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It's Crunch time – the LPC is now engaged in discussions with the three PCOs in Devon regarding next year's local enhanced services and other issues that will affect your day to day work and practice. Devon PCT's financial position is the most difficult – unfortunately this means yet again that it is unlikely that there will be any new services included for community pharmacy this year. Torbay Care Trust is intending to continue all of the local enhanced services for next year and we are still in discussion with NHS Plymouth about their future commissioning intentions.

The slight glimmer of hope on the horizon is that each organisation is undertaking the redesign of patient flows and pathways. While this may well help achieve the dual aims of having patients appropriately treated closer to home and reducing the costs to the commissioners, there is an over reliance on GPs in primary care and the role of pharmacy within the collective 'team' remains to be properly defined. The LPC continues to promote the contribution that community pharmacy could make towards improving patient care and outcomes for patients, as this is generally overlooked while organisations focus inwards on reducing costs. However, there is already a service well placed to demonstrate the value of community pharmacy particularly in the management of long term conditions by supporting patients to take their medicines most effectively. Yes, you've guessed it! Medicines Use Reviews that also provide a source of income that many pharmacy contractors are not maximising. The table below shows the latest data:

Devon LPC Medicines Use Review Figures – November 2008

Primary Care Organisation	Total MURs in month	% of pharmacies claiming	Average number of MURs per pharmacy
Devon PCT	1597	72%	16
NHS Plymouth	439	56%	16
Torbay Care Trust	469	70%	17
South West Region	13518	62%	18

Across Devon and Torbay, the number of contractors undertaking MURs remains at about 70%, while in Plymouth the number of contractors undertaking MURs has been steadily falling, with just over half now partaking in the service. The current fee for a MUR is £28. The potential income for offering 400 MURs is £11,200 per annum per pharmacy contractor. Overall across Devon, Plymouth and Torbay **only 30-35% of the available money is being taken back into pharmacy. That means a staggering £1,645,280 is likely to be unclaimed at the current rate of delivery. Why?**

The LPC has produced a number of resources and training packages to support the MUR service, both in starting it up and ongoing development, available in the online resources section of the website. Several national documents have also recently been produced on medicines use reviews and patients' adherence to their medication, copies are available on the LPC website;

http://www.lpc-online.org.uk/devon_lpc/?news_id=1523.

If you would like further help or advice, please contact the Secretariat Office.

Pharmacy Order 2009

A dry piece of reading or “Your Once in a Lifetime” opportunity to play a part in shaping the new pharmacy regulator? Probably both, but still the draft Pharmacy Order 2009 will take forward recommendations that were included in the White Paper *Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century* to establish a General Pharmaceutical Council (GPhC). The GPhC will regulate pharmacists, technicians and pharmacy premises and its key functions will include:

- Registration of qualified and competent practitioners
- Standards of practice, education and training, CPD and conduct
- Operating fitness to practice procedures
- Registration, regulation and inspection of pharmacy premises

It is incredibly important that you take the chance to respond to the consultation, and to make it easier for you the LPC has arranged to include discussion on the document in its forthcoming locality forums.

Please read and respond to the consultation.

Details of how are set out on the LPC website: http://www.lpconline.org.uk/devon_lpc/?news_id=1460; or you can complete a response form at one of the forums.

Thinking AheadImportant reminder about Christmas 2009!

PSNC have published the 2009 bank holiday opening/closing form on their website; http://www.psn.org.uk/publications_detail.php/117/opening_hours_notification_forms.

Note that in 2009, the official Boxing Day Bank Holiday is on Monday 28 December.

Pharmacies that are normally open on Saturdays will need to notify the PCT (with at least 90 days notice) if they intend to close on 26 December (if the hours are all supplementary), or apply (at least 90 days in advance) for permission to change core hours (if the Saturday hours include core hours).

Prescription Issues

The Secretariat office continues to receive reports from contractors about mis priced and switched prescriptions, and have fed back to PSNC issues about the additional workload for contractors in the sorting and submitting of prescriptions and general inefficiencies of the system. Please continue to let us know if you have experienced significant problems. In the meantime, PSNC issued an update on the Capacity Improvement Programme (CIP) last November together with some guidance to reduce prescription switching which can be downloaded from the LPC website. We have received feedback on findings from sampling contractors in our area detailed below.

