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Shared-Care service provision for people being treated for substance use during the COVID-19 pandemic

This guidance is to support community pharmacy teams in caring for your shared-care substance use clients and ensuring the highest level of service can be provided with a reduced work force.

Areas to review urgently:

- How to manage self-isolating patients:
 - Use a standardised letter of authority for the patient's representative to use to collect the medicines for the period of isolation (see letter in the Appendix).
 - The "supervision" direction on a script is not legally binding, therefore new scripts are not required if you have to stop supervising the consumption of the prescription. It would be good practice to contact the prescriber to gain authorisation to not supervise¹.
 - Consideration needs to be given to any Child Protection plans that are in place, however the needs of the patient and the exposure of the pharmacy team also need to be considered.
- How to manage potential pharmacy closures and disruption to the supply chain:
 - Ask the prescribing team to review all clients to assess who could move to weekly or fortnightly collection of prescriptions.
 - Consult the prescriber to jointly risk assess patients.
 - If pharmacies start to close due to isolated staff, then shared care clients are affected immediately.
 - Dispensing should be in daily bottles to reduce risk. Scripts should be issued on FP10MDA or FP10, to allow pharmacies to claim for providing daily bottles (see [guidance on claiming the Packaged dose fee](#)).
 - Consider safety measures for clients with Child Protection orders:
 - Initially locate other pharmacies that they could use.
 - If no other pharmacy is available, speak to their key worker and / or prescriber.
 - Locked boxes in the home could be considered to store opiate substitution medication.
 - Ask the prescribing team to consider issuing emergency scripts to go to another pharmacy that may be open and nearby, but note that this could place a huge pressure on the open pharmacies.
 - Agree an ongoing review period with the prescribing team.

Ongoing considerations:

- If your pharmacy needs to close, contact your local service provider and prescribers.

¹ Medicines, Ethics and Practice Guide, July 2019. Page 101. Section 3.6.8

- Look to find nearby pharmacies who are able to provide support to ensure clients continue to receive their prescriptions and ensure that all key members of your team are aware of their location.
- Changes to prescriptions will need to be made and/or new prescriptions generated to support continuity of prescriptions.

Appendix: Template letter to enable a representative to collect medicines on behalf of a patient in isolation

Please note current best practice is to use a letter of authority per day, however if this changes, this form can be used for multiple days.

Patient's name:	
Patient's address:	
Date of Birth:	

Dear pharmacist

This letter is to show that I am currently in self-isolation due to COVID-19 and I give permission for the person named below to collect my medication on my behalf.

Patient representative's name:	
Patient representative's address:	
Relationship to patient:	

I have informed them that they will need to provide identification before they can collect the prescription.

Patient's signature:		Date:	/ /
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For Pharmacy use

Letter received by (pharmacist name)	
Registration number:	
Date received:	
Date of collection:	
Last date letter is valid:	

This letter of authorisation is valid for ____ days.