

GP Practices  
Community Pharmacies  
LMCs & LPCs

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By Email

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Dear Colleagues,

### **Re: Tackling inappropriate supplies of Controlled/High Risk Drugs**

I am writing to share with you serious concerns of patients trying to obtain inappropriate additional supplies of Controlled/High Risk Drugs concurrently through various service pathways.

We have had a significant increase in incidents reported to us where patients have frequently presented through the Pharmacy NUMSAS Service; attended OOH GP Care Providers or A & E Departments and successfully managed to obtain supplies at multiple sites across the Yorkshire and Humber region in a very short period of time. Furthermore we have had a report of a patient who consecutively attended five different A&E Departments in our region and managed to obtain supplies of Pethidine.

All these incidents have highlighted the potential for patient harm. Each one of us has a duty of care to identify, manage and reduce risk within our organisations.

We have established a multidisciplinary approach to tackle this issue of inappropriate requests for supplies of controlled drugs/high risk medicines. We are putting together a series of safeguards and these will be underpinned by professional vigilance and effective communication. Access to the Summary Care Record is an invaluable tool and should be checked to support decisions for any requests for urgent supply of medicines.

#### **Actions for General Practices**

- Implement a system for colleagues including the administrative team to identify patients who are in this high risk category.
- GMC Guidance requires regular reviews and ideally this should be face to face consultations if the patient is prescribed a controlled or other medicine that is commonly abused or misused.
- Where you have identified or have concerns that a patient may be trying to obtain inappropriate supplies you must use the additional information for dispenser feature for the Electronic Prescription Service that adds a note on the Left Hand Side of the prescription below the prescribed medicine. The words to use are: **“SUPPLIES ONLY TO BE MADE BY THE AUTHORISING PRESCRIBER”**
- Local multidisciplinary information sharing with NHS111 & GP OOH Providers for each of these patients to prevent further inappropriate supplies.
- Use Electronic Repeat Dispensing (eRD) for daily or weekly prescriptions of non-Schedule 2 or 3 Controlled Drugs. This will allow pharmacies to change nominations and retrieve the prescriptions from the NHS spine if the patient were to travel to a different part of the country.
- Have a clear system for reviewing all NUMSAS/OOH/A&E request/supply notifications to identify and manage inappropriate supplies. Add any notifications of supplies made to the GP record (under medicines prescribed elsewhere), so that they are made visible to others using the

Summary Care Record and therefore could help prevent further inappropriate supplies.

- Check formal identification and confirm medication with their current GP for temporary patients who may also be trying to obtain further supplies of controlled or other medicines commonly abused or misused.

### **Actions for Community Pharmacies**

- Determine if a supply request is genuine and use all existing information to support your decision making.
- Access the Summary Care Record for every NUMSAS or Emergency Supply request to identify concerns raised by the authorising prescriber with the drug(s) concerned which will be communicated with **SUPPLIES ONLY TO BE MADE BY THE AUTHORISING PRESCRIBER.**
- Use the EPS Tracker to check status of any current prescriptions and where necessary contact the nominated pharmacy for further information.
- Discuss, document and raise any new concerns with prescribers.
- Work collaboratively with General Practices to help manage high risk and vulnerable patients
- Where a NUMSAS notification has not been sent electronically, ensure a paper copy is sent to the GP Practice.
- Keep a copy of this letter near your Prescription Book where you document emergency supplies, and near where the NUMSAS service is delivered.

### **Joint Actions for GP Practices & Community Pharmacies**

- All staff to have regular refresher training around high risk drugs and medicines that are commonly abused or misused.
- All staff to know the specific wording used to identify and prevent inappropriate supplies of individual drugs across the Yorkshire & Humber region.
- Share this letter with all staff within your practices including locum colleagues.

### **Reporting of Controlled Drug Incidents and Concerns**

I would also like to take this opportunity to remind all GP Practices, Prescribers and Community Pharmacies that all Controlled Drug Incidents and Concerns must be reported through the CD Reporting Portal: [www.cdreporting.co.uk](http://www.cdreporting.co.uk)

To successfully implement these strategies to prevent inappropriate supplies of Controlled/high risk drugs, and therefore safeguard the health and safety of vulnerable patients, it is imperative that all healthcare professionals work together and I thank you for your support in this matter.

Yours faithfully



**Gazala Khan**

Lead Controlled Drugs Accountable Officer  
NHS England North (Yorkshire & Humber)