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| **Our Ref:** | 141230 Letter re pharmacy repeat ordering - LPC |  |
| **Your Ref:** |  |  |
| **Date** | 30th December 2014 |  |
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**To: Bolton Local Pharmaceutical Committee**

Dear Colleague,

Each year, GP practices participate in a prescribing work programme in which the practice is asked to review certain areas of prescribing. Bolton CCG has an annual prescription volume growth which is amongst the highest in Greater Manchester. Many local practices have expressed concerns with ordering of repeat prescriptions and this area will be a key focus of attention during 2015-2016. The CCG Medicines Optimisation Team will be supporting the introduction and where appropriate, review of practice repeat prescription processes. This includes repeat prescription requests from patients, their representatives and community pharmacies.

We are aware that many community pharmacies are diligent in contacting patients to ascertain their requirements within seven days of ordering their next prescription. However there are several pharmacies who do not adopt this approach. This has led to patient complaints and a waste of resources. We do not feel that requiring community pharmacies to contact patients within seven working days of ordering their prescription is unreasonable.

Practices are encouraged to co-operate with community pharmacists to improve service delivery to patients. However you may notice changes in the way that practices handle repeat prescription requests, including:-

* Telephoned repeat prescription requests may not be accepted, except in exceptional circumstances
* All repeat prescription requests from community pharmacies must be stamped and signed by the community pharmacist, pharmacy technician or dispensing staff with their GPHC registration number (if applicable) to confirm that the patient has been contacted within the past 7 working days and requires the medicines requested. Otherwise the request will not be accepted. Faxed copies will be accepted with the required confirmation.
* Should any inappropriate repeat prescription ordering be identified the practice will contact the community pharmacy on each occasion and identify the incident for the community pharmacies’ records.
* Where any three episodes of inappropriate prescription re-ordering by a community pharmacy (to include loss of prescriptions and requests for duplicates) have been identified over a period of 3 months, the practice will inform the CCG Medicines Optimisation Team. These three episodes will be reviewed at a practice meeting with representatives from the practice, CCG Medicines Optimisation Team, the community pharmacy and an LPC representative to discuss any appropriate action.
* Should further episodes of inappropriate prescription reordering be identified, then the practice may consider the option of refusal to accept prescription re-ordering from that particular pharmacy. However, the community pharmacy may still offer to collect and deliver prescriptions on behalf of patients.

The above criteria have been approved by the CCG at December’s Executive Committee meeting. The Committee highlighted the benefits to patients of community pharmacy ordering on their behalf. Nonetheless, the issue of waste medication remains a significant clinical risk and cost burden to the NHS. Our intention is to monitor the proposed system for quality, safety and the reduction of waste. If no significant improvement occurs, the Executive Committee will move to a system where Pharmacy requests for prescriptions are not accepted by GP practices.

May we take this opportunity to thank our community pharmacist colleagues through this challenging period. If local pharmacists have specific questions related to the on-going work of the CCG Medicines Optimisation Team, please contact them on 01204 462125.

Yours faithfully,

**Dr. Stephen Liversedge Ben Woodhouse**

**Clinical Director for Primary Care and Medicines Optimisation and Health Improvement Prescribing Lead**