We also recommend that you ensure all staff involved are briefed on the guidance for exempt prescriptions.

Handwritten Age Not Signed: Where the patient is aged under 16, or 60 or over and the date of birth is automatically printed on the prescription, the prescription does not need to be signed. However this concession does not apply where the age/date of birth is handwritten - the exemption declaration must be completed.

Ticked but not signed: Where an exemption declaration is required, the prescription should include a mark (for example tick or cross) in one of the exemption boxes and a signature. Forms have been switched because there was not a signature where required.

Not Ticked or Signed: This is where the prescription has been switched because no exemption category was ticked and the prescription wasn't signed (i.e. the back of the form was blank), where the exemption declaration was required.

Charge Paid: This is where the 'charge paid' box has been completed indicating that this was a 'chargeable' prescription which had been misfiled.

Public Health Campaigns

The LPC has been working with the three PCOs across Devon to co-ordinate the healthy lifestyle campaigns that are one of the essential services in the contractual framework.

Devon Primary Care Trust, NHS Plymouth and Torbay Care Trust Healthy Lifestyle Campaigns for 2009-10.

May Sexual health	July Skin Cancer Awareness	September Stroke Prevention
November Alcohol	January Healthy Weight	March No Smoking

For 2009-10 there will be six campaigns as detailed in the box below. We have agreed with the public health leads that there will be a consistent approach to running the campaigns with the same resources being provided across Devon. More information to follow But don't forget the last campaign for the current year is No Smoking day on the 11th March 2009.



There is a link to the national No Smoking Day website on the LPC website, or <http://www.nosmokingday.org.uk>.

The LPC has also produced a practical guide to support pharmacists and their staff in helping people to stop smoking that can be downloaded from the website with lots of useful hints and tips.

*Mandatory CPD
The requirement for
mandatory CPD will come into
effect on the 1st March 2009.
Practicing pharmacists and
registered technicians will
have to make a minimum of
nine CPD records per annum.
Don't forget that by reading
this newsletter you will be
"doing" CPD!!*

NPSA Safety Alerts

How important are the NPSA alerts in Community Pharmacy practice?

Please see the article on the final sheet of this
newsletter.

New fax number for FP57 order form

The FP57 (prescription receipt and refund claims forms) order form issued by the Office Services Department at Dean Clarke House contains an old fax number. This is crucial when ordering and acknowledging receipt of the pads

The new fax number is 01392 449865

The telephone has also changed and is now 01392 449790.

Medicines Sales Protocol

You may recall the Which? Report published last year that highlighted some areas of concern around advice given to patients when purchasing over the counter medicines.

The LPC has produced a medicines sales protocol that if followed will ensure the safe and effective use of non-prescription medicines by our customers. A laminated copy is attached with this newsletter so that you can display it in a prominent position. Further copies can also be downloaded from the LPC website.

Safety Alerts

The LPC is working with the Compliance Manager and primary care contracting team at the Devon PCT to reduce the number of irrelevant alerts being sent to community pharmacy. We are hoping that these will be sent by email shortly once the IT issues have been ironed out. In the meantime, as a reminder, although you are not required under your terms of service to sign and acknowledge receipt of safety alerts, you must be able to demonstrate systems are in place for review and action and to maintain a log of actions taken on receipt of safety alerts. (See the LPC September 08 newsletter http://www.lpc-online.org.uk/bkpage/files/115/newsletter/microsoft_word_september_newsletter.pdf.)

Controlled drugs and supplementary prescribers

We have had some incidents whereby substance misuse clients did not receive their methadone apparently because their prescriptions had been written by a non-medical prescriber. Just to remind you, non-medical prescribers are permitted when acting under and in accordance with the terms of a clinical management plan (CMP), to administer and/or supply or direct any person to administer Controlled Drugs in Schedules 2,3 4 and 5. In England, supplementary prescribers use FP10MDA-SS or FP10MDA-SP prescription forms for drug mis-users. Please ensure that if your pharmacy is in a local Supervised Consumption LES scheme, that all pharmacists working in your pharmacy are familiar with the above.

