

Governing Body meeting (held in public)

DATE: 24 November 2016

Title	Community Pharmacy Medicines Waste Audit Report Summary 2016
This paper is for Information	
Recommended action for the Governing Body	<p>That the Governing Body:</p> <p>Note</p> <ol style="list-style-type: none"> 1. It is estimated that £517,216 worth of medicines are disposed of in Bexley in one year. 2. The majority of the high cost medication items returned is for use in acromegaly/specialist endocrine disorders, prophylaxis of angina, and prophylaxis/treatment of vitamin D and calcium deficiency. 3. This audit will be re-run 2017 to evaluate the effectiveness of the 2016 medicines waste campaign.
Potential areas for Conflicts of interest	None.
Executive summary	<p>The waste medicines audit carried out in 2014, and 2015 has been repeated looking at the waste medicines returned to pharmacies in Bexley. There has been a reduction of waste in the medicines collected by the 5 pharmacies, in the month audited.</p> <p>The results from the 2016 community pharmacy medicines waste audit report provides an estimate of £517,216 worth of medicines are disposed of in Bexley in one year.</p> <p>In 2016 the majority of high cost medication items returned is for use in acromegaly/specialist endocrine disorders, prophylaxis of angina, and prophylaxis/treatment of vitamin D and calcium deficiency.</p> <p>The NHS Bexley Medicines management team will use the results from this audit to work with the communications team to devise a medication waste campaign for the coming year and the audit will be re-run in 2017-18.</p>

Clinical Commissioning Group

How does this paper support the CCGs objectives?	Patients:	Improve awareness of the cost of waste medicines.	
	People:	Improve awareness of the cost of waste medicines.	
	Pounds:	To try to decrease the amount of waste medicines by understanding which medicines are returned to a pharmacy for disposal.	
	Process:		
What are the Organisational implications	Key risks	None.	
	Equality	Pharmacies from various locations in Bexley were included in the audit for equality.	
	Financial	This report shows the estimated value of medicines returned to a pharmacy for disposal i.e. wasted NHS resource.	
	Data	Using data collected in Bexley community pharmacies.	
	Legal issues	None.	
	NHS constitution	None.	
Engagement	Via prescribing newsflash, patient council meeting presentation.		
Audit trail	Has been reviewed at Finance Sub-Committee and Medicines Management Sub-Committee.		
Comms plan	Via prescribing newsflash, patient council meeting presentation		
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Date	24 October 2016		

Community Pharmacy Medicines Waste Audit Report Summary 2016

Introduction

This audit has been conducted following 2 audits conducted in March 2013 and April 2015, the same five pharmacies were selected to observe the trends relating to returned waste medicines by patients. The aim was to determine the level of wasted medicines returned to community pharmacies for destruction and identify any trends in the type of products returned by patients.

Method

The same five Bexley pharmacies were selected for this audit as those in the 2013 and 2015 audits, the pharmacies are as follows:

- Harrison's Pharmacy, Erith
- Browne's Pharmacy, Bexley
- Hayshine Pharmacy, Welling
- Knightons Chemist, Belvedere
- Broadway Pharmacy, Bexleyheath

Two pre-registration pharmacists were involved in the audit; one pre-registration pharmacist visited each pharmacy and requested that the same audit from April 2015 was conducted again over a month. The rationale for the audit was explained to pharmacists and pharmacy staff of the pharmacies and their support requested.

A box was provided to each pharmacy to place all patient returned medicines for the period of four weeks from 21/3/2016 - 17/4/2016.

Pharmacies with a large quantity of medication returns were visited at least three times in the month and the remaining pharmacies approximately fortnightly, the following details were recorded for all medication: drug name, strength, form, quantity returned, and brand if applicable. If liquids/creams/ointments/sprays had been used and returned than an estimate was used to quantify the amount remaining.

