

May 2025 Volume 4 Issue

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Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board

BOB Medicines Optimisation Bulletin



This bi-monthly newsletter is written by the Medicines Optimisation Team of the BOB Integrated Care Board and is intended for healthcare professionals and practice staff. If you have any questions or feedback, please contact the team via the email address: bobicb.medicines@nhs.net

Past editions of the bulletin can be found on the [SharePoint](#) website.

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National updates

MHRA drug alert reminder – The risk of prescribing short-acting beta 2 agonists (SABA) without an inhaled corticosteroid (ICS) in asthmatic patients

The MHRA has released a reminder to all healthcare professionals and patients of the risk of severe asthma attacks and increased mortality associated with overuse of SABA with or without anti-inflammatory maintenance therapy in patients with asthma. Healthcare professionals should be aware of the change in guidance that no longer recommends prescribing SABA without an inhaled corticosteroid.

Full details from the MHRA can be found [here](#).

We are currently updating the local BOB Asthma Management guideline in line with national guidance ([NICE Guideline \[NG 245\]](#), November 2024, Asthma: diagnosis, monitoring and chronic asthma management (BTS, NICE, SIGN)) to reflect these changes. Please review patients at risk and consider prescribing in line with NICE NG245.

So what?

- Please familiarise yourself with the new NICE Guideline NG245 and be vigilant to patients overordering SABA inhalers.

Learn from patient safety events (LFPSE) service – GP contract 2025-6 requirement

In 2025/26 GP practices will be required to have regard to the [Primary care patient safety strategy](#) and also register for and maintain an administrator account with the [Learn from Patient Safety Events \(LFPSE\) service](#) per the [GP contract](#).

The [LFPSE service](#) is a nationwide system designed to capture safety events across all healthcare settings. It helps identify emerging patient safety themes, sheds light

on overlooked issues in primary care and supports actions to prevent future harm to patients.

Primary care providers—such as GP, dental, optometry practices, and community pharmacies—without a local risk management system are asked to report patient safety events directly through LFPSE. To do so, they need to register for an account and use the [online LFPSE service](#).

See the NHSE [LFPSE Online Service - Introductory Guide](#) to get set up on LFPSE. If you have a list of staff for access to LFPSE, please send their email addresses to the [Patient Safety Helpdesk](#) and the team will forward a group invite.

So what?

- Please ensure all staff are aware of the new requirements regarding LFPSE
- Register for and maintain an LFPSE account, reporting any patient safety events
- A reminder that controlled drugs incidents or concerns (including loss or theft) should be reported to the NHS Area CD Accountable Officer via the online Controlled Drug reporting website – www.cdreporting.co.uk. You should also report incidents to the police (if necessary)

BOB System updates

Updates from Area Prescribing Committee

Relugolix for treating hormone-sensitive prostate cancer

A new **oral** GnRHa for hormone-sensitive prostate cancer has been agreed for use across BOB by the Area Prescribing Committee in line with [NICE TA 995](#)

AI

- For new GnRHa patients: it has been agreed as **AMBER INITIATION** where it will be started under specialist supervision before primary care are asked to continue.

AR

- For existing patients already on GnRHa injectable products: it has been agreed as **AMBER RECOMMENDATION**.

A new BOB GnRHa guideline for prostate cancer will be available shortly, where this treatment will be positioned as first line choice (in line with licensed indications, see [SPC](#) and [BNF](#) for more information including dosage, interactions and other precautions)

As an oral treatment, this is potentially easier from an administration perspective, removing the need for a regular injection and therefore also reducing workload in primary care. This is also a good option for patients who struggle to attend for regular injections such as housebound patients (see previous [BOB MOB article in March](#))

So what?

- Primary care prescribers should be aware of this new treatment option and may start to receive recommendations/requests to continue prescribing from specialists. Further GnRHa for prostate cancer prescribing guidance for primary care will be available shortly.

Inclisiran and bempedoic acid for lipid management

A change in the formulary status for the following has been agreed for:

GREEN

- **Inclisiran:** From amber recommendation to **GREEN**. It must be prescribed in accordance with [NICE TA733](#).
- **Bempedoic acid:** From amber recommendation to **GREEN**. It must be prescribed in accordance with [NICE TA694](#).

(The changes above may not be reflected in the formularies at the time of publication of this newsletter but are expected in the following weeks).

Resources to support inclisiran prescribing are also available:

- New BOB inclisiran patient information leaflet – available [here](#)
- Updated ‘Initiating inclisiran in primary care resource pack for practices’ document, including – available [here](#).
- A reminder that inclisiran is included in the BOB Near Patient Medicines Management Locally Commissioned Scheme available [here](#)

An updated BOB lipid modification guide will be available shortly, in which the above changes are included, to also take into account updates previously made in [NICE cardiovascular disease guideline 238](#) (December 2023) and [NHS national guidance for lipid management for primary and secondary prevention of cardiovascular disease](#) (September 2024).

So what?

- Primary care prescribers should be aware of the change in formulary status for inclisiran and bempedoic acid.
- Be aware of the resources to support inclisiran prescribing – patient information leaflet, primary care resource pack and locally commissioned service.
- An updated BOB lipid modification guideline will be available shortly.

