

# Help Guide

## for Pharmacies

**TURNING  
POINT**  
inspired by possibility



### Local Service Details:

Slough Treatment &  
Recovery Team (START )  
27 Pursers Court  
Slough  
SL2 5DL  
01753 692548

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## Home Office Approved Wording

There are 5 statements which are home office approved wording:

- Please dispense instalments due on pharmacy closed days on a prior suitable day.
- If an instalment's collection day has been missed, please still dispense the amount due for any remaining day(s) of that instalment.
- Consult the prescriber if three or more consecutive days of a prescription have been missed.
- Supervise consumption on collection days.
- Dispense daily doses in separate containers.

Turning Point prints all of the home office approved wording statements on prescriptions. The wording is printed at the bottom of the prescription.

If the relevant approved wording is used, a pharmacist can:


- Supply the balance of an instalment if the interval date is missed (e.g. if three days' supply was directed to be supplied on day one but it was missed, it allows two days' supply to be issued on day two).
- Supply treatment prior to the start date on the prescription, if this is on a day the pharmacy is closed for example during bank holiday periods (e.g. if the start date is a bank holiday Monday and the pharmacy is closed, a supply can be made if the signature date is before the start date).

[Circular 027/2015: Approved mandatory requisition form and Home Office approved wording - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/444444/Circular_027_2015_Approved_mandatory_requisition_form_and_Home_Office_approved_wording.pdf)

## Clients missing collections due to Bank Holidays

Each prescription that is issued by Turning Point contains the **Home Office wording** that allows you to dispense the dose for the day the pharmacy is closed, on a day prior when the pharmacy is open.

This wording is located at the bottom of the prescription.

Pharmacy Stamp	Age 40y D.o.B 19/03/1976	Title, Forename, Surname & Address Ms Georgia Wallace 467 Sycamore Drive Colchester CO7 6PI
Number of days' treatment N.B Ensure dose is stated	7	NHS Number: 3345 9582 9148 3634
<p>Methadone hydrochloride 1mg/ml SF oral solution 490ml Take 70ml daily 10/11/2016 70ml 11/11/2016 70ml 12/11/2016 70ml 13/11/2016 70ml 14/11/2016 70ml 15/11/2016 70ml 16/11/2016 70ml</p>		
<p>Please dispense instalments due on pharmacy closed days on a prior suitable day. If an instalment's collection day has been missed, please still dispense the amount due for any remaining day(s) of that instalment.</p>		
Signature of Prescriber	Date	
<i>Rafael W</i>	11/11/2016	
For Dispenser No. Of Prescns. On form	Dr Rafael Warner 294 Primrose Lane Dundee DD14 10GQ	
		

**Pharmacy closed  
on the prescription  
start date?**

This wording  
allows you to  
dispense the day  
prior if the  
prescription starts  
on the day the  
pharmacy is closed

## The prescription was signed over 28 days ago. Can I dispense?

This depends on the 'Appropriate Date'.

### What is an 'Appropriate Date'?

Schedule 2 and 3 controlled drugs prescriptions, such as those for methadone and buprenorphine, are valid for 28 days after the 'appropriate date' on the prescription. The appropriate date as defined in the legislation is:

**“The later of the date on which it was signed by the person issuing it or the date indicated by him as being the date before which it shall not be supplied<sup>1</sup>”**

### How do I identify the Appropriate Date on a Prescription?

- **"Date on which it was signed by the person issuing it"** (signature date):  
This is the date that the prescription was signed, which is recorded next to the signature box. Legally the date of signing must be stated. For 'regular' CD prescriptions (i.e. not instalment prescriptions) this is often the only date on the prescription and therefore becomes the appropriate date.
- **"Date indicated by him as being the date before which it shall not be supplied"**:  
The Medicines Ethics and Practice (MEP Edition 44; page 113, RPS, 2021) confirms this in advice given to pharmacists:

*"For on NHS prescription, the appropriate date is the later of either the date on which the prescription was signed or a date indicated by the appropriate practitioner as the date before which it should not be dispensed."*

