

# City and Hackney CCG prescribing checklist for primary care prescribers

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## Introduction

This checklist contains key prescribing information and resources for evidence-based and cost effective prescribing within City and Hackney.

### **GP** website

The main page of the GP website gives you access to local clinical guidelines, shared care guidelines (SCGs), primary care pathways, CCG news and upcoming events. The GP website is accessible via the below link: https://gps.cityandhackneyccg.nhs.uk/

The medicines management team (MMT) section provides access to additional prescribing resources, including the local joint formulary, medicines management newletters, joint prescribing group documents, positions statements and information on stock shortages. The MMT content is accessible from the main GP website page or via the below link:

https://gps.cityandhackneyccg.nhs.uk/medicines-management/medicines-management

# How to contact medicines management

Telephone: 0203 816 3224

Email: <u>CAHCCG.CityandHackneyMedicines@nhs.net</u>

The team is accessible from 9am to 5pm, Monday to Friday.

## **Incidents and safety alerts**

The Drug Safety Update produced monthly by the MHRA can be accessed here: <a href="https://www.gov.uk/government/publications/drug-safety-update-monthly-newsletter">https://www.gov.uk/government/publications/drug-safety-update-monthly-newsletter</a>

You can go to the **'Yellow Card website'** or use the **'Yellow Card App'** to view drug safety alerts and to report side effects/problems with medicinal products. The app can be downloaded from the Apple App Store and Google Play Store.

https://yellowcard.mhra.gov.uk/

All medication errors MUST be reported to the National Reporting and Learning system (NRLS). Patient identifiable information should not be included in the NRLS reports. Practices are encouraged to share incident reports with the CCG for wider learning to prevent similar incidents from occurring.

The NRLS form is accessible here: https://report.nrls.nhs.uk/GP eForm

Useful documents	GP website link
Joint formulary (eBNF)	https://gps.cityandhackneyccg.nhs.uk/medicines- management/medicines-management/joint-formulary
Clinical guidelines (main page for all guidelines)	https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines
Shared care guidelines	https://gps.cityandhackneyccg.nhs.uk/shared-care
MaPPs (patient friendly drug information leaflets)	http://mimapps.org/live/index.php?t=72680
GP clinical pathways	https://gps.cityandhackneyccg.nhs.uk/pathways
Medicines management bulletins (newsletters)	https://gps.cityandhackneyccg.nhs.uk/medicines- management/prescribing-matters-newsletters



## OptimiseRx® prescribing support software

Optimise Rx® is a clinical decision support solution which integrates with EMIS to deliver patient-specific messages at the point of care that ensures appropriate, cost-effective prescriptions. OptimiseRx® content is informed by local and national guidance plus nationally recognised, evidence based sources including: NICE and MHRA drug safety updates.

Please contact the medicines management team for any queries or suggestions for OptimiseRx® messages. For technical issues, contact OptimiseRx® on **Tel**: 01392 440 111 or **Email**: Customerservices@fdbhealth.com

## Access to end of life care medicines

There is a scheme within City and Hackney that provides out of hours access to a range of medicines that are used at the end of life (palliative care). Participating community pharmacies operate on an on call rota, allowing 24/7 access to end of life care medicines. End of life medicines are available via a courier service if required (e.g. if the patient's carer is unable to go to the pharmacy). The 'End of life care medicines resource pack' contains details of the participating pharmacies, medicines stocked by these pharmacies and legal requirements for the prescribing controlled drugs. The resource pack can be accessed here: https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/end-of-life-care-medicines-resource-pack

## **Antibiotic prescribing**

The North East London Management of Infection Guidance for Primary Care was developed in collaboration with CCGs and hospital trusts within North East London; the guidance can be accessed here: <a href="https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/infection-management-in-primary-care-north-east-london-guidance">https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/infection-management-in-primary-care-north-east-london-guidance</a>

Contact details for Homerton microbiology team

Microbiology via air-call through switchboard: 0208 510 5555

Antimicrobial pharmacist: bleep 209

The RCGP TARGET antibiotic toolkit includes a range of resources that can each be used to support prescribers' and patients' responsible antibiotic use. https://www.rcgp.org.uk/clinical-and-research/resources/toolkits/target-antibiotic-toolkit.aspx

