

Pharmacy

December 2024 Update

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10.12.2024



Summary

Pharmacy Department Roles and Responsibilities
Pharmacy Leadership Team
Pharmacy People
Departmental Sections
Discharge Prescriptions



Pharmacy Roles and Responsibilities

Medicines
Supply

Clinical
Pharmacy

Pharmacy
Production

Safety and
Governance

Education
and Training

Financial
Assurance

New
Medicines
and Trials

Medicines
Information

Procurement
and Quality
Assurance



Pharmacy Corporate Responsibilities



Controlled Drugs Accountable Officer

- Chief Pharmacist
- Medical Director/CD Local Intelligence Network



Medicines Safety Officer

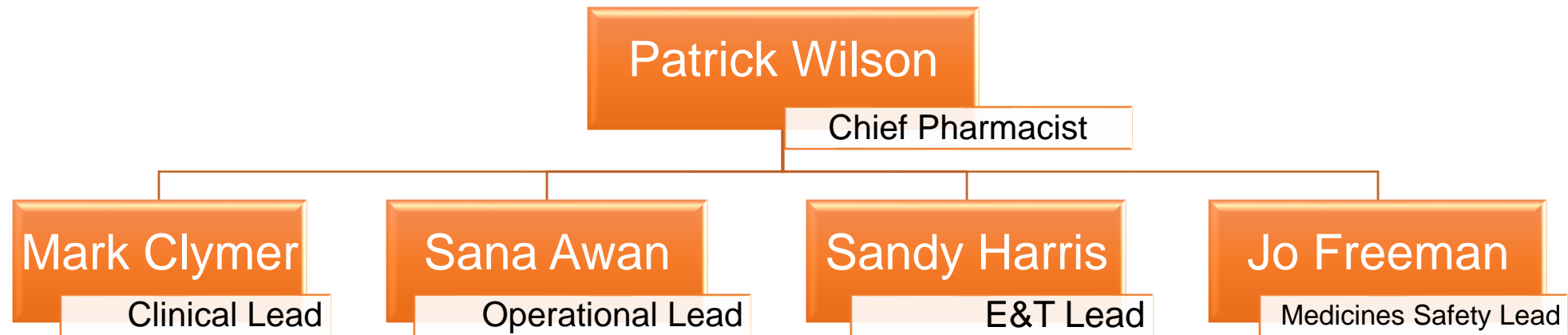
- Lead Pharmacist for Medicines Safety
- Medicines Safety Committee