See example overleaf 

<sup>1</sup>Statutory Instrument 2006 No.1450 Dangerous Drugs, England and Wales, Dangerous Drugs, Scotland The Misuse of Drugs (Amendment No.2) Regulations 2006

## Example

Here is an example of an instalment grid printed on a Turning Point instalment prescription:

Pharmacy Stamp

Age: 40y  
D.o.B: 19/03/1976

Title, Forename, Surname & Address  
Ms Georgia Wallace  
467 Sycamore Drive  
Colchester  
CO7 6PI

Number of days' treatment: 14  
N.B. Ensure dose is stated

NHS Number: 3345 9582 9148 3634

**Methadone 1mg/1ml Mixture**  
Daily: 50ml  
Total: 700 (Seven Hundred) ml  
From: 10/09/2020 to 23/09/2020

Date	Dispense	Dose	Date	Dispense	Dose
10 Sep	50ml	50ml	17 Sep	50ml	50ml
11 Sep	50ml	50ml	18 Sep	50ml	50ml
12 Sep	50ml	50ml	19 Sep	50ml	50ml
13 Sep	50ml	50ml	20 Sep	50ml	50ml
14 Sep	50ml	50ml	21 Sep	50ml	50ml
15 Sep	50ml	50ml	22 Sep	50ml	50ml
16 Sep	50ml	50ml	23 Sep	50ml	50ml

Instalments due on days when the pharmacy is closed should be dispensed on the day immediately prior to closure.

Signature of Prescriber: *Rafael W*  
Date: 22/08/2020

For Dispenser No. Of Prescns. On form:  
Dr Rafael West  
GMC: 676135  
Lindley Medical Practice  
Northwich  
N12 9DL

**NHS**

**Signature Date:** 22/8/2020

- this is the date the prescription is authorised by the prescriber.

**HOWEVER...**

The '**Appropriate Date**' is 10th September.

The first instalment must be supplied within 28 days of 10th September, however as the instructions for supply are clear, the prescription would be supplied as stated on the grid as this makes the prescriber's intentions unequivocal.

