Monitoring of Controlled Drugs (CDs) in Primary Care

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The latest approved version of this document is online.
If the review date has passed please contact the Author for advice.

Version Control:

Version	Summary of Changes/Amendments	Issue Date
1	Initial Issue	April 2025

Engagement & Consultation

Key Individuals/Groups Involved in Developing this Document

Role / Designation
Jade Bell - Medicines Management Pharmacy Technician
Jonathan Boyd - Chief Pharmacist and CDAO

Circulated to the following for Consultation

Date	Role / Designation
May 2026	CD LIN Group

1. Introduction

The Controlled Drugs (Supervision of Management and Use) (Wales) Regulations 2008 require designated bodies (and any body or person acting on behalf of or providing services under arrangements made with the designated body) to have adequate and up to date standard operating procedures (SOPs) in place in relation to the management and use of controlled drugs.

Controlled Drug (CD) SOPs are detailed written instructions that aim to achieve uniformity in the way that CDs are managed across the organisation.

Benefits of CD SOPs include:

- Clarity for staff on what is expected of them.
- Practical guidance to support the management of CDs.
- Improved CD governance by ensuring consistent safe and legal processes are in place.

The Health Board is required to have SOPs covering every applicable aspect of the CD journey. The Regulations specify that the SOPs must, in particular, cover the following matters, as appropriate to the organisation —

a. who has access to the controlled drugs;
b. where the controlled drugs are stored;
c. security in relation to the storage and transportation of controlled drugs as required by the misuse of drugs legislation;
d. disposal and destruction of controlled drugs;
e. who is to be alerted if complications arise; and
f. record keeping, including—
    i. maintaining relevant controlled drugs registers under the misuse of drugs legislation, and
    ii. maintaining a record of the controlled drugs specified in Schedule 2 to the Misuse of Drugs Regulations 2001(specified controlled drugs to which certain provisions of the Regulations apply) that have been returned by patients.

The CD SOPs should be used in conjunction with the Medicines Policy

This SOP covers the monitoring of CDs prescribed within Primary Care in Powys Teaching Health Board.

2. Objective

This SOP applies to staff working within the PTHB Medicines Management Team with delegated responsibility for the monitoring of prescribing of Controlled Drugs in Primary Care and provides advice and guidance on the correct procedures for monitoring the use of Controlled Drugs by the Medicines Management Team.

The aim of controlled drug monitoring is to:

- Identify any excessive and inappropriate prescribing of Schedule 1 – 5 Controlled Drugs within Powys Teaching Health Board.
- To support prescribers to adhere to best practice and national guidance.
- To assist the PTHB CDAO with any concerns, complaints or the reporting of incidents involving Controlled Drugs.

3. Definitions

- PTHB – Powys Teaching Health Board
- SOP – Standard Operating Procedure
- CDAO – Controlled Drugs Accountable Officer
- CDs – Controlled Drugs
- MMT – Medicines Management Team (pharmacists, pharmacy technicians, support staff, nurses and administrative staff working in the Medicines Management department)
- NMP – Non-Medical Prescriber
- IP – Independent Prescriber
- MOD – Ministry of Defence
- BNF – British National Formulary
- MEP – Medicines, Ethics and Practice
- WP10 – NHS Prescription Form used in Wales
- NWSSP – NHS Wales Shared Services Partnership

4. Roles / Responsibilities

The prescribing of CDs within Primary Care is solely the responsibility of a prescriber within their scope of practice and legal restrictions.
A full list of Controlled Drug Prescribing Restrictions & Prescriber Types may be found in the PTHB Medicines Policy.

