

# Pharmacy First Standard Operating Procedure for the supply of inhaler spacer devices

## Community pharmacy inhaler technique review and supply of spacer device in appropriate circumstances

Summary
<p>The key objective of this SOP is to ensure that when community pharmacists review a patient's inhaler technique, they give advice on the most suitable type of inhaler. If the preferred device forms part of the pMDI (pressurised metered dose inhaler) pathway, Pharmacy First will allow supply of a spacer device if deemed beneficial to the patient. Spacers minimise the need for perfect co-ordination when inhaling and are particularly recommended where high doses of inhaled steroids are used.</p>
Scope
<p>This SOP covers all patients (children and adults) who:</p> <ul style="list-style-type: none"> <li>• are deemed to be appropriate for an pMDI pathway for their condition</li> <li>• are using a bronchodilator or inhaled corticosteroid or combination of both</li> <li>• are giving consent to GP being informed a spacer has been supplied</li> <li>• are registered with a Somerset GP</li> <li>• Patient has agreed to an inhaler technique review by the community pharmacist or technician</li> <li>• Following that inhaler technique review the community pharmacist or technician and patient agree that a spacer would aid better technique and outcomes from their pMDI inhaler</li> </ul> <p>Patients taking a mix of pMDI and dry powder inhalers (DPI) should be recommended for review in GP practice to synchronise to one type or another <u>before</u> a spacer is supplied. Spacers should not be supplied to patients under this Standard Operating procedure using both a DPI and pMDI</p>
Benefits of the scheme
<ul style="list-style-type: none"> <li>• Reduced referrals to GP practice for spacer</li> <li>• Improved inhaler technique</li> <li>• Improved patient outcomes</li> <li>• Reduction in waste</li> </ul> <p>This service is intended to support patients to gain maximal benefit from their prescribed medicines, and is not designed to be a replacement for the annual asthma or COPD review</p>

in the GP practice.

In children, a pMDI and spacer are the preferred method of delivery of  $\beta$ 2 agonists and inhaled corticosteroids. A face mask is required until the child can breathe reproducibly using the spacer mouthpiece.

#### Spacers to be supplied

These are spacer devices in the Somerset formulary, namely Easychamber<sup>®</sup>: with or without mask (175ml capacity), Aerochamber Plus<sup>®</sup>: Standard device with or without mask (149ml capacity), Aerochamber Plus Flow-Vu Antistatic, with or without mask or Volumatic<sup>®</sup> Spacer (750ml capacity). This is reimbursed at the NHS Drug Tariff cost for the spacer (see below for April 2025 pricing)

Item	Price
Easychamber adult with mouthpiece	£3.98
Easychamber with adult mask	£6.59
Easychamber with infant mask	£6.53
Easychamber with child mask	£6.55
Aerochamber Plus	£5.21
Aerochamber Plus with adult, child or infant face mask	£8.69
AeroChamber Plus Flow-Vu Anti-Static with standard or youth (5+ years)	£5.22
AeroChamber Plus Flow-Vu Anti-Static with adult small mask	£8.72
AeroChamber Plus Flow-Vu Anti-Static with adult large mask	£8.72
AeroChamber Plus Flow-Vu Anti-Static with small mask for infants (0-18 months)	£8.72
AeroChamber Plus Flow-Vu Anti-Static with medium mask for children (1-5 years)	£8.72
Volumatic	£3.88

#### USE AND CARE OF SPACERS

The spacer should be compatible with the pMDI being used. A change in spacer may alter effective dose delivered.

Spacers should be cleaned monthly or performance is adversely affected. They should be washed in detergent and allowed to dry in air. The mouthpiece should be wiped clean of detergent before use.

Plastic spacers should be replaced at least every 12 months but some may need changing at six months

Action once spacer is supplied

It is a requirement to keep auditable records of administration and supply of medication and devices via this Standard Operating Procedure.

Information entered into a patient clinical record should include:

- Patient's name, address and date of birth
- Consent given
- Indication
- Name of device supplied
- Date supplied
- Information and advice given to the patient on use and maintenance of device
- Signature/name and GPhC number of pharmacist who supplied the medication, and name and address of pharmacy
- Record that medicine supplied via Standard Operating Procedure
- A computer or manual record of all individuals receiving treatment under this Standard Operating Procedure should also be kept for audit purposes within each practice. Check with employer which method of recording is to be used.
- The GP practice should be informed of the consultation and supply of medication.
- Data must be stored in accordance with Caldicott guidance, GDPR and the Data Protection Act.

#### Remuneration

- Patients will receive the spacer free of charge.
- Payment to the pharmacy will be £10 for completing the review where a spacer device is prescribed, plus the cost of the spacer as above.
- Only 1 spacer will be allowed per patients via this SOP

#### Characteristics of staff

- Pharmacist or technician must be registered with the General Pharmaceutical Council (GPhC) and competent to work with this Standard Operating Procedure
- Must have completed initial training and/or be familiar with the current service level agreement for Somerset Pharmacy First.
- Must be able to themselves demonstrate good inhaler technique with a pMDI with and without a spacer
- Must only use this SOP in conjunction with Pharmacy First.
- Must have access to a current copy of the BNF
- Consultation room available for discussion
- The individual pharmacist's or technician competence with respect to their practice under this Standard Operating Procedure will be assessed by their mentor/manager on a regular basis.
- It is the responsibility of the pharmacist or technician to keep up-to-date with their continued professional development, in line with GPhC requirements;
- The pharmacist or technician must be alert to changes in Summaries of Product Characteristics, and Drug Safety Updates from MHRA.

#### Further guidance

- Patients taking high dose ICS should be advised to carry a steroid warning card
- Advice on mouth hygiene should be offered to avoid side effects
- Asthmatic patients to be reminded that step-down considerations are part of the asthma pathway and that doses should be just enough to control symptoms
- [Asthma UK guide to spacers](#) including videos