Medicines Governance

- Safe storage
- Incident management

Pharmacy Leadership Team



Pharmacy People

The Pharmacy Department is made up of a range of different professional groups

Pharmacists (GPhC) = 49

Pharmacy Technicians (GPhC) = 50

Pharmacy Assistants = 53

Admin & Clerical = 5

IT Specialist = 1

Scientist = 1

Specialty General Manager = 1

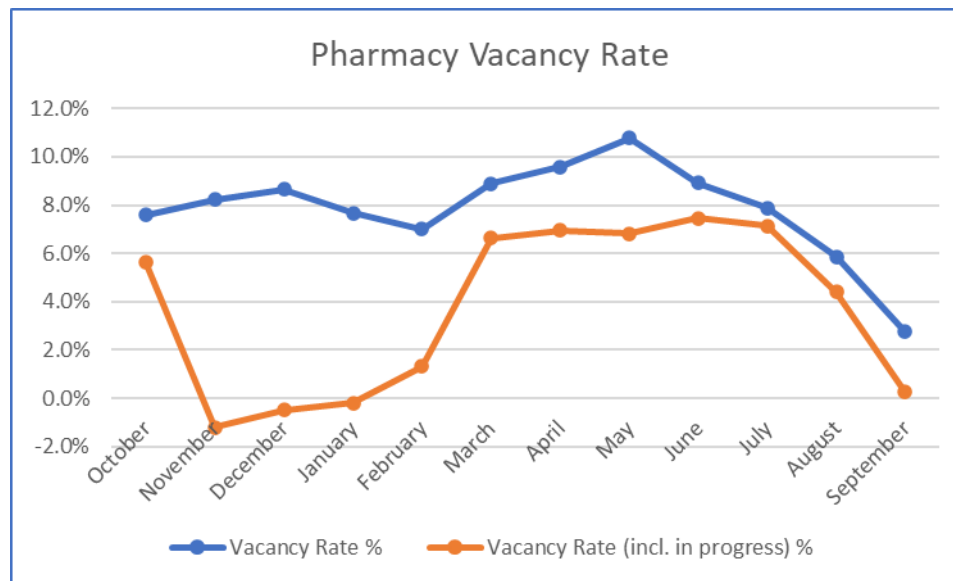


Pharmacy People

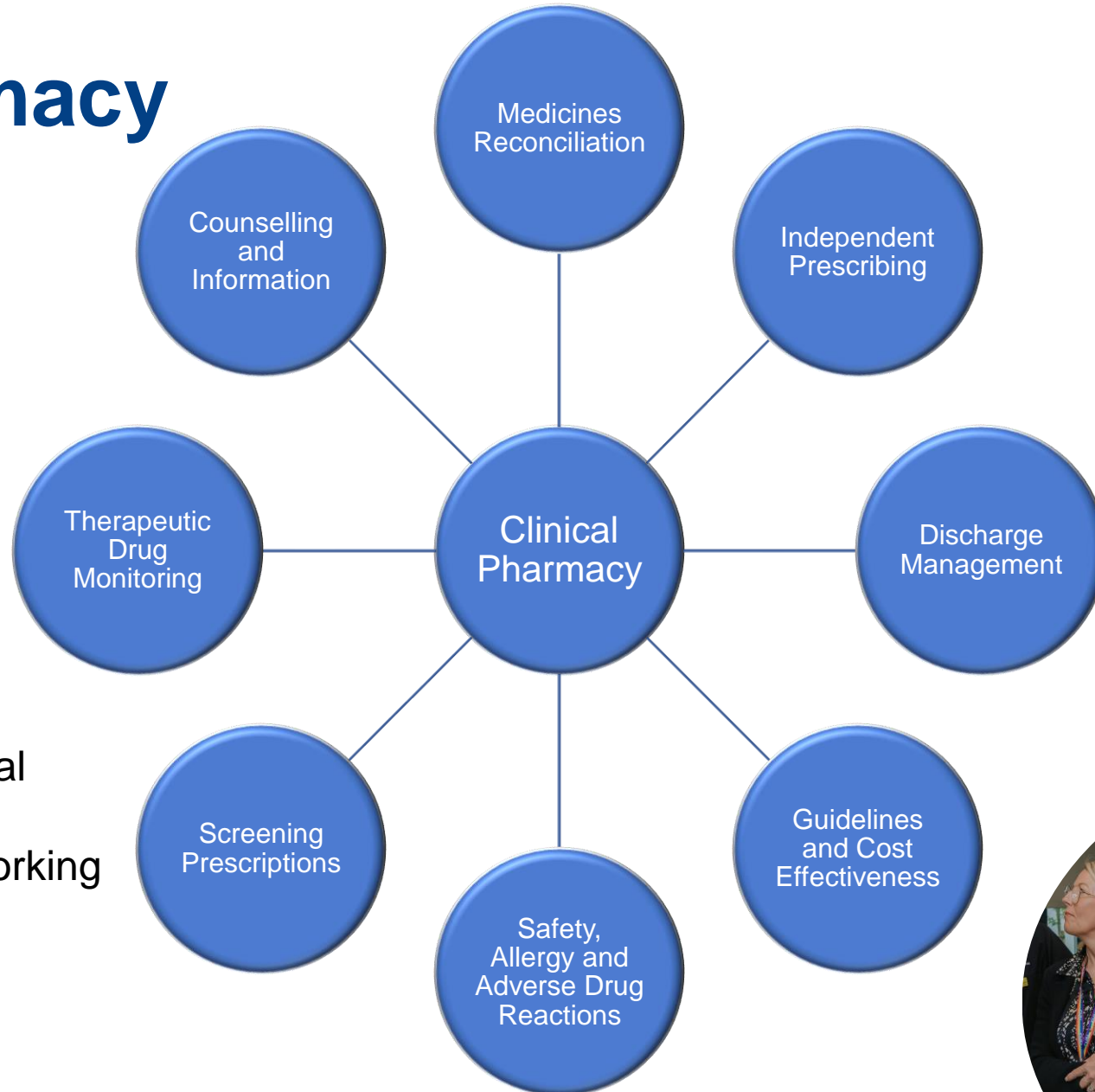
The Pharmacy Department had a budgeted establishment of 139.6wte

The Pharmacy Department had 130.50wte contracted in post (vacancy of 9.08wte)

Minimal use of agency staffing (1 locum pharmacist)



Clinical Pharmacy



Provided by a team of clinical pharmacists and medicines management technicians working in clinical areas directly with patients as part of the multidisciplinary team



Clinical Pharmacy

Investigation report: The role of clinical pharmacy services in helping to identify and reduce high-risk prescribing errors in hospital

Ward-based clinical pharmacy services can play an important role in helping the multidisciplinary team to identify and reduce high-risk medication errors. Effective clinical pharmacy services have been evidenced to improve a range of measures linked to efficiency and patient safety in acute hospitals.

Investigation report

Medication not given: administration of time critical medication in the emergency department

There were no defined roles or responsibilities in the ED to ensure patients who required time critical medications were identified, and medications prescribed, as soon as possible.

The ED had no dedicated pharmacy support to help staff in providing care to patients who required time critical medications.

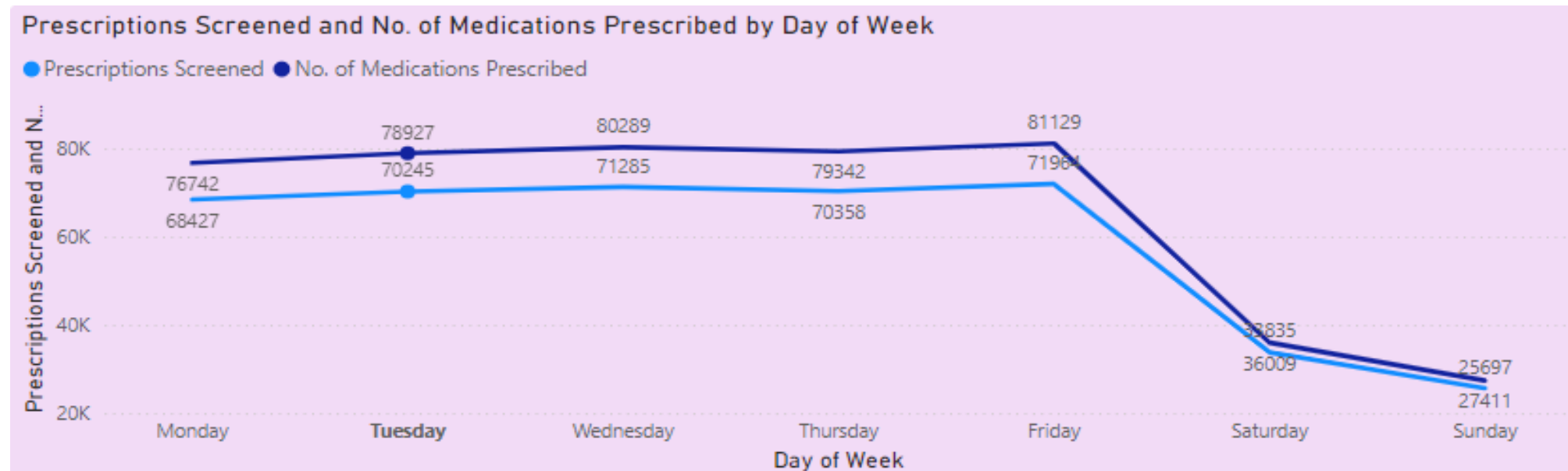


Independent Review of Clinical Pharmacy Services at NHS Hospitals in Wales

	Recommendation
1	Pharmacy teams must be routinely integrated within every multidisciplinary team.
3	Pharmacy teams, including advanced emergency department practitioners, must be available in every emergency department and integrated into the patient assessment process, to ensure good medicines decisions and management at the first opportunity.
7	The specialist knowledge and skills of advanced practice and consultant pharmacists must be made available to benefit patients and practitioners in community settings.
9	Dedicated pharmacy resource should be integrated into MDTs in clinical priority areas with an ambition to embed pharmacy professionals in every MDT over time.

