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## PSNC Briefing 008/15: Directions of Prescriptions

The term is used to describe the exercise of undue influence by a medical practice over the choice of where a patient takes or sends their prescription to be dispensed.

It is also used to describe situations where pharmacy owners and pharmacists encourage medical practitioners to recommend their pharmacy, by way of offering any gift or reward.

### Directions of Prescriptions by GP and practice staff

**Some medical practitioners are positively suggesting particular pharmacies for patients to use when getting prescriptions dispensed. Is this allowed?**

Prescription direction should not take place. Patients must be allowed a free choice between any community pharmacy. The patients are entitled to take decisions about where they want their prescriptions to be dispensed; therefore, if a patient prefers to use a particular pharmacy, the NHS Constitution requires that this preference is respected.

Action by a medical practice seeking to influence a patient's choice of pharmacy can undermine relationships with patients, as well as damaging trust and cooperation between healthcare professionals. Proper prescription practices should always be followed.

Generally, medical practices must not:

- provide a practice endorsement for a pharmacy,
- allow a practice database to be used to facilitate the promotion of a pharmacy,
- suggest that the practice would like a patient to use a particular pharmacy,
- allow the patient to believe that the care they receive from their medical practice could be influenced by their choice of pharmacy,
- recommend that the patient should collect a prescription from a certain pharmacy which is not the pharmacy that the patient had chosen,
- manipulate the prescription management process in favour of a particular pharmacy (e.g. offer to a pharmacy privileged access to prescriptions generated by the practice),
- fail to be consistent when liaising with pharmacies,
- ignore a patient's freely stated choice of pharmacy,
- misrepresent a practice relationship with a pharmacy and
- make unsubstantiated or misleading claims about a pharmacy.

Pharmacy owners and pharmacists must not request or become complicit in such activities as it is recognised that arrangements of this type usually require two parties – the GP practice that direct and the pharmacy that receives.

Any financial arrangements between community pharmacies and GP practices should be transparent. If there is a link between a medical practice and a pharmacy appropriate procedures must be in place to ensure that payments are in no way linked to prescription direction.

In the General Medical Council’s Guidance on “Financial and commercial arrangements and conflicts of interest”, if the GP medical practice has a financial or commercial interest in a pharmacy, the medical practitioner must not allow that interest to affect the way he prescribes for or advises patients. Also, he must not try to influence patient’s choice of healthcare services to benefit him, or benefit someone close to him or his employer. If the medical practice dispenses medicines, he must not allow his financial or commercial interests to affect the way he prescribes. If the doctor plans to refer a patient for investigation, treatment or care at an organisation in which he has a financial or commercial interest, he must tell the patient about that interest and make a note of this in the patient’s medical record.

Sometimes undue influence can be presumed. For example, a medical practitioner may make a positive statement about a pharmacy and the patient could see this as a recommendation to use a particular pharmacy. Therefore, medical practitioners should be alert to the potential for even casual comments to be given more weight by the patients than is intended.

### **Electronic Prescription Service (EPS) Nomination**

In regards to the Electronic Prescription Service (EPS) the patient can choose where their prescriber will electronically send their prescriptions. This is called nomination.

Patients should be supported to make an informed choice about nomination and choose the pharmacy that is most suitable for them. Patients should not be unduly influenced in their decision to nominate or in their choice of nominated pharmacy. Prescribers must not seek to persuade a patient to nominate a specific pharmacy. If a patient asks the GP who they should nominate, the GP should provide the patient with a list of all the dispensers (pharmacies and dispensing appliance contractors) in the area who provide EPS.

Healthcare professionals must seek a patient’s consent to nomination on each occasion that is necessary, such as after a change in circumstances, not only at the beginning of the process. If a patient has changed nomination the GP practice or another pharmacy cannot change the nomination back, relying on the original nomination, and must wait for the patient to request/consent to the change.

It is important that all staff can explain nomination to patients. Patients must be informed that a nomination is not mandatory, that they can choose who they wish to nominate and they are not restricted to nominating a dispensing contractor located close to their GP practice and that they can ask to set, change or remove their nomination at any time.

### **Dealing with Direction of Prescriptions**

If you believe that your doctor is directing patients to use a particular pharmacy you should consider:

- a) discuss with the Practice Manager or senior partners

- b) raise with the Local Pharmaceutical Committee (LPC) so that it can discuss the issue with the LMC to intercede, and
- c) raise with the NHS England

## Direction of Prescription encouraged by pharmacy owners and pharmacists

**Q. A medical practitioner has been offered a gift by a pharmacy owner in order to suggest his patients to use this particular pharmacy. Is this allowed?**

A. No, this is not permitted. The pharmacy terms of service (Paragraph 30(4) of Schedule 4, Part 4 of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013) contain several provisions that apply to the transfer of prescriptions from a GP practice to a pharmacy. These terms prohibit a pharmacy from making any payment (including the payment of a company dividend) to a GP practice, or any of the staff, in return for the practice recommending that a patient presents their prescription to the pharmacy. Therefore, pharmacies must not seek to encourage a GP practice to recommend their pharmacy, by way of offering any gift or reward.

The prohibition also applies in situations concerning Electronic Prescription Service (EPS). Pharmacies must not offer any gift or reward to either a GP practice or to a patient to encourage a patient to nominate them

## Further Information

For further information see:

- [GMC Good Medical Practice guidance](#), section on Financial and commercial arrangements and conflicts of interest
- [GMC Good Medical Practice guidance](#) contents page
- National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013), [Terms of Service](#) Paragraph 30(4) of Schedule 4, Part 4
- The [joint statement](#) of PSNC, BMA and PV on Prescription Direction
- [The NHS Constitution](#)
- Customer Contact Centre NHS England: **0300 311 22 33**

If you have queries on this PSNC Briefing or you require more information please contact [Maria Georgiou](#), Regulations Officer.