East Surrey CCG, Guildford & Waverley CCG, North West Surrey CCG, Surrey Downs CCG & Surrey Heath CCG

MEDICINES MANAGEMENT GUIDE TO PRESCRIBING

Section 1 - Introduction & Signposting

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1   SCOPE

This guidance is offered to all practitioners working for or on behalf of the CCGs in Surrey.

This document provides a wide-ranging guide for those who may be new to the NHS who require signposting to a full range of resources and information around prescribing, as well as those with more experience who may wish to check their understanding on certain areas.

1.2   DOCUMENT PURPOSE

The Medicines Management Guide to Prescribing aims to support the delivery of consistent prescribing and medicines related advice to healthcare teams working in the CCGs in Surrey with a purpose of:

- Improving the quality and consistency of patient care
- Improving patient access to healthcare services
- Utilising limited resources as effectively as possible
- Patients being fully informed of the reasons why a medicine has or has not been prescribed
- Achieving good patient concordance or adherence with their prescribed treatment
- Increasing the appropriateness and cost-effectiveness of prescribed treatments
- Improving care between the primary, secondary and tertiary care interface.

The document components were reviewed and recommended by the Medicines Commissioners Group (between October 2017 and January 2018) and subsequently approved for use by the individual CCGs

1.3   IMPLEMENTATION AND MONITORING

The information in this guide is advisory in nature and should be regarded as good practice. Prescribing in the CCGs is monitored routinely through analysis of ePACT.net data and clinical audits.   All GP practices have allocated pharmacy support on a regular basis.

1.4   TRAINING

Many aspects of this document are self-explanatory and require little or no additional training. When requested, the Medicines Management teams within each CCG are able to offer one to one support or group sessions.

1.5   SECTION GUIDES / CONTENT LIST

The guide has been split into a number of individual sections with the intention that the sections can be updated when required to provide up-to-date information on changes to advice or legislation, both nationally and within the CCGs within Surrey. A link to each section and a brief overview of the contents are shown below.

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1.6 PRESCRIBING ADVISORY DATABASE

(Click icon to enter the PAD or go to http://pad.res360.net/PAD)

The Surrey Prescribing Advisory Database ('PAD') is an innovative, web-based resource which can be accessed by all healthcare professionals and by patients. The PAD provides guidance and key information on medicines use within Surrey. Information available on the PAD includes:

- Recommendations, policy statements and submission papers from our Prescribing Clinical Network (PCN) and Medicines Commissioners Group (MCG)
- Links to associated NICE Technology Appraisals
- Relevant drug / safety alerts issued by the NHS Improvement, European Medicines Agency (EMA) and the Medicines and Healthcare products Regulatory Agency (MHRA)
- Local policies, procedures, protocols and guidelines relating to the use of medicines
- Materials used in the course of optimising medicines use e.g. audit tools, letter templates

Each drug entry on the PAD has been assigned a Traffic Light Status (see Section 2) which is a locally agreed colour-coded guidance system on the use of medicines across the interface between primary and secondary care. It provides a framework for defining where clinical and therefore prescribing responsibility should lie. The system is only advisory but is intended to clarify expectations of prescribing responsibility.

The PAD is maintained by members of the Medicines Management Teams who provide services to the local Clinical Commissioning Groups.

For comments or suggestions regarding the PAD please email: thePAD@nhs.net

1.7 PrescQIPP

All of the Surrey CCGs have subscribed to an NHS programme called PrescQIPP, which produces a range of evidence-based, application-in-practice oriented resources to support quality prescribing in the NHS - see "overview for clinicians" document.

Where agreed as appropriate and supportive of local initiatives, PrescQIPP resources will be made available on the PAD and will be used / implemented by local Medicines Management Teams. CCG NHS logos will be added to locally endorsed PrescQIPP documents.

Practice staff can register with PrescQIPP to access a broad range of PrescQIPP resources. To do this, you will need to visit the following link, supply your details and select your CCG from the list provided: https://www.prescqipp.info/register/registers

For more information about PrescQIPP and to access a variety of resources, visit the PrescQIPP website https://www.prescqipp.info/resources

1.8 USING the ELECTRONIC BNF AND NICE EVIDENCE

Why use the electronic BNF?