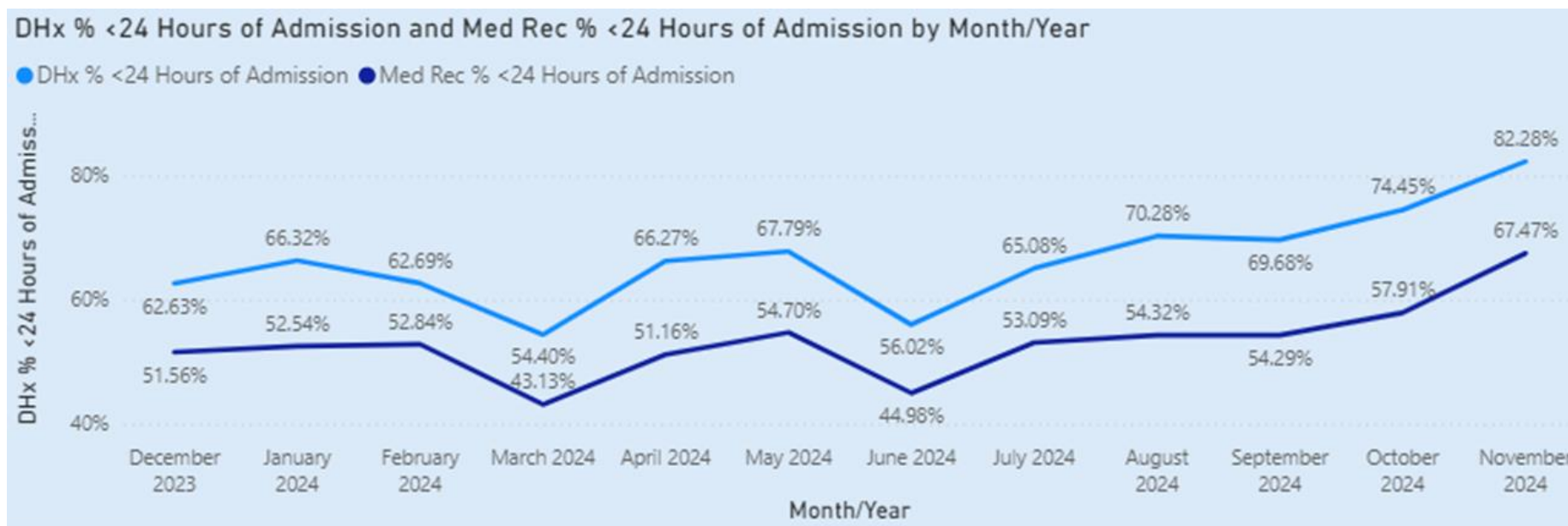
Clinical Pharmacy

Pharmacists and Pharmacy Technicians review patients and their prescriptions for safety, clinical and cost effectiveness



Clinical Pharmacy

A key function of the clinical pharmacy team is to undertake a reconciliation of each patient's medicines within 24 hours of admission to hospital. This is the technical task of ensuring accuracy but also the clinical role of whether those medicines are safe and appropriate given the patient's clinical presentation



