

## **COVID -19 Medicines optimisation key messages for practices – Issue 4**

Please send all queries to the team inbox: [MECCG.PIMMS@nhs.net](mailto:MECCG.PIMMS@nhs.net)

Please bear with us as like yourselves we are dealing with many challenges. We will do our best to respond in a timely manner but do consider that queries that have a wider impact may take longer to respond to whilst we seek guidance. We have set up a new page on our website for Covid-19 medicines resources:

<https://midessexccg.nhs.uk/medicines-optimisation/covid-19-resources>

### **MOLES 2020/2021**

An email was sent out relating to MOLES being rolled over until at least the end of September. Quarterly payments will be made to practices at the usual time following receipt of MOLES returns. Monthly returns (March 2020 onwards) have been reviewed and simplified in the light of current priorities and should be submitted on Survey Monkey each calendar month. <https://www.surveymonkey.co.uk/r/VRWXWNG>

We suggest you take a screenshot of the return before submitting the survey to save a copy for yourself.

**Focus areas for work** are now all linked with support the response to COVID19—and should be interpreted very flexibly and not viewed as restrictive. The work described below using COVID Protect interface and medication reviews can be undertaken using MOLES funding.

- a. Maintaining usual prescribing quantities and usual duration of prescriptions.
- b. Increasing the number of patients on eRDs- and ensuring that a process is in place to maintain patients on eRDs at the end of each batch. The usual duration of each batch should be 12 months unless there are clinical reasons to restrict to shorter period.
- c. Encouraging patients to order their medicines electronically via NHS APP or GP clinical systems SystemOne/EMIS—this also supports social distancing through promoting virtual medicines ordering
- d. Patient Safety-Actioning Eclipse Live RADAR and Patient Safety Alerts (Red, Amber, Purple)- link with medications reviews COVID19 vulnerable patients.
- e. Delivering Anti-microbial Stewardship in line with national guidance
- f. Safe and appropriate prescribing of controlled drugs in line with national and local guidance. Includes no more than 30 days supply and not increasing the number of patients on more than 120mg equivalent morphine

### **COVID-19 Protect**

An additional COVID 19 PATList upload is required, alongside the GP clinical system upload and usual PATlist, to get the maximum benefit from the COVID-19 protect tool.

Refer to the [COVID-19 protect quick reference guide to uploading](#) which details the functionality of the tool and the need for these uploads.

All COVID-19 protect resources can be found here: <https://midessexccg.nhs.uk/medicines-optimisation/covid-19-resources/covid-protect-resources-eclipse-advice-and-guidance>

Includes COVID-19 protect user guides, patient guide, uploading guides, anticoagulation optimisation using the COVID-19 protect tool.

### **Ibuprofen and COVID-19 update**

The Commission of Human Medicines (CHM) was asked to review the safety of ibuprofen in patients with COVID-19. The Commission on Human Medicines' Expert Working Group on coronavirus (COVID-19) has concluded that there is currently insufficient evidence to establish a link between use of ibuprofen, or other non-steroidal anti-inflammatory drugs (NSAIDs), and contracting or worsening of COVID-19.

Patients can take paracetamol or ibuprofen when self-medicating for symptoms of COVID-19, such as fever and headache, and should follow NHS advice if they have any questions or if symptoms get worse.

Refer to the chief medical officer's update [LINK](#)

### Vitamin B12 guidance update

Our vitamin B12 re-priorisation guide has been updated. This guide supports practices to identify patients who might be suitable for interim oral vitamin B12 replacement or stretching dose intervals for the IM injection. It has been updated to reflect guidance from the British Society for Haematology and now also includes advice on suitability of self-administration of IM hydroxocobalamin.

Refer to the guidance here [\(LINK\)](#)

### Shared care drugs monitoring update

We have now developed an FAQ for patients taking immunosuppressants.

The guidance for monitoring shared care drugs during COVID-19 pandemic has also been updated.

They can be found on the website here:

<https://midessexccg.nhs.uk/medicines-optimisation/covid-19-resources/shared-care-drugs-1>

### National resources and updates

COVID-19 and [diabetes guidance from the Primary Care Diabetes Society](#) (LINK) with prescribing information and links to other national diabetes guidance.

The British Thoracic Society has developed guidance on the current [supply issues of many respiratory inhalers](#) (LINK). It outlines factors to consider in maintaining the supply chain, switching inhalers when only absolutely essential with links to inhaler technique websites and inhaler dose comparison charts.

### Lithium guidance

We have developed a guidance summary for lithium monitoring whether patients are shielding, self-isolating or social distancing.

It also includes advice for patients experiencing COVID-19 symptoms whilst taking lithium.

The guidance is on our website from this [LINK](#)

### Round-up of other queries

#### Guidance for Dispensing Practices on managing the dispensary when the accountable GP is offsite

There is a COVID section on the Dispensing Doctors Association (DDA) online portal which provides guidance. It is recommended that dispensing practices join the DDA Covid-19 forum where instant advice and guidance can be obtained from the DDA and colleagues across the country. The designated dispensary lead GP should be contactable by telephone but does not have to be on the premises for the dispensary to operate. We have developed some guidance on this [\(LINK\)](#)

#### Accepting returned medicines from patients

The National Pharmacy Association have developed some FAQs principles can be applicable to the practice dispensary. <https://www.npa.co.uk/coronavirus-updates/faqs-covid-19/>

- o Asking patients to remove dispensing labels from the medicines themselves where possible
- o Asking patients to only return medicines at the moment if they really need to, and to consider waiting until after the pandemic is over
- o If the dispensary has a safe and secure space to store returned medicines (completely segregated from pharmacy stock and dispensed medicines), leaving the medicines in this space for 72 hours before handling them