- From September 2015, there will be only one edition of BNF available to NHS health professionals in England, but the BNF is actually updated monthly
- Using a paper BNF is not the most up to date source of information
- Electronic access provides the most up to date prescribing information
- NHS aiming for entirely digital use by 2018 i.e. the paper BNF will disappear eventually

How to access the electronic BNF?

- On-line via www.evidence.nhs.uk
- Mobile app from NICE
    - Available for iPhone and Android phones
    - Search "BNF publications" in App Store or Play Store
    - Use offline – no need for internet connection to use

What is NICE Evidence?

Provided by NICE, http://www.evidence.nhs.uk is a unique index of selected, authoritative and evidence-based information that provides free access to health, public health and social care information

- Over 1000 trustworthy and accredited sources
- Search using wildcards, filters and exact phrases.
- Sources include: British National Formulary, Clinical Knowledge Summaries, SIGN, the Cochrane Library and Royal Colleges, Social Care Online and GOV.UK.

Accreditation mark

An accreditation mark next to results is a recognised sign of high-quality processes used to produce guidance and advice.

Print copies of the BNF

NICE provides print copies of the BNF and BNF for Children (BNFC) to prescribers working in the NHS and other organisations that provide NHS-commissioned care in England. They also provide the Nurse Prescribers Formulary (NPF) to community practitioner nurse prescribers in England.

Eligible NHS prescribers receive copies of BNF, BNFC and NPF free of charge annually with distribution staggered throughout September and October. If ordered you can expect to receive BNFc first, followed by BNF then NPF.

For details of eligibility and how to obtain print copies, visit the NICE website
https://www.nice.org.uk/About/What-we-do/Evidence-Services/British-National-Formulary

1.9 POLYPHARMACY / DE-PRESCRIBING RESOURCES

Increasingly, prescribers are becoming aware of the need to review medication and consider the benefits of 'deprescribing'. Deprescribing is not about denying effective treatment to people who will benefit; it is about ensuring people do not receive unnecessary treatment, which is unlikely to be of benefit and may cause harm.

The Surrey CCGs have developed a short guide aimed at supporting clinicians with polypharmacy medication reviews, including a series of short appraisals of the available tools and resources. This is available on the PAD by searching "polypharmacy" or via
http://pad.res360.net/PAD/Search/DrugCondition/762

1.10   LIBRARY SERVICES

All of the local acute trusts in Surrey provide library services which are available to NHS staff working within the Surrey CCGs. They a provide a range of services to help you find the best evidence to support your clinical decisions and patient care. Membership provides free access to a large range of electronic resources, books and journals as well as a number of other services including training and support.

Details of how to become a member can be found at the websites for all local library services (see table below).

Trust	Website
Ashford and St. Peter's Hospitals NHS Foundation Trust	http://www.ashfordstpeters.nhs.uk/library-services
Epsom and St Helier University Hospitals NHS Trust	https://www.epsom-sthelier.nhs.uk/lis
Frimley Health NHS Foundation Trust	https://www.fhft.nhs.uk/careers/library-services/
Royal Surrey County Hospital NHS Foundation Trust	http://www.libraryroyalsurrey.nhs.uk/
Surrey and Sussex Healthcare NHS Trust	http://www.surreyandsussexlibraryservices.nhs.uk/

1.11   SPECIALIST PHARMACY SERVICE

NHS Specialist Pharmacy Service (SPS) is commissioned and funded by NHS England SPS supports medicines optimisation across the NHS, with a focus on high-cost, complex and innovative medicines and medicines-related services. SPS joins together experts to create a rich source of impartial advice for pharmacists, GPs and clinicians to use free of charge. All resources are available at the SPS website www.sps.nhs.uk/

1.12   MANAGING CONFLICTS OF INTEREST

NHS staff involved in the procurement, prescribing or providing advice on medicines may become involved in arrangements that introduce considerations that may be in tension with the best interests of patients.

NHS England issued guidance "Managing Conflicts of Interest: Revised Statutory Guidance for CCGs" in June 2017 (https://www.england.nhs.uk/ourwork/coi/) which provides recommendations in relation to this matter. NHS staff working for or on behalf of Surrey CCGs should refer to local CCG policies, notably the Hospitality Policy and Working with the Pharmaceutical Industry Policy, to ensure that they understand the CCGs' requirements.