Pharmacy Production

Manufacture aseptic pharmaceutical doses for named patients at SFH

Chemotherapy for Oncology and Haematology

Parenteral nutrition

Ophthalmological Injections

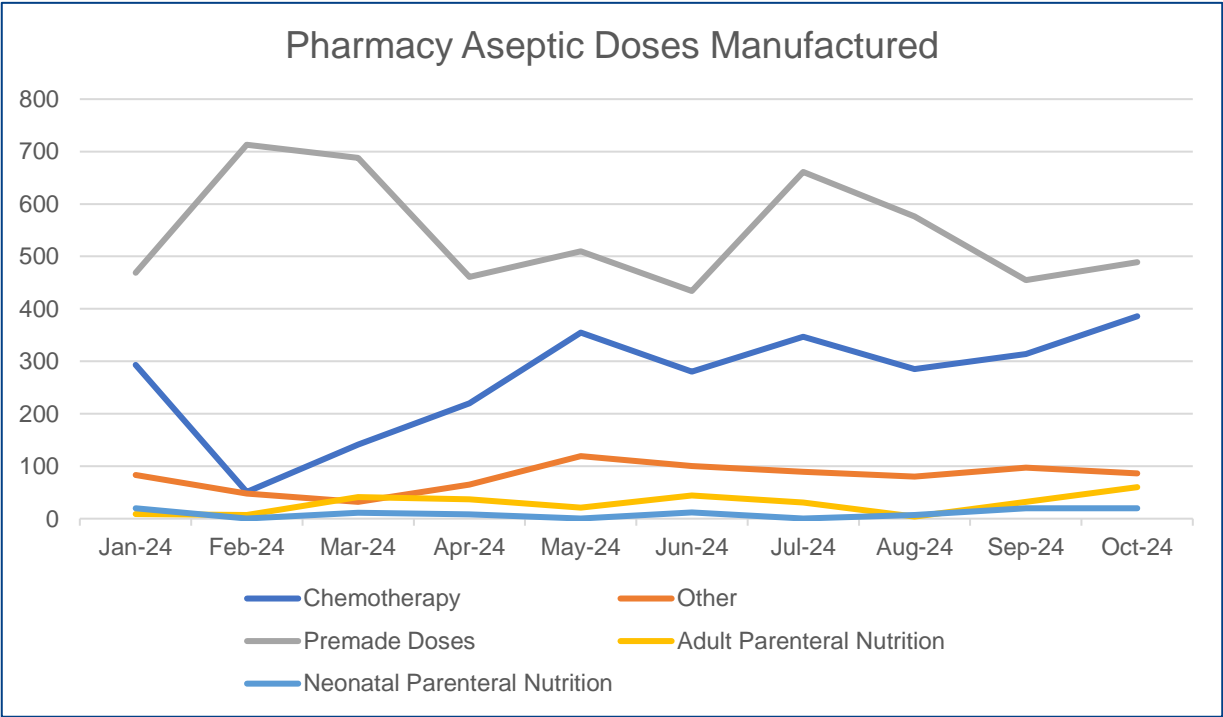
Biologic drugs

Pre-packing for SFH use and for commercial sale to other NHS

Quality control of manufactured products and unlicensed medicines



Pharmacy Production



Prepacks	SFH Use	External	Total
Total	67096	188141	255237



Pharmacy Production



Figure 1: proposed location and design of Modular ADU facility

Education and Training

6 Trainee Pharmacists

4 Pre-Registration Pharmacy Technicians (utilising apprenticeships)

All newly qualifying pharmacists supported with postgraduate clinical diploma

Aim for all pharmacists to be independent prescribers

Training provided to medical students, resident doctors, nurses

Pharmacy input into Trust induction for all clinical staff

Links with University of Nottingham



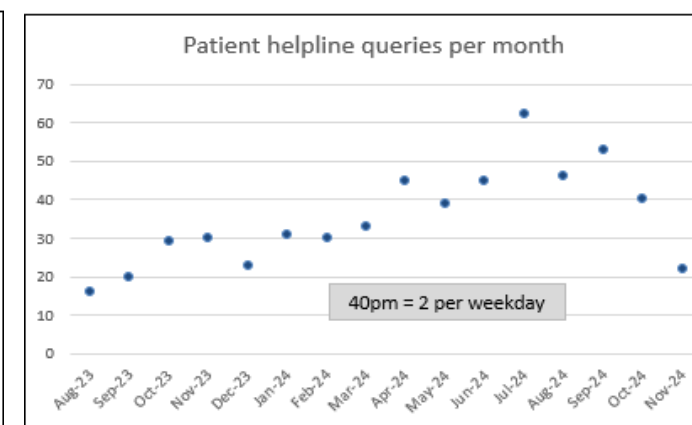
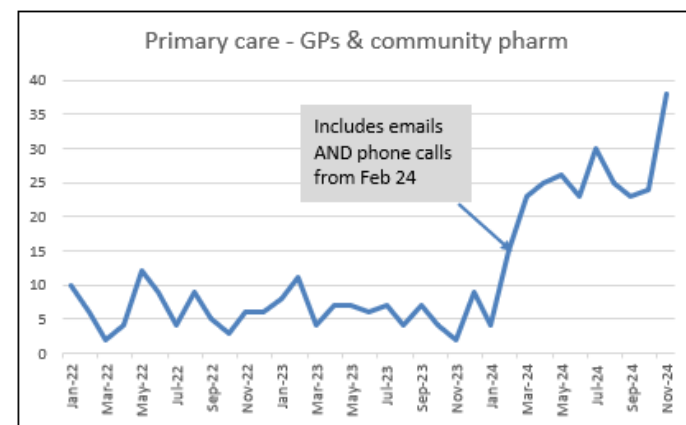
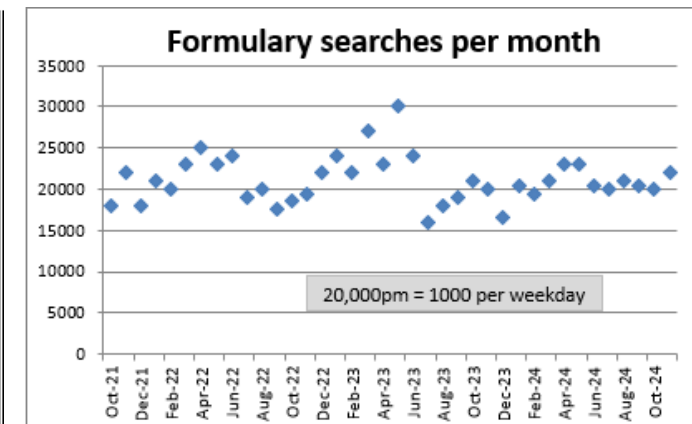
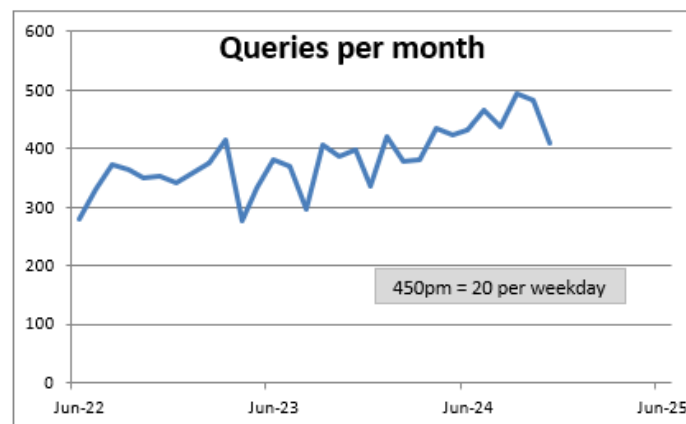
Medicines Information

Support for all clinical colleagues within SFH by phone/email

Maintain joint Nottinghamshire Medicines Formulary with NUH

Take queries/provide advice to healthcare professionals in primary care

Contact number available to patients on all medicines bags and TTO letters



Medicines Finance

In **23/24** at SFH we spent
£29.7m on medicines
of that



£5.3m was passed through to **NHSE** (Specialised Services including Cancer)

£11.5m was passed through to **ICB** (locally commissioned eg Rheumatology & Gastro)

£240k was passed through to the **Cancer Drugs Fund**

SFH employ a Lead Pharmacist for High-Cost Drugs who is responsible to SFH, NHSE and the ICB for the cost-effective use of pass-through medicines

In **24/25** we have led projects to save **£467k** through efficient use of medicines

Medicines Homecare

Third party company deliver medicines to a patient's nominated address

VAT exempt

Often included as part of the cost of high-cost medicines

In 2024 approx. **2000 patients** receiving regular homecare prescriptions

Grown from 700 patients in 2014

Spend approx. **£8.1m** p/a via homecare

Saving to NHS approx. **£1.6m** p/a



Stores and Distribution

Pharmacy Stores receive 4,600 individual lines per month equating to 70,000 packs

Pharmacy Stores distribute 45,000 packs per month to our clinical areas at SFH

We supply around 50 orders per month to external units (mainly John Eastwood Hospice)



