

How to use this guide



This interactive guide enables you to link directly to medicines policies, procedures, documents, tools and other sources of information produced by TEWV.

All links are to either the TEWV website (with one further click required to open each document) or other open access webpages.

Use “Ctrl F” and enter a search term to find specific documents. The guidance is clustered into themes associated with clinical practice and operational processes. Some documents are signposted in multiple sections for ease of access. Please provide any feedback or suggested improvements to christopher.williams@nhs.net

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A wider range of documents are available on the [TEWV website](#). The ones presented here are considered most suitable for external stakeholders.

Safe Transfer of Prescribing

Formularies: these outline the preferred medicines and include the RAG status which define where prescribing and monitoring of medication should occur:



- [County Durham & Tees Valley Formulary](#)
- [North Yorkshire & York Formulary](#)
- [Harrogate & Rural District Formulary](#)

Safe transfer of prescribing guidance: sets out the “rules” which define whether prescribing can be safely transferred to primary care. This document is specific to mental health medication. Its content has been agreed at the Area Prescribing Committees. **Safe Transfer of Psychotropic Medication MSS18:** this 1 page guide provides specific advice on safe transfer of prescribing at discharge from an in-patient setting and covers interim transfer of prescribing to TEWV community teams prior to transfer to primary care.

Psychotropic Medication Monitoring Guide: this guidance refers to the minimum physical health monitoring requirements

The regularly maintained master version of this document can be found [here](#)

Prescribing Restrictions

Formularies: these outline the preferred medicines and include the RAG status which define where prescribing and monitoring of medication should occur:

- [County Durham & Tees Valley Formulary](#)
- [North Yorkshire & York Formulary](#)
- [Harrogate & Rural District Formulary](#)



Unlicensed and Off-Label Use of Medicines: highlights the process for using off-label and unlicensed medicines, including the required recording of information, medicines that are pre-approved by the Trust for prescribing and the process for applying to prescribe those that aren't.

An application process also exists when a TEWV clinician is wanting to prescribe a non-formulary or restricted-formulary medicine, or an unlicensed / off-label medicine not covered by the guidance above. If approved, the prescribing would be considered unsuitable for transfer.

Psychotropic Drugs & Smoking

Medicines and Smoking Guidance: process for using NRT and advice on the impact on medication of smoking / stopping smoking
Tobacco smoking cessation and psychotropic drugs - MSS25:
brief 2 page safety summary



Treat As One Guides for Acute Trusts

Summary guides to support acute trusts to manage patients admitted on; [clozapine](#), [depot / LAI antipsychotics](#), [lithium](#)



Medication Monitoring

Psychotropic Medication Monitoring Guide: this guidance refers to the minimum physical health monitoring required by NICE, Summary of Product Characteristics (SPC) or alternative listed source.

It is intended to be used in conjunction with the TEWV Safe Transfer of Prescribing Guidance and all other TEWV clinical guidelines.



Management of QTc Prolongation with Antipsychotics: when to perform an ECG and how to respond to an abnormal QTc interval

Hyperprolactinaemia (drug induced): evaluation and referral pathway with embedded management guidance

Pregnancy & Childbearing Potential

Prescribing psychotropic medication when there is childbearing potential: supportive guide on what to consider and how to get advice to support decisions

Valproate Pregnancy Prevention Programme MSS13:
there is a national aim to drive down the prescribing of valproate to people of child-bearing potential by 50%.
This 1 page MSS describes the process of registering on the valproate PPP.



Medication Pathways to Support Shared Decision Making

Children & Young People

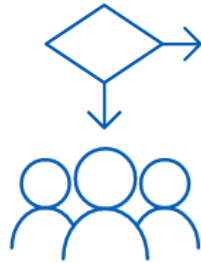
- [ADHD](#)
- [Depression](#)

Adults (& ALD + MHSOP as appropriate)

- [ADHD](#)
- [Anxiety*](#)
- [Bipolar Disorder*](#)
- [Depression*](#)

Older People

- [Dementia Care Pathway AChEI decision aid](#)



Medicines Adherence

[Medication adherence MSS23](#): 1 page guide to optimise, assess and improve adherence

[Sources of prescribing information and information for patients MSS22](#):

1 page summary of useful links to guidance and patient information

[TEWV Patient Information Leaflets \(choiceandmedication.org\)](#): primary source of patient information in relation to medicines.

Accessible information available in a variety of alternative formats (e.g. easy-read) and a variety of languages

[Compliance aids](#): includes an assessment to gauge the most appropriate compliance aid and guides which medication can be added into multi-compartmental compliance aid (if this is what is required)

[Equality and diversity statement for pharmacy policies, procedures and guidelines](#)



Shared Care Guidelines

Only a small number of medicines are subject to specific shared care arrangements. Oral antipsychotics are not subject to shared care (see Safe Transfer of Prescribing guidance).

Prescribing must be initiated by a specialist and, with agreement from the patient and GP, prescribing and monitoring can be transferred to the GP under the specific criteria outlined in the individual documents linked below.

