



# Norfolk LPC

## News

November 2011

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### **Clindamycin and Diarrhoea**

We have been asked to remind Pharmacists of the need to inform patients of the appropriate action to take if they develop diarrhoea during or following treatment with some antibiotics, especially Clindamycin. Anyone experiencing such symptoms should stop taking the Clindamycin immediately and seek medical advice.

### **Welcome To Your New-Look Newsletter**

We've made some changes to your LPC Newsletter and hope to be sending it out a little more regularly next year. On the back of your Newsletter you will now find useful contact details and if you have any local pharmacy news we would love to include it. Please do send any feedback good or bad you may have and any ideas you may have for future newsletters to [norfolkassist@pharmacy-anglia.org](mailto:norfolkassist@pharmacy-anglia.org)

### **Ask Your Pharmacist Week**

**Monday 7<sup>th</sup> - Sunday 13<sup>th</sup> November**

Ask Your Pharmacist week is an annual event presented by the NPA. This year's theme is "more than medicines" to promote the accessible services, healthcare advice and highly skilled staff that local pharmacies can provide to their local communities.

It launched in Parliament this year on the 31<sup>st</sup> of October and you should have received some promotional materials a couple of weeks ago. The stores department at NHS Norfolk were very kind in helping us distribute these materials. You can also access many other resources and information materials which will be delivered free of charge on the HERON website. Go to [www.heron.nhs.uk](http://www.heron.nhs.uk) and click the "Leaflet catalogue" tab.

Please use this opportunity to display the materials and raise awareness with your staff during the week and beyond. The posters do not have dates on them so can be used throughout the year, if you would like more posters please email Lauren Dyble [norfolk-assist@pharmacy-anglia.org](mailto:norfolk-assist@pharmacy-anglia.org).

# **New Medicines Service and Hospital-Initiated Medication**

There has been some confusion as to the eligibility of patients who have had a NMS-related medication initiated in secondary care to receive the NMS from their community pharmacy.

Detailed guidance has just been published, and is now on the LPC website. Section 6 clarifies this issue, so we reproduce the key points here for your information:

“Direction 7(1)(e) sets out the eligibility criteria for patients (NB. The letter ‘P’ is used throughout the 2011 Directions and refers to the pharmacy contractor/community pharmacy.)“P only offers to provide first stage services as part of their New Medicine Service guidance (and so only offers to provide any part of the service) to persons who have, for the first time, been prescribed a particular NMS medicine (Schedule 2 lists these drugs), and:

(i) the prescription is on a prescription form that is for dispensing as part of pharmaceutical services or local pharmaceutical services and is presented at the pharmacy premises at or from which the service is to be provided, or

**(ii) this occurred while the patient was at a hospital (whether as an inpatient or an outpatient), but;**

**(aa) as part of a course of treatment that is continued once the patient is no longer at the hospital, and**

**(bb) the patient was referred to P by a health care professional at the hospital who is (partly) responsible for that course of treatment;”**

Patients can therefore be recruited to the NMS in two ways. Firstly they can be recruited into the service opportunistically by the pharmacy contractor when they first present an NHS prescription for a medicine that is eligible for the service. The pharmacy contractor should check with the patient that it is the first time they have collected the new medicine and whether they have received the NMS previously from a different pharmacy.

**The second way they can enter the service is where they are prescribed an eligible medicine whilst at hospital (whether as an inpatient or as an outpatient). In this situation the patient must continue to take the medicine as part of a course of treatment when they are no longer at the hospital, and they must be referred to the service by a health care professional at the hospital who is wholly or partly responsible for a course of treatment.**

In many cases hospital pharmacists will be key to referring patients to their usual community pharmacy contractor for the NMS. Where IT systems and resources permit it may be possible for community pharmacy contractors to receive copies of relevant discharge summaries.

*Norfolk LPC is currently in discussions with key professionals from both the Queen Elizabeth Hospital in King’s Lynn and the Norfolk & Norwich University Hospital. We hope to agree ways in which appropriate hospital staff can raise awareness of the*

NMS service and, ideally, refer patients to their usual pharmacy for a NMS consultation on discharge as part of a wider workstream to improve "Transfer of Care" arrangements. We will keep you informed.

## Annual Complaints Survey & Report

To date only around **35%** of pharmacies have made the required annual Patient Complaints Report return to NHS Norfolk (Due by June). You are reminded that this is a requirement of our core contract, and such low levels of compliance are therefore disappointing. NHS Norfolk has always taken a supportive stance on such requirements. As we move from very local PCT structures to perhaps more remote National Commissioning Board supervision we must be prepared for stricter enforcement of contract requirements.

The template form and a handy year-planner for reporting requirements (a laminated copy of which was sent to all pharmacies) are available on the LPC website.

## EPS2 Update

We are aware that many of you are in the process of discussing EPS2 upgrades with your system suppliers. We would encourage you to do so, but you should also be aware that, as far as we can ascertain, in Norfolk EPS2 full roll-out and activation is not imminent.

NHS prescribers are limited to when they can issue electronic prescriptions by the NHS (General Medical Service Contracts) Regulations 2004. Only PCTs that have been authorised through Secretary of State Directions can direct their GPs to start issuing electronic NHS prescriptions.

