Pharmacist Monthly Update November & December

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Welcome message

Dear Pharmacist,

Welcome to the final newsletter of 2012.

The PSI would firstly like to take this opportunity to thank pharmacists, pharmaceutical assistants and pharmacy owners for their co-operation with the continued registration 2013 process. This acknowledgment particularly applies to all those, whose certificates of registration expire at the end of December, and especially to those who used the online registrant facility.

In this newsletter we bring to your attention a recent increase in the number of complaints received by the PSI involving errors in dispensing prescriptions for children and advise a number of risk reduction measures that you may find useful to reflect on.

Following a number of recent queries, we issue a reminder regarding the PSI's position on 'electronic cigarettes'. We also bring you the third and final article in the series on animal remedies, new podcasts on our website about *PSI Inspections* and also the *Role of the Pharmacist in the care of patients in Residential Care/Nursing Homes*, and an invitation to apply to be a tutor pharmacist for the 2013/2014 academic year.

Finally in regard to CPD, we wish to reassure the profession of the ongoing plans for the Irish Institute of Pharmacy. The PSI will hold an information and engagement campaign on the new CPD system, core competency framework and other educational initiatives around the country early next year. This is to ensure that you can be fully informed about the new CPD system and how it will impact on you, as well as the various educational activities and practitioner supports that will be available.

The PSI wishes everyone a safe and peaceful holiday season.

Paediatric Dispensing Errors

An important aspect of the PSI's complaints, inquiries and discipline processes is that relevant learnings and observations are disseminated to the profession at large. Therefore the PSI would like to make pharmacists aware of an issue which has arisen through our complaints system.

In recent months there has been an increase in the number of complaints relating to errors made during the dispensing of prescriptions for children.

The main types of issues which have been reported to the PSI involve:

- Dosing errors (including errors in dose calculation or in labelling)
- Dispensing 'High Tech' medicines for children
- Errors being repeated as a result of not reviewing the original prescription at each dispensing

While many of these types of errors can also occur in dispensing prescriptions for adults, it is widely acknowledged that children are generally at greater risk of suffering harm from medication errors than adults. Therefore it is important that pharmacists are especially vigilant when dispensing or supplying medicines for use in children and that measures to minimise the risk of errors are constantly reviewed and improved.

The risk reduction tips set out below are intended to be helpful to pharmacists in reviewing the dispensing policies and procedures, and risk management approach in their own practice.

Risk Reduction Tips

- Check the **dose prescribed** at each dispensing. Check:Check **calculations** at each dispensing: Ten-fold dosage errors are an important paediatric problem. These can be the result of calculation error, misplaced decimal points or unit confusion.
    - The **age**: The age of all children under 12 should be written by the prescriber on the prescription. In the absence of this information, the child's age should be ascertained and written on the prescription.
    - The **weight**: Where the dosage of medication is calculated based on weight, the child's weight should be ascertained, where possible, and re-evaluated regularly.
    - An appropriate **reference** source: e.g. current SmPC or BNF for Children (BNFC).
    - The **units** of measurement: e.g. mg or ml
- Check against the **original prescription**: Never rely solely on the Patient Medication Record (PMR) as this has the potential to lead to error repetition. Check the right patient is getting the right medication at the right dose in the right form at the right time.
- If in doubt, **contact the prescriber** regardless of the origin of the prescription - a children's hospital or specialist can still be the source of a prescribing error. The hospital pharmacy department may be a useful source of information and clarification. Where a hospital prescription is transcribed onto a GMS prescription, check the original prescription, when possible, to identify transcription errors.
- Review the **storage** of medicines for children and consider if isolating from adult formulations, separating SALADs (sound-alike look-alike drugs) or highlighting "high strength" formulations would help reduce the risk of error.
- **Double check**: Where possible employ an independent double check. Where this is not possible, separating the final verification by time and/or place and returning to perform your own check is a possible compromise. A double check can significantly reduce errors and ensure they are corrected before reaching patient level.
- **Communicate** clearly: Patient or parent/carer counselling should include the name of the drug, the purpose for which it is being used, the amount to be administered and a double check of the child's age. Ensure that, where appropriate, the parent/carer is supplied with a suitable administration device (e.g. measuring spoon) and counselled in the safe use of the device. Ensure that the parent/carer understands the likely side-effects and which side effects should prompt them to contact you or their prescriber/GP.

Reminder on E-Cigarettes Position

The PSI has recently received a number of queries regarding the appropriateness of electronic cigarettes being sold by pharmacies. In addition, a recent survey conducted by 'mystery shoppers' on behalf of the PSI has indicated that electronic cigarettes are being stocked and sold in a number of pharmacies.