Forthcoming Events

24th February 2009 Mid Devon Locality Forum with Mike Barbour (mail@thaxtedpharmacy.co.uk)

Venue: Tiverton Hotel, Blundells Road, Tiverton EX16 4DB

25th February 2009 Plymouth Locality Forum with Mark Stone (mark@devonlpc.org)

Venue: The Beefeater Meeting Room, Marsh Mills, Plymouth PL3 6RW

26th February 2009 Torbay Locality Forum with Simon Gardner (rendrag@aol.com)

Venue: Torquay Premier Inn, The Seafront, Torquay TQ2 5HE

2nd March 2009 Exeter Locality Forum with George Wickham (george@thepharmacist.org)

Venue: The Devon Hotel, Matford, Exeter

3rd March 2009 Consultation Event – Draft Pharmacy Order and the Responsible Pharmacist Standards

Venue: Barnstaple Hotel, Braunton Road, Barnstaple

The one not to missed

Brilliant Opportunity to hear the new National Director for Community Pharmacy – Jonathan Mason – talk about his vision for pharmacy and delivery of the White Paper; also to hear representatives of the three PCTs talk about their own local processes for service redesign and the pharmacy needs assessment.

Date: 1st April 2009, where? Sandy Park Exeter.

Details of all of these events can be found on the events page of Devon LPC website;

http://www.lpc-online.org.uk/devon_lpc/forthcoming_events.html

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The next full LPC Committee meeting will be held on Monday 9th March 2009 (7.30 pm) at the Secretariat Offices, Deer Park Business Centre, Haldon Hill, Kennford, Exeter, EX6 7XX.

If you are interested in attending as an observer please contact the Secretariat on 01392 834022.



HOW IMPORTANT ARE THE NPSA ALERTS IN COMMUNITY PHARMACY PRACTICE?

The National Patient Safety Agency (NPSA) is part of the Department of Health and has responsibility for promoting patient safety by informing, supporting and influencing organisations and health care sector workers.



In our pharmacies we are obviously working within the health care sector and therefore we need to be aware of the alerts and include them in our daily practice where appropriate. The alerts released whether 'Rapid Response' or 'Safety' provide methodical advice on how to improve patient safety in your pharmacies. The guidance can be incorporated into your standard operating procedures to provide your patient with a quality and safe dispensing service.

What can happen if I don't work to the NPSA alert recommendations?

- This is presently untested in law, however it is widely taken as fact that if you ignore a specific and relevant alert from the NPSA, this could be used as evidence by the prosecution to weigh in favour of a gross failure of the duty of care to the patient, if a problem occurred with their treatment.
- The Corporate Manslaughter and Corporate Homicide Act 2007 provides the legal framework, where for the first time companies and organisations can be found guilty of corporate manslaughter as a result of serious management failures resulting in a gross breach of a duty of care.

What NPSA alerts are relevant and should be followed by community pharmacy?

The following alerts released by the NPSA are important and should be included in pharmacy practice.

1. Dispensing of oral anti-coagulants – competency 4, NPSA Safety Alert 18 (March 07)
 - a. Resources: www.npsa.nhs.uk, www.lpc-online.org.uk/devon_lpc/
> ONLINE RESOURCES > PHARMACY CONTRACT > DISPENSING > *NPSA Safety Alert Anti-coagulant training resource*
2. Reducing dosing errors with opioid medicines – NPSA Rapid response alert (July 2008)
 - a. Resources: www.npsa.nhs.uk > *Rapid response alerts*,
 - b. www.lpc-online.org.uk/devon_lpc/ > NEWSLETTERS > *July 2008*
3. Risks of incorrect dosing of oral anti-cancer medicines - NPSA Rapid response alert (January 2008)
 - a. Resources: www.npsa.nhs.uk > *Rapid response alerts*