Medicines Supply

Currently >200 medicines lines on the national shortage list

RPS National [report](#) into medicines shortages

Requires increased use of unlicensed medicines and QC assessment

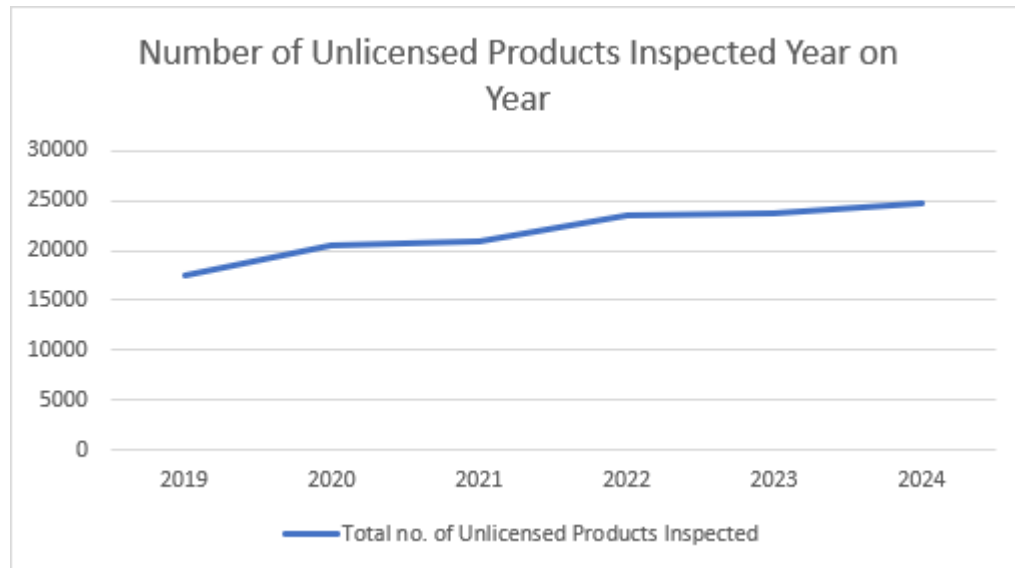
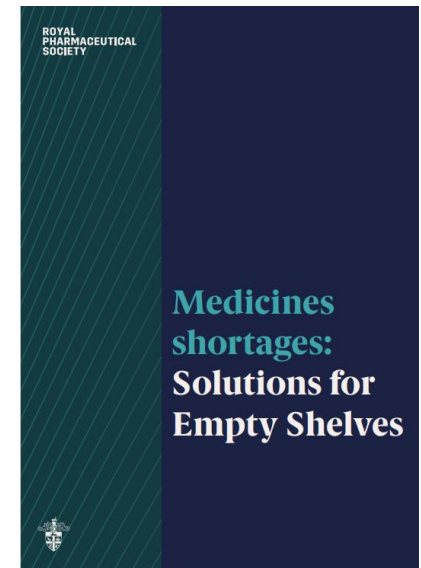
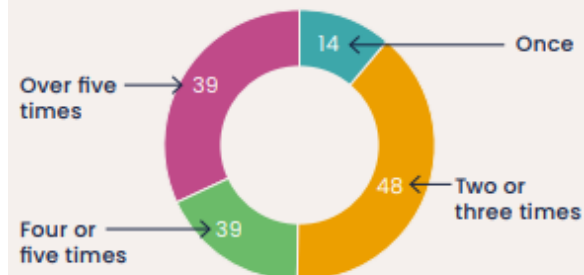


Figure 3.

Patient survey response

How often have you had problems getting this medicine/these medicines from a pharmacy in the last year? (Please select one option)