Prescribing Quality Scheme

PQS (April 2025) Target 3 – Oversupply and Repeat Prescribing

Resources for the BOB Prescribing Quality Scheme PQS launched in April 2025 are now available on [SharePoint](#). To help you get started the MOT are hosting a series of webinars relating to each target within the scheme. The timetable for these is listed [here](#) with links to the webinar/recording and slide deck uploaded when ready. Please ensure you have returned the practice participation agreement to MOT before embarking on any PQS work.

| Date | Webinar | Speaker(s) | Webinar link |
|--|---|--|---|
| Thurs 24 th April 1pm – 1.45pm | Oversupply and Repeat Prescribing | Orla McBride (BOB MOT) | Watch recording Prescribing 1.1 Repeat Prescribing ICB Webinar 20250424 122848 Meeting Recording 1 - YouTube 24th April 25 Slides |
| Wed 30 th April 1pm – 2pm | ScriptSwitch® and the PQS requirements | Jagdeep Gheer (BOB MOT) Joanna Sosnowska (Optum UK) | Watch recording https://youtu.be/O9U2ndNyp6k 30th April 25 Slides |
| Tues 6 th May 1pm – 2pm | SABA overuse in Children | Christiana Meira (BOB MOT) Paula Matson (Respiratory Specialist Nurse BOB ICB, Integrated Respiratory Delivery Network Community Clinical Lead) | Join the meeting now |
| Thur 8 th May 1pm – 2pm | Dietetics – Oral Nutritional Supplements formulary compliance | Sarah Ryeland (BOB MOT) Naomi Asembi (BOB MOT) | Join the meeting now |
| Thur 15 th May 1pm – 2pm | DOAC Optimisation | Janice Craig (BOB MOT) Kirsty Scott (Lead DOAC Pharmacist BHT) | Join the meeting now |
| TBC | Falls and SMRs | Jillian Powell (BOB MOT) TBC | |

Target 3 Oversupply and Repeat Prescribing

The aim of this target is to carry out a guided Quality Improvement review of repeat prescribing based on the RPS/RCGP Toolkit launched in Oct 2024 in order to improve and streamline processes. Practices should involve all roles involved in processing repeat

prescriptions as part of an MDT review. A sample of data can be analysed either via NHSBSA or customised Emis-web searches to help identify trends or problems.

Resources to support the completion of this target are available on SharePoint include:

- Workbook (template) for the target. Please ensure you look at the various tabs for more information
- Emis-web searches – these can be downloaded, save and imported into your practice clinical system
- Information on accessing NHSBSA Oversupply data
- [Recording of webinar](#) & [slide deck](#) with links to resources

Additional support can be requested from your MOT PQS champion. “Drop-in” sessions are available for anyone to attend where we will give a live demo of the NHS BSA Oversupply Dashboard and endeavour to answer any questions you may have.

PQS Target 3 Drop in Session: **Tuesday 20th May** @ 13.00 [Join the meeting now](#)

PQS Target 3 Drop in session **Thursday 29th May** @ 13.00 [Join the meeting now](#)

Dietetic Updates

Enteral Feed Supply Disruption

Nutricia, the enteral feed supplier for BOB and Frimley ICBs, is facing significant supply challenges expected to last for the next 3 months. The Department of Health and Social Care National Supply Disruption Response team is working with Nutricia to manage the disruption. ICB's are working with Nutricia and Dietitians to minimise the impact on patients and primary care as much as possible.

Since January 2025, patients have been transitioning from Abbott to Nutricia, with most expected to switch by June 2025. Due to current shortages, some patients may need to be temporarily switched via prescriptions to alternative feeds from suppliers like Abbott or Fresenius Kabi. We apologise for the inconvenience caused.

So what?

- You may be contacted by Nutricia Homeward or a Dietitian regarding prescription changes to alternatives such as Abbott or Fresenius Kabi.
- Stock availability is changing daily – updates can be found [here](#)

- For updates or queries, contact the Medicines Optimisation Team at: bobicb.medicines@nhs.net.

ScriptSwitch Insights

Monthly Top Medication Switches: Most presented switches April 2025

Each month the Medicines Optimisation Team will be highlighting some key ScriptSwitch recommendations that have been frequently missed but can have a significant impact on patient care and medication management.

By staying on top of these top switches, you can help ensure that your patients are receiving the most effective, cost-efficient, and evidence-based treatments.

Prescribing the 'preferred' replacement can also help to reduce your practice **Offer Rate** which support the 2025 – 2026 Prescribing Quality Scheme incentive.

Please see table below of commonly presented switches during April 2025:

| Original Product | Replacement Product | Did you know? |
|---|---|--|
| Cetraben Cream | Epimax Excetra Cream | Epimax Excetra Cream has been approved for use by BOB APC with input from local dermatologists, to ensure its effectiveness and equivalence to the original product. |
| Amoxicillin 500mg capsules 7 day course | Amoxicillin 500mg capsules 5 day course | NICE recommends a 5-day course of amoxicillin rather than a 7-day course for most indications including (but not limited to): <ul style="list-style-type: none"> • acute cough • acute infective exacerbation of COPD • community acquired pneumonia |
| Adcal-D3 chewable tablets | Evacal D3 chewable tablets | Prescribing Evacal D3 chewable tablets are more cost effective than Adcal-D3 and are considered equivalent. |

So what?

