Winter 2023

NHS England - Midlands Area Controlled Drugs Newsletter

This newsletter contains local and national CD information to support safe use and handling of controlled drugs

Midlands Controlled Drugs Accountable Officers

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New Contact Details for Fraudulent Prescription Form Reward Scheme

Pharmacists should note that the contact details to make a claim under the fraudulent prescription reward scheme have been updated in Part XIVA of the September 2023 Drug Tariff. This follows concerns raised with the Department of Health and Social Care (DHSC) by Community Pharmacy England.

Please note the correct address below is different to that published in the September 2023 Drug Tariff and this should be updated as soon as possible.

Pharmacists who are eligible to claim a reward under the scheme should now contact:

NHS Counter Fraud Authority
7th Floor, HM Government Hub
10 South Colonnade, Canary Wharf
London, E14 4PU
Tel: 0207 895 4545

The Scheme allows pharmacies to claim a financial reward where they have identified a fraudulent script form and either prevented fraud, or contributed to the investigation of fraud. A reward is payable where:

- Fraudulent activity can be proven; and
- The conditions for the scheme are met.

From the September 2023 edition, the Drug Tariff states:

'The NHS Counter Fraud Authority (NHSCFA) ("The Authority") is responsible for receiving and considering claims for reward payments in England. The Scheme applies to all claims which are received by the Authority on or after 7 May 2003. Retention and Reporting Reward: claims where a chemist –
(a) has not provided the drugs, medicines or listed appliances ordered on the fraudulent prescription form, or
(b) has provided the drugs, medicines or listed appliances ordered on the fraudulent prescription form, but had reason to believe at the time or subsequently came to have reason to believe that the form is fraudulent, and reports this to the relevant authorities.

The chemist will be eligible for a payment of £70, where all the conditions for either the retention, or the reporting, element of the reward are met. Only one reward will be payable for each dispensing occasion. Please note there are conditions for the retention, and reporting element of the reward .

These conditions should be viewed on the CFA website: www.cfa.nhs.uk

Pharmacies—Do you Have Obsolete or Out of Date CDs Piled Up Awaiting Destruction?

For community pharmacies without Superintendents to act as Authorised Witnesses in the destruction of out of date or obsolete Controlled Drugs, pharmacies can request an NHSE Authorised Witness to visit, to keep your stocks for destruction to a manageable level. Firstly, log into the on-line CD Reporting Programme **www.cdreporting.co.uk**, and select the green tile entitled *"Destruction Request or Log a Destruction"*. It is a quick and easy form to complete, but where all the CDs for destruction should be input. On receipt of the request, a CD Team member will make contact to arrange a visit to your pharmacy.

Nitrous Oxide

From the 8th November 2023, a change to the Misuse of Drugs Act 1971 to control nitrous oxide under Class C of that Act and to schedule the substance under Schedule 5 to the Misuse of Drugs Regulations 2001 and make provision for lawful access to the substance for legitimate purposes, including medical use. More information can be found through the following link:

- 006/2023: Control of nitrous oxide under the Misuse of Drugs Act 1971 (accessible) - GOV.UK (www.gov.uk)

Medicines Collection by a Representative on Behalf of a Drug Misuse Patient

If representatives are to be sent to collect a dispensed CD on behalf of a drug misuse patient, pharmacists should first obtain a letter from the patient authorising the 'collector', and quoting their name. (This includes those detained in police custody who should supply a letter of authorisation to a police custody officer to present to the pharmacist.) A separate letter is required each time a representative is sent to collect and they should bring ID. The pharmacist must be satisfied that the letter is genuine. It is also good practice to insist on seeing the patient in person at least once a week unless this is not possible. The record of supply in the CD register should include details of the representative. If the directions on the prescription state that the dose must be supervised, the pharmacist should contact the prescriber before the medicine is supplied to the representative – since supervision will not be possible. It is legally acceptable to confirm verbally with the prescriber that they are happy with this arrangement since supervision, while important, is not a legal requirement under the 2001 Regulations. An appropriate record of this conversation should be made. The prescriber would not need to be contacted if the person is in police custody and the representative collecting the dose is a police custody officer or a custody healthcare professional. This is because the administration of any Schedule 2 or 3 CDs in custody will be supervised by a healthcare professional. If the dose is usually supervised, but has been supplied, the pharmacist should consider annotating the prescription and patient medication records to advise others that the dose has not been supervised in the pharmacy.