Antipsychotic Depots / LAIs

- [First Generation Antipsychotic FGA LAI](#)

Second generation LAIs:

- [Aripiprazole](#), [Paliperidone](#), [Risperidone](#)

ADHD Medication (children and adults)

- [Atomoxetine](#)
- [Dexamfetamine](#)
- [Guanfacine](#)
- [Lisdexamfetamine](#)
- [Methylphenidate](#)

See associated “Medication Pathways to Support Shared Decision Making”

Mood Stabilisers

- [Lithium](#): broader than just the shared care agreement, these guidelines cover the safe prescribing and monitoring of this high-risk and critical medicine
- [Valproate / Valproic Acid where there is child bearing potential](#): to be used in conjunction with [Valproate Pregnancy Prevention Programme MSS13](#)

Miscellaneous

- [Melatonin](#): includes general prescribing advice (including the most appropriate formulations to prescribe)



*This document is available as a word document with additional embedded documents. The file will need to be downloaded from the website to be able to access the embedded files.

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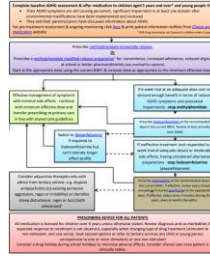
Attention Deficit Hyperactivity Disorder

Prescribing algorithms including methylphenidate cost and release profile comparison:

- [Children & Young People](#)
- [Adults](#)

Shared care guidelines for children and adults

- [Atomoxetine](#)
- [Dexamfetamine](#)
- [Guanfacine](#)
- [Lisdexamfetamine](#)
- [Methylphenidate](#)



Deprescribing Guidance

Deprescribing guidance for:

- [Dosulepin](#)
- [Promazine](#)
- [Trimipramine](#)

[Quetiapine XL](#): how to use IR in preference to XL formulations

[STOMP Medication Review Pathway](#): Stopping over Medication, of People with a Learning Disability, Autism or both, with psychotropic medicines



Depression

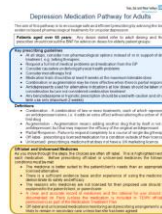
[Depression prescribing algorithm for adults](#)

(inc. ALD & MHSOP)*: stepped process with embedded handy hints

[Depression Pathway \(pharmacological\) for CAMHS](#):

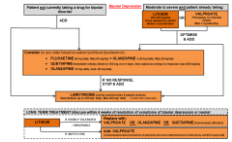
linked to CAMHS pathways within TEWV

[Citalopram & escitalopram - dose reduction & ECG algorithm](#): describes maximum appropriate doses for these medicines and includes when an ECG should be performed.



Bipolar Disorder

[Bipolar Disorder](#): algorithm with embedded detailed Guidance



Dementia

[Dementia Care Pathway](#): Guidance for prescribing acetylcholinesterase inhibitors and memantine



Anxiety

[Anxiety](#)*: step-wise guide including; OCD, PTSD, panic, GAD and social anxiety. Includes a stopping and swapping chart.



*This document is available as a word document with additional embedded documents. The file will need to be downloaded from the website to be able to access the embedded files.

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Antipsychotics

[Psychotropic Medication Monitoring Guide](#): this guidance refers to the minimum physical health monitoring required

[Management of QTc Prolongation with Antipsychotics](#): when to perform an ECG and how to respond to an abnormal QTc interval

[High Dose Antipsychotic Treatment](#): describes what HDAT is, who can make the decision to prescribe, the enhanced monitoring and processes required once this decision has been taken.



Antipsychotics

- Depot and Long Acting injections

[North of England guidance](#): advice to support the most appropriate choice of long-acting antipsychotic injection

Shared Care guidelines: [First Generation](#), [Aripiprazole](#), [Paliperidone](#), [Risperidone](#)

[On Admission to an Acute Hospital Ward](#): safety guidance to support acute trusts to appropriately manage patients admitted on LAI antipsychotics



Clozapine

[GP Information Sheet](#): 3 page summary designed to guide GPs on key safety issues and how to manage patients that are prescribed clozapine by TEVV

[On admission to an acute hospital](#): safety guidance to support acute trusts to appropriately manage patients admitted on clozapine

[Clozapine and the role of therapeutic drug monitoring](#): (for information only) when clozapine level plasma assays are useful and suggested action based on results



Lithium

[Guidelines on Safe Lithium Prescribing and Shared Care](#): general standards, initiation, patient information, lithium registers, safe prescribing and monitoring of this high-risk and critical medicine

[On admission to an acute hospital](#): safety guidance to support acute trusts to appropriately manage patients admitted on lithium



Valproate / Valproic Acid

[Valproate Pregnancy Prevention Programme MSS13](#):

there is a national aim to drive down the prescribing of valproate to people of child-bearing potential by 50%. This 1 page MSS describes the process of registering on the valproate PPP

[Shared Care](#): only required for patients where there is child bearing potential



Document Changes

Version	Date of change	Details of change
1.0	29/3/22	New document
1.1	1/6/22	Risperidone LAI shared care added