

Primary Care Services

CONTROLLED DRUG POLICY

Version 1.0

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Executive Summary

CDs are drugs with restrictions on their use including administration, prescribing, ordering, manufacturing, record keeping, storage, destruction and are subject to the Misuse of Drugs Act 1971 and the associated regulations. CDs are important for the management of a variety of clinical conditions and are subject to special legislative controls because of the potential for them to be abused or diverted and cause harm.

The purpose of this policy document is to promote the safe and effective prescribing of controlled drugs (CDs) and to highlight the roles and responsibilities of staff within East London Foundation Trust's (ELFT) GP Practices.

This Policy is intended for all Prescribers, Prescription Clerk Team and Reception Team

East London Foundation Trust GP Practices do not keep controlled drugs on premises

1.0 PRESCRIBING CONTROLLED DRUGS

1.1 Prescribers and the classes of CDs they can prescribe

- Prescription by a medical doctor (GP) – schedule 2, 3, 4 and 5 drugs
- Prescription by supplementary prescribers – when acting under, and in accordance with, the terms of a clinical management plan, CDs in schedules 2, 3, 4 and 5
- Pharmacist and Nurse Independent Prescribers may prescribe, and give directions for the administration of Schedule 2, 3, 4 and 5 Controlled Drugs. They are not permitted to prescribe diamorphine, dipipanone or cocaine for treating addiction but may prescribe these items for treating organic disease or injury. Prescribers must ensure that they are familiar with the various drug schedules, details of which can be found in the British National Formulary.

1.2 Before prescribing:

- Take into account the benefits and risks of prescribing, including dependency, overdose and diversion.
- Consider all prescribed and non-prescribed medicines the person is taking and whether the person may be opioid naïve.
- Use evidence-based sources, such as NICE, the BNF, and the local CCG formulary for prescribing decisions when possible.

1.3 When prescribing controlled drugs:

- Document clearly the indication and regimen for the controlled drug in the patients record (“as directed” is not adequate)
- Check the patient’s current clinical needs and, if appropriate, adjust the dose until a good balance is achieved between benefits and harms.
- Discuss arrangements for reviewing and monitoring treatment with the patient. Consider frequency of review for further repeat prescriptions and potential risks for misuse.

1.4 When prescribing 'when required' controlled drugs:

- Document clear instructions for when and how to take or use the drug in the patient’s record.
- Include dosage instructions on the prescription (with the maximum daily amount or frequency of doses) so that this can be included on the label when dispensed.

It is inappropriate for a prescriber to prescribe a CD for themselves, a family member or a friend unless in a clinical emergency.

1.5 Controlled Drug (CD) prescription writing requirements:

To be valid, on top of the normal prescription requirements for prescription only medicines (as specified under the Medicines Act), prescriptions for Schedule 2 and 3 CDs must also contain the following (as outlined in the Misuse of Drugs Regulations 2001):

1. The dose
2. The form
3. The strength (where appropriate)
4. The total quantity or dosage units of the preparation in both words and figures
5. For instalment prescriptions, specify the instalment amount AND instalment interval.

A pharmacist is not allowed to dispense a Controlled Drug unless all the information required by law is given on the prescription. In the case of a prescription for a Schedule 2 or 3 CD, a pharmacist can amend the prescription if it specifies the total quantity only in words or in figures or if it contains minor typographical errors, provided that such amendments are indelible and clearly attributable to the pharmacist.

A failure to comply with the regulations concerning the writing of prescriptions will result in inconvenience to the patients and carers and delay supplying the necessary medicine.

2.0 Duration of treatment:

It is good practice that the quantity of Schedule 2, 3 and 4 CDs be limited to a quantity for up to 30 days treatment. In cases where a prescription is issued for > 30 days treatment, the prescriber must be able to justify that there is a clinical need and that it would not cause an unacceptable risk to patient safety.

3.0 Repeat dispensing (batch prescriptions):

Schedule 2 and 3 CDs cannot be prescribed on repeat dispensing prescriptions.

Repeat dispensing prescriptions for Schedule 4 CDs must be dispensed for the first time within 28 days of the date. After the first dispensing the repeats are legally valid within the normal periods of validity of the repeatable prescription.

Repeat prescriptions for Schedule 5 CDs must be dispensed for the first time within six months of the date. After the first dispensing the repeats are legally valid within the normal periods of validity of the repeatable prescription.