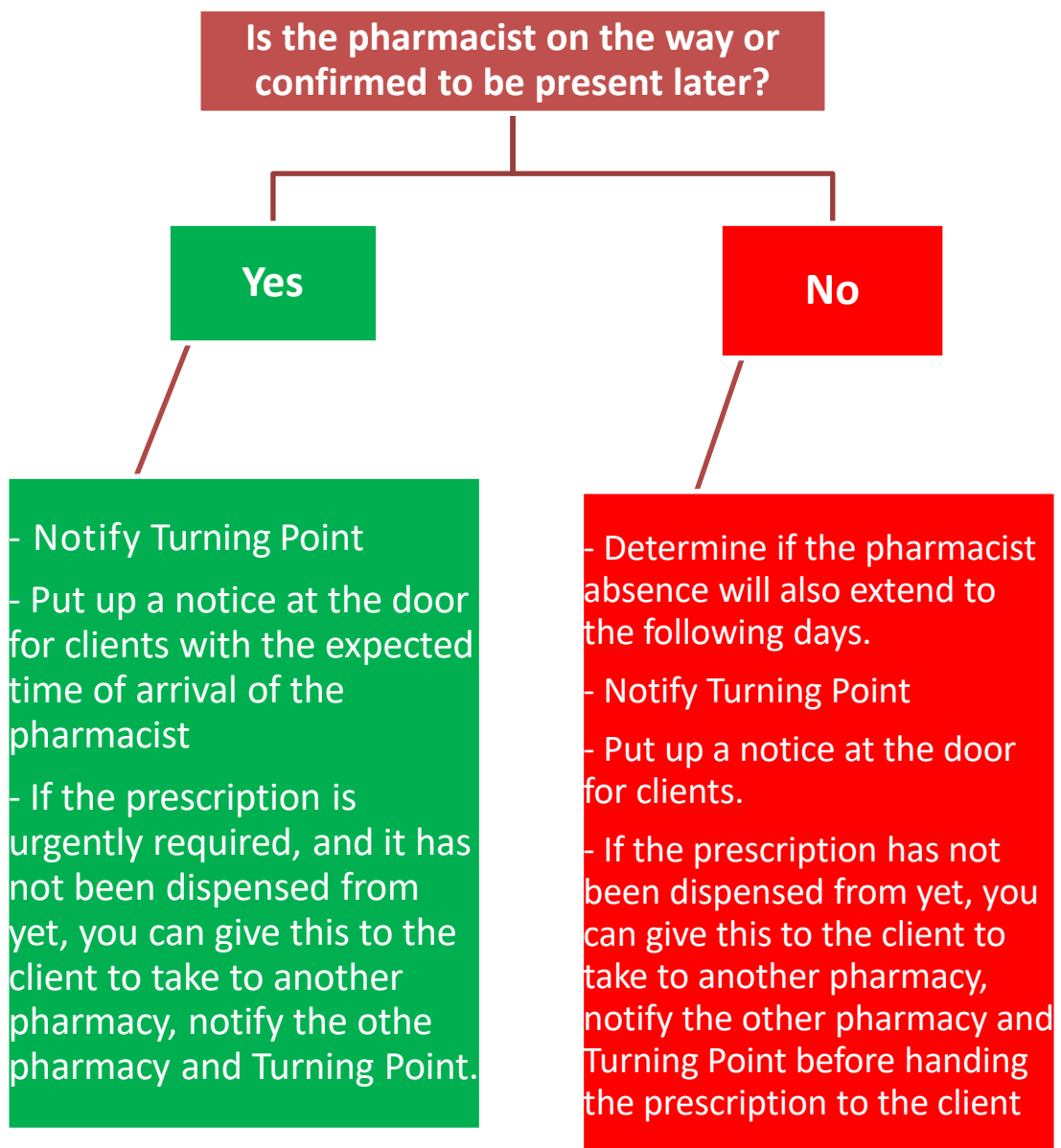
Note: Although the instalments run beyond 28 days from the signature date, this prescription is legal for the reasons stated above.

## There is no pharmacist on site

We understand there may be unavoidable situations when this occurs.

In each case proactive steps should be taken to contact clients and standard processes for notifying the local NHSE team followed

You can take the following steps to support us and the clients:



## “Voiding” vs “Holding” a prescription

We may ask you to void a prescription or place a prescription on hold.

### Voiding a Prescription

You may be asked to void a prescription:

- Immediately (e.g. if the dose or treatment has changed)
- After a certain date (e.g. client will start a dose reduction)
- Between two dates (e.g. client is going on holiday and will be provided a holiday script)

### Action by you:

- Do not dispense any further doses from the void from date provided
- Clearly indicate this on **Details of Items Supplied** section to prevent duplicate prescriptions

**If we can't reach you**  
The **new** generated prescription will state the details of the previous prescription that requires voiding

- The prescription can be marked as as complete and filed away for end of the month submission

### Placing a Prescription on Hold

You may be asked to place a prescription on hold. Some of the reasons for this may be:

- If a client has been hospitalised and they are receiving the same dose in hospital
- The client is not engaging with us and there are concerns around safe prescribing

### Action by you:

- Do not dispense any further doses from stated date
- Wait for further instructions from Turning Point
- Indicate the prescription is on hold (for other pharmacy staff)

Please record the name of the staff member that gives any instructions to void or hold a prescription



## What do I do if a client misses a dose of Opioid Substitution Treatment (OST)?

### ONE day missed

During titration



#### What do I do?

- Do **not** dispense the prescription
- Contact the local Turning Point service for further advice

#### Why is this important?

- The risk of death during methadone induction has been calculated at nearly seven-fold greater than the patient's risk of death prior to entering methadone maintenance treatment. Deaths usually occur during the first three to ten days of treatment<sup>1</sup>. Therefore, extra caution should be exercised during the first two weeks of treatment and any OST doses missed (including buprenorphine) should be reported to Turning Point.
- If a client misses a dose during the titration phase of treatment (i.e. increase in dose during the induction onto an OST prescription) Turning Point must be contacted before the next dose is given. Titration phases should not fall upon a weekend due to observation arrangements with Turning Point treatment services.

