

Quick Reference Guide

**Access to Antibiotics in Primary Care during COVID-19**  
**A guide to prescribers and healthcare colleagues**

- Access Dorset Formulary [[link](#)]
- NICE COVID-19 Rapid Response Guideline; Managing suspected or confirmed pneumonia in adults in the community NG 165 [[link](#)]
- South Central Antibiotic Network Group (SCAN) guidelines [[link](#)]
- Novel coronavirus (COVID-19) standard operating procedure Running a medicines re-use scheme in a care home or hospice setting [[link](#)]

**Do I need to set up grab bags or stock supplies in my local Hubs and/or care homes?**

- **NO - National advice** is not to hold stockpiles of medicines including antibiotics, and to use EPS prescriptions from pharmacies as routine.
- Advanced prescribing or stockpiling places additional risk on the supply chain. In addition, it removes stock from wholesalers and pharmacies and prevents the opportunity of redirecting distribution to areas of need if the pandemic situation changes.
- We need to remain mindful of Antimicrobial Stewardship and resistance. Over-prescribing and diminishing the power of antibiotics could undermine an important part of the medical response to Covid-19.
- Community Pharmacies routinely stock doxycycline and amoxicillin, amongst a range of other antibiotics. Stock availability of these medications is currently not a national concern.

**Does antibiotic treatment need to be started within 4 hours of establishing a diagnosis in the community?**

- **NO** - The [NICE COVID-19 rapid guideline: managing suspected or confirmed pneumonia in adults in the community NG165](#) specifically did not require initiation of antibiotics within 4 hours of a diagnosis of pneumonia in people in the community. This was due to the challenges that may present during COVID-19 times. Prescribers should be mindful that COVID-19 is a viral infection and that antibiotics should only be initiated where there is a differential diagnosis of secondary bacterial pneumonia.
- The advice states: “Start antibiotic treatment **as soon as possible**, taking into account any different methods needed to deliver medicines to patients during the COVID-19 pandemic”.

**How do patients/care homes get their antibiotic prescriptions dispensed quickly?**

- An **EPS acute prescription** should be generated by the prescriber and sent to the patients **nominated** community pharmacy.
  - If prescribers have seen the patient an EPS token must be provided.
  - If remotely prescribed, ideally the barcode should be texted to the patient/carer.
  - Without either of these, prescriptions are not easily identified on the spine.

	<ul style="list-style-type: none"> <li>• <b>Collection/Delivery of Prescription:</b> <ul style="list-style-type: none"> <li>○ <b>Patients who have or are suspected of having COVID-19 must NOT go to the community pharmacy themselves.</b> The patient should be instructed to ask someone to collect their prescription on their behalf. This remains the best option unless personal circumstances do not allow this. Patients who are unable to identify a representative to collect on their behalf can be supported to find a volunteer to collect the prescription on their behalf by contacting either the           <ul style="list-style-type: none"> <li>▪ <b>BCP helpline on 0300 123 7052 or</b></li> <li>▪ <b>Dorset helpline on 01305 221000</b></li> </ul> </li> <li>○ <b>Shielded patients</b> can also be supported by deliveries of medicines from their pharmacy through the Pandemic Delivery Service. In this instance the shielded patient can phone the community pharmacy directly to make arrangements. Community Pharmacies can identify shielded patients via the Summary Care Record. Practices have been asked to share names on the shielded list in the interests of the patient, <b>without sharing clinical detail</b> as this will further facilitate deliveries of dispensed medicines where required.</li> </ul> </li> </ul>
Queues at Community Pharmacies	<ul style="list-style-type: none"> <li>• Just as at supermarkets there may be a need to queue at the community pharmacy. Community pharmacies are no longer reporting significant queues on their premises.</li> <li>• Patients or their representatives should be informed that a short wait might be required as many pharmacy premises are enacting their social distancing and continuity plans. Policies such as ‘One in : One out’ may apply as premises are often small and capacity for queuing inside is limited.</li> </ul>
Fast-tracking prescription collection for care homes or nursing teams	<ul style="list-style-type: none"> <li>• Community pharmacies have been asked to assist fellow healthcare workers by allowing them to bypass the usual queue when collecting medicines.</li> <li>• Healthcare workers are encouraged to communicate and liaise with their local pharmacies directly to identify local arrangements.</li> </ul>

**Contact details**

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**\*\* Disclaimer \*\***. *This is rapid impact summary contains links to interim guidance developed to respond to emerging prescribing and medicines management issues during the COVID-19 pandemic. Best efforts have been made to consult with the relevant specialities before guidance is published. In the current climate, guidance is subject to rapid change, often on a daily basis. Please consider this when utilising this guidance. We ask practices only to adopt National Guidance from NHS England & Improvement, NICE, relevant professional bodies or from Dorset CCG.*