



NHS England & NHS Improvement - Midlands 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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Signatures on Prescriptions

The Secretary of State (H&SC) has approved a temporary measure in England to help limit the transmission of coronavirus by suspending the need for patients to sign prescription forms for five months, to 31 March 2021. This is to avoid cross contamination and help minimise the handling of paperwork when collecting medicines.

Signing the back of a CD prescription as confirmation of collection is good practice and not a requirement, however, where the person collecting the CDs does not agree to sign the back of the form the pharmacist may apply their discretion on whether to supply them.

Additional information on CD Prescriptions forms and validity can be found on the [PSNC website](#). The pharmacist may wish to consider the following:

- If a pharmacist is assured of the ID of the patient or representative they are supplying, they can use

their discretion to supply without a signature. They would still record the ID of the collector in the CD register for Schedule 2 CDs.

- Where a patient is prescribed a Sch.3 CD and later says they never received the medication, to prove it had been supplied, good practice would be to record this in the PMR particularly if the pharmacist is supplying to a representative
- If they are not assured of the ID of the patient or their representative when supplying, they can ask to see identification and if satisfied they can then use their discretion to supply without a signature
- If they are not assured of the identity of the patient or the collecting representative despite seeing ID, they can refuse to supply and record this in the PMR. They should then make reasonable steps to contact the genuine patient (i.e. via the

prescriber) to explain how the medication can be supplied.

Identity Checks: There is a legal requirement for pharmacists to establish whether a person collecting a Sch. 2 CD is the patient, their representative or a health care professional acting within their professional capacity. This only applies to Sch. 2 CDs.

Where the person collecting the Sch. 2 CD is the patient or their representative, the pharmacist should ask for proof of identity, e.g. ask to see photo-ID or a credit/debit card. Pharmacists have the discretion to decide whether to ask for proof of ID and whether to supply the CD. Where the person collecting the drug is a health care professional, the pharmacist must obtain the person's name and address and must ask for proof of identity unless the health professional is known to them. The pharmacist may still supply the CD even if ID is not provided.

'Speak Up' Resources Available for All Staff

The Gosport review highlighted the importance of encouraging staff to speak up when they have concerns. [New e-learning resources](#) to support NHS staff to raise concerns on issues such as patient safety have been launched by Health Education England during October as part of [Speak Up Month](#), the national campaign run by the [National Guardian's Office](#).

They include '[Speak Up](#)', the first instalment of a three-part 'Speak Up, Listen Up, Follow Up' e-learning programme for staff, volunteers and those in training, which explains how to speak up, and what to expect when colleagues do. The subsequent modules aimed at middle managers and senior leaders will follow by March 2021.

'Purple Drank'



Police Controlled Drug Liaison Officers (CDLOs) have raised awareness of 'Purple Drank', also known as 'Lean'. This refers to a drink that is made from over-the-counter medications and is used for its psychoactive effect. It typically contains codeine and promethazine.

Further information on 'Purple Drank' can be accessed on [DrugWatch](#)

Analgesics for Dental Pain



Based on toxicovigilance assessments during the pandemic, there is the potential for patients with dental problems to take excessive dosages of analgesic medications instead of attending the dentist. Patients may have been purchasing over-the-counter forms of pain relief which need to be identified and discussed with the patient.

Please see the following [poster for guidance on dental pain relief](#)

‘Just in Case’ (JIC) Medication for End of Life Care

During the pandemic response services across the UK have adapted and developed. NHS Wales have shared two examples of how they responded to supply: Just in Time Emergency Medicine Packs. This was achieved by a pioneering End of Life Care pharmaceutical service delivering palliative medicines directly to patients in the community within 2 hours. The Welsh Ambulance Service NHS Trust and NHS Wales have also shared how they responded to the pandemic by appropriately administering: ‘Just in Case’ medication to those with pre-existing life shortening illnesses. Further details on these projects can be viewed at:

[End of Life Covid-19 Medicines Service to Supply Just in Time Emergency Medicine Packs](#)
[Ambulance Based ‘Just In Case’ \(JIC\) Medication](#)

‘Live Well with Pain’ Resources

At the September Shropshire and Staffordshire LIN a presentation was delivered to the network on the work that has been taking place at a GP Practice in Shropshire to review complex patients on opioid medication. The network were made aware of resources that have been beneficial for patients and healthcare professionals when having discussions about pain management and their medication. Healthcare professionals may find access to these free resources useful:

<http://www.my.livewellwithpain.co.uk> and <http://www.livewellwithpain.co.uk>

Reducing High Dose Prescribing—Seeking your Initiatives and Interventions



West Midlands Academic Health Science Network (WMAHSN) Patient Safety Collaborative has been asked to support NHSE&I and it’s MedSIP programme by gaining a better understanding of the prescribing of high-dose opioids at a local level by:

- *Identifying effective interventions that lead to a reduction in opioid prescribing for chronic non-cancer pain*
- *Identifying networks, partners, levers and opportunities in the system that will support a culture around the safer prescription of opioids*

The aim of the programme is to support the national

objective to reduce harm from opioid medicines by reducing high dose prescribing (>120mg oral morphine equivalent), for non-cancer pain by 50%, by March 2024.

The WMAHSN would like to hear about any initiatives/ interventions that are currently taking place within the West Midlands that will help in achieving the programme’s ambitions (e.g. service improvement, incentive schemes, audits, practice based research, education and training sessions, campaigns, etc.). Please contact emma.suggett@wmahsn.org with details.

Prescribing in Palliative Care

Medicines guidance on equivalent doses of opioid analgesics can be accessed via the BNF under [Prescribing in Palliative Care](#)

Controlled Drugs Accountable Officer Changes

Organisations that are required to have a CQC registered CDAO are reminded that where there is a change in the person undertaking this role, a [notification form](#) **must be completed and submitted to the CQC in a timely manner** so that records can be kept up to date.



Drug Safety Update — Transdermal Fentanyl Patches for Non-Cancer Pain: Do Not Use in Opioid-Naive Patients

The MHRA have issued a drug safety update in relation to Transdermal Fentanyl Patches for non-cancer pain. Following a review of the risks associated with use of opioid medicines for non-cancer pain, the Commission on Human Medicines (CHM) has recommended that Fentanyl Transdermal Patches are contra-indicated in opioid-naive patients in the UK. The update provides advice for healthcare professionals and reminds prescribers to inform patients of the following:

- Not to exceed the prescribed dose
- Follow the correct frequency of patch application, avoiding touching the adhesive side of patches, and washing hands after application
- Not to cut patches and avoid exposure of patches to heat including via hot water (bath, shower)
- Ensure that old patches are removed before applying a new one
- Follow instructions for safe storage and properly dispose of used patches or patches that are not needed; it is particularly important to keep patches out of sight and reach of children at all times.

The full update can be accessed online [Drug Safety Update](#)