Dispensary

Main dispensary at KMH smaller unit at Newark hospital

Supplies for Mansfield Community Hospital from KMH

Weekend and evening service runs from KMH

Supply medicines for inpatient use, outpatient and discharge prescriptions

Dispense average of 21,250 items per month = 23,200 packs per month

In 2023 we dispensed 17,227 outpatient prescriptions

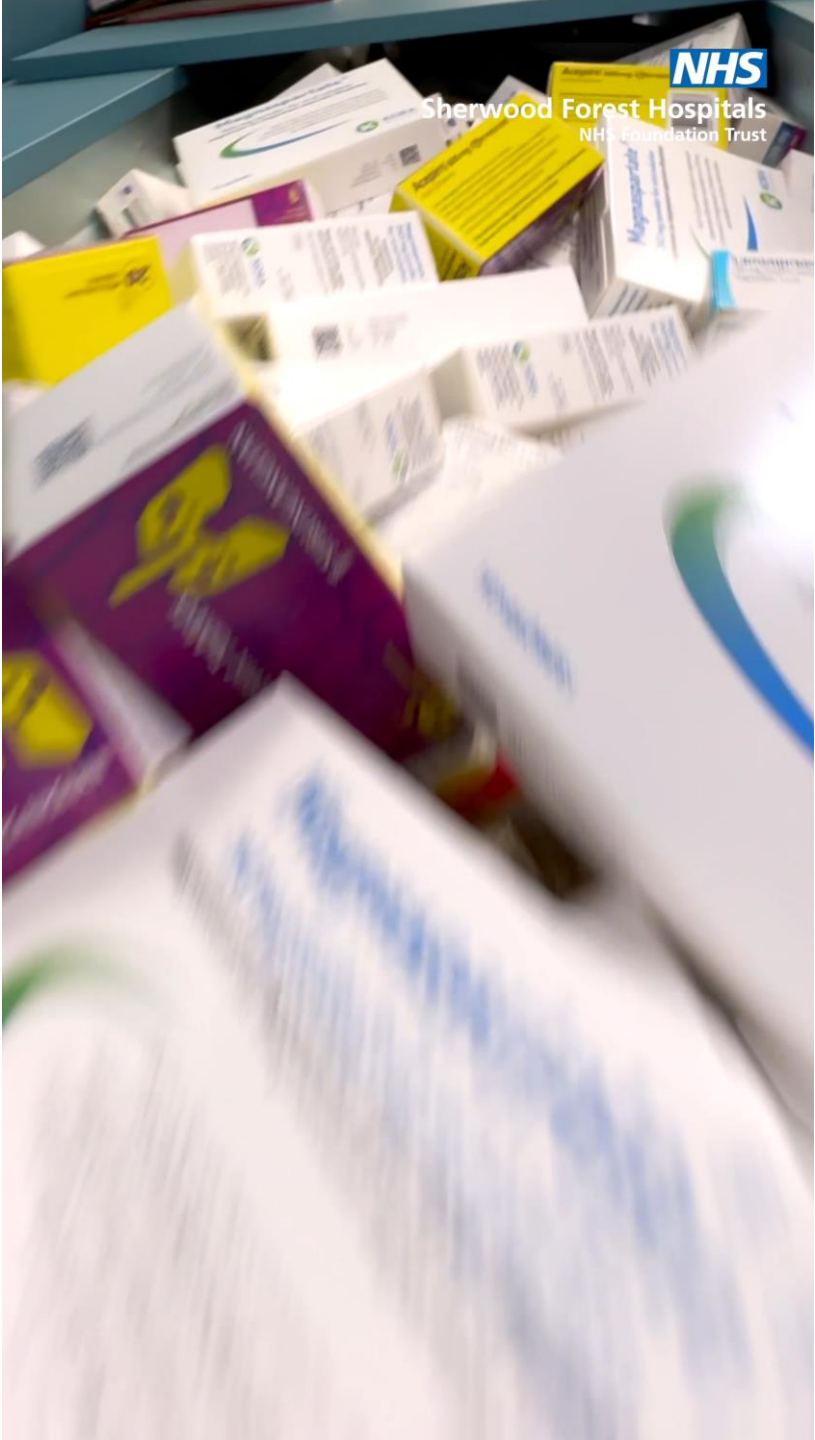
Of those

60.2% were dispensed < 20 minutes

81.4% were dispensed < 30 minutes



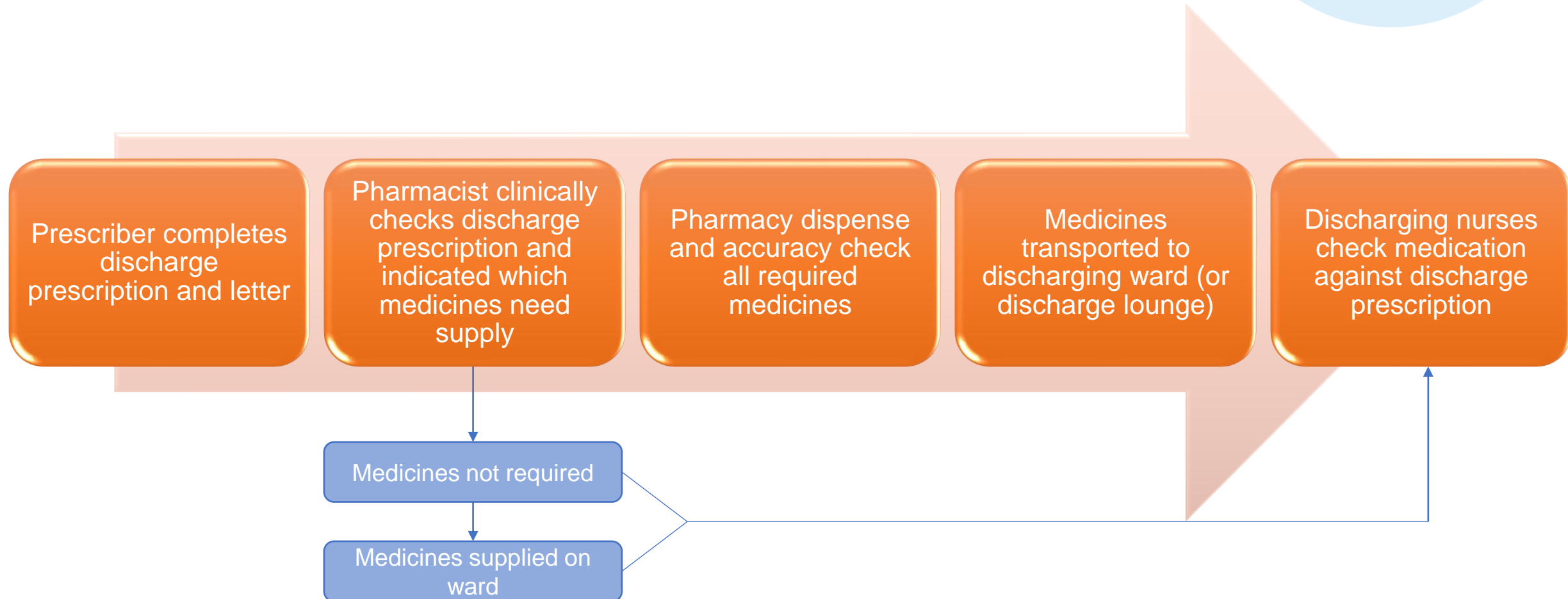
Outstanding Care,
Compassionate People,
Healthier Communities



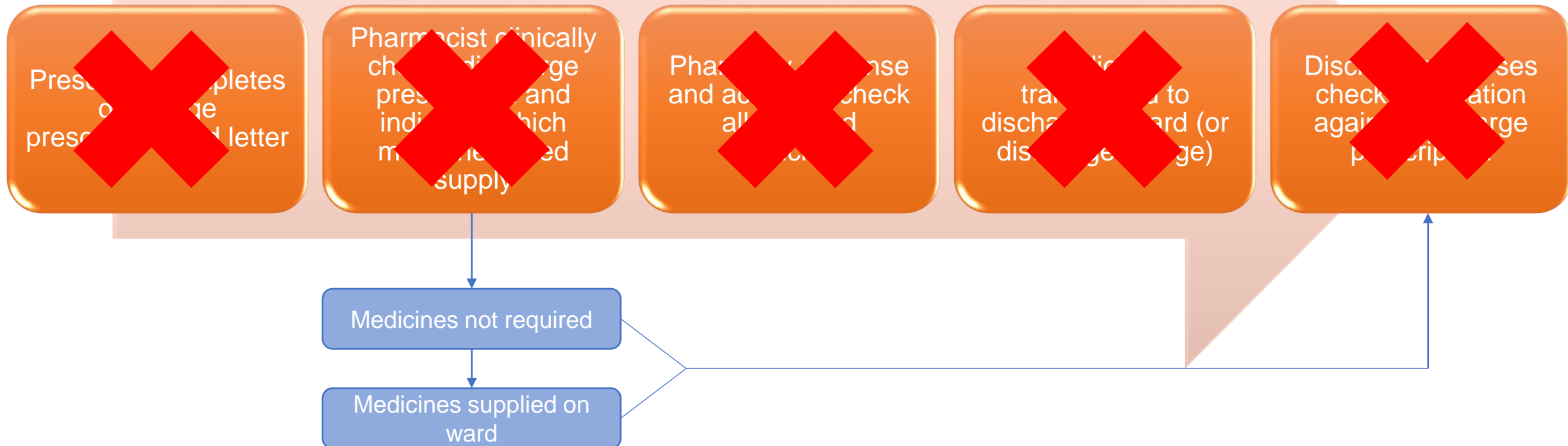
NHS
Sherwood Forest Hospitals
NHS Foundation Trust