- Please disseminate and share across your practice and at practice clinical meetings
- Review your practice ScriptSwitch reports

If you have any questions or need assistance with navigating ScriptSwitch, please do not hesitate to get in contact via the Medicines Inbox bobicb.medicines@nhs.net or Optum customerserviceuk@optum.com

Response to feedback on Emcozin

BOB Medicines Optimisation Team are committed to supporting safe and effective prescribing by listening to our clinical colleagues. After receiving valuable feedback from prescribers regarding the ScriptSwitch recommendation to switch generic co-codamol to Emcozin, we have reviewed the concerns raised around stock availability and made the decision to suspend this switch with immediate effect.

We appreciate the time clinicians take to share their insights, which play a vital role in ensuring our prescribing support tools remain clinically appropriate and patient focused. Thank you for your continued engagement and dedication.

If you have further questions or feedback, please don't hesitate to contact the Medicines Optimisation team bobicb.medicines@nhs.net.

ScriptSwitch Upgrade

We understand that some practices have reported intermittent speed issues when utilising ScriptSwitch software. Thank you to those who raised this, your feedback is invaluable in helping us identify and address problems quickly.

In response, we are working closely with Optum and the CSU to roll out an upgrade to the latest version of the ScriptSwitch application (v7.10) across all machines. This update is aimed at resolving the performance issues you've experienced and ensuring a smoother, more reliable prescribing experience.

We want to reassure you that your concerns are being heard and acted upon. We're committed to supporting practices and ensuring you have the tools you need to work efficiently.

We'll keep you informed as the rollout progresses. In the meantime, if you have any further issues or questions, please don't hesitate to contact Optum customerserviceuk@optum.com

Thank you for your continued engagement and collaboration.



Place updates

Buckinghamshire

Medicines aids resources to help patients manage their medicines

The Rapid Response and Intermediate Care (RRIC) Team at Buckinghamshire Healthcare NHS Trust has developed some resources to support patients/carer where the patient has any difficulty remembering their medicines, problems taking their medicines, or questions about their medicines. These are available to staff, patients and the general public on the BHT hospital website.

1) Patient information leaflet - Medicines aids to help you manage your medicines (easy read format)

- Provides examples and suggestions of aids that help patients with their medication routine.
- Access at the following link: [Medicine aids - to help you manage your medicines](#)

2) Medicines reminder tick charts

- Can be used by patients to fill out their medication and tick when they have taken it.
- There are 2 versions of these with examples of how to use them.
- Access at the following link:
 - [Medicines reminder tick chart](#)
 - [Medicines reminder tick chart 2](#)
 - [Medicines reminder tick chart example](#)
 - [Medicines reminder tick chart example 2](#)

So what?

- Encourage your teams to signpost any patients where this may be helpful to them.

Training, upcoming meeting and Resources



People with sensory impairment safety gap – Patient safety Commissioner report

The '[Safety Gap](#)' commissioned by the Patient Safety Commissioner identifies safety issues for patients with vision and hearing impairments who are placed at greater risk from medicines and medical devices because their views are not taken into account.

The research found that at every step of the process from the design of packaging and inaccessible information, the needs of patients with vision and hearing loss have not been adequately taken into account.

Respiratory Information and Resources

The BOB Integrated Respiratory Delivery Network (IRDN) have created a webpage on SharePoint to host respiratory resources to support your management of people with respiratory conditions. For the latest information from BOB IRDN, please see the newsletters on this [link](#).

Diabetes Information and Resources

The BOB Integrated Diabetes Delivery Network (IDDN) have created a webpage on SharePoint to host diabetes resources relating to pathways and guidance to support your management of people with diabetes. For the latest information from BOB IDDN, please see the newsletters on this [link](#).



Other news and information



Medicines Supply Information

Some information on long-term supply issues can be found on [Prescqiipp](#) or the [Medicines Supply Tool](#) on the SPS website. Please note this is not an exhaustive list.

Please note the Medicines Optimisation team will no longer be producing a summary the key stock issues that relate to primary care as this information can vary and fluctuate on a week-by-week basis, therefore the information can become outdated quickly. We advise that you register to be able to access the resources detailed above, to ensure you obtain the most relevant and up to date information on Medicine Supply Information.

Serious Shortage Protocols

Serious Shortage Protocols (SSPs), which enable community pharmacists to supply patients with specific alternative medicines, are available to view on the NHS Business Service Authority (BSA)'s [dedicated SSP web page](#), along with supporting guidance. Questions regarding the SSPs should be directed to the NHS Prescription Service:

Email: nhsbsa.prescriptionservices@nhsbsa.nhs.uk

Telephone: 0300 330 1349. Textphone: 18001 0300 330 1349

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