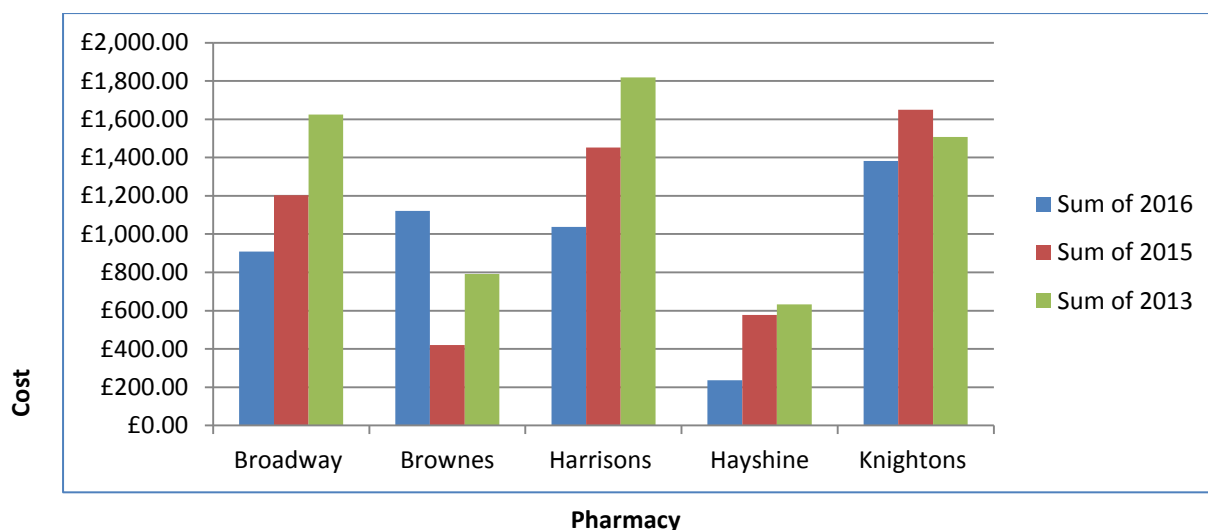
The pre-registration pharmacists used March's 2016 and April's 2016 Drug Tariff, MIMs, and the BNF to calculate the cost of the medicines returned to each pharmacy.

Results

In 2016 patient returns amounted to £4,685 worth of prescribed medication over one month across the five pharmacies. It is estimated that across all 46 pharmacies in Bexley this would equal £43,102 a month, or £517,244 a year.

Year audit carried out	Estimated annual waste
2016	£517,244
2015	£585,387
2014	£703,755

A graph to show the cost of returned medication per pharmacy over the last three audits



A graph to show the total cost of returned medicines from the five pharmacies over the last three audits



As seen from the graphs, there is a £617 reduction compared to the audit undertaken in 2015, and a £1690 reduction compared to the audit undertaken in 2013, this suggests that implementations to reduce overall medication wastage have been successful as evident by the trends observed.

Breakdown of results

The top 3 returned medication in terms of quantity and price over the five pharmacies are shown below

Table 1: Top 10 medicines returned by cost					
Drug	Strength	Form	Used for	Quantity	Cost
Octreotide	100mcg/1ml	Ampoules	Carcinoid syndrome	51	£305.90
Isosorbide mononitrate	60mg	Tablets	Angina	798	£299.25
Adcal D3	Calcium carbonate 1.5g/Colecalciferol 400 units	Chewable tablets	Vitamin D and calcium deficiency	2179	£142.02

Octreotide was the highest cost medication returned. Octreotide is used predominately for the treatment of carcinoid tumours; this return of 51 ampoules is most likely a result of a patient(s) death and so returned medication.

Isosorbide mononitrate is used for the prophylaxis of angina. The high cost is due to the large volume of patient returns. As the drug is used prophylactically it opens up the potential for non-adherence. Patients can feel asymptomatic and therefore choose not to take it, thus leading to the amount wasted.

Adcal D3 chewable tablets are used in the treatment and prophylaxis of vitamin D and calcium deficiency. Similarly the high cost is solely due to the large volume of patient returns, as there are no immediate benefits from taking the vitamin supplement it is likely that again non-adherence is the cause of the returns.

Table 2: Top 10 medicines returned by quantity					
Drug	Strength	Form	Used for	Quantity	Cost
Adcal D3	Calcium carbonate 1.5g/Colecalciferol 400 units	Chewable tablets	Vitamin D and calcium deficiency	2179	£142.02
Amlodipine	10mg	tablets	Angina/hypertension	1131	£34.74
Metformin	500mg	Tablets	Diabetes mellitus	1091	£37.01

Adcal D3 chewable tablets are the top returned medication by quantity, 2,179 tablets were returned over the month in the five pharmacies. Given the large volume it is also third in the top 10 by cost.

Amlodipine and metformin are ranked second and third in the top 3 by quantity; however, the price did not have a major impact on the overall cost of the medicine wastage.

Conclusion

The results from the 2016 community pharmacy medicines waste audit report provides an estimate of £517,216 worth of medicines that are disposed of in Bexley in one year. In 2016 the majority of the high cost medication items returned is for use in acromegaly/specialist endocrine disorders, prophylaxis of angina, and prophylaxis/treatment of vitamin D and calcium deficiency.

The NHS Bexley Medicines management team will use the results from this audit to work with the communications team to devise a medication waste campaign for the coming year and the audit will be re-run in 2017-18