

Cheshire and Merseyside Medicines Shortages

Background

Medicines shortages are becoming more commonplace for a number of reasons outside of the control of pharmacies and GP practices or other providers such as hospitals.

These can be large global or national factors related to supply chains, manufacturing problems, raw material shortages and regulatory issues.

There can also be more localised issues related to quotas and supply for pharmacies from wholesalers in an attempt to manage bigger supply challenges.

This can lead to variability in the availability of key medicines from different pharmacies which can be frustrating for both patients and prescribers. This leads to significant time spent by community pharmacies trying to source medicines and time by prescribers amending prescriptions to alternative products or reissuing prescriptions.

This document summarises key advice for dispensers and prescribers to help manage medicines shortages.

Key Points on Dispensing for Prescribers

- **Community Pharmacists are not allowed to deviate from the prescribed strength, formulation or quantity and cannot substitute without a new prescription unless there is a specific Stock Shortage Protocol (SSP) issued by DHSC.**
- Dispensed items on the same page (including on EPS) cannot be transferred between pharmacies when other items on the same page have been dispensed.
- Many pharmacies will be linked to specific wholesalers or have varying quotas available for them to order for shortage medicines.
- Contacting and chasing up supplies is now taking up many hours of staff time in community pharmacies which is limiting their ability to deliver services such as pharmacy first.

Key Points on Prescribing for Dispensers

- If a medicine is unavailable the prescriber will not have a ready list of available alternatives.
- EPS prescribing for repeat items is high volume and known shortage items can easily be issued. It is also easy to leave a shortage item on a multi-item prescription without realising
- Practice workflows are also under significant pressure, and it can take some time for an alternative to be prescribed.



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Supportive Measures - Communication

- Where possible establish “back office” communication channels such as an office number between pharmacies and practices to reduce the time on hold. This is required from both practices and pharmacies.
- Consider establishing communication networks in your local area to share information on stock availability between pharmacies and between GP practices and pharmacies. You may wish to link your local medicines optimisation team into this network.
- Consider setting up set times of the day when issues related to shortages can be discussed between your local pharmacies and GP practices.

Supportive Measures – Prescribers

- For medicines with long term known supply issues, consider issuing the item as a single item prescription. This will allow it to be returned to the spine and dispensed at another pharmacy if needed.
- It may not be possible for the pharmacy to return the prescription so that it can be cancelled, if the patient has had some items dispensed from it. In this instance request that the pharmacy marks the item “ND” not dispensed and issue a prescription for the replacement.
- If the prescription is going to a pharmacy other than the regular pharmacy, please check the EPS nomination and issue as “any pharmacy”.
- Prescribe the medicine generically where clinically appropriate and in line with local policy.
- Prescribe for 28 days rather than a longer period to avoid exacerbating supply problems.
- Allow flexibility in earlier ordering to give patients more time to source the medication before running out. A suggestion is 7-10 days before running out. In some cases even longer may be requested such as with pancreatic replacement treatment.
- Advise patients that their medicine may be difficult to obtain and may take longer from their usual pharmacy or involve contacting other pharmacies to find stock if a known supply issue. This could also be added as a prescription note or other communication method if you are not in consultation with the patient.

Supportive Measures – Dispensers

- Make practices (or others supporting prescribing such as hubs) aware of shortage items and potential alternatives that can be obtained
- Consider all supply routes including obtaining stock from other pharmacies rather than just your usual wholesaler **and contacting the manufacturer direct**. In some cases local supply guidance may be issued by the ICS to support you in obtaining supplies for patients.



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- Establish the urgency of supply needed with the patient. Consider if you will be able to source this in a reasonable timescale or if an alternative product needs to be prescribed.
- Where possible share shortage information with SPS website using CPE's online reporting form and your local ICS medicines optimisation team who can disseminate this to practices

Key Points for Patients

- Your medicine may take longer to obtain than usual or have to be obtained from a different pharmacy.
- Order your medication with plenty of time before you run out. This is usually at least 7-10 days before you run out but may be longer if advised by your prescriber or pharmacist.
- You may need to have a different strength of medication prescribed to give the same dose (e.g. 2x10mg tablets vs 1x20mg tablet).
- In some cases another formulation (e.g. capsule instead of a tablet) may need to be prescribed.
- You may also have your medication changed to a similar medication if it is not possible to obtain your usual treatment.
- Your pharmacy can only dispense what is on the prescription unless there is a national shortage protocol in place.
- Call around different pharmacies to check if the medication is available before taking in your prescription to another pharmacy. It is a good idea to try different companies as they will have different suppliers. Your GP practice will not know which pharmacies have stock and your dispensing pharmacy will only know what they are able to obtain so please be patient.
- In some cases it may be better to keep your prescription at your regular pharmacy to give them time to try and obtain the treatment.
- Don't hoard medication if you can get a supply, as this can cause problems for others and can potentially be dangerous.
- You will usually be changed back onto your usual medication once the shortage is resolved but they can often last several months or sometimes longer.



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