



LPC News

Christmas Edition



MERRY CHRISTMAS

Hello and welcome to the last edition of this year of the LPC News.

We have again crammed our Ph-estive Issue with interesting stories and important Information. We hope you enjoy it and enjoy doing the the word search. The comms tema and I would like to wish a Merry Christmas and all the best for the new year. We look forward to reporting again in the new year.

Sami & The Comms Team

Honorary Doctorate

Sunderland LPC are delighted to announce that Umesh Patel, Chairman of Sunderland Local Pharmaceutical Committee, has been awarded an Honorary Doctorate of Science by the University of Sunderland. Mr Patel, who is also the Northern regional representative (and former chairman) of the National Pharmaceutical Association and a member of the Pharmaceutical Services Negotiating Committee (PSNC), was presented the award at the Stadium of Light on 2 December 2010 for his outstanding contribution to the pharmacy profession and in recognition of his professional standing in Sunderland and in the North East Region. Mr Patel said:

"I am delighted for this recognition and see it as being a very positive achievement for the community pharmacy profession as a whole. I have found there to be tremendous opportunities in this country and feel that people of any background can achieve their goals through hard work and determination."

Umesh studied for his pharmacy degree at Sunderland and registered as a pharmacist in 1979. He has worked in the Sunderland area for 22 years and has community pharmacies in Tunstall Road and Southwick, which he runs with his wife Damini, who is also a pharmacist.



Kathryn Featherstone

Kathryn has worked with Gateshead & South Tyneside LPC as our support officer for 2 years but she now leaves us. The LPC would like to thank her for all her hard work whilst she has been with us. We wish her all the best for the future although she will not be a stranger as we work with her as secretary of Sunderland LPC.

Swine FLU -is back!!!!

The PCT have informed us that Swine flu is back and the Department of health are allowing the prescribing of Tamiflu. This time however, the prescriptions will be via the usual "pharmacy" distribution system using FP10 prescriptions and not via anti -viral centres via vouchers. The LPC would like to bring this important information to your attention as you may start to get prescriptions for Tamiflu. Please ensure your pharmacy teams are aware of this information. Pharmacy played a very important role in the last outbreak and we need to be ensure we can help again. It may be prudent to obtain a few packs of Tamiflu for the holiday period.

Minor Ailments

Minor Ailments has now been launched accross our area. The PCT have asked us to remind you that it is important that you fully fill the minor ailments form. In particular the back side of the form.

Would you like to receive the LPC NEW by Email?

If you would like to receive the LPC News by email contact [Sami - lpc-news@sami.eu.com](mailto:Sami-lpc-news@sami.eu.com)

NEW Years Day

The LPC's worked with the PCT to arrange Pharmaceutical Cover on New Years day. We would like to thank all those involved for their co-operation in arranging the days cover. We would like to audit the day to help us plan for the future. We would appreciate your help in this. If you are open on New Years Day please could you let us know how many prescriptions you do on that day.

Please make sure you only include walk in prescriptions and not any prescriptions you may have done during any quiet periods.

We have attached a simple form for you to fill in or alternatively you can fill in an eform by going to our website and clicking on the New Years Day Icon.

instead as it is more cost effective and freely available.

Christmas Word Search



Try and find as many words as possible in the word Search Grid.

Score:

- Less than 20** – Oh Dear! I think the lights on the Christmas tree have gone out...
- 21 – 40** – End of term report says 'Could do better'
- 41 – 49** – You've made it on to Santa's 'Good Children' list!
- 50** – You're the star at the top of the tree!

The answers will be published in the

Snow Delivery Service

Pharmacies have tried their best to not allow the bad weather to disrupt to their services. One contractor even went as far as getting his ski's on to make deliveries!!!! Jan Forster, Director of North East Primary Care Services Agency, said: "We know we can rely on our community pharmacists, like all health professionals in our local NHS, to ensure that patient care is not compromised, despite the current adverse weather conditions."



PNA's

Contractors will by now have received a copy of the draft PNA from the PCT. (in multiples, this may have gone to your Head Office)

You are strongly advised to check your details and respond, if necessary, to the PCT before the deadline of 17th January. The PCT will need to consider any changes then get approval from the Board, before publication of the final PNA document on 1st March 2011.