83 PCT's are currently listed in the Directions and are therefore able to authorise prescribers to use EPS Release 2. Norfolk is NOT on the list, and it is our understanding that the Secretary of State has indicated that no more PCT areas will be authorised until further notice, presumably to allow evaluation of the system and some of the initial issues.

We are aware that some contractors may be tempted to start to take nominations for EPS2 from patients. You are entitled to do this, but the regulations make it clear that you must satisfy yourself that the nomination is still valid if some time has passed since the nomination was taken. You are not permitted to use EPS2 nomination for any other purpose, e.g. routine script collection etc.

Clearly, when the time comes- and you WILL be given good notice, the task of issuing SmartCards for all dispensary staff will be huge. Norfolk LPC does have concerns that this *may* coincide with a stage of PCT dissolution which means it is short of resources to carry out this task. Norfolk LPC will assist in this if necessary.

The LPC stance on this, therefore, is that while we do not consider it urgent, we would support any Contractor who wishes to deploy EPS2. The PCT will issue SmartCards on request. The person currently responsible is Oliver Horne [oliver.horne@norfolk.nhs.uk](mailto:oliver.horne@norfolk.nhs.uk)

## **DH invites pharmacies to participate in the Quit Kit 3 2012 campaign**

The Department of Health is inviting pharmacies across England to distribute Quit Kits to smokers in a nationwide campaign running from January to March next year. These kits will contain some practical tools and advice which are designed to help people quit smoking.

The 2012 campaign is designed to build on the success of this year's Quit Kit campaign in which more than 3,700 pharmacies across England took part and patients who received the kits had a 70% success rate. That said, the communication of last years scheme left a lot to be desired!

Order lines are open from 3rd October and all contractors who decide to participate in the campaign can order their Quit Kits by calling 0800 678 3173. Any pharmacy interested in supplying these kits and requiring further information can do so by contacting [smokefree@dh.gsi.gov.uk](mailto:smokefree@dh.gsi.gov.uk).

## **Stock Shortages**

### **- Complain to Your MP!**

**PSNC are urging contractors to write to their MPs regarding the on-going supply issues**

Contractors will have seen in the pharmacy press Secretary of State Andrew Lansley's dismissal of pharmacy medicine supply chain problems. In a reply to a Parliamentary Question the Secretary of State said the government had inherited the problem from the previous government and had worked with industry to resolve the issue, dismissing the reports of continuing problems.

We would urge Pharmacists to write to your constituency MPs as soon as possible:

- Briefly outline the problem to remind MPs that many pharmacists are experiencing problems on a daily basis obtaining some lifesaving drugs
- Refer to the Secretary of States dismissal of the problem and state clearly and firmly that the problem is not resolved
- Give brief examples of current shortages and, most importantly, the impact on patients in the constituency
- Keep the letter crisp and to the point
- Contractors should ask their constituency MPs to take the matter up with the Secretary of State as a matter of urgency and confirm the action taken

If you would like contact details for your local MP, please look at: <http://findyourmp.parliament.uk/>

## **Sexual Health Survey Patient Questionnaires**

It is a requirement of the Sexual Health Service LES that pharmacies conduct a patient experience survey, via a questionnaire, with a "fair proportion" of service users (approx. 25%, but we would suggest all are asked to complete the questionnaire where appropriate).

The results of this should be fed back annually to the commissioners (due April each year). This is in addition to the general patient experience survey which is carried out as part of the core contract. Until now the Sexual Health Service Questionnaire related mainly to more invasive/clinical treatments offered by other providers. We have now adapted this into a pharmacy-specific format which is better worded for our services. The template can be downloaded from the Norfolk LPC Website- [www.pharmacy-anglia.org](http://www.pharmacy-anglia.org) (click on Norfolk). Choose “Enhanced Services” from the menu on the left. Then click “Sexual Health” and then “FAQs and Template”.

If you have trouble accessing the site please contact us to request a hard-copy.

## Stop Press!!!!

As we go to press the DH has **finally** issued a consultation on proposals to reform pharmacy control of entry regulations.

The regulations will see the PNA based test replace the current 'necessary or expedient test' and remove the need for three of the exemptions from the control of entry test, including the 100 hours exemption. The “Distance Selling” exemption, however, remains.

For detailed information on the Consultation, please visit the LPC website

[www.pharmacy-anglia.org](http://www.pharmacy-anglia.org) or [www.psn.org.uk](http://www.psn.org.uk)

## Chlamydia Treatment & Partners

On a few occasions we've been asked to clarify the process for partners of positive chlamydia patients who attend for treatment—so here it is!

- A partner is issued with a chlamydia test to complete when he/she goes home. The medication should be issued with the test and the partner informed that the medication should be taken directly after completing the test. Treatment must not be delayed in anticipation of the test result.
- The only delay to treatment will involve how long after eating food or taking anti-acids the medication can be taken. (This should be explained by the provider of the treatment and will also be in the information leaflet with the tablets).
- The rationale: To identify if the partner was ever positive (2/3rds of partners will be) and to allow for on-going partner notification should they return a positive test

## LPC Contacts

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## PCT Contacts

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**Ian Small MRPharmS** is the Pharmacy Adviser with overall responsibility for Community Pharmacy. Ian is based at Lakeside 400 and should be your first "port of call" for most community pharmacy related matters at the PCT.

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