NHS
Sherwood Forest Hospitals
NHS Foundation Trust

Discharge Prescriptions - Workflow



Discharge Prescriptions - Problems



Discharge Prescriptions – Controlled Drugs

CD regulations at SFH

Drug	Schedule	Store in CD cupboard?	Record in CD Register?	Witnessed destruction required?	Order in...		Handwritten [†] Dr's signature required on prescription?	Quantity in words & figures on TTO/outpatient prescriptions?	Signed delivery & receipt on ward?
					Normal CD Requisition Book?	Schedule 3 CD Requisition Book?			
Alfentanil	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Buprenorphine	3	Yes	No	No	No	Yes	Yes	Yes	Yes
Cocaine	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Codeine injection	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Diamorphine	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Diazepam (tablets only)	4	No	No	No	No	No	No	No	Yes
Dexamfetamine	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Dipipanone	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Fentanyl	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Gabapentin	3	Yes ⁴	No	No	No	Yes	Yes	Yes	Yes
Hydromorphone	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Ketamine (injections and oral liquid)	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Lisdexamfetamine Elvanse	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Methadone	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Methylphenidate Ritalin, Concerta XL, Equasym XL, Medikinet XL	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Midazolam	3	Yes ⁴	No	No	No	Yes	Yes	Yes	Yes
Mifepristone ²	POM ²	Yes	Yes	No	No	Yes	N/A	N/A	Yes
Morphine (Oramorph 10mg/5mL)	POM	No	No	No	No	No	No	No	Yes
Morphine (except Oramorph 10mg/5mL)	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Oxycodone	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Pethidine	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Phenobarbital	3	Yes ⁴	No	No	No	Yes	Yes	Yes	Yes
Potassium injections ¹	POM ¹	Yes	Yes	Yes	Yes	No	N/A	N/A	Yes
Pregabalin	3	Yes ⁴	No	No	No	Yes	Yes	Yes	Yes
Remifentanyl	2	Yes	Yes	Yes	Yes	No	N/A	N/A	Yes
Sativex (cannabis extract)	4	No	No ³	No	No	No	No	No	No
Secobarbital	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Tapentadol	2	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes
Temazepam	3	Yes	No	No	No	Yes	Yes	Yes	Yes
Tramadol	3	Yes ⁴	No	No	No	Yes	Yes	Yes	Yes
Zopiclone	POM	No	No	No	No	No	No	No	Yes

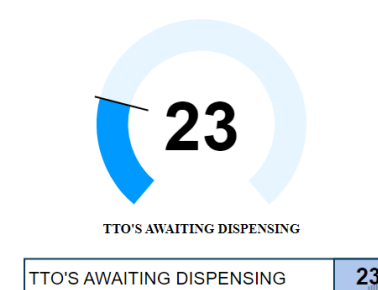
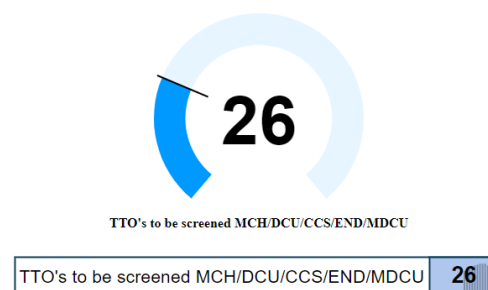
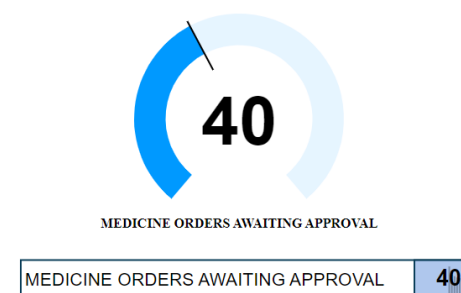
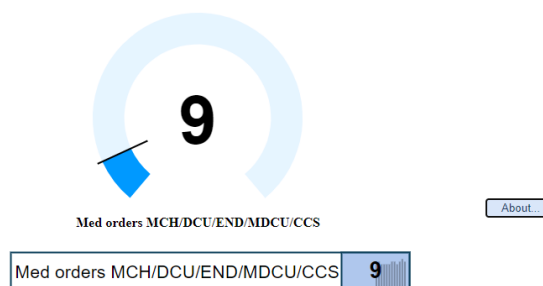
Discharge Prescriptions – Targets

