Community Pharmacy Nottingham and Nottinghamshire ICB News

A newsletter for Community Pharmacy Teams in Nottingham, Nottinghamshire and Bassetlaw

Purpose of this newsletter

The purpose of this newsletter is to share news from across the health system with Community Pharmacy Teams. Please share this newsletter with everyone in your pharmacy team including any locum staff.

Questions and feedback about this newsletter

If you have any questions, please email the ICB Community Pharmacy Clinical lead; Rebecca Dickenson using the email address Rebecca.Dickenson7@nhs.net.

Please send feedback as it helps to tailor this newsletter for you and your team.

Short on time? Click on the black square bulletin icon, bottom right of your screen, review the thumbnails and jump to the section you want to read first

Know Your Numbers and Community Pharmacy

Thank you to everyone who took part in the blood pressure Know your numbers campaign. Many of you undertook extra blood pressure checks to help identify people who have no symptoms from high blood pressure but are at greater risk of stroke, heart attack and kidney disease.

On Friday 12th September, Lilian Greenwood MP visited Clifton Pharmacy, where she had her own blood pressure checked by Andreas Ioannou, Community Pharmacist, demonstrating just how easy and accessible it is to get tested in the community. Her visit shone a spotlight on the vital role pharmacies play in preventative healthcare and encouraged more people to take control of their health by knowing their numbers.

National Health Campaigns

The Department of Health and Social Care (DHSC) and NHS England have finalised plans for two national health campaigns that all pharmacies must participate in during 2025/26. The campaigns will run from:

- Monday **20th October 2025** to Sunday **9th November 2025**; and
- Monday **2nd February 2026** to Sunday **22nd February 2026.**

Pharmacies can promote the service in a variety of ways to meet the campaign requirements, including through materials already in use. For more information click on the following link Read more and download resources

Call to all Pharmacy Owners – Complete the 2025 workforce survey

Pharmacy owners are reminded of the mandatory requirement to complete the 2025 workforce survey **by midnight on Friday 21st November 2025**. The NHS Business Services Authority (NHSBSA) sent the survey link by email in September.

If you're part of a multiple pharmacy group, the survey may be completed centrally. If you're unsure whether it's your responsibility or your head office's, please check with your head office team. Click on the following link for additional information on completing the survey Find out more about how to complete the survey

The survey will gather workforce data from community pharmacy contractors. Analysis will provide insights to support future service and workforce planning in community pharmacies. The survey enables an annual picture of the community pharmacy workforce in England.

Benefits of the survey include:

- Support NHS workforce and service development planning.
- Inform future investment in education and training for the community pharmacy workforce; and
- Provide evidence of service capacity and capability across the community pharmacy sector.

NHS Business Services Authority will collect the survey data. Once collected, data will be anonymised and aggregated at Integrated Care System (ICS) level.

For assurance, NHS England and NHS BSA follow clear information governance processes which maintain anonymity and ensure that participating pharmacies and individuals within the pharmacies are not identifiable.

Increase to the level of funding for the 2025/26 Foundation Trainee Pharmacist Programme in England

NHS England's workforce, training and education team have confirmed the level of funding for each training site for trainee pharmacists starting in the 2025/26 training year (summer and autumn start windows) has been increased to £27,295.

The increased payments will be made automatically to all eligible training sites, including back-dated pay to the start date of the trainee pharmacist. There is nothing additional that training sites need to do to receive the uplifted payment.

More information on the funding for the 2025/26 training year click on the following link on NHS England's website.

Launch of the "Pharmacy technician development programme: Preparing for the future".

Applications are now open

NHS England and the Centre for Pharmacy Postgraduate Education (CPPE) are pleased to announce the launch of the "Pharmacy technician development programme: Preparing for the future".

About the training programme

Preparing for the future is designed to build confidence and support pharmacy technicians to develop their skills to deliver a wider range of services, now and into the future.

Open to all pharmacy technicians, this flexible and supportive programme aims to support the development of clinical confidence, leadership skills, and professional practice. Participants will be supported throughout the programme by a dedicated education supervisor, and the programme is designed to offer a flexible, supportive learning experience, designed collaboratively with each pharmacy technician.

Delivered between October 2025 and March 2026, pharmacy technicians will engage in structured learning that enhances clinical, leadership, and decision-making skills. The programme will particularly focus on supporting pharmacy technicians to adapt to the evolving scope of practice, including recent changes to supervision legislation, the expansion of the Pharmacy First service, and the use of Patient Group Directions.