### ONE day missed

After titration and/or maintenance or reduction

#### What do I do?

- The pharmacist must indicate on the prescription "not dispensed" next to the relevant date and on the relevant data collection forms on the Pharmacy Remuneration IT platform.
- If the client misses a pick-up they should return the next day as usual for their next dose.
- Ask the reason for missed dose in a friendly manner. Any regular patterns should be reported to Turning Point for further investigation.

### THREE days missed

3 consecutive days



#### What do I do?

- Do **not** dispense the prescription
- Contact the local Turning Point service for further advice
- The prescription should not be re-initiated until a specific instruction to endorse this has been given by a prescriber from Turning Point. If an instruction to continue the prescription is given the current prescription **can be used**<sup>2</sup>. A note of this decision should be made on the clients PMR.

### FOUR days missed

4 non-consecutive days in a two week FP10 MDA prescription period

#### What do I do?

- Dispense the prescription
- Contact the local Turning Point service

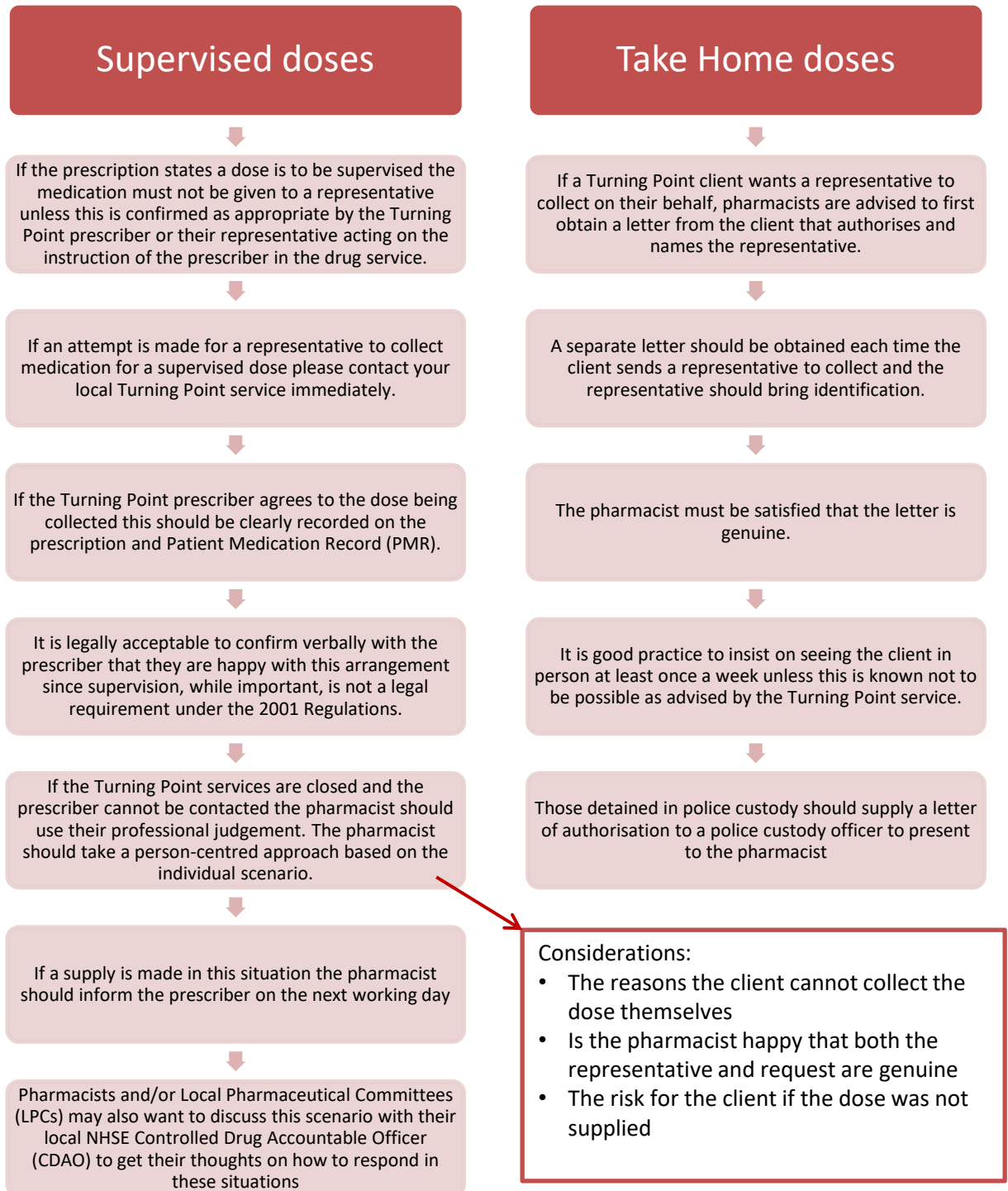
Note: If a client fails to collect four or more pick-ups in a 14-day FP10MDA prescription then Turning Point should also be contacted. Please note this requirement is also outlined in the Medicines, Ethics and Practice guidelines and should be adhered to<sup>3</sup>.