The Medicines Management Primary Care Team is responsible for monitoring the NHS prescribing of Controlled Drugs (via WP10) by all Primary Care Contractors. This includes:

- General Practice
- Community Pharmacists
- Dental Prescribers
- Optometrist Prescribers

In addition, the Medicines Management Primary Care Team is responsible for monitoring:

- Private Prescriptions for Controlled Drugs in Primary Care
- Requisitions for Controlled Drugs
- MOD Prescribing of Controlled Drugs

5. Prescribing of Controlled Drugs

Refer to the Medicines, Ethics and Practice (MEP) for guidance on the prescribing of Controlled Drugs including, but not limited to:

- Making and recording prescribing decisions
- Validity of prescriptions
- Maximum length of supply

6. Procedure for Controlled Drug Monitoring

6.1 Prescribing data sources

The PTHB Medicines Management Team will carry out monthly monitoring of prescribing of controlled drugs (including private prescriptions), through various means, including:

- CASPA
- Primary Care Services Catalogue
- SPIRA Controlled Drug dashboards
- Occurrence reports
- Audits

6.2 Criteria for raising prescribing queries

The MMT will identify prescribing that requires review against the following criteria:

- Quantities of CDs exceeding 30 days' supply
- Dosages exceeding the BNF maximum dose
- Morphine equivalence exceeding 120mg daily
- Inappropriate polypharmacy
- Non-formulary prescribing
- Medicines required for short-term use only
- Unclear dosage instructions
- Non-formulary prescribing
- Medicines required for short-term use only
- Unclear dosage instructions

6.3 Private CD Prescriptions
The MMT will view all private prescriptions issued monthly.

6.4 Private CD requisitions
The MMT will view all CD requisitions issued monthly using the CD_Req Viewer function on the NWSSP Primary Care Services website.

6.5 Recording prescribing queries
The MMT will record all queries on the CD Monitoring Spreadsheet.

6.6. Liaison with Prescriber
It is the responsibility of the Lead Primary Care Pharmacy Technician to review all queries raised and direct these to GP Practices by email, ensuring a pragmatic and timely approach is taken. As a minimum, queries raised will be reviewed quarterly.
A standard template (Appendix 1) should be used to record queries and request additional information and clinical justification, if appropriate, from prescribers.

7. Escalation Process and Reporting Mechanisms

If queries are not answered satisfactorily or no response is received within a reasonable timeframe, the Medicines Management Primary Care Team must escalate to the CDAO for further action.

Results from the CD Monitoring process are to be reported at every quarterly CD LIN meeting.

8. References / Bibliography

Medicines Policy
MEP
MME Calculator
BNF
Opioids Aware

Appendix 1

Sent on behalf of the Controlled Drugs Accountable Officer (CDAO)

Dear Colleague

I am writing to you in your capacity as Prescribing Lead for the practice on behalf of **********, Controlled Drugs Accountable Officer (CDAO). I need your support to understand some prescribing that has come to light during routine monitoring of prescribing data. You will be aware that prescribing data is a little out of date by the time that we get to see it and the most recent data that we can see through CASPA relates to prescribing up to *********.

The controlled drug monitoring process currently focuses on:

- Prescribed quantities that exceed 30 days' supply
- Dosages that exceed the BNF maximum daily dose
- Unclear / ambiguous dosage instructions
- Prescribing of Oral Morphine Equivalence >120mg daily **(The new OMED Dashboard: NPI - Monthly OMED Measures - All Wales Therapeutics and Toxicology Centre has highlighted this area of focus for Welsh practices in recent months)**

During this review, one or more patients at your practice received a prescription which meets the criteria for review, please find details in the below table. I would be grateful if you could provide the following information for these patients:

- Details of all pain management medication and benzodiazepines that the patient is prescribed (if you could include details of the dosage instructions and the quantity prescribed, that would be really helpful)
- Details of the indication
- Information about where the prescribing recommendations came from
- Details about who is currently involved in reviewing the patient's treatment
- Actions taken to improve prescribing safety or formulary adherence

Please note, confidential information will not be shared outside of the Medicines Management Team and will be used to provide our CDAO assurance that controlled drug prescribing is being safely managed at your practice.

Patient NHS number	Drug	Dosage	Quantity	Reason for flagging	Date of prescription	Comments	All pain management medication or benzodiazepines prescribed	Indication	Where did the prescribing recommendation come from?	Who is currently involved in the patient's treatment?	Actions taken, including date of most recent medication review

I appreciate the challenges that addressing prescribing like this presents, so if I can offer any support, please let me know.