At the start of the programme, learners will work with their education supervisor to identify their individual development needs and will be supported thereafter to meet these, progressing at a pace that suits them.

Further information

- For more information and to apply for an NHS England funded place on this programme, click on the following link CPPE Website

NHSmail is becoming NHS.net Connect

NHSmail is being rebranded to NHS.net Connect, which includes a new homepage with easier access to email, Teams, OneDrive and support. There are no changes to email addresses or logins, and no action is required from pharmacy teams.

Pharmacy owners must ensure the shared NHS.net mailbox is accessible and linked to at least two staff members with personal NHS.net accounts. To keep accounts active, staff should log in at least once every 30 days. Click on the following link for more information Tell me more

Sign up to the Primary Care Bulletin

The Primary Care Bulletin is NHS England's weekly email update, with essential news for community pharmacy and the wider primary care sector — including general practice, dentistry, and optometry.

It's a quick and reliable way to stay up to date with national guidance, service developments, and resources that support your work and your patients. Sign up today to get updates straight to your inbox. To sign up and receive the Primary Care Bulletin click on the following link Sign up here

Join the Medicines Optimisation in Care Homes Pharmacist and Pharmacy Technician Network

The Integrated Care Borad (ICB) Medicines Optimisation Team host a pharmacist and pharmacy technician network meeting for any local pharmacists or technicians involved in providing care to people in care homes. The network group meet quarterly to discuss relevant clinical topics (often with specialist guest speakers) and any challenges or questions that individuals might have faced in practice. If you would be interesting in joining the group or would like more information, please email either s.aslam@nhs.net or e.moncrieff@nhs.net

Pharmacy First Contraception Service Preferred Prescribing List

The NHS Pharmacy Contraception Service (PCS), also known as "Pharmacy First Contraception," allows pharmacists to initiate or continue the supply of certain oral contraceptive pills. There is no single, national formulary for this service; instead, pharmacists must follow national patient group directions (PGDs) in conjunction with any specific formularies or prescribing guidelines set by their local Integrated Care Board (ICB).

Please click on the following link preferred-brands_aide-memoire.pdf to see the preferred brands recommended by Nottingham & Nottinghamshire ICB.

The table below can also be used as a quick reference.

Medicine name	Please prescribe as
Co-cyprindiol 2000microgram/35microgram tablet	Clairette or Dianette
Desogestrel 75 microgram Prescribe by brand in soya or nut allergy (some generics may contain ingredients unsuitable for soya or nut allergy sufferers - check individual SPCs)	Desogestrel 75microgram generic
Desogestrel 150 microgram / Ethinylestradiol 20 microgram	Bimizza or Gedarel 20/150
Desogestrel 150 microgram / Ethinylestradiol 30 microgram	Cimizt or Gedarel 30/150
Drospirenone 3 mg / Ethinylestradiol 30 microgram	Yacella or Dretine
Ethinylestradiol 35microgram / Norgestimate 250microgram	Cilique or Lizinna
Ethinylestradiol 20microgram / Gestodene 75microgram	Millinette 20/75
Ethinylestradiol 30microgram / Gestodene 75microgram	Millinette 30/75
Ethinylestradiol / Levonorgestrel multiphasic	TriRegol
Ethinylestradiol 30 microgram / Levonorgestrel 150 microgram	Levest or Rigevidon
Levonorgestrel 1500 microgram tablet	Generic prescribing preferred

Emollients & Fire Risk – Reminder

Pharmacy teams are reminded of the ongoing fire risk linked to both paraffin-containing and paraffin-free emollients. This risk has been highlighted in past Medicines and Healthcare products Regulatory Agency (MHRA) campaigns, and teams should continue advising patients accordingly. Safety resources and patient materials are available, click on the following links for more information GOV.UK website and Tell me more

What is the risk?

Although emollients are not flammable themselves or when on the skin they can transfer from the skin onto clothing, bedding, dressings, and other fabrics. Once there, they can dry onto the fabric, build up over time and act as an accelerant. In the presence of a naked flame or heat source, fabric with emollient dried on is easily ignited and will significantly reduce the time available to put out a fire before serious and fatal burns are sustained. This risk applies to all emollients, including paraffin-free emollients.

What can you do?

• Display information highlighting the fire risk associated with the use of emollients and contact with a naked flame or heat source.

• Advise patients who smoke and use emollients of the dangers.

