# Response ID ANON-ZPAJ-48J9-4

Submitted to **Short Life Working Group on Prescription Medicine Dependence and Withdrawal - Consultation on Draft Recommendations**
Submitted on **2021-06-03 15:11:00**

## Recommendation 1

**1.1 Do you agree with this recommendation?**

Yes

**1.2 How effective do you think that action on recommendation 1 will be?**

Effective

**1.3 Please enter any comments on recommendation 1.**

**Please enter any comments on recommendation 1:**

Data must be analysed and inspected in context to be useful. Data can be gathered and read but not acted upon. To evaluate more effectively the impact of this action it would need to clearer what data was going to be gathered, how it was going to be analysed and why. Also, it is not explained how this data would differ to that already available to prescribers and how it would lead to improvement in practice. To do this the data would have to be specific to that setting, prescriber, profession, or team. It is also important that the widespread use of outcome measures is implemented to drive improvement in practice and evaluate any changes to show improvement because of this data collection and analysis.
Data should also be used to ensure the delivery of personalised medicine.
It is also vital that pharmacists, regardless of area of practice but where appropriate, are included when deciding what professions and organisations this data, and the analysis of it, will be available to.

## Recommendation 2

**2.1 Do you agree with this recommendation?**

Yes

**2.2 How effective do you think that action on recommendation 2 will be?**

Very effective

**2.3 Please enter any comments on recommendation 2.**

**Please enter any comments on recommendation 2.:**

Guidelines provide quality evidence-based documents on the benefits and risks and clinicians rely on them to make informed decisions so this development would be welcomed.
Guidelines should include detailed information on:
• when and how to say no to these medications if not appropriate
• Initial medication trial review
• detailed deprescribing methods if the medication is not helpful - even if there is no alternative available.
• Multidisciplinary working to achieve the best outcomes for the patient including notifying community pharmacists when a patient begins deprescribing to enable them to support the patient through this, particularly at times when their prescriber may not be available. The use of single shared patient records would facilitate this joined up working.
It is also important that if guidelines are produced, in an attempt to reduce dependence, they are applicable to all healthcare settings where these medications will be prescribed or used and that they are followed while taking into account variations in demographic requirements and healthcare provider. Some clinical specialty areas will require justifiably higher prescribing of these medications than others and this must be recognised.

## Recommendation 3

**3.1 Do you agree with this recommendation?**

Yes

**3.2 How effective do you think that action on recommendation 3 will be?**

Very effective

**3.3 Please enter any comments on recommendation 3.**

**Please enter any comments on recommendation 3.:**

The resources would be welcomed but thought should be given to how to make these resources available to all. Many, especially from deprived areas, do not have the skills or equipment to access IT based resources. As experts in medicine and the most accessible healthcare provider, pharmacists, and pharmacy staff, could have a valuable role in overcoming these inequalities and this has never been more evident than during the pandemic. As part of our Pharmacy 2030 vision for community pharmacy, we are looking for pharmacies to become local health care hubs, where people can access lifestyle advice, support to prevent ill health, referral to other services and access to digital support tools. This would make them ideally placed to help patients access these online resources while also having a highly trained healthcare professional on hand, able to support.

Decision aids to help patients understand and manage the risks associated with these medicines would be welcome but they would have to be made available along with professional advice. This is particularly important where mental health is concerned to ensure emerging issues do not go unnoticed, undiagnosed, or untreated.

## Recommendation 4

### 4.1  Do you agree with this recommendation?

Yes

### 4.2  How effective do you think that action on recommendation 4 will be?

Effective

### 4.3  Please enter any comments on recommendation 4.

**Please enter any comments on recommendation 4.:**

This work would be welcomed if it resulted in timely access to help and support for patients at these times from an appropriate healthcare practitioner. Also, while the implementation of a helpline would assist with accessibility and, perhaps, speed of access, it will only be beneficial if it is accompanied by a robust process for rapid onward referral to an appropriate healthcare practitioner for patients who are deemed to be requiring further assistance at that time.

Out of hours is a time when a lot of patients with addiction issues struggle to access help and support, with many turning to their community pharmacist for help and advice. To help facilitate this, shared patient records would be essential which would give all healthcare professionals dealing with the patients care up to date information on their current health status, including mental health status, and medication regardless of the prescriber. Robust referral pathways would also be essential to ensure patients presenting at a community pharmacy in withdrawal, or with other addiction related issues, can be seen by the most appropriate healthcare practitioner. It is important that if the support that is required is because of declining mental health that the referral pathways ensure fast and appropriate access to a service that can provide specific mental health support.

The use of pharmacist independent prescribers should be considered as a potential solution to addressing withdrawal out of hours, while this would only be workable with access to shared notes and robust governance, it would help address the many patients who suffer withdrawal after release from remand, prison or hospital without appropriate throughcare.

However, this development should not detract from the need for more investment into the treatment of the underlying problems and to help patients develop self-management strategies which would reduce the number requiring out-of-hours assistance. Work should also be done on the promotion of evidence based non-pharmaceutical options for treatment.

## Recommendation 5

### 5.1  Do you agree with this recommendation?

Yes

### 5.2  How effective do you think that action on recommendation 5 will be?

Somewhat effective

### 5.3  Please enter any comments on recommendation 5.

**Please enter any comments on recommendation 5.:**

This recommendation is welcomed but the impacts will be longer term. In the shorter term, until research can be conducted, public health campaigns highlighting the dependence potential and ineffectiveness of these medicines with extended use would be beneficial. Pharmacies are ideally placed to deliver these with high footfall, trained staff who can engage with patients, and it could be tied in with OTC codeine sales.

## About you

### What is your name?

**Name:**
Laura Wilson

### What is your email address?

**Email:**
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**Are you responding as an individual or an organisation?**

Organisation

**What is your organisation?**

**Organisation:**
Royal Pharmaceutical Society

**The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:**

Publish response with name

**We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?**

Yes

**I confirm that I have read the privacy policy and consent to the data I provide being used as set out in the policy.**

I consent

## Evaluation

**Please help us improve our consultations by answering the questions below. (Responses to the evaluation will not be published.)**

**Matrix 1 - How satisfied were you with this consultation?:**
Very satisfied

**Please enter comments here.:**

**Matrix 1 - How would you rate your satisfaction with using this platform (Citizen Space) to respond to this consultation?:**
Very satisfied

**Please enter comments here.:**