

LPC News

DR ALLEN TWEEDIE

Pharmacy will be a lot poorer with the passing of Allen

Dr Allen Tweedie, a former LPC member, has died after developing cancer of the pancreas.

Allen was an active member of the LPC for many years and was part of the original Gateshead LPC before the merger with South Tyneside LPC.

He was a well loved member of the LPC and a real champion of Pharmacy. He was a true Gentleman and always had a lot of time for Pharmacists, new and old. David Carter, Chairman of the Gateshead & South Tyneside LPC sums up how everyone felt about him.



Allen Tweedie was a pharmacy legend in the North East; and his passing recently is a big loss for the whole profession of pharmacy.

I have known Allen personally for more than 25 years and throughout that time he has always amazed me with his drive and energy for community pharmacy. He was a well respected thinker with a real grasp of detail. On the PSNC, his contribution to the medicines management agenda was immense. Locally he was a strong supportive member of Gateshead and South Tyneside LPC and was always available to attend meetings and fight the cause for community pharmacy. Recently, instead of taking it easy, he continued to study and obtained a PhD and a MBA; and continued to promote pharmacy helping to establish the IPF. He was proud of his achievements and was rightly awarded the RPSGB silver medal a few years ago and a DSc last year by the University of Sunderland.

Our thoughts are with Allen's wife, Christine, and family at this sad time.

David Carter,
Chairman of the Gateshead &
South Tyneside LPC

Quality Meetings

LPC News has been informed that there will soon be a series of rolling "quality meetings" throughout our patch for contractors and their staff to attend. For readers with long memories, you will re-call the "clinical Governance" meetings that used to be put on in localities throughout Gateshead and South Tyneside; sometimes at breakfast and sometimes after work. These are essentially the same, and two contractors have agreed to co-ordinate the meetings in our area: Jackie Parkin in Gateshead and the LPC Chair, Dave Carter, in South Tyneside. The Chairman said "Improving quality, clinical governance and best practice is very important to contractors; and the LPC has been working

on bringing back these meetings for some time now. The meetings will be time limited to one hour, with food served prior to the meeting. In essence, the meetings will take the form of an update followed by a chance for pharmacists to discuss significant events and learn from each other"

These meetings will be held monthly on rotation throughout Sunderland, Gateshead and South Tyneside and all meetings will be open to everybody in South of Tyne PCT area. Contractors will be getting a letter soon inviting them to attend the first meetings. If you wish to attend the meetings it will be necessary to book places in order to sort out the catering arrangements.

Would you like to receive the LPC NEWS by Email?

If you would like to receive the LPC News by email contact Sami - lpc-news@sami.eu.com

GP / PHARMACY GUIDES

The PSNC, NHS Employers and the General Practitioners Committee (GPC) of the British Medical Association have launched two new guides designed to support GPs and community pharmacists in developing more effective working relationships.

The guides, 'The GP practice – a guide for community pharmacists and pharmacy staff' and 'The community pharmacy – a guide for General Practitioners and practice staff,' cover information about each professions' respective disciplines to enable increased understanding and improve primary care services for the patient.

The guides include information on:

- funding arrangements;
- the Quality and Outcomes (QOF) framework
- prescribing policies; and
- the range of clinical and administrative functions that practices and community pharmacies provide.

The guides have been produced by the professional relationships working group that was set up following the Pharmacy White Paper to improve professional relationships between GPs and community pharmacists, to benefit patients.

The PSNC has published the text of the guide to general practice, aimed at community pharmacists and their teams, in the March edition of Community Pharmacy News. PDF copies of both guides can be downloaded from the PSNC website.



http://www.psn.org.uk/news.php/594/march_cpn_is_now_online

NEW Sorting arrangements for PPD

PPD asks contractors to change the way they sort prescriptions out.

The PPD wants pharmacies to sort their prescriptions out in a new way. Again asking for certain prescriptions to be segregated from the main items. Mark Burdon, Regional PSNC Rep explains why this change is being impelented.

The previous sorting arrangement was essentially for NHSBA (PPA/PPD's) benefit. Their automated prescription pricing system was unable to price Broken Bulk and and outside of calendar packs hence the reason we were asked to separate them out. They appear to have incorporated these into the CIP (automated) system so sorting is no longer required.

The new sorting arrangements are for our

benefit - i.e. if we sort, then PPD will price these a second time. Also, all items with a NIC of >£100 will be itemised on the FP34 (as happens now with items over £300). This is a partial move towards improved transparency. The expensive items are obviously the ones that are most contractors will notice an error on and cause the greatest concern. However, PSNC's policy is to continue to press for greater transparency and improved audit.

It might be worth contacting your IT system supplier to find out what their plans are to assist with this.