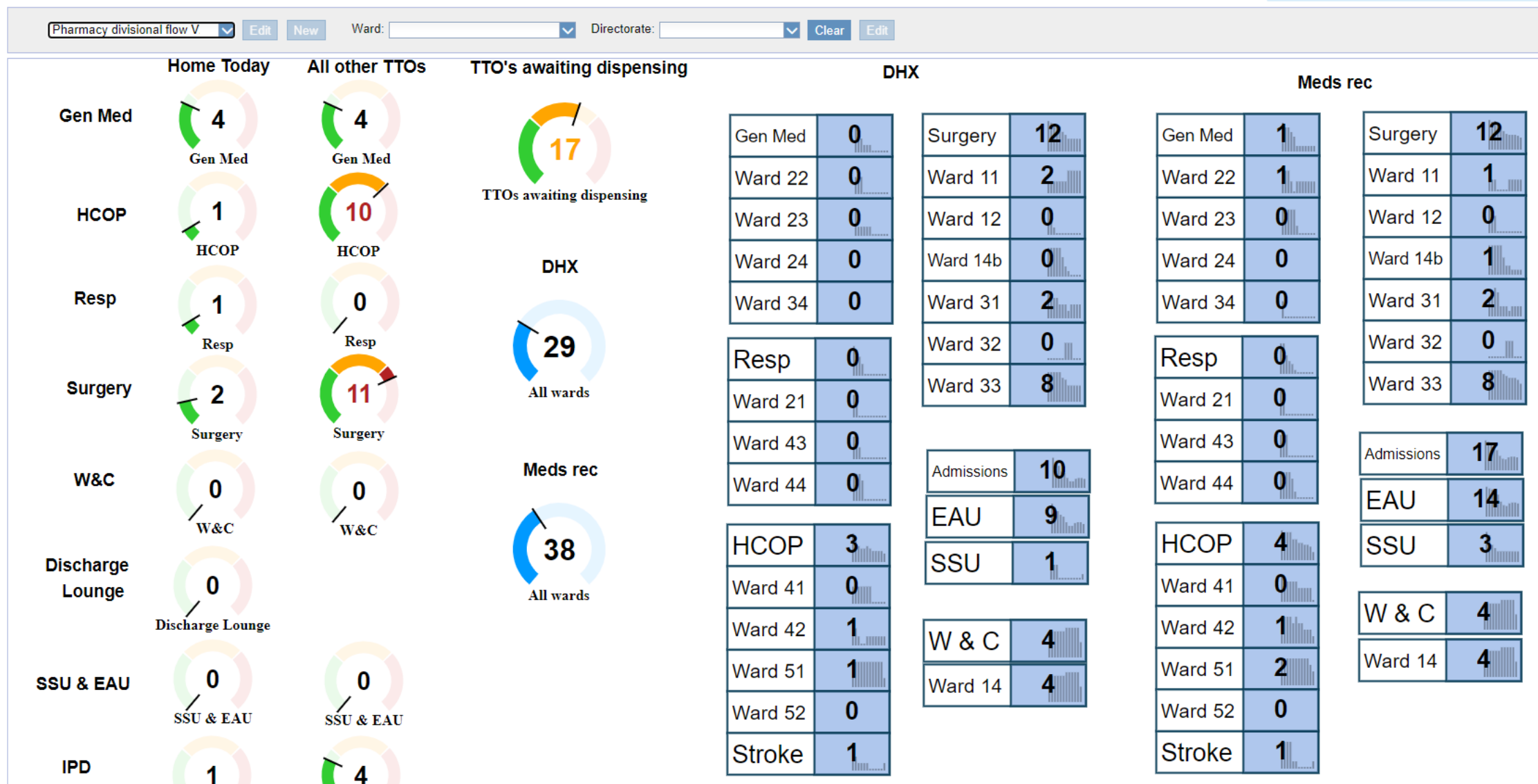
Pharmacy will clinically check prescriptions in a timely fashion

Pharmacist and Medicines Management Technician (MMT) presence on wards Mon-Fri

Dispensary Service

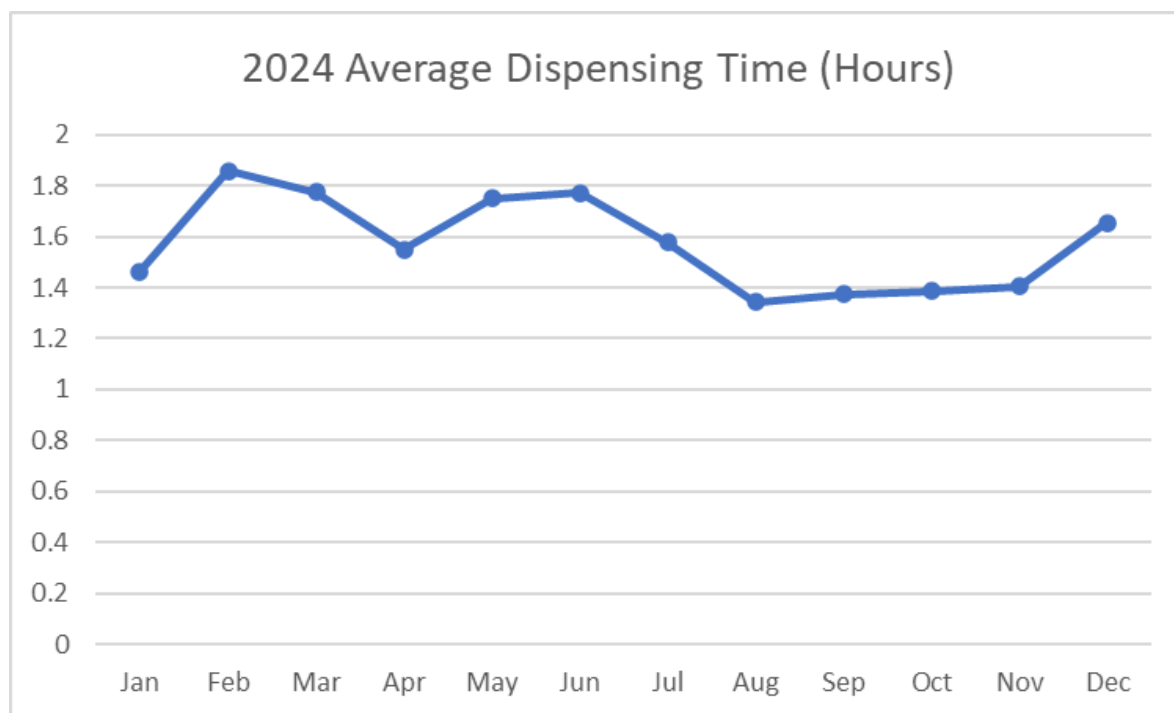
Weekends/On-Call





Discharge Prescriptions – Targets

Pharmacy will dispense all discharge prescriptions within 2 hours with the exception of those requiring “Mediwallets” where 24 hours’ notice is requested for planned discharge



70% within 2 hours

45% within 1 hour



Quality Improvement

- Better access to data from Nervecentre®
- Better dispensary discharge KPIs
 - Average turnaround times
 - %age complete within 2 hours
 - %age complete within 1 hour
- Better coverage for all clinical areas (Maternity, ED)
- Improved communication to community pharmacy
- Patient satisfaction
- Weekend service
- Automation



Questions?