• Recommend changing clothing and bedding regularly - preferably daily – emollients soak into fabric and can become a fire hazard. Washing clothing or fabric at a high temperature may reduce emollient build up but not totally remove it.

• Report any fire incidents with emollients or other skin care products via the Yellow Card Scheme.

Chronic asthma local guidelines update

Following the update to NICE guidelines on chronic asthma, local guidelines have also been updated. No new patients should be prescribed ‘when required’ salbutamol alone. In adults and children ≥12, single inhaler therapy using a Long-acting beta-2 agonist/ Inhaled corticosteroid (LABA/ICS) combination inhaler is now the mainstay of treatment, with ‘when required’ salbutamol no longer having a place in therapy for this group of patients.

‘When required’ Salbutamol still features in the children under 12 guidelines but should only be prescribed alongside a regular Inhaled corticosteroid (ICS) inhaler.

Patients who are prescribed salbutamol should not need to order and use more than 1 salbutamol inhaler per year if their asthma is well controlled. Community pharmacists are encouraged to counsel patients about their inhalers and encourage the patient and

prescriber to review asthma care if more than 2 salbutamol inhalers are required in a 12-month period.

Buprenorphine 7-day Patches – Preferred Brand Change to Sevodyne®

Sevodyne® is now the preferred brand of weekly buprenorphine transdermal patches in primary care, replacing Butec®.

Key points for Community Pharmacy Teams:

- Prescribers are encouraged to initiate new patients on Sevodyne®, and to switch existing patients from Butec® to Sevodyne® during routine reviews.
- It is important to inform patients (and/or their carers) about this brand change to minimise the risk of confusion or administration errors.
- Sevodyne® and Butec® are equivalent and are available in the same range of strengths: 5, 10, 15 and 20 micrograms/hr
- If your local practices are planning to switch multiple patients, they have been asked to contact local pharmacies in advance. Please support this process by assisting with stock management and ensuring availability.
- Sevodyne® is stocked at all mainline wholesalers.

Thank you for your continued collaboration in supporting safe and cost-effective prescribing.

Prescribing generic melatonin on FP10s

In June 2025, Sherwood Forest Hospitals (SFH) Community Paediatric Team switched to prescribing generic melatonin on FP10s. This moved the Trust away from supplying an unlicensed product in line with MHRA rules.

Melatonin MR tablets are the preferred formulation to be prescribed but alternatives that can be used following a clinician's discussion with the patient include melatonin liquid or normal release melatonin tablets. Melatonin capsules are not part of the treatment algorithm.

This switch has been co-ordinated by the SFH Community Paediatric Team with patients and parents / guardians being informed prior to this change in prescribing practice.

As front-line healthcare professionals you will have regular conversations with patients regarding their medicines and this switch could be a topic that you discuss. If a patient or parent/guardian raises concerns regarding the melatonin formulation they have been prescribed, could you recommend they discuss this with their prescriber (in the case of SFH this is the Community Paediatric Team) about the potential for alternatives but please avoid

recommending that capsules are available as these are not a melatonin formulation used within the service.

Elvanse Adult® Discontinued

Elvanse Adult® (lisdexamfetamine dimesylate) has been discontinued in the UK. Takeda has consolidated Elvanse Adult and Elvanse into a single brand, Elvanse®, which is now licensed for use in patients aged 6 years and above (children, adolescents, and adults).

Key Points:

- Elvanse Adult is no longer available in the UK.
- Prescribers should now prescribe Elvanse for all eligible patients aged 6 years and above.
- There is no longer a need to prescribe lisdexamfetamine by brand.
- Pharmacies will only stock Elvanse, simplifying supply for both patients and healthcare professionals.
- No changes have been made to the formulation of Elvanse.

Further Information:

For the official communication and further details from Takeda click on the following link

Elvanse Combined Packs Communication – September 2025 (PDF)

Insulin Detemir (Levemir®) Discontinued

All Levemir® presentations are to be discontinued by June 2025

Local advice is that no new patients are to be started and that current patients are to be switched to a suitable alternative basal insulin. Stock is anticipated to be exhausted by December 2026.

We are aware that there is still a relatively high number of patients being prescribed Levemir® and numbers are not coming down as hoped.

We would be grateful if, when issuing any Levemir insulin to patients, you could inform them of the discontinuation and urge them to book an appointment with their GP, practice nurse or diabetes specialist when possible. This appointment does not need to be urgently requested, however.

For further information click on the following links Medicines Supply Notification and local guidance.