NCSO

Last month we highlighted the correct endorsing of NCSO products. Remember to check mid month the PSNC website to see which products have been granted NCSO status by the department of health. It is important you keep up to date with this otherwise you could find you are losing a lot of money

PSNC LPC CONFERENCE

The PSNC held a successful conference in London. Members of both LPC's attended the conference and found it very useful and informative. A small interview with Sue Sharp is now posted on Gateshead & South Tyneside LPC Website.

www.gandstlpc.net

with a link to all the resources and information about the conference on the PSNC Website.

RECORD KEEPING

We wish to remind pharmacists that good record keeping is really important. There may be times when we need to make a decision about a prescription when it is not possible to contact the prescriber, perhaps at weekends, Bank Holidays and evenings. Most PMR systems have a facility to add intervention notes or just a simple file note. If your decision is challenged at a future date, it will be much easier to remember why you made the change or defend your actions, if you have documented it at the time, giving a reason for your decision, showing due diligence.

ZOTON

Due to supply policies by Pfizer Ltd, some local community pharmacists within the Sunderland area are unable to obtain sufficient supplies of Zoton Fastab to supply their patients.

Sunderland LPC have written to Pfizer and are still awaiting a response (although we understand City Hospitals Sunderland received a response from Pfizer when they forwarded our letter).

The NHS South of Tyne & Wear is in the process of switching patients to generic capsules; Sunderland LPC would strongly recommend that those pharmacies who have patients on lansoprazole fastabs should (where possible) advise the GP to prescribe lansoprazole capsules instead as it is more cost effective and freely available.

TRAINING

Smoking Cessation and NHS Health Check training is now provided for free by First Contact Clinical. See the attached leaflets for details and contacts.

First Contact
Clinical



Seasonal Greetings & Best wishes for 2011

*From all the members of
Gateshead & South Tyneside LPC*




Emma Morris



J.P. Green



David How

Lee Simpson







How to get the most from endorsements

The recent news that £120m is to be taken out of Category M between October 2010 and March 2011 means that times are going to be tight for community pharmacy. It is therefore imperative that contractors get their prescription endorsements right, to try to minimise any losses that might arise from incorrect pricing. To help contractors do this, we have put together a short guide to cover some of the areas where losses might occur. (Whilst these are correct at the time of going to press – please always check the current Drug Tariff ensure accuracy).

NCSO

When there are shortages of products in part VIII of the DT, contractors may have to dispense an equivalent product that is only available at above the set DT price. When this happens, PSNC can apply to the DH for the 'No Cheaper Stock Obtainable' (NCSO) Concession. If granted, contractors will be paid based on their endorsement rather than the DT price but it is essential that contractors endorse the prescription fully with:

- the letters 'NCSO' and
- **full details of the product dispensed** (e.g. manufacturer, brand name or price if it is an uncommon item and pack size) and
- **sign and date**

If any of this information is missing, payment will be based on the Drug Tariff price rather than the endorsed product.

If an item is in Category A or M of Part VIII of the Drug Tariff, out of pocket expenses can't normally be claimed. However if the NCSO Concession has been granted and the prescription is properly endorsed, **out of pocket expenses can also be claimed.**

The NCSO concession only lasts for the month it is granted and if problems remain, PSNC has to reapply at the beginning of the next month. In this situation PSNC have a FAQ response as shown below:

Q. Can I endorse a prescription 'NCSO' in advance of the NCSO Concession being agreed by the DH?

A. Yes, where a Part VIII product cannot be obtained at the Drug Tariff price because of a supply problem and a more expensive product has had to be dispensed, the prescription could be endorsed in anticipation of the NCSO Concession being granted. The full endorsement required is the initials, 'NCSO', full details of the product dispensed and the endorsement must be initialled and dated. NHS Prescription Services will reimburse based on the standard Part VIII price where the product was not been granted the NCSO Concession in the month concerned.

The image shows a green NHS prescription form with the following handwritten entries:

- Age:** 35
- Name (including forename) and address:** A Patient, Address St, Address Town, Postcode
- Dispenser's endorsement:** NCSO
- Product 1:** Gabapentin 100mg Caps, 1 tds, 1 x 100
- Product 2:** Broken Bulk Tacrolimus 1mg, 10d, 28
- Product 3:** Paracetamol 500mg Tablets, 2 QDS, 2 x 100
- Signature of Doctor:** [Signature]
- For dispenser's use:** Dr Who, Street Surgery, Anytown, Postcode

Slipped date of birth / age printing

It is essential to check that the age / DoB is shown clearly in the box, as if it is obscured or printing has slipped, then these prescriptions could be switched if they have been included in the exempt bundle on age grounds, as the pricing computer won't recognise the age exemption. **If the age / DoB has any slippage or overprinting, make sure the back of the prescription has been signed and ticked for the relevant exemption.**

Slipped prescription item printing

Occasionally a prescription item is partially printed over the prescriber's signature box. Prescription Services has advised that if less than 50% of the item is printed within the signature box, then the prescription should be included in **the red separators to sort separately when sending for pricing at the end of the month**, to ensure it gets priced manually and not missed by the pricing computers.

