

Payment not to dispense

Background and Introduction

Medicines sometimes appear on FP.10's that are not required by the patient. Some are included at the point of prescribing in error whether this is transcription or following an update, some are ordered in error by patients, patients representatives or other advocates. There are a variety of other reasons why medicines appear on FP.10's when these are not required by the patient. The supply of medicines that are not required for whatever reason compromises patient safety and is a waste of NHS resource.

Repeat prescriptions are reviewed at GP practices at set intervals. The purpose of such a review is partly to update repeat medicines lists for patients to ensure repeat requests are dealt with appropriately. Community pharmacy teams can help with the identification of unwanted medicines at the point of prescription handover to the patient or their representative. Some unwanted medicines maybe discontinued repeat medicines and in this instance the intervention can inform update to the patients repeat list through GP notification. This process is automated and sent via secure email.

In 2011, community pharmacy teams were asked to take part in a PCT led annual audit of patient prescriptions. The purpose of the audit was to identify items appearing on FP.10's at the point of prescription handover to check that all dispensed items were in fact required by the patient. The audit took place over a two week period and a significant number of items were found that had been included on the FP.10 but was not required by the patient. The reasons for inclusion were audited and the outcomes are seen in Table.1 below.

Reason	Occurrences
Patient ordered but not required	124 (