It would probably be expected that there will be over-sorting by some contractors and under-sorting by others. There is no penalty either way, but under-sorting will mean that these items are not double checked. I don't know what the procedure is for erroneously sorted items.

NEW SORTING ARRANGEMENTS

From April 2010 dispensed prescriptions (Which will be sent in May) should have the following separated by the red separators the PPD provide:

- Broken bulk items (as you currently do);
- Items with a NIC of £100 or more; and
- 'Specials'.

National Roll-out of the Summary Care Record

The Summary Care Record (SCR) is an electronic summary of key health information. It will hold limited essential information derived initially from the patient's GP record; this will include medication, adverse reactions and allergies and may contain additional information such as significant medical history. This will then be added to over time with content such as hospital discharge notes.

The record will remain a summary and only contain significant aspects of a person's care. Patients will be able to see the record via HealthSpace and a patient will be asked before their record is accessed, except in certain circumstances.

Background information can be found online at: <http://www.cfh.nhs.uk/scr>
The SCR is live in several care settings including: Out of hours, emergency departments, acute admissions wards, ambulance trust and walk in centres.

As part of the consent arrangements, before any information is uploaded to the Summary Care record by GP Practices, there is a 12-week public information programme (PIP). Patients are sent a personally addressed letter along with a leaflet detailing what is happening and what their choices are. They will be told that they have a period of time to decide whether they wish to have a SCR stored for them.

If patients are not sure whether they wish to have a record, they will be encouraged to seek further information and support, to help them make their decision. The information they are sent includes a helpline telephone number (0845 603 8510) and web address

(www.nhs.org/records), where they can receive further information. The letter may also have details of any local events that the PCT may be planning as part of a public awareness campaign.

Over 40% of Primary Care Trusts have started their PIPs with more to follow.

Pharmacy SCR Pilot

In the 2008 Pharmacy White Paper, the Government committed to undertaking further work with a (Summary Care Record) early adopter PCT to consider the benefits, governance and practical arrangements of community pharmacists having access to the SCR. Bradford has been chosen as the first site to pilot pharmacy access.

The pilot pharmacies will be accessing the SCR through the 'Summary Care Record Application (SCRa)', a secure internet portal by which patient information (both demographic and clinical) held on the Spine can be accessed. As with other Spine applications, access will be controlled by smartcard privileges. At this stage, it will be read only access to the record and won't be integrated with PMR systems.

Work is currently ongoing to select and prepare the pharmacies that will be involved in the pilot.

At the national level, the RPSGB is leading on the development of professional guidance and the DH are co-ordinating the engagement of key stakeholders including the major insurers to discuss guidance on potential liability issues. For example 'what are the consequences of having access to the record but choosing not to look on a particular occasion?'. There are a range of issues which still need to be worked through and will be steered by experiences during the pilot. The options for an independent evaluation of the pilot are being explored by the Department of Health.

LPC Elections 2010

As well as the national elections that have just taken place we too have had our own local elections for the LPC. Here are some questions and answers about our own elections.

What is happening?

The LPC members stood down at the end of March 2010;

In April a new committee was elected and will start work from then on.

What has happened so far?

There has been a change in the LPC constitution, to ensure that LPC members match the distribution of owners across the PCT area. This means the Company Chemist Association (CCA) can appoint six members; (CCA companies include Boots, Lloydspharmacy, Rowlands and the supermarket pharmacy chains) and the remaining seven LPC members will be elected by the local independent contractors.

Election for Independent Contractors

Following the nomination process only six people stood for election to the LPC. As there were seven places this meant that these six people are elected automatically, without the need for a poll. When they took their up their places on the new LPC in April 2010 they co-opted the remaining place. This occurred in the April Meeting with a further independent taking this seat.

Election of Officers

Also at this meeting an election of the officers took place

LPC members April 2010

The following is a list of Independent contractors who have been elected are:

- David Carter - Also Elected as Chairman
- Louise Lydon - Also Elected as Treasurer
- Tracy Groves
- Sami Hanna – Also elected as Communications Officer
- Joanne Neil
- Lisa Simpson
- Mark Burdon

The CCA Reps are

- Emma Morris (Boots)
- Denise Laidlaw (Adsa)
- Jonathan Green (Lloyds) - Also elected as Treasurer
- Alex Graham (Lloyds)
- JenniferGraham (Boots)
- Richard Anderson (Co-Op)

More information on each member will shortly be published on our New Website which will be launched soon.

Alcohol Brief Intervention Training



Pharmacists
Learned to apply
brief Interventions

Pharmacists across the area recently attended an alcohol brief intervention training event held by First Contact Clinical. The Event was hailed a success with pharmacists agreeing it was informative and helped improve their skills. Another pharmacy evening training event for Tues 15th June has been agreed, as the first one in May filled up very quickly. The evening is from 6.30pm – 9.30pm, with some online training to complete before the event. The training takes place at the Tedco Centre in Jarrow and is suitable for pharmacists and their staff.

