

# PostScript

**SPECIAL EDITION JUNE 2007**

**HDL(2007)12 SAFER MANAGEMENT OF CONTROLLED DRUGS**

## **SUMMARY:**

- **NHSGGC has appointed an Accountable Officer to guarantee compliance with Controlled Drug (CD) legislation.**
- **More stringent checks will be made across NHSGGC on all aspects of CD use, eg prescribing, dispensing, storage, administration, destruction and record keeping.**
- **NHSGGC will work with other relevant NHS and non-NHS bodies locally and nationally to share intelligence.**
- **Any concerns will be investigated and appropriate action taken with regulatory or legal bodies.**

The fourth report of the Shipman Inquiry identified serious shortcomings in the systems used for the management of CDs. It made recommendations to improve their management including the creation of a controlled drugs inspectorate comprising small multi-disciplinary inspection teams, operating regionally but co-ordinated nationally.

The Government responded to these recommendations in *Safer Management of Controlled Drugs - the Government's response to the fourth report of the Shipman Inquiry*. The current systems need strengthening by measures designed to work within and alongside existing governance arrangements and build on the expertise of organisations that currently monitor and inspect aspects of the management and use of CDs and controlled stationery.

The intention is to encourage good practice in the management of CDs and help to detect unusual or poor clinical practice or systems, criminal activity or risk to patients.



Implementation of the new arrangements will support healthcare professionals and encourage good practice. It will not deter the use of CDs when clinically required. They will also ensure that potential criminality is identified and reported to the appropriate authority at the earliest opportunity.

Health Boards must ensure that:

- an Accountable Officer (AO) is appointed to guarantee compliance with the legislation;
- standards are in place wherever CDs are purchased, stored, dispensed, prescribed, administered or destroyed;
- monitoring of all practice is undertaken, including
  - analysis of prescribing and dispensing data;
  - routine and targeted inspection of relevant premises;
- intelligence is shared with other relevant bodies including private hospitals, clinics, care homes and hospices;
- where practice is called into question, investigations and appropriate action are undertaken. These may involve relevant professional regulatory or licensing bodies, NHS Scotland Counter Fraud Services or the police.
- all monitoring is recorded and reported to the Scottish Executive quarterly.

The Board has appointed Dr Kate McKean, Head of the Pharmacy and Prescribing Support Unit as AO to undertake the activities across NHSGGC. Work is underway to scope the extent of work required to fulfil these requirements. Where possible, activities will be co-ordinated with existing processes.

Some duties currently undertaken by the police (including CD destruction) will become the AO's responsibility in September 2007.

## WHAT ARE THE IMPLICATIONS FOR NHSGGC HEALTHCARE PRACTITIONERS?

There is a new power of entry and inspection for certain authorised persons to inspect CDs and records. The inspection process is intended to identify and investigate concerns, monitor compliance, educate, improve quality and support individual and organisational development. The AO will lead the development and implementation of systems for routinely monitoring CDs through proactive analysis and identifying triggers for concern, and taking action. Monitoring will include:

- ensuring all areas which hold stocks of CDs prepare and operate standard operating procedures covering access, storage, security, destruction and record-keeping.
- undertaking an annual review of all primary care contractors, eg GP practices, community pharmacies, dentists;
- ensuring three-monthly CD checks in all hospital wards, theatres and departments;

- arranging random sample inspection of 10% of “relevant premises” and arranging targeted inspections in areas where concerns have been raised;
- liaising with RPSGB inspectorate on community pharmacy reporting;
- reviewing records from midwives, district nurses, Macmillan nurses and practice nurses;
- analysis of data on NHS and private CD prescribing in primary and acute care;
- analysis and summary of the collated information from the annual declaration and completion of a self-assessment form completed by relevant practitioners;

The AO will also ensure that NHSGGC has suitable arrangements for the disposal of CDs. To date, this duty has been carried out largely by Strathclyde Police.

## CO-OPERATION WITH NON-NHSGGC USERS OF CONTROLLED DRUGS

There is now a statutory duty of co-operation which enables a range of organisations to share information and intelligence about the management and use of CDs complying, wherever possible, with Caldicott principles and the Data Protection Act.

The NHSGGC AO is required to act as co-ordinator for local intelligence networks involving key agencies, eg private hospitals and hospices, the police, NHS QIS, the Care Commission, NHS Scotland Counter Fraud Services, regulatory bodies, representation from local authorities, Drug Action Teams, Local Supervising Authority Midwifery Officers, a dental representative and the Home Office Drugs Inspectorate.

Members of the network will have information-sharing protocols to review emerging trends. The network will enable agencies that have concerns about the activities of any healthcare professional or organisation to share them as soon as possible with any other local agencies who may be affected or who may have complementary information.

## WHAT HAPPENS NEXT?

A scoping exercise is getting underway to identify the work required by the legislation. This involves a wide range of internal and external stakeholders. Details will follow once the processes are in place. Anyone wishing to contribute should contact:

Audrey Thompson, Prescribing Adviser  
[audrey.thompson@ggc.scot.nhs.uk](mailto:audrey.thompson@ggc.scot.nhs.uk)  
0141 201 5214

David Brown, PPSU Programme Manager  
[david.brown4@nhs.net](mailto:david.brown4@nhs.net)  
0141 201 5487