Heathcare professionals should refer to their professional codes of practice for further information. The following information (adapted from The BMA's guidance "Transparency and doctors with competing interests – guidance from the BMA") provides information that may be pertinent to prescribers in relation to potential conflicts of interest around medicines and prescribing.

Gifts and other inducements

Best practice in relation to gifts and inducements is well established. As the GMC states, doctors must not ask for or accept gifts from healthcare industries or patients and their families, which may affect or be seen to affect the way they prescribe for, advise or treat patients under their care. Similarly, doctors must not offer these inducements to colleagues.

The Association of the British Pharmaceutical Industry (ABPI) publishes a detailed Code of Practice regulating the promotional activities of its members and their interactions with health professionals that includes sections on direct and indirect inducements. http://www.pmcpa.org.uk/thecode/InteractiveCode2016/Pages/default.aspx.

The Code of Practice prohibits the offers of inducements. It states:
> *No gift, pecuniary advantage or benefit may be supplied, offered or promised to members of the health professions or to other relevant decision makers in connection with the promotion of medicines or as an inducement to prescribe, supply, administer, recommend, buy or sell any medicine.*

Guidance from NHS England sets out a number of rules and principles for NHS staff in relation to gifts. These are not binding on general practices and those working for private or independent providers, but NHS England invites the boards or governing bodies of these organisations to consider implementing the guidance.
- Staff should not accept gifts that may affect, or be seen to affect, their professional judgment
- Gifts from suppliers or contractors doing business (or likely to do business) with an organisation should be declined, whatever their value
- Subject to this, low cost branded promotional aids may be accepted where they are under the value of £6.00
- Gifts of cash and vouchers from individuals should always be declined
- Staff should not ask for gifts
- Gifts valued at over £50 should be treated with caution and only be accepted on behalf of an organisation. If accepted they should be declared.
- Modest gifts under the value of £50 do not need to be declared.

NHS England guidance on hospitality

Hospitality, such as the offer of meals, refreshments and other expenses in relation to attendance at professional or educational events is an established part of professional life. It is important however that hospitality is proportionate and avoids giving rise to concerns about undue influence. Drawing on guidance from the ABPI, NHS England sets out the following principles and rules:
- Staff should not ask for or accept hospitality that may effect, or be seen to affect, their professional judgement
- Hospitality must only be accepted where there is a legitimate business reason and it is proportionate to the nature and purpose of the event
- Particular caution should be exercised when hospitality is offered by actual or potential suppliers – modest and appropriate hospitality can be accepted but senior approval should be sought and it should be declared

In relation to meals and refreshments:
- If their value is less than £25 they can be accepted
- Between £25 and £75 they can be accepted but must be declared
- If their value is over £75 they should ordinarily be refused, unless senior approval is given.

Again, these are not binding on general practices and those working for private or independent providers, but NHS England invites the boards or governing bodies of these organisations to consider implementing the guidance.

Education and training

Medicine involves life-long learning, from medical school through to retirement. The healthcare industries can have an important role in education and training, such as when introducing new devices or interventions that require the development of new skills or techniques. Industry can help sponsor educational activities including continuing professional development. There is however considerable scope for perceived or actual competing interests to develop in relationships between industry and medical professionals. It is important that steps are taken to ensure that the involvement of industry in education and training doesn't undermine, or give the impression that it might undermine, the development of independent and objective clinical judgment. As with other actual or potential competing interests, transparency is key. Doctors should therefore make all reasonable efforts to identify whether commercial organisations are involved in their education and training and to disclose this information using appropriate systems and processes.

As mentioned above the ABPI provides guidance to the pharmaceutical industry on best practice in the relationship between the pharmaceutical industry and health professionals and some of the general principles and overall approach are relevant across the healthcare industries. Key points include:
- The involvement of industry in the provision of education is permissible where it is necessary to deliver resources that provide clear benefits to patients or adds value to the NHS
- Industry involvement in the provision of medical education or resources must not be allowed to compromise clinical independence
- Meetings or other events for health professionals sponsored by industry must have clear educational content. The involvement of sponsoring organisations must be disclosed.
- Travel and hospitality must be proportionate and secondary to the primary educational purpose of the meeting.