This is contrary to the guidance "PSI Position on Electronic Cigarettes" issued by the PSI in June 2011 where it categorically states that, in the absence of appropriate regulation, "the PSI considers it would not be appropriate for any of these products to be offered for sale or supply in retail pharmacy businesses in Ireland".

Electronic cigarettes are not regulated as either medicinal products or medical devices and do not form part of a recognised smoking cessation therapy.

Members of the public have a right to expect that the quality, safety and efficacy of any products supplied in pharmacies have been appropriately established and independently assured.

The PSI would once again refer you to the guidance which outlined the PSI position in regard to electronic cigarettes and for the avoidance of doubt, the PSI wishes to confirm for pharmacists and pharmacies that compliance with this guidance document is mandatory.

Duty Register 2013

Every registered retail pharmacy business (pharmacy) should have recently received by post a specially-formatted 'retail pharmacy business duty register' for 2013 from the PSI.

These registers are sent free-of-charge to pharmacies to facilitate compliance with the requirement of Regulation 5(1)(c) of the Regulation of Retail Pharmacy Businesses Regulations 2008, i.e. “an on-going, contemporaneous and retrievable record of any other registered pharmacist, responsible for the retail pharmacy business or for the personal supervision of the sale and supply of medicinal products…”.

The maintenance of this record is a legal requirement and failure to maintain this record in accordance with the regulations is an offence.

It is recommended that this register should be retained at the retail pharmacy business after the period to which it pertains by the pharmacy owner/superintendent pharmacist, as it may be required for legal, insurance or other purposes at some time in the future.

If your pharmacy has not received a 2013 duty register from us, please contact the PSI at info@thepsi.ie and we will send one on to you.

PSI Podcasts on Website

Podcasts on ‘PSI Inspections’ and ‘The Role of the Pharmacist in the care of patients in Residential Care/Nursing Homes’ are now available to view on the PSI website homepage www.thePSI.ie.

These podcasts are based on presentations given at recent educational meetings with pharmacists.

In early 2013 the PSI intends to publish further podcasts on the ‘Section 18’ Regulations, the Code of Conduct for pharmacists and also a short film on the Role of the Supervising Pharmacist. In addition, further information pieces about the PSI Inspection process aimed at assisting pharmacists in preparing for an inspection will also be developed.

Tutor Pharmacists 2013/2014

Applications are now invited for tutor pharmacists for the 2013/2014 National Pharmacy Internship Programme (NPIP). This invitation is for all registered pharmacists who have practised as a pharmacist for a minimum of three years and includes all previous tutor pharmacists and those who wish to apply to be recognised as a new tutor in line with the minimum criteria set down by Council of the PSI.

A list of tutor pharmacists will be circulated in January 2013 to all current fourth year pharmacy students in the three schools of pharmacy, and pharmacists are now invited to have their name included on this list if they so wish.

The role of the tutor is intrinsic to the successful formation of Ireland’s future pharmacists. In acknowledging that key role, a tutor support infrastructure has been developed which includes access to RCSI electronic libraries, reference material and online virtual campus and a helpdesk to assist with tutor queries and concerns.

Tutors have access to an on-line programme (Tutor Training and Accreditation Programme) which supports them in the skills required for effective tutelage. Completion of this programme is recognised by the PSI as a formal activity for the purposes of your own continuing professional development (CPD) requirements for continued registration.

Tutors are also recognised and certified as Associate Faculty of RCSI for the academic year they are supervising an intern and as such can display a certificate to the public in their training establishment that attests to their status.

Further information about the NPIP programme, the role of the tutor and also how to apply to be a tutor is available on the PSI website – the application form is available here.

Completed application forms should be returned to the RCSI by Friday 18January 2013 if possible.

Queries may be directed to Hugh Carroll on (01) 402 2774 or email mpharm@rcsi.ie.

Drug Safety CPD Resource

Pharmacists may be interested in an educational initiative being provided by an Irish company *ia*CME which provides online CPD resources for pharmacist, GPs and other healthcare professionals.

The new resource is a series of interactive, on-line activities based on the IMB’s Drug Safety Newsletters. The first module has just been launched and is based on the IMB’s Drug Safety Newsletter 49th edition. This module is available free of charge

and provides a structure for practitioners to keep up to date with current safety information and to implement the IMB's advice into their practice.