However, if more than 50% of the item is in the signature box then a new prescription must be sought from the prescriber.

Broken Bulk

Claims for 'Broken Bulk' should be made if the quantity that you have to order from the supplier ordered is unlikely to be used up during the following six months. Claims can apply to drugs, incontinence and stoma appliances in Part IXB and IXC and chemical reagents other than items supplied in special containers. Broken Bulk is not allowed on Part VIII Category E products but may be paid on the ingredients.

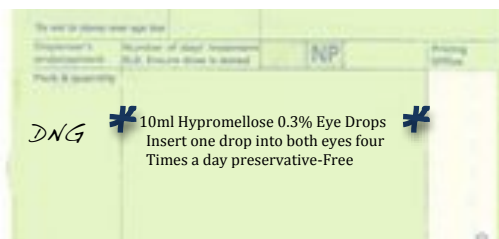
The endorsement should include '**BB**', the **pack size** supplied and the **date** of the claim.

Use the red separators to sort separately when sending for pricing at the end of the month; this ensures that they are manually priced as the **pricing computer does not recognise BB claims.**

Specials

Keep prescriptions for 'Specials' separate and use **the red separators to sort separately when sending for pricing at the end of the month**. This is so that they get priced manually and don't get put into the computerised system, which may miss that it is a special and just price on the first ingredient. Include Extemporaneously Prepared items in this category. PSNC has also suggested that the main section of the prescription is marked with an asterisk, to force the pricing computer to send it to a manual pricer (as if it were a hand written prescription), however the Prescription Services advice is that defacing a prescription is still technically illegal.

If you do not get any discount from your Specials supplier, remember to endorse 'DNG'.



