

## **Service Specification**

### **Repeat Dispensing**

#### **1.0 Service Description**

- 1.1 The management and dispensing of repeatable HSC prescriptions for medicines and appliances<sup>1</sup>, in partnership with the patient and the prescriber.
- 1.2 This service specification covers the requirements additional to those for dispensing, such that the pharmacist ascertains the patient's need for a repeat supply and communicates any clinical or compliance concern or supply query to the prescriber.

#### **2.0 Aims and intended service outcomes**

- 2.1 To increase patient choice and convenience, by allowing them to obtain their regular prescribed medicines and appliances directly from a community pharmacy for a period agreed by the prescriber.
- 2.2 To minimise wastage by reducing the number of medicines and appliances dispensed which are not required by the patient.
- 2.3 To help optimise the efficiency of General Medical Practices, by lowering the burden of managing repeat prescriptions.

#### **3.0 Service outline**

- 3.1 Pharmacists should undertake appropriate training. Pharmacy contractors are responsible for ensuring pharmacists they employ are competent to provide the repeat dispensing service. Pharmacy contractors will need to ensure that there are systems in place to make locum pharmacists aware of any local agreements, such as arrangements to communicate with prescribers or storage and audit trails of repeatable prescriptions and batch issues.
- 3.2 Pharmacy staff will educate patients about the repeat dispensing system and its operation, including the importance of only requesting those items which are actually required by the patient.
- 3.3 Community pharmacies will securely store at the pharmacy a patient's repeatable prescription and the related batch issues.
- 3.4 Community pharmacies will check the validity of the repeatable prescription and batch issues and will dispense in accordance with the directions given on the repeatable prescription. If no specific instructions are given by the prescriber, the pharmacist will use his professional judgement to decide when it is appropriate for the items to be dispensed. A HSC repeatable prescription needs to be dispensed for the first time within six months of being written unless it is for a Schedule 4 controlled drug when the first batch issue must be dispensed within 28 days of being written. Repeatable prescriptions can then

only be dispensed subsequently for up to a year from being written or until any expiry date specified by the prescriber, whichever is less. Schedule 1, 2 and 3 controlled drugs may not be prescribed on or dispensed against a repeatable prescription.

- 3.5 Prior to each dispensing episode the pharmacist will ensure that the patient is taking or using, and is likely to continue to take or use, the medicines or appliances appropriately, and that the patient is not suffering any side effects from the treatment which may suggest the need for a review of treatment. The pharmacist will also check whether the patient's medication regimen has been altered since the prescriber authorised the repeatable medication and whether there have been any other changes in the patient's health since that time, which may indicate that the treatment needs to be reviewed by the prescriber. The pharmacist will ensure that any medicines that are not wanted or needed by the patient are not dispensed.
- 3.6 After each dispensing episode, an appropriate batch issue will be endorsed in accordance with Drug Tariff requirements (RD guidance) and submitted for payment in accordance with BSO guidance.
- 3.7 If a pharmacist is concerned about the safety of dispensing a batch issue, due to a change in the patient's medical condition or medication regimen, then he may refuse to dispense the item. The pharmacist will advise the patient to seek an appointment with the prescriber and/or may contact the prescriber to alert him to the matter of concern.
- 3.8 The community pharmacy will maintain records of the dispensing of repeatable prescriptions in order that there is a clear audit trail in place which will allow pharmacy staff to unambiguously determine dates and quantities of medicines or appliances supplied during each dispensing episode. Records of interventions made by the pharmacist, considered by the pharmacist to be clinically significant, will be maintained in the patient's record.
- 3.9 The community pharmacist will inform the prescriber of any clinical or compliance concern or supply query, which occurs in relation to the repeatable prescription.

<sup>1</sup> As now, pharmacies will not have to supply any (listed) appliance that is prescribed, rather only such appliances as they supply in the normal course of business

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