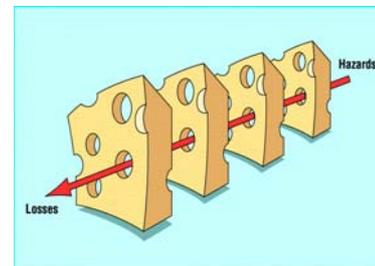


Medicines Governance Project

SAFETY MEMO 5



From: Medicines Governance Pharmacists,
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To:

Directors of Pharmaceutical Services / Trust Pharmacy Managers

Dr N Morrow, Chief Pharmacist, DHSSPSNI

Directors of Pharmacy, HSS Boards



For information

9th April 2004

RE: Changes to approved names of medicines

Further to recent communication from DHSSPS (CPh6/03)¹, concerning the programme of change from BANs (British Approved Names) to rINNs (recommended International Nonproprietary Names); we write to advise you of available resources for minimising the risk of medication incidents during the changeover period.

The changeover has already begun and medication incidents have been reported locally. All healthcare staff are expected to be using rINNs by 30th June 2004 and pharmaceutical manufacturers have until 30th December 2004 to comply.

The programme of action outlined in CPh6/03 identified important issues in implementing the change. More specific examples of the areas that may be affected are given below:

- **IT - software systems**
 - all software systems containing drug dictionaries must be updated, for example, dispensing systems, pharmacy back up systems, electronic discharge systems and electronic prescribing systems such as those in use in intensive care and chemotherapy units.
- **Documentation**
 - documentation containing the affected medication should also be updated. For example pre-printed prescriptions, worksheets, emergency box contents lists, top-up lists, formularies, medication shelf labels and ward cupboard lists. Written patient information policies, treatment protocols and prescribing guidelines containing the affected medicines should also be updated.
- **Clinical Pharmacy Services**
 - prescription charts are often endorsed by pharmacists with the approved medicine name. A change to endorsement using rINNs should coincide with other local changes.
- **Interface issues**
 - consideration should be given to the potential for confusion as medicine related information is transferred between the Trust and other bodies, who are also in the process of implementing the change, for example GPs, pharmaceutical wholesalers and nursing homes.
- **Storage**
 - medicines are often stored alphabetically. When relocating medicines, whose name has changed significantly, it may be useful to place a reminder of the new name in the previous location. The Medicines Governance Team have produced some examples of reminders, which are attached for your review.

- **Returns**

- the impact of the name changes on Trust pharmaceutical returns policies should be considered and agreement reached on whether products labelled with a BAN will be acceptable for credit.

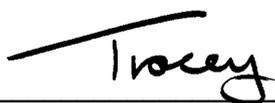
This list of examples is not exhaustive; rather it is intended to assist in conducting a comprehensive review of the impact of the name changes in your Trust.

All healthcare professionals, including locum and part-time staff, have a responsibility to familiarise themselves with the name changes and use them in conjunction with locally agreed timetables for change. To assist with this process the following resources are being made available:

- BNF No.47 (March 2004)
This has incorporated the name changes and includes a leaflet produced jointly by the NPSA and BNF.
- www.mhra.org.uk
This website contains a link to the full list of medicines affected and commonly asked questions.
- MHRA are conducting a communication programme, which includes:
 - Advertisements in professional journals, including the Nursing times, British Journal of General Practice, Pharmaceutical Journal, Hospital Pharmacist, Chemist and Druggist, British Medical Journal, British Dental Journal and Lancet.
 - Provision of a laminated reference guide for healthcare professionals which lists the most commonly affected medicines.
 - Distribution of posters to GP surgeries, community and hospital pharmacies, and residential nursing homes.
- Medication Safety Today (May 2004)
 - This will include a news item highlighting the change and will be available at www.dhsspsni.gov.uk/pgroups/pharmaceutical as well as through the usual distribution routes.

Trusts should also assess the need for locally produced information resources.

Please contact your Medicines Governance Pharmacist if you wish to discuss any of these issues further.



Tracey Boyce, Team Leader
On behalf of the Medicines Governance Team

Enc

References

1. DHSSPSNI – CPh6/03. Change in names of certain medicinal substances. 02/06/03