### Good practice for antibiotic prescribing

- Prescribe antibiotics only when there is likely to be a clear clinical benefit. Do not prescribe an antibiotic for a simple cold or for all sore throat.
- Check drug allergies before prescribing.
- Offer a deferred prescription in cases where the need for antibiotic therapy is unclear, and safety net with clear instructions to the patient as to when they should take it.
- Use narrow spectrum antibiotics first and avoid the use of broad spectrum antibiotics such as coamoxiclav, quinolones and cephalosporins unless specifically indicated.
- In pregnancy, take specimens to inform treatment.
- Always refer to up to date British National Formulary (BNF) and data sheet compendium (<u>www.medicines.org.uk</u>) for the latest drug information.
- Where special circumstances exist (e.g. drug resistance, request for IV antibiotics from secondary care) please seek guidance from the local consultant microbiologist.



# Medicines not to be routinely prescribed in primary care

NHS England recently published national guidance on 'medicines that should not be routinely prescribed in primary care'. In line with the guidance, the following medicines are not recommended for prescribing.

#### **Pain medicines**

- Co-proxamol
- Rubefacients (e.g. Movelat®, Deep Heat®), please note topical NSAIDs are prescribable
- Paracetamol and tramadol combination (e.g. Tramacet®)
- Immediate release fentanyl for non-palliative pain (e.g. lozenges, films, nasal spray)
- Oxycodone and naloxone combination (e.g. Targinact®)
- Lidocaine patches

## Other products

- Tadalafil 2.5mg and 5mg once daily dosing (for erectile dysfunction and benign prostatic hypoplasia)
- Doxazosin modified release
- Perindopril arginine (e.g. Coversyl®)
- Liothyronine
- Dosulepin
- Trimipramine
- Travel vaccines for the purpose of travel (these can be prescribed privately)

### **Supplements**

- Glucosamine and chondroitin
- Homeopathy
- Herbal medicines
- Lutein and antioxidants
- Omega-3 fatty acids
- Probiotics (unless for ACBS approved indications).
- Vitamins and minerals (unless for the treatment of diagnosed vitamin or mineral deficiency, including for those patients who may have a lifelong condition or have undergone surgery that results in malabsorption).

#### Medicines available over the counter (OTC)\*

Medicine prescribed for a condition that is considered to be self-limiting, that lends itself to self-care should not be routinely prescribed unless exceptions apply. Please see the full guidance from NHSE for a list of products/conditions and exceptions to the guidance: <a href="https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf">https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf</a>

# **Analgesics**

- All patients who are prescribed analgesics should be regularly reviewed and have their medication stopped or stepped down as appropriate.
- Prescribe regular paracetamol (i.e. 1g four times daily instead of 'as required') first line.
- Add codeine if a weak opiate is indicated.
- Avoid tramadol (particulary in elderly patients due to risk of confusion and falls) unless there is a clear valid indication for it.
- Gabapentin and pregabalin has the potential for drug misuse as they enhance the euphoric effects of other drugs; concomitant use with an opioid can potentiate the side effects of the opioid and can be fatal.



- If a non-steroidal anti-inflammatory (NSAID) is indicated, **ibuprofen** or **naproxen** are the preferred NSAIDs and should be prescribed for a **short period** of use.
- Where a proton pump inhibitor (PPI) is needed for gastro-protection, use lansoprazole or omeprazole.
- Note the following medicines are not suitable for routine prescribing in primary care: co-proxamol, rubefacients, paracetamol and tramadol combination (e.g. Tramacet®), immediate release fentanyl, oxycodone and naloxone combination (e.g. Targinact®) and lidocaine patches.