4.0 Electronic prescriptions:

Where possible all prescriptions should be sent via EPS as a clear audit trail is then kept.

5.0 Private prescriptions for Schedule 2 & 3 CDs:

In England, prescribers can now only order Schedule 2 or 3 CDs privately on pink private prescription form FP10PCD.

No private prescription will be issued by an ELFT GP Practice to patients registered with them

6.0 Providing information and advice regarding CDs

Document and give information to the person taking the controlled drug or the carer administering it, including:

- How long the person is expected to use the drug
- How long it will take to work
- What it has been prescribed for

- How to use controlled drugs when sustained-release and immediate-release formulations are prescribed together
- How it may affect the person's ability to drive (see the advice from the [Department of Transport on drug driving and medicine: advice for healthcare professionals](#))
- that it is to be used only by the person it is prescribed for.

7.0 Prescribing incidents:

Any prescribing error or incident involving a CD must be recorded as a significant event by the person discovering the event. This must be discussed at a clinical meeting to reflect, learn and identify possible methods of preventing recurrences. Prescribing incidents must also be reported to the Controlled Drugs Accountable Officer (see page 5 for details).

8.0 STORAGE & COLLECTION OF CD PRESCRIPTIONS

Where possible CDs should be sent by EPS. When not possible then signed FP10 prescriptions for Schedule 2 or 3 CDs are to be kept separate from other repeat prescriptions and are to be filed in the relevant controlled drug collection folder. All controlled drug prescriptions will have a red flag attached to the prescription to ensure they are segregated from other prescriptions.

The controlled drug collection folders for patients and local pharmacies should be kept securely in a locked cupboard/cabinet

A record must be made in the patient notes on SystmOne to indicate when the prescription was collected and by whom. If collected by a pharmacy, this must also be recorded in the notes.

The prescription for Schedule 2 or 3 CDs must also be signed for on the patient/pharmacy specific CD collection book (also kept in reception).

A record on both SystmOne and the CD collection book ensure a clear audit trail for the CD.

Identification may be asked for if there are any concerns or there is uncertainty about the person collecting the CD prescription.

9.0 STOLEN/MISSING/LOST CD PRESCRIPTIONS

Any lost or stolen CD prescriptions must be reported to the practice or deputy manager, and duty doctor on the day. Details must be recorded in the patient's notes on SystmOne.

For stolen prescriptions, the patient/carer must obtain and provide a crime reference number (CRN) to the surgery. The CRN must be verified by contacting the police. The prescription must only be re-issued by the duty doctor if they are satisfied with the evidence provided and there is a clinical need for the CD to be prescribed immediately.

There must be a thorough investigation conducted by management if a prescription cannot be found within the practice. The duty doctor may only re-issue the prescription if satisfied that the prescription cannot be

found after investigation and there is a genuine clinical need. The previous prescription must be cancelled in the patient's record.

Any patient who reports a CD prescription as lost must be interviewed by management or duty doctor on the day. The duty doctor should only re-issue another prescription if satisfied with the information provided and there is a genuine clinical need for the prescription. Details must be recorded in the patient's notes.

10.0 Reporting Controlled Drugs concerns to the Controlled Drugs Accountable Officer:

The Controlled Drugs Accountable Officer (CDAO) for the Trust is the Chief Pharmacist and Controlled Drugs Accountable Officer, East London NHS Foundation Trust

The CDAO is charged with responsibilities in relation to the safe, appropriate and effective management and use of CDs, this includes their safe and effective destruction and disposal.

Healthcare professionals have a statutory duty to report all complaints, concerns or untoward incidents involving controlled drugs to the CDAO. Pharmacies may have a duty to report these to their head offices; however it is a requirement that all complaints, concerns or incidents involving controlled drugs must also be reported to the CDAO.

Examples of incidents that require reporting include (list is not exhaustive):

- Concerns with colleagues or patients
- Prescribing errors involving CDs
- Dispensing errors involving CDs
- Patient complaints involving CDs
- Missing or lost CDs
- Medicines Management CD issues

11. Review

This policy will be subject to review every three years, or, in light of any changes to the relevant local and national guidance.

13. Bibliography

- Nigel's Surgery 28: Management of Controlled Drugs. <https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-28-management-controlled-drugs>
- East London Foundation Trust Controlled Drug Policy. <https://www.elft.nhs.uk/uploads/files/1/CD%20Policy%2011.0.pdf>