FP34C Submission Document REV'D April 2010	FP34C Submission Document REV'D April 2010																																							
SORTING AND SUBMISSIONS OF FORMS																																								
<p>1. Complete one submission document only.</p> <p>2. FP10 prescription forms must be sorted as follows:</p> <p>2.1 Into patient charge group, i.e. exempt, paid, and paid at old rate. Each group should be segregated. PLEASE DO NOT use adhesive tape, pins or staples as these have to be removed and can delay processing.</p> <p>2.2 Within each group, sort in the order stated below:</p> <p>2.2.1 Resubmitted forms from previous month(s).</p> <p>2.2.2 Prescription forms with broken bulk claims, items with a net ingredient cost of £100 or more, items where prescribers have included supplementary product information (i.e. Specials). Please wrap these prescriptions in the red separators endorsed with this submission form to support identification at the NHD Prescription Services.</p> <p>2.2.3 Forms FP10 MDA by prescriber surname - where possible sorted open and fat.</p> <p>2.2.4 Forms FP10 D.</p> <p>2.2.5 Forms FP10RIG with RN indicator by prescriber surname.</p> <p>2.2.6 Forms FP10RIG with CN indicator by prescriber surname.</p> <p>2.2.7 Forms FP10RIG with SP indicator by prescriber surname.</p> <p>2.2.8 Forms FP10G/NC Hospital Forms.</p> <p>2.2.9 All other FP10 forms by prescriber surname (NB any prescribers with fewer than 20 forms can be placed into a miscellaneous section at the end of each group).</p> <p>3. All of the following forms must be kept separate from the FP10 prescriptions in exempt and chargeable groups (submitted for processing and reimbursement as in paragraph 2) and collated by form type as follows:</p> <p>3.1 RA ie Repeat Authorising forms.</p> <p>3.2 ETP Tokens for non payment.</p> <p>3.3 FP57 forms.</p> <p>4. Enter the required submission/declaration figures in the boxes opposite including electronic prescriptions. Do not include the number of any ETP tokens for non-payment or the number of any Repeat Authorising forms in your FP10 forms/items declarations in Part 1.</p> <p>5. Please fold this submission document along the fold line on page 4, so that the bar code is visible on the top, do not tear the form. Place this completed submission document on top of the submitted forms, pack securely in accordance with guidelines issued by NHS Security Management Services. Despatch to the NHD Prescription Service by NO LATER THAN THE FIFTH day of the month following that in which they were dispensed, using the address label provided.</p> <p>Notes -</p> <p>A) Address labels (for submission of parcels to the NHD Prescription Services) are supplied by the NHD Prescription Services.</p> <p>B) Postage on parcels and correspondence sent to the NHD Prescription Services MUST be pre-paid.</p> <p>C) The forms must be despatched in a secure manner that enables tracking and tracing of the delivery.</p>	<p>Part 1 Submissions</p> <table border="1"> <thead> <tr> <th>FP10/Electronic Prescription Claims</th> <th>Prescriptions</th> <th>Items</th> </tr> </thead> <tbody> <tr> <td>Exempt from patient charge</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Patient charge paid</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Patient charge paid at old rate</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Total - All Prescriptions</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>ETP Tokens for non-payment</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Electronic Prescriptions (do not if any submitted)</td> <td><input type="checkbox"/></td> <td>Repeat Authorising forms (do not if any submitted) <input type="checkbox"/></td> </tr> <tr> <td>No. of FP57 forms submitted</td> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td>FP57 total amount refunded</td> <td>£ <input type="checkbox"/></td> <td><input type="checkbox"/> pence</td> </tr> </tbody> </table> <p>Part 2 Declarations</p> <table border="1"> <tbody> <tr> <td>Total number of hours that pharmacists and staff members supporting the dispensing process work in an average week, rounded to the nearest whole number (See Drug Tariff part VIIA)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No. of Medicines Use Reviews undertaken (See Drug Tariff part VIC)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No. of Appliance Use Reviews carried out at premises or subsequent reviews for users living at the same location within a 24 hour period (See Drug Tariff part VIE)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No. of Appliance Use reviews conducted at the users home (See Drug Tariff part VIE)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No. of items with Out of Pocket Expenses claimed (See Drug Tariff part I cause 10)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Total claim for Out of Pocket Expenses (only enter claim for out of pocket expenses)</td> <td>£ <input type="checkbox"/></td> </tr> </tbody> </table>	FP10/Electronic Prescription Claims	Prescriptions	Items	Exempt from patient charge	<input type="checkbox"/>	<input type="checkbox"/>	Patient charge paid	<input type="checkbox"/>	<input type="checkbox"/>	Patient charge paid at old rate	<input type="checkbox"/>	<input type="checkbox"/>	Total - All Prescriptions	<input type="checkbox"/>	<input type="checkbox"/>	ETP Tokens for non-payment	<input type="checkbox"/>	<input type="checkbox"/>	Electronic Prescriptions (do not if any submitted)	<input type="checkbox"/>	Repeat Authorising forms (do not if any submitted) <input type="checkbox"/>	No. of FP57 forms submitted	<input type="checkbox"/>		FP57 total amount refunded	£ <input type="checkbox"/>	<input type="checkbox"/> pence	Total number of hours that pharmacists and staff members supporting the dispensing process work in an average week, rounded to the nearest whole number (See Drug Tariff part VIIA)	<input type="checkbox"/>	No. of Medicines Use Reviews undertaken (See Drug Tariff part VIC)	<input type="checkbox"/>	No. of Appliance Use Reviews carried out at premises or subsequent reviews for users living at the same location within a 24 hour period (See Drug Tariff part VIE)	<input type="checkbox"/>	No. of Appliance Use reviews conducted at the users home (See Drug Tariff part VIE)	<input type="checkbox"/>	No. of items with Out of Pocket Expenses claimed (See Drug Tariff part I cause 10)	<input type="checkbox"/>	Total claim for Out of Pocket Expenses (only enter claim for out of pocket expenses)	£ <input type="checkbox"/>
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Out of Pocket claims

Out of Pocket Expenses (OOP) can be claimed in exceptional circumstances on all medicines you don't supply frequently (except Category A or M of Part VIII of the DT, unless they have NCSO status). Out of Pocket Expenses can also be claimed on appliances in Part IXB and IXC of the Drug Tariff but cannot be claimed on items in Part IXA or IXR.