## **Controlled drugs**

- Issue as acute item and prescribe the minimum quantity necessary.
- Prescribe enough of a controlled drug to meet the person's clinical needs and for no more than 30 days.
- Oral products should be used except where there is evidence of swallowing difficulties. Oxycodone with naloxone combination (e.g. Targinact®) should **not** be initiated.
- From 1<sup>st</sup> April 2019, gabapentin and pregabalin will be reclassified as schedule 3 CD with 'CD prescription requirements'

For all enquiries and/or concerns relating to the management and use of Controlled Drugs, contact: england.londoncdaccountableoffice@nhs.net

# Benzodiazepine and Z-drugs

- First line treatment of insomnia should be non-pharmacological measures.
- Avoid initiating a benzodiazepine or Z-drug (e.g. zopiclone, zolpidem).
- For patients who have not received these drugs regularly, only prescribe for a maximum of 7 days and at the lowest effective dose.
- These drugs have the potential to be misused be wary of requests to replace lost prescriptions.
- Prescriptions for hypnotics and anxiolytics should not be put on repeat.

East London Foundation Trust – material to support appropriate prescribing of hypnotics and anxiolytics <a href="https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/elft-material-to-support-appropriate-prescribing-of-hypnotics-and-anxiolytics-across-east-london">https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/elft-material-to-support-appropriate-prescribing-of-hypnotics-and-anxiolytics-across-east-london</a>

# High risk drugs (DMARDs, immunosuppressants, warfarin, lithium)

- Ensure monitoring is up-to-date before prescribing high risk drugs.
- Ensure quantity is in line with frequency of monitoring.

Specialist Pharmacy Service – suggestions for 'Therapeutic Drug Monitoring' in adults in primary care <a href="https://www.sps.nhs.uk/articles/suggestions-for-therapeutic-drug-monitoring-in-adults-in-primary-care/">https://www.sps.nhs.uk/articles/suggestions-for-therapeutic-drug-monitoring-in-adults-in-primary-care/</a>

# Restricted list prescribing - hospital only, unlicensed and specials

## Hospital only drugs

Do not prescribe a 'hospital only drug' unless there is a valid shared care arrangement in place and the patient is being monitored as per shared care guideline.



## Unlicensed drugs and 'Specials'

Do not prescribe an unlicensed medicine unless there is a clear valid documented indication for the medication and a licensed alternative does not exist. Note that EMIS will show a price of £0.00 for an unlicensed medication. However, the product is likely to be **premium** priced.

## Resources for the prescribing of unlicensed 'specials'

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/unlicensed-specials-prescribing-resources

## **Inhalers**

- All inhalers should be prescribed by brand name, except for salbutamol.
- High dose inhaled corticosteroid (ICS) products should only be used if adherence and inhaler technique is confirmed to be sound.
- Salbutamol inhaler should only be added to repeat medications when the need for ICS has been assessed. Do not add salbutamol to repeat dispensing.

#### Asthma management guideline

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/asthma-management-guideline

#### **COPD** management guideline

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/copd-management-guideline

## **Asthma and COPD inhalers summary**

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/asthma-and-copd-inhalers-summary

## Asthma and COPD inhaler technique information flashcards

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/asthma-and-copd-inhaler-technique-information-flashcards

**RightBreathe** is a tool designed to optimise inhalers use. Specific, tailored information for all inhalers and spacer devices licensed in the UK for treating asthma and COPD is provided. <a href="https://www.rightbreathe.com/">https://www.rightbreathe.com/</a>

## Vitamin D

- Colecaciferol should be prescribed by brand name.
- The adult treatment loading dose is 40,000 units once weekly for 7 weeks. Formulary approved brands are:
  - Aviticol<sup>®</sup>, Plenachol<sup>®</sup> and Hux D3<sup>®</sup> capsules
  - SunVit-D3® tablets
  - InVita D3® oral solution (for those with established swallowing difficulties)
- Adult maintenance dose is 800 2,000 units daily. **Patients should be advised to purchase** this over the counter. Valupak® colecalciferol 1,000 units tablets cost approximately 99p per 60 tabs.