<sup>1</sup> Royal College of General Practitioners (RCGP). Guide to the Management of Substance Misuse in Primary Care (2005), pages 118-119

<sup>2</sup> Verbal confirmation from RPS and Home Office by Chief Pharmacist, Turning Point

<sup>3</sup> RPS (2019) Medicines, Ethics and Practice. Edition 43, July 2019, p.99

## Can a representative collect a client's doses?



## Supply Issues

### Generically prescribed

If a medication has been generically prescribed (e.g. 'buprenorphine' or 'methadone'), this allows any brand or branded generic products to be dispensed.

### Espranor®

Buprenorphine sublingual tablets are **not** interchangeable with Espranor®. This is because Espranor® is a freeze-dried wafer formulation of buprenorphine. Wafers should be dissolved **on top of the tongue**.

Espranor® has a higher bioavailability (approximately 25-30% greater than buprenorphine sublingual tablets) <sup>6</sup>. The amount of drug reaching the blood stream may be higher than sublingual buprenorphine products.



### What do I do if I do not have the brand prescribed in stock?

There are a few options available to you:

- **CD requisition:** Community pharmacy professionals are able to obtain supplies of schedule 2 and schedule 3 controlled drugs in the community via a CD requisition. This is an option if immediate supply is required.
- **Alternative pharmacy:** If a requisition is not possible and the prescription has not been dispensed off, please identify a pharmacy that has the stock available. Hand the prescription to the client and signpost them to the pharmacy. Please notify Turning Point immediately via the duty number or email address on the front of this booklet.

*If the above options are not available:* **Contact Turning Point:** We're here to support.

## “We cannot take on any more OST clients”

### We understand the pressures community pharmacy is under.

Unfortunately, these pressures have resulted in some pharmacies refusing to dispense prescriptions for Turning Point clients.



**All people**, regardless of their circumstances, deserve to be treated with **respect** and **dignity**, and provided with the **same level of care**.

### Can a pharmacy refuse to dispense an NHS prescription?

The Terms of Service include an obligation that an NHS pharmacist must provide prescribed medication to a person presenting a prescription "with reasonable promptness".

Supervised consumption is an enhanced local commissioned service but unsupervised dispensing of methadone and buprenorphine falls under the essential dispensing contract.

There are circumstances where the NHS pharmacist may refuse to make a supply - for example, if there is an error on the prescription, or where it would be clinically inappropriate to make the supply.

An NHS pharmacist who fails to supply prescribed medicines with "reasonable promptness" is likely to be in breach of their Terms of Service obligations.