



Controlled Drugs Newsletter

Summer Edition

August 2022

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

Midlands Controlled Drugs Accountable Officers

North Midlands - Derbyshire, Nottinghamshire, Shropshire & Staffordshire	Central Midlands - Lincolnshire, Leicester, Leicestershire, Rutland & Northamptonshire	West Midlands - The Black Country, Birmingham & Solihull, Coventry & Warwickshire, Herefordshire & Worcestershire
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Self-Checking Dispensing Errors

Over recent months we have seen an increase in incidents reported in relation to self-checking dispensing errors. Ideally two people should be involved in the dispensing process where this is possible. A second competent person should carry out an accuracy check and ideally should not have been involved in the assembly process. If you are a pharmacist working alone, once you have assembled the medicines, try to create a short mental break between the assembly and final check to avoid carrying over any recollection of preconceived errors from the assembly process, this should help to reduce the risk of such errors occurring.

Sales of Phenergan & Codeine Linctus

We have been made aware of further concerns regarding increases in OTC requests/purchases of Phenergan (Promethazine), Pholcodine, Codeine Linctus and Co-codamol.

These products can be used to make a substance called 'Purple Drank' or 'Lean'. Information produced by Drugwatch UK, provides further details on 'Purple Drank/ Lean' and can be found at:

http://thedrugswheel.com/drugwatch/Lean_Infosheet_DrugWatch_1_0_Pro.pdf

Please make sure everyone in the pharmacy is aware of the potential for abuse of these medications and have a process in place for dealing with them.

Review requests for any signs of misuse such as:

- Requests regarding stock availability via telephone
- Large quantities request or multiple visits from the same people
- Rehearsed answers - the customer's answers appear rehearsed or scripted
- Specific products - the customer asks for Phenergan, Pholcodine or Co-codamol products
- Opportunistic - the customer waits for busy periods in the pharmacy or until less experienced staff are available
- Nervous/guilty behaviour - the customer avoids eye contact, appears uncomfortable answering questions or is unusually timid
- Impatient - the customer is in a hurry to complete the transaction

All sales of this medication must only be made by pharmacists or suitably trained pharmacy staff under the supervision of a pharmacist. We also recommend these medications are kept out of sight.

Destruction of Expired/Obsolete Schedule 2 CDs

It is a legal requirement under the 2001 regulations to have stocks of obsolete, expired and unwanted Schedule 2 CDs destroyed in the presence of an Authorised Witness (AW). Community pharmacies with less than five branches and dispensing GP practices should complete the CD Destruction form at www.cdreporting.co.uk. Once your request is submitted on the portal, we will process it and you will be contacted by an AW to book a date for the CD destruction to take place.

PLEASE REMEMBER: Out of date/obsolete or unwanted Schedule 3 stock CDs (e.g. temazepam, tramadol, buprenorphine, midazolam) do not require the presence of an AW. It is recommended that a senior member of practice staff / pharmacy destroys and records the Schedule 3 CDs and another member of staff witnesses the destruction.

Opioid Prescribing Comparators Dashboard

ePACT2 have released the newest dashboard – the Opioid Prescribing Comparators Dashboard, the accompanying YouTube video for guidance about its purpose and background:

<https://www.youtube.com/watch?v=5yRNK-FDpic&feature=youtu.be>

Community Pharmacy Emergency Closures

There have been frequent cases of pharmacies not being able to dispense daily Opioid Substitution Treatment (OST) scripts, but not taking action to ensure drug treatment service providers are informed. We appreciate the significant challenges in trying to fill pharmacist gaps and the decision to close a pharmacy is not one that is taken lightly as this situation affects all patients at that pharmacy.

We ask from a Controlled Drugs perspective that drug treatment services are informed so patients can be supported in a timely way to ensure continuity of supply, and to advise daily supervision clients of the closure and how to access their OST medicine.

If your pharmacy is faced with a risk of a short-term closure because no pharmacist is available, in readiness make sure your pharmacy business continuity plan is up to date, ensure the emergency closure SOPs are up to date and easy-to-find for someone who may be completely unfamiliar with your pharmacy.

It is important that all the pharmacy staff are aware of what to do and that a checklist is to hand, which includes emergency numbers and who to contact including GP practices so they can signpost patients and local drug treatment services to ensure all avenues could be explored, and to avoid a patient being without their required medication on any day. Not forgetting to inform NHSE Primary Care Pharmacy Team of the emergency closure who can be contacted by email;

Derbyshire, Lincolnshire, Leicestershire, Northamptonshire and Nottinghamshire: england.eastmidsparmacy@nhs.net
Shropshire, Staffordshire, Birmingham & Solihull, Coventry & Warwickshire, Herefordshire & Worcestershire and The Black Country: england.pharmacy-westmidlands@nhs.net

Useful Links to Updated Guidance

- NICE have recently published guidance on “ Medicines associated with dependence or withdrawal symptoms: safe prescribing and withdrawal management for adults” This guidance covers prescribing and managing withdrawal from opioids, benzodiazepines, gabapentinoids, z-drugs in primary and secondary care. It does not cover opioids prescribed for acute or cancer pain, or at the end of life, or illicit drug dependence. You can find the guidance at <https://www.nice.org.uk/guidance/ng215>
- A new study has suggested pregabalin may slightly increase the risk of major congenital malformations if used in pregnancy. Prescribers should advise patients that they should continue to use effective contraception during treatment but avoid prescribing in pregnancy unless clearly necessary. [Pregabalin \(Lyrica\): findings of safety study on risks during pregnancy - GOV.UK \(www.gov.uk\)](#)
- The MHRA has been made aware of concerns raised following changes to the product information for chlorthalidopoxide (Librium) regarding a possible genotoxicity risk and contraception requirements for males and females. This relates to recent implementation of the European Medicines Agency's in [SWP recommendations](#) in relation to genotoxic medicines.
- Assessment of all chronic pain and management of chronic primary pain which covers assessing all chronic pain and managing chronic primary pain in people aged 16 years and over. For more information follow the link [Recommendations | Chronic pain \(primary and secondary\) in over 16s: assessment of all chronic pain and management of chronic primary pain | Guidance | NICE](#)
- In May 2022, the Specialist Pharmacy Service published guidance on strategies for the safe application of transdermal patches to reduce the risk of medication errors in healthcare settings. To read the guidance follow the link [Using transdermal patches safely in healthcare settings – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](#)

Controlled Drug Liaison Officers (CDLOs)

Police forces across the UK have CDLOs who can offer advice around the safe management of pharmaceutical controlled drugs to ensure the correct procedures and legislation are followed, such as:

- Safe storage
- Auditing
- CD destructions
- Suspicious activity/theft
- Forged or stolen prescriptions
- Current crime trends

CDLOs can inspect healthcare premises, pharmacies, and accompany GPhC inspectors and CDAO team members on visits. CDLOs may conduct their own unannounced visits. Learnings and observations from some of these visits can be found below:

- Large stock quantity of CDs
- Regular balance checks not being completed as per SOPs
- Issues identified with CD destruction entries
- Large quantity of CD's to be destroyed
- CDs not being stored in line with safe custody regulations

The contact details of your CDLO can be found here [Contact your nearest CDLO \(apcdlo.org\)](https://www.apcdlo.org)

Incidents & Concerns

All incidents and concerns raised involving CDs must be reported to the CD Accountable Officer. Concerns may include patients potentially misusing or abusing drugs, prescribing concerns, dispensing concerns etc. To report all CD incidents and concerns please use the CD online reporting tool available at www.cdreporting.co.uk