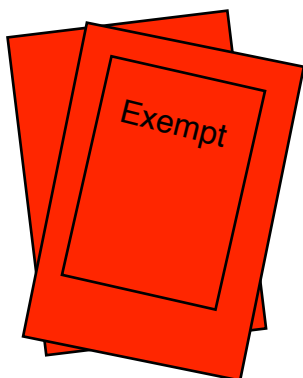
All Out of Pocket expenses must be claimed on the FP34C submission form (for payment) AND endorsed on each individual prescription (audit trail). The individual endorsement must include 'XP', amount of claim and reason for claim; invoices should not be sent but copies need to be kept in case of query or investigation.

Q. What can be claimed?

Actual costs incurred in during the process of obtaining specific items to fulfill patient prescriptions can be claimed this includes costs such postage, handling and the cost of phone calls to manufacturers or suppliers to order products.

Q. What can't be claimed?

Claims cannot be made for expenses which do not pertain to a specific product; this includes costs such as minimum order surcharges and fuel surcharges. Staff time costs can also not be claimed. The first 10p of any out of pocket expenses claim is retained by NHS Prescription Services.



Red Separator Warning

The red separators are to be used for Specials, broken bulk claims, slipped printing items and items where the NIC is over £100, to ensure manual pricing and help minimise errors due to the pricing computer misreading items. You may be tempted to put everything into the red separators, to ensure everything gets manually priced – **DON'T**. If it looks as though everything has been included in the red separators, NHS Prescription Services will put everything through the computerised system and you could lose out on broken Bulk claims and specials claims.

More information

There is a lot of information available on making sure endorsements are as accurate as possible.

PSNC have a number of helpful web pages (some of their information has been used in this article). They also have a free downloadable guide to dispensing, which is essential reading:

http://www.psn.org.uk/data/files/publications/87/Dispensing_Resource_Supplement_20089.pdf

The NPA have an online training programme (free for members) on the Drug Tariff, which includes a section on endorsing; this could be essential CPD for you and your staff.

New Years Day Audit

In order to assess how busy pharmacies were on 1st January 2011 please fill in the boxes below with the number of WALK IN items on the day.

Please don't include prescriptions which were processed but that did not necessarily come on the day. E.g. MDS, Owings etc.

Pharmacy Name =

No of Hours open =

No of Walk In items dispensed =

Approximately what percentage
of your Sales would be attributed to
OTC Medicines =

You can enter this data online by visiting our e-form www.gandstlpc.net/nye

All data will be kept confidential.



First Contact
Clinical

Helping to reduce Tobacco Related Harm

Smoking Cessation

Smoking remains the main cause of preventable disease and premature death in the UK. About 8.5 million people still smoke in England today, and over 80,000 deaths a year are due to smoking in England alone. Smoking kills half of all long-term users.

- A smoke free future. Department of Health February 2010

Our free Smoking Cessation training programme will enable you to:

- ✓ Effectively deliver Smoking Cessation in line with local and national requirements.
- ✓ Gain the necessary competences (knowledge and skills), identified by NCSCT, required to deliver evidence-based behaviour change techniques to smokers.
- ✓ Increase your knowledge and awareness of the most-up-to-date evidence relating to recommended interventions.
- ✓ Collect and collate locally required performance data via the new NHS SoTW web-based database.
- ✓ Assess a client's readiness to change and ability to quite, and modify your behaviour accordingly.
- ✓ Deliver advice in a short, personalised and structured way.

Visit our training website www.learningfirstcontact.co.uk or email us on enquiries@firstcontactclinical.co.uk to find out more.

First Contact Clinical, TEDCO Business Works, Henry Robson Way, South Shields, NE33 1RF
Telephone: 0191 4274685 Email: enquiries@firstcontactclinical.co.uk



First Contact Clinical

NHS Health Checks Training

Heart disease, stroke, type 2 diabetes and kidney disease can often be prevented.

Our free NHS Health Checks training programme will enable you to:

- ✓ Effectively deliver NHS Health Checks in line with local requirements.
- ✓ Identify who should have a free NHS Health Check.
- ✓ Assess, calculate and manage risk.
- ✓ Assess a client's readiness to change and modify your behaviour accordingly.
- ✓ Deliver advice in a short, personalised and structured way.

Visit our training website www.learningfirstcontact.co.uk or email us on enquiries@firstcontactclinical.co.uk to find out more.

Free NHS Health Check

Helping you prevent heart disease, stroke, diabetes and kidney disease.