If anyone is interested in attending, please email jenjulien@firstcontactclinical.co.uk or call 01914274685 for more details.

SUPPLY CHAIN PROBLEMS

Supply chain problems continue to cause problems for pharmacists trying to fill prescriptions. PSNC collect data on the problems and pass them onto the DH on a regular basis. There is an online feedback form on the PSNC Website that pharmacies can use to report problems obtaining branded medicines http://www.psn.org.uk/quota_feedback.php

Some local pharmacists have reported that they have been approached to supply drugs for export. Guidance is given below in case you are approached.

Supply Chain Obligations:

Manufacturers and wholesalers licensed to trade in the UK have a legal duty to ensure that UK patient needs are met and pharmacists have ethical obligations to ensure the needs of patients are always put first.

- The holder of a wholesale dealer's licence may only obtain medicines for human use from licensed manufacturers or licensed wholesale dealers. It would not be legal for a wholesaler to obtain medicines from a pharmacy that does not have a Wholesale Dealer's License.
- If a wholesaler does trade medicines for export that are in short supply in the UK and as a result UK patients don't get their medicines, they could be in breach of the Regulations and could face regulatory action against their licence, and/or criminal prosecution. It is likely that we will start to see action being taken by the MHRA.
- A list of medicines that pharmacies are reporting problems obtaining can be found on the PSNC Website.

Drug Tariff - NCSO June 2010

The following products have been granted NCSO status for the month of June 2010:

Gabapentin 300mg capsules Nizatidine 300mg caps

It is essential that contractors endorse the prescription with the initials 'NCSO' and full details of the product dispensed (e.g. manufacturer, brand name or price if it is an uncommon item and pack size). The endorsement must also be signed and dated. If any of this information is missing, payment will be based on the Drug Tariff price rather than the endorsed product.

NCSO status only lasts until the end of the month that the application was made. If at the beginning of the following month, the problem is still not resolved, a new application for NCSO status is made. If you have problems obtaining a Part VIII product or problems obtaining the product at the set Drug Tariff price, please contact the PSNC on 01296 432823. We will then contact the main wholesalers to establish the extent of the problem and if necessary make an application for the product to be given NCSO Status.

Pharmacy Handbook

We have developed a Pharmacy Handbook, for contractors to keep information about the day-to day running of the pharmacy in one place.

Some sections have been prefilled for you, with additional sections for you to complete your individual pharmacy details.

This is ideal to help any locums you may have working for you and as a reference for your staff if the regular pharmacist isn't available.

The pharmacy handbook will be available to download from our new website which will be up and running soon. In the meantime if you can't wait please get in touch with Sami Hanna for a copy. lpc-news@sami.eu.com

Tamsulosin

Following the launch of OTC Tamsulosin, the RPSGB have produced guidance to support pharmacists in the appropriate supply.

http://www.rpharms.com/practice--science-and-research/otc-tamsulosin-reference-guide.asp?dm_i=EQ,46CH,1SO7M,CYBE,1

Men can often be a difficult target group to reach and the launch of OTC tamsulosin provides men who have urinary problems access to a health professional on the high street to discuss their symptoms at a time convenient to them.

New Pharmacy Minister appointed

Earl Howe, a hereditary peer, has been named as the minister responsible for pharmacy in England and said the sector's future will be outlined in the "coming months". His appointment was welcomed by pharmacy bodies who said his track record had proven him to be a strong representative for the sector.

PSNC chief executive Sue Sharpe said the committee had worked with Earl Howe on a number of issues in recent years and was "confident that he will be a strong advocate for community pharmacy within the Department of Health". He fully recognised pharmacy's capacity to expand the range of services it provided, Mrs Sharpe added.

NPA director of communications Nicola Rossi also welcomed the appointment, describing Earl Howe's "keen interest" in community pharmacy as "encouraging". Prior to joining the Department of Health team, Earl Howe, who inherited his title in 1984, was opposition spokesperson for health and social services in the House of Lords.

In June 2009, he campaigned for the decriminalisation of single dispensing errors following the conviction of Elizabeth Lee. He said: "Does the existence of a strict criminal liability test enhance public safety? If the answer is no, as I believe, then the law needs to be changed."

More recently in an interview with the Chemist and Druggist he said

"I am very enthusiastic about how pharmacy will play a bigger role in improving the lives of people, especially in ensuring the safe and effective use of medicines.

"We want people to have more control over their health and pharmacists are vital in our focus on prevention."

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