

From the Chief Pharmaceutical Officer
Mrs Cathy Harrison



FOR ACTION

Chief Executive, Strategic Planning and Performance Group/Business Services Organisation (*for onward transmission to relevant staff*)

Assistant Director of Integrated Care, Head of Pharmacy and Medicines Management, SPPG (*for onward distribution to Community Pharmacies*).

Head of General Medical Services, SPPG (*for onward distribution to GP Practices*)

GP Medical Advisers, Strategic Planning and Performance Group.

Castle Buildings
Stormont
BELFAST
BT4 3SQ
Tel: 028 90 523219

Email: cathy.harrison@health-ni.gov.uk

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Dear Colleagues,

SERIOUS SHORTAGE PROTOCOL – PENICILLIN V PREPARATIONS

Serious shortage protocols (SSPs) under the Human Medicines Regulations 2012 (HMRs) are an additional tool to manage and mitigate medicines shortages. An SSP enables community pharmacists to supply a specified medicine in accordance with a protocol rather than a prescription, without needing to seek authorisation from the prescriber, saving time for patients, pharmacists and prescribers. They are used in the case of a serious shortage, where a medicine would be likely to be out of stock for some time, and if, in the opinion of ministers, it would help manage the supply situation.

I am writing to inform you that in response to current concerns across the UK regarding the availability of antibiotic preparations required for the treatment of Group A Streptococcus infection, the Department of Health and Social Care (DHSC) has developed SSPs for three products to ensure that patients are able to access the treatment they need, namely:

Medicine	Alternative(s)
SSP040 Phenoxymethylpenicillin 125mg/5ml oral solution sugar free	Phenoxymethylpenicillin 125mg/5ml oral solution
SSP041 Phenoxymethylpenicillin 250mg/5ml oral solution sugar free	Phenoxymethylpenicillin 250mg/5ml oral solution 2 x Phenoxymethylpenicillin 125mg/5ml oral solution 2 x Phenoxymethylpenicillin 125mg/5ml oral solution sugar free Phenoxymethylpenicillin 250mg tablets

SSP042 Phenoxymethylpenicillin 250mg/5ml oral solution	2 x Phenoxymethylpenicillin 125mg/5ml oral solution 2 x Phenoxymethylpenicillin 125mg/5ml oral solution sugar free Phenoxymethylpenicillin 250mg tablets
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These SSPs have been authorised by DHSC Ministers and apply in all parts of the UK. All three SSPs have an expiry date of **31 January 2022**.

Details on these SSP's are available on the Business Services Organisation (BSO) dedicated page on its website - www.hscbusiness.hscni.net/services/3063.htm

Please note that the 'Addendum – Supporting information on notifying other healthcare professionals' does not apply in Northern Ireland. Pharmacists in Northern Ireland should refer to the existing [SSP operational guidance](#) on the BSO website.

Community pharmacists should use their professional skill and judgement to decide whether it is reasonable and appropriate to substitute the patient's prescribed order for a supply under these active SSPs. The patient/carer will also need to agree to supply under the SSP.

Should the quantity on the prescription be unclear, the pharmacist should consult with the patient and use their professional judgement to make an appropriate supply under these SSPs. Pharmacists should refer to the relevant Summary of Product Characteristics (SPC) and Patient Information Leaflets (PIL) to inform these decisions.

If a patient/carer declines to receive the medicine under these SSPs, the pharmacist should use their professional judgement to determine if other courses of action are appropriate whilst taking into consideration wider supply issues. If this does not address their concerns, the patient/carer should be referred back to their prescriber for advice.

Action Required

All relevant staff should be made aware of these SSP's. I would ask the SPPG to bring this information to the attention of GP Practices and Community Pharmacists directly.

Yours sincerely,



Cathy Harrison
Chief Pharmaceutical Officer