Repeat Medication Ordering. 
Frequently Asked Questions.

This information has been prepared to help GP practice staff with changes to repeat medication ordering.

1. **Why are we doing this?**

   This initiative aims to reduce the waste of medicines that are routinely ordered but not needed.

   Prescribers, district nurses and practice pharmacists have all highlighted the significant waste and safety issues related to current repeat ordering systems. At a recent stakeholder workshop in Buckinghamshire, one of the recommended next steps was to limit third party ordering of repeat medication. Implementing this initiative has the potential to save approximately £660,000 per year. With the current financial pressures on the NHS and NHS Buckinghamshire Clinical Commissioning Group (CCG), initiatives that clearly reduce waste need to be progressed. Other CCGs around the country have already implemented this initiative. Luton CCG has estimated its implementation of this initiative saved approximately £2 million over two years.

   > ‘Nobody knows which medicines a patient is running out of better than the patient or their carer and we want to empower patients to take more control over managing their health.’
   
   **Dr Raj Bajwa. Clinical Chair. Buckinghamshire CCG.**

2. **What is changing and when?**

   All patients who can request their own medication directly from their GP practice will need to do so themselves from **1 August 2018 onwards**. Third party ordering of repeat medication by community pharmacies, online pharmacies and appliance contractors will be stopped for the majority of patients. The exception will be patients who are unable to order their medication by any of the recommended routes.

   The recommended routes are:
   - Online
   - Taking the repeat prescription request slip directly to the GP practice
   - By telephone, if that service is offered by the GP practice

3. **Who does this change affect?**

   This change only affects patients who are on repeat prescription and who order their repeat medication in the following ways:
   - Have an agreement with a community pharmacy to order a medication on their behalf
• Take the repeat prescription request slip to a community pharmacy
• Have an agreement with an appliance contractor to order appliances e.g. catheters, colostomy bags, on their behalf

Patients who already take their repeat prescription request slips into the GP practice or order their repeat medication online are not affected.

This change only affects the ordering of repeat medication. A patient can continue to have their prescription collected from the GP practice by their chosen Pharmacy if is not sent directly via Electronic Prescription Service (EPS). The patient can then collect their medication from the Pharmacy or have it delivered to their home.

4. Who is exempt from this change?

Some patients will continue to need pharmacy support with repeat medication ordering.

Exceptions to the change are:

• Patients who are housebound who cannot order on line, or do not have a carer or representative that can order on their behalf
• Patients using a Monitored Dosage System
• Patients who have a learning disability who do not have a carer or representative who can order on their behalf
• Patients who have dementia who do not have a carer or representative who can order on their behalf

GPs, practice staff, community pharmacists, patients and carers will know who this group of patients are. For these patients, it should be noted on the individual’s patient record that the community pharmacist is continuing to order their medication.

5. How will this improve safety?

The new system should give patients better control over medication ordering. It will avoid stock piling of medication which can result in patients being confused about which medicines to take. In addition, it should prevent medication that has been stopped from being re-ordered by mistake.

6. How will the change be managed?

Letters and leaflets will be developed by the CCG and made available to practices and community pharmacists. Additional communication will include messaging through social media and information on the CCG website.

7. What do practices need to do?

• Review your practice repeat prescribing system in line with CCG Best Practice Guidance
• Encourage patients to request their own repeat prescriptions. For those who can use a computer or smartphone, online ordering is likely to be the easiest way. For those who can’t use this method, the repeat prescription request slip can be used. This change will increase demand for registration for Patient Access, however, in the longer term, it should mean patients are less likely to need help from the practice. Nominating a Patient Access champion within the practice or from the Patient Participation Group could support patients with the registration process.

• Ask patients to make sure that they get the repeat prescription request slip from the pharmacy when their medicines are next dispensed.

• For patients who cannot request their own repeat prescriptions either online or by using the repeat prescription request slip, and don’t have a carer who can request the prescription for them, agree alternative methods. Community pharmacists may be able to help identify this group of patients. Alternative methods may include:
  a) Allowing telephone requests (if this is offered by the GP practice)
  b) The practice pharmacist managing generation of the patient’s repeat prescription
  c) For this individual, the patient’s community pharmacy requesting the prescription. This should be agreed with the community pharmacist.

• Let any community pharmacists and appliance contractors linked to the GP practice know about the change. This communication will also be carried out by the CCG.

• After 1st August, stop accepting repeat prescription requests from community pharmacists or appliance contractors except for the exception groups detailed above. However, a patient should not be left without medication. If necessary, allow one more request and make the change on the next cycle.

• Assure patients that items not ordered will not be removed from their repeat prescription if they do not order the item on a particular cycle.

• Monthly ordering of ‘as required’ medication is a significant cause of waste. ‘As required’ items should be changed to ‘variable repeat’.

8. What if a patient complains?

If patients or their representatives require further assistance outside this guidance, they should be advised to contact the Patient Advice and Liaison Service on 0800 328 5640 or scwcsu.palscomplaints@nhs.net.

9. What if a patient runs out of their medication and hasn’t ordered in time?

Patients who have not yet received the message to order their prescriptions themselves can still obtain a prescription, they should be provided with the information explaining the changes and given assistance to register for online ordering if needed.

A repeat prescription should be supplied as quickly as possible, preferably transmitting it electronically to the pharmacy.
Out of hours, emergency supplies can be made at the discretion of the pharmacist. However patients may be charged for this.

A patient can also call 111 if they require medication out of hours they will then be referred to a pharmacy who is participating in the NHS Urgent Medicine Supply Advanced Service (NUMSAS). A pharmacist will interview the patient over the telephone and will assess the legality of the supply before issuing an emergency supply.

The Medicines Management Team would like to thank all member practices for their support.