- It is good practice for the person collecting a Schedule 2 or 3 CD to sign the space on the specific space on the prescription form. A supply can be made if this is not signed, subject to the professional judgement of the pharmacist .
- Instalment prescriptions only need to be signed once.
- A representative, including a delivery driver, can sign on behalf of a patient. However, a robust audit trail should be available to confirm successful delivery of the medicine to the patient.

Shortage of Medicines to Treat ADHD

Prescribers in England have been advised not to start new patients on certain medications for attention deficit hyperactivity disorder (ADHD) which may be affected by shortages through late summer to winter.

Methylphenidate prolonged-release capsules and tablets, lisdexamfetamine capsules, and guanfacine prolonged-release tablets have been in short supply due to a combination of manufacturing issues and increased global demand.

Brands involved are:

1.**Methylphenidate:**

- Equasym XL® 10, 20 and 30 mg capsules
- Xaggitin XL® 18 and 36 mg prolonged-release tablets
- Concerta XL® 54 mg prolonged-release tablets
- Xenidate XL® 27 mg prolonged-release tablets

2.Lisdexamfetamine:

- Elvanse® 20mg, 30mg, 40mg, 50mg, 60mg and 70 mg capsules
- Elvanse® Adult 30mg, 50mg, and 70 mg capsules

3. Guanfacine:

Intuniv® 1mg, 2mg, 3mg and 4 mg prolonged-release tablets

A national patient safety alert has been issued by the Department of Health and Social Care, and it is hoped that the issue will resolve soon. "Other ADHD products remain available but cannot meet excessive increases in demand," the DHSC alert states. "At present, the supply disruptions are expected to resolve at various dates between October and December 2023."

GPs should review patients taking these drugs to check their supplies. If they are running low GPs should consult pharmacists or specialist teams for advice on alternatives.

The Medicines and Healthcare products Regulatory Agency has advised caution when switching patients between different long acting formulations of methylphenidate, warning that the instructions for use and release profiles can be different and may "affect symptom management."

Guidance for Dentists—Prescription Safety

Dental practices need to have systems in place to ensure prescriptions are produced, signed and stamped in accordance with the current regulations. These are:
Schedule 6 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and the associated paragraph 39(3) of Schedule 6 to the GMS Regulations.

Dental practices also need to ensure their blank prescriptions are secured securely. The NHS Counter Fraud Authority has published guidance for the management and control of prescription forms: A guide for prescribers and health organisations (March 2018). This guidance:

- supports providers, both NHS and private, authorised by their commissioner to order prescriptions
- helps providers develop local systems to ensure the security of prescription forms against theft and misuse
- applies to blank computer prescription forms and handwritten pads.

Organisations holding stocks of prescription forms are responsible for their management and use by:

- preventing theft and misuse through secure storage
- developing a policy outlining roles and responsibilities
- developing local protocols outlining actions to take in the case of loss, theft or missing prescription forms/paper
- controlling and recording prescription form movement, including recording serial numbers.

More information can be found on the CQC website - Dental mythbuster 36: Security of blank prescription forms - Care Quality Commission (cqc.org.uk)

Misuse of Drugs Regulations 2023

Please note, that the following changes to the controlled drugs regulations come into force on 31 December 2023, and include amongst other changes, the provisions for paramedics to prescribe various CDs (Regulation 6D). Please see the information linked below:

The Misuse of Drugs (England and Wales and Scotland) (Amendment) (No. 2) Regulations 2023 (legislation.gov.uk)

T28 Exemption Certificates—Denaturing Controlled Drugs

Some organisations may be unaware of the need to hold a T28 exemption form for denaturing controlled drugs. Organisations that denature controlled drugs must obtain a T28 exemption form from the Environment Agency. Care homes (non-nursing) should return medicines to community pharmacies.

