## **Working Together to Minimise the Impact of Medicines Shortages**



### **Key issues:**

- Working together with understanding and good communication will help minimise the impact of medicines shortages for patients, pharmacies and GP practices.
- Medicines supply issues are a growing national problem and affect all sectors of the ICS (Integrated Care System) leading to frustration and concern for patients.
- Shortages are caused by factors such as manufacturing problems and global market share.
- GP practices spend time changing prescriptions, often without knowing what else is available.
- Pharmacies are spending a lot of time sourcing medicines, sometimes by having to contact multiple wholesalers. Stock situations changes rapidly, sometimes within hours.
- Prescribing budgets are under pressure as prices of medicines increase.

#### Advice for all

- Use patient information leaflet to explain shortages PIL.
- Clinicians should establish the urgency & whether patients have any supplies at home
- If there is a medicines supply notification, follow the actions listed at the end of the document for advice & alternatives

# **Community Pharmacy (CP):**

- Inform prescribers of alternatives & serious shortage protocols that are available. (see below)
- Ask the GP practice for a direct phone number to avoid using patient lines &/or arrange a set time of day when a prescriber can be available for queries.
- If there is no stock, send the prescription back to the spine so patient can take to another pharmacy. If possible, liaise with nearby pharmacies to signpost patients to a pharmacy that has stock.
- Consider "staged" dispensing, i.e. partial supply & ask patient to collect the rest at a later date.
- Limited availability can lead to significantly inflated prices. Report pricing concerns to <u>CPE</u>.

#### **GP Practices:**

- Prescribe generically where appropriate to allow pharmacies to dispense any available brand.
- When a medicine is in short supply consider 28-day prescribing (even if 56 days is routine)
- Work with the PCN community pharmacy lead to share key messages.
- Where possible share direct line numbers where individual patient's problems can be discussed without delay
- Allow 7 days before a prescription may run out to order give time for processing & stock location.
- Where a medication is known to be in short supply try to ensure the item goes on a separate script & with a token for any pharmacy to pull the script down from the spine

#### **Healthcare Professional (HCP) Information**

- 1. HWE clinical guidance website can help you to identify first line and second line medicine choices.
- 2. SPS Medicines supply tool
  - List of known, enduring shortages does not cover all short term problems. Anyone with <a href="nhs.net">nhs.net</a> email can <a href="register">register</a>
- 3. Community Pharmacy England Serious Shortage Protocols
  - Allows pharmacists to switch certain products without referring patients back to the prescriber
- 4. Serious Shortage Protocols. Provides guidance for HCP on managing serious shortages
- 5. CPE Medicines Factsheet Information on medicines supply for patients Patient Information

Version	1.0
Developed by	Sarah Crotty, Senior Pharmacist HWE ICB & Helen Musson Chief Officer Community Pharmacy Herts
	with thanks to Nottinghamshire ICB for a draft we adapted.
Ratified by	Medicines Optimisation Delivery and Implementation Group Feb/March 24