Learners on the *ia*CME learning platform will have access to MCQs, discussion forums and personal blogspace. The focus on patient outcomes together with reflection and peer-learning tools are intended to be consistent with the CPD framework for pharmacy. Learners will be able to download certificates immediately on successful completion of each module. More information at http://www.imb.ie/EN/Safety--Quality/How-the-IMB-monitors-product-safety/Human-Medicines/Resources-for-Healthcare-Professionals.aspx, and at http://www.iacme.ie/imbdsn.html or by email from info@iacme.ie.

PSI Inspectors advice on Animal Remedies (Part 3)

As a follow up to the October newsletter "Inspectors Advice on Animal Remedies" which examined veterinary prescriptions and dispensing requirements, this month we will review:

- The emergency supply of animal remedies
- Veterinary requisitions

The Emergency Supply of Animal Remedies

The legislation provides that a pharmacist may dispense an emergency supply of a prescription only animal remedy at the request of a vet, but only in limited emergency circumstances. Emergency supplies may only occur where:

- By reason of emergency, the vet is unable to furnish a prescription immediately
- The vet undertakes to furnish the prescription within 72 hours
- The animal remedy is supplied in accordance with the vet's directions
- The animal remedy is not a controlled drug listed in schedule 1 or 2 of the Misuse of Drugs Regulations 1988 (S.I. No. 328 of 1988) (as amended)
- The animal remedy is labelled correctly
- The supply is recorded in the animal remedies register.

The vet must undertake to furnish the prescription within 72 hours and should he/she fail to do so, the legislation states that the pharmacist shall not supply an animal remedy at the request of that vet in the future.

Please note that the 'emergency supply' of a prescription only animal remedy, at the request of a member of the public, is not permitted.

Requisitions for Animal Remedies

A vet must obtain animal remedies for use in the course of their veterinary practice from a licensed animal remedies wholesaler/manufacturer. The only exemption to this requirement is in circumstances where a medicinal product is required by the vet for use in accordance with the cascade system. Information on the cascade system is detailed in regulation 18 of the European Communities (Animal Remedies) (No. 2) Regulations 2007 (as amended) and sets out the circumstances in which a medicine, that does not have an animal remedies authorisation, may be prescribed or administered to an animal.

A vet may only procure a medicinal product from a pharmacist for use in accordance with the cascade system where a requisition is provided. In instances where the medicine required is a controlled drug, as listed in the Misuse of Drugs Regulations 1988 (as amended), the requisition must:

- contain the name and address of the practitioner
- state that he/she a vet
- specify the purpose for which the drug is required
- specify the total quantity to be supplied
- be signed by the practitioner/ recipient

Vets should follow this format when requisitioning any medicinal product for use in accordance with the cascade system from a pharmacy.

The pharmacist must be satisfied that the requisition is written by a registered veterinary practitioner. A pharmacist who supplies such medicinal products must satisfy himself/ herself, in so far as is possible, that the medication will be used appropriately. It is also recommended that the requisition contains a declaration by the vet that the medicine is required for administration in accordance with regulation 18 of the European Communities (Animal Remedies) (No. 2) Regulations 2007 (as amended).

Don't forget to record the details of the supply in the animal remedies register. These requisitions must be retained at the pharmacy for five years and made available to inspectors upon request.

Reminder

All legislation which governs these areas is set out in The European Communities (Animal Remedies)(No. 2) Regulations 2007 (S.I. No. 786 of 2007) (as amended), which can be accessed in full via www.irishstatutebook.ie or via the PSI website www.thepsi.ie. All pharmacists engaging in the sale and supply of animal remedies must ensure they are familiar with all aspects of these regulations.

IMB Notice on Black Cohosh

The Irish Medicines Board (IMB) wishes to inform pharmacists that no products containing the herbal substance Black Cohosh (*Cimicifuga racemosa; Actaea racemosa*) or Cimicifuga species have been approved for marketing in Ireland, and that these products can no longer be legally placed for sale on the market here.

Under the policy for the regulation of Traditional Herbal Medicinal Products (THMPs), herbal products that contain herbal substances that are more appropriately regulated as THMPs need to be registered with the IMB before being placed on the market here.

To this end, herbal products containing the herbal substance Black Cohosh or Cimicifuga species are considered to be THMPs and since no products containing Black Cohosh or Cimicifuga species have been approved for marketing in Ireland, any pharmacy that has purchased Black Cohosh products or Black Cohosh containing products after 31 December 2011 should remove such products from sale, and either return them to their supplier or send them for destruction.

Please note that additional guidance in relation to the controls in place for the sale and supply of herbal products and more specifically THMPs is available from patrick.walsh@imb.ie.

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