T28 exemption allows pharmacies and similar places to denature controlled drugs to comply with the Misuse of Drugs Regulations 2001.

A T28 exemption certificate can be obtained from the Environment Agency Website via the following link:

https://environment.data.gov.uk/public-register/view/search-waste-exemptions

Please remember that T28 exemption certificates need to be renewed every 3 years, so please check your T28 is in date.

In relation to the quantity of waste you can treat under the exemption, pharmacies can:

- store or treat up to 1 cubic metre of waste at any one time
- store waste for up to 6 months

Occurrence Report Submission Reminder for Designated Bodies

Organisational CDAOs, please remember to submit your Occurrence Reports in line with the following timetable:

For any CD events which occur:	Report for this Qtr. no later than:
Q1— Between 1 April and 30 June	31 July
Q2—Between 1 July and 30 September	31 October
Q3—Between 1 October and 30 December	31 January
Q4—Between 1 January and 31 March	30 April

Remember to Report Controlled Drugs Incidents or Concerns to your CDAO on-line via:

www.cdreporting.co.uk

NHS England Midlands

If you experience an issue /concern relating to the prescribing, dispensing, storage or administration of controlled drugs—**PLEASE REPORT THESE EVENTS TO YOUR CDAO**:

Concerns—relate to issues which *may* occur due to e.g. poor practices, system failures, or worries regarding colleagues in relation to CDs. Reporting Concerns may also be a form of 'whistleblowing' re issues surrounding CD safety e.g.:

- **Worries** by surgery staff that a colleague may be self-prescribing CDs following behavioural changes *(concerns may be reported anonymously)*
- Concerns relating to **unauthorised staff** having access to CD cupboard keys/not following SOPs / worries about CD storage issues
- **Inappropriate prescribing** of high volumes of Controlled Drugs identified by say Hospices / Care Homes, Substance Misuse Service, etc
- **Unsafe management and control of CDs** in a patient's home setting, i.e. end of life care

Concerns may be submitted anonymously, but, we would be unable to make enquiries to the reporter about the concern, or feedback any investigative outcomes.

Incidents— these include events that have already happened, directly, or as a result of a different occurrence, and have caused injury, harm, or health damage, including 'near misses'; for example:

- **Loss of CDs** following a pharmacy break-in / dispensing error / CD spillages
- **Prescribing error** on a prescription from a GP: wrong meds/too much or too little dosage
- **Running balances** with a **discrepancy** between stock and register / record keeping errors
- **Failure of a syringe driver** in a home setting for end of life community care
- **Delivery driver error**—issued to wrong patient / lost on route / not followed SOPs
- **Dispensing errors / Medicines label error / incorrect formulation**
- **Fraudulent attempts to obtain CDs**

The above list isn't exhaustive, but general guidance examples of CD incidents which must be reported.

When reporting the incident or concern, you will be asked to provide details of the event and actions taken, such as:

◊ What action was taken?; Was the patient contacted?
◊ Was any harm caused to the patient, what action was taken if so?
◊ Was the prescriber informed?
◊ Who else has been informed/notified of the incident?
◊ What measures have been put in place to prevent recurrence?
◊ What have you learned from the incident? Have you shared learning with your team?

REMEMBER:

The CDAO for NHSE North Midlands is: SAMANTHA TRAVIS

The CDAO for NHSE Central Midlands is: BHAVISHA PATTANI

The CDAO for NHSE West Midlands is: AMIT DAWDA

If you have any queries, please contact the NHSE Midlands CD Teams:

All North Midlands queries: england.northmidlandscd@nhs.net 0113 825 4717
All Central Midlands queries: england.centralmidlands-cd@nhs.net 07730 381119
All West Midlands queries: england.westmidlandscd@nhs.net 07783 822994