam has been issued regularly each month for three years.

He is not currently prescribed any other medication for his depression.

He also has: acne, knee pain, type 2 diabetes, gastro-oesophageal reflux disease and asthma.

Next steps - systems



- How could a medication review have helped these patients?
- Could you use synchronisation and electronic repeat dispensing (ERD) to improve things for patients?
- How will you explore these in a consultation:
 - What questions will you ask?
 - What information will you give?

Feedback



Break



Patient expectations



- Direction – signposting
- Reassurance
- Advice – how to deal with it
- Prescription
- Education – prevention and support

What would you do with this?



What would you do with this?



What would you do with this?



© 2012 GS

Patient expectations



Think about:

- How, when and why will the patient use it?
- How long are they likely to need it for?
- Will they need monitoring?
- When will you review them?

- *How much will they remember from the consultation?*
- *How will you communicate this?*

Acne



Pharmacy Stamp	Age 43 D.o.B 12.04.74	Name (including forename) and address Gina Golightly 4 Any Street Anytown
By not to stamp over age box		
Dispenser's endorsement	Number of days' treatment N.S. Ensure dose is stated	NP
Pack & quantity <u>Adapalene 0.1% cream</u> X 30g Apply thinly, once daily		Pricing Office
Signature of Doctor		Date 20.09.17
For dispenser No. of Prescs. on form	123456 Dr Doctor My Surgery Anytown	
NHS PATIENTS - please read the notes overleaf		

32 1768

Gina Golightly has recently been diagnosed with moderate acne. She has changed her skincare routine, but found it unsuccessful.

Having used the shared decision making tool and local formulary, she has decided to trial Adapalene.

Asthma



Pharmacy Stamp	Age 46 D.o.B 12.04.71	Name (including forename) and address Gloria Golightly 4 Any Street Anytown
By not to stamp over age box		Dispenser's endorsement NP
Packing & quantity Fostair 100mcg/6mcg beclomethasone/ formoterol metered dose inhaler X 1 device Two puffs to be inhaled twice daily.		Pricing Office FP10NC1000
Signature of Doctor	Date 20.09.17	
For dispenser No. of Prescrib. on form	123456 Dr Doctor My Surgery Anytown	

NHS PATIENTS - please read the notes overleaf

32 11111111768

Gloria Golightly has recently found her asthma has been getting worse. Gloria is starting gentle exercise, including swimming with friends, to help her get out more and lose weight. She is also thinking of stopping smoking.

You have created an asthma action plan together and she has also decided to trial a combined inhaler containing 100mcg beclomethasone (inhaled corticosteroid) and 6mcg formoterol (long acting beta-2 agonist) per dose.

Feedback



Being realistic



- You can't do all of this in a 10 minute consultation!
- How can you manage this?
- How can technology help?
- Who can help you?

Feedback



What is your prescribing toolkit?



- In practice:
 - In a consultation
 - Signing prescriptions
- On a home visit

What will you take away from today?



Objectives for today



- Identify legal and clinical issues using prescription scenarios.
- Demonstrate how good prescribing systems can support patient care.
- Develop techniques for discussing treatment plans with patients.
- Create a prescribing resource toolkit to support you in practice.

Thank you!



- Please complete your feedback forms 😊
- A wide range of prescribing resources can be found at:
<http://medicines.necsu.nhs.uk/guidelines/umbria-guidelines/>

Depression resources



- NECS antidepressants key messages: <http://medicines.necsu.nhs.uk/download/antidepressants-mo-key-messages/>
- NECS hypnotics key messages: <http://medicines.necsu.nhs.uk/download/hypnotics-mo-key-messages/>
- NECS hypnotics – reducing and stopping practice guide: http://medicines.necsu.nhs.uk/download/gp_hypnotic_guide_doc_-pdf/
- NECS dosulepin prescribing guidance: http://medicines.necsu.nhs.uk/download/cumbria_dosulepin_prescribing_guidance_aug151-docx/
- First Step self help booklet – Depression: <https://www.cumbriapartnership.nhs.uk/our-services/mental-health/our-mental-health-services/first-step/first-step-resources>
- NICE shared decision making tool – Depression: <https://www.england.nhs.uk/rightcare/shared-decision-making/>
- Patient UK PHQ-9 toolkit: <https://patient.info/doctor/patient-health-questionnaire-phq-9>

GORD resources



- NECS Proton Pump Inhibitors key messages: <http://medicines.necsu.nhs.uk/download/proton-pump-inhibitors-key-messages/>
- NECS Interventions for GORD: http://medicines.necsu.nhs.uk/download/gastroesophageal_disease-pdf/
- NHS Choices – Heartburn and GORD: <http://www.nhs.uk/Conditions/Gastroesophageal-reflux-disease/Pages/Introduction.aspx>
- Self Care Forum – GORD Factsheet: <http://www.selfcareforum.org/>
- NICE shared decision making grid - GORD: <https://www.england.nhs.uk/rightcare/shared-decision-making/>

Knee pain resources



- NICE shared decision making tool – Osteoarthritis: <https://www.england.nhs.uk/rightcare/shared-decision-making/>
- NHS Choices – Osteoarthritis: <http://www.nhs.uk/conditions/Osteoarthritis/Pages/Introduction.aspx>
- NECS Oxycodone key messages: <http://medicines.necsu.nhs.uk/download/oxycodone-key-messages/>
- NECS NSAID key messages: <http://medicines.necsu.nhs.uk/download/nsaids-key-messages/>
- Opioids Aware: <https://www.rcoa.ac.uk/faculty-of-pain-medicine/opioids-aware>

Infection resources



- North East and Cumbria Antimicrobial Prescribing Guideline:
<https://medicines.necsu.nhs.uk/download/north-east-cumbria-antimicrobial-prescribing-guideline-for-primary-care/>
- TARGET antibiotic resources:
<http://www.rcgp.org.uk/TARGETAntibiotics>

Urinary tract infection:

- Public Health England UTI diagnosis guidelines:
<https://www.gov.uk/government/publications/urinary-tract-infection-diagnosis>
- NICE summary: lower UTI:
<https://www.nice.org.uk/guidance/ng109/resources/visual-summary-pdf-6544021069>
- NICE summary: recurrent UTI:
<https://www.nice.org.uk/guidance/ng112/resources/visual-summary-pdf-6544163629>

Respiratory resources



- Asthma UK – Asthma Action Plan and Asthma Control Test:
<https://www.asthma.org.uk/>
- NECS Summary of National Review of Asthma Deaths (NRAD):
<http://medicines.necsu.nhs.uk/wp-content/uploads/2015/12/2015XNRADXBriefingXandXRecommendations.pdf>
- NICE asthma (diagnosis, monitoring and management) NG80 resources:
<https://www.nice.org.uk/guidance/ng80/resources>
- NECS Patients with asthma – inhaled corticosteroids key messages:
<http://medicines.necsu.nhs.uk/download/patients-with-asthma-inhaled-corticosteroids-key-messages/>
- North Cumbria COPD inhaler guide:
<https://medicines.necsu.nhs.uk/download/copd-inhaler-decision-tool-north-cumbria/>
- Prescribed inhalers for people with COPD key messages:
<https://medicines.necsu.nhs.uk/download/prescribed-inhalers-for-people-with-copd-key-messages-2/>