## Vitamin D deficiency in primary care - Adult pathway

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/vitamin-d-deficiency-pathway-adults

### Vitamin D deficiency in primary care - Children's pathway

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/vitamin-d-deficiency-pathway-children



## **Emollients**

- Do not prescribe emollients as a general moisturiser for dry skin in patients without a diagnosed dermatological condition.
- Patients requesting a general skin moisturiser should be advised to purchase their emollient from a supermarket or pharmacy.
- Bath emollients are non-formulary and are not recommended by City and Hackney CCG. An appropriate emollient (e.g. emulsifying ointment) should be used in warm bath water rather than a propriety/branded bath emollient product.
- There is a **fire risk with all emollients**, regardless of whether they contain paraffin or not. See MHRA alert for further details: <a href="https://www.gov.uk/drug-safety-update/emollients-new-information-about-risk-of-severe-and-fatal-burns-with-paraffin-containing-and-paraffin-free-emollients">https://www.gov.uk/drug-safety-update/emollients-new-information-about-risk-of-severe-and-fatal-burns-with-paraffin-containing-and-paraffin-free-emollients</a>

#### See the 'Emollient Guideline and Formulary' for further information:

https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/emollient-guideline-and-formulary

# Oral nutritional supplements and gluten free foods

## Guideline for the prescribing of oral nutritional supplements

 $\underline{https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/food-and-nutrition-prescribing-of-oral-nutritional-supplements}$ 

- Oral nutritional support should only be prescribed on the advice of a dietitian and two supplements per
  day are usually recommended (exceptions are those on liquid only diet). Check compliance first if more
  supplements are required. Patients should be instructed to take the supplement 'between meals'.
- 1<sup>st</sup> line formulary choice products: Aymes® shake (powder) and Aymes® Complete (only for patients who have an intolerance to lactose)
- 2<sup>nd</sup> line formulary choice products: Fresubin® Powder Extra (Kosher approved) and Fresubin® 2kcal Drink (Kosher approved and only for patients who have an intolerance to lactose).
- **2kcal/ml preparations are preferred.** DO NOT prescribe 1kcal/ml preparations unless advised by a dietitian in writing.
- Patients should be reviewed for tolerance and weight changes at least every three months by the
  practice. The dietician should be notified of any changes and a dietetic review should be requested
  where needed.

Guidance for the prescribing of gluten free foods on NHS prescriptions in primary care <a href="https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/food-and-nutrition-prescribing-of-gluten-free-foods-on-nhs-prescriptions-in-primary-care">https://gps.cityandhackneyccg.nhs.uk/prescribing-guidelines/food-and-nutrition-prescribing-of-gluten-free-foods-on-nhs-prescriptions-in-primary-care</a>

- Gluten free products are only prescribable on NHS prescription for patients diagnosed with coeliac disease, dermatitis herpetiformis and established gluten-sensitive enteropathies (including steatorrhoea due to gluten sensitivity).
- Only gluten free **bread**, **rolls**, **baguettes** and **flour type mixes** (**excluding cake mixes**) can be prescribed on an NHS prescription in line with Department of Health and Social Care guidance.



# **Public Health prescribing**

## **Smoking cessation**

GPs do not prescribe nicotine replacement therapy (NRT) and Champix® (varenicline) in City and Hackney CCG. Smoking cessation products are provided via the **Hackney Stop Smoking Service** at specialist public health smoking hubs.

http://www.cityandhackneygpconfederation.org.uk/what-we-do/hackney-stop-smoking-service/

## **Substance misuse**

Drug and alcohol support for Hackney residents are provided by the **Hackney Recovery Service**. Methadone and other products for alcohol and substance misuse are usually provided by this clinic. https://www.hackney.gov.uk/substance-misuse

To refer a patient, complete a referral form and send to <a href="mailto:hackney@wdp.cjsm.net">hackney@wdp.cjsm.net</a> (secure email address) or telephone: 0300 303 2611 / fax: 0333 344 3743.

#### Link to referral form

http://hackneyrecoveryservices.org.uk/wp-content/uploads/2016/06/Referral-Form-v0.2.docx

## **Healthy Start City and Hackney scheme**

GPs should not prescribe folic acid 400mcg or vitamin D 400 units to pregnant women via FP10 prescriptions. Pregnant, breast feeding women and children under the age of four years are encouraged to access free vitamin drops via Healthy Start scheme from local pharmacies. Please note, babies fed infant formula should not be given Healthy Start vitamins unless they are drinking less than 500mls (about 18fl oz or 1 pint) of formula a day because formula is fortified with vitamins and no other supplementation is required. https://hackney.gov.uk/healthy-start