



Pharmacy Flow Chart

Patient is assessed for prescribing, identifies chosen pharmacy NYH worker contacts pharmacy to check they will take patients prescription

Patient sees GP and is given first prescription in hand

Pharmacy is contacted to inform them of medication , dose and dispensing regime

Subsequent prescriptions will be posted/Pharmacy will collect

Patient does not collect for 3 consecutive days then pharmacist places script on hold and NYH is informed

Patient is physically seen by worker and tested, re-titration process begins

Titration process

1. Patient is seen by NYH worker
2. Worker tests for opiate naivety
3. Discusses with patient how they have maintained opiate use and by what means
4. Restarts medication after discussions with Prescriber at appropriate dose 30-40mls methadone daily
5. Increasing as per clinical guidance and prescribers discretion
6. Supervised consumption may need to be considered

If there is a change in medication patient may be given new prescription in hand or if enough time will be posted/collected from NYH

NYH worker will ring pharmacy to confirm dose change

Patient attends Pharmacy under influence of drugs or alcohol

1. Pharmacist uses own judgement and skills to ascertain intoxication
2. If he feels appropriate withhold medication for that day
3. Request patient to come back much later in a better state or present the following day
4. Dispensing the remainder of the prescription less the days missed
5. Pharmacist informs NYH worker of incident

Prescribing incidents or complaints to be directed to Andy Pearson (Deputy Clinical manager for North Yorkshire Horizons)

Patient related issues to be referred to patient's worker or Hub manager.

Skipton Manager: Amanda Fox

Selby Manager: Mark Vidgen

Harrogate Manager: Lee Wilson

Northallerton Manager: Craig Bosomworth

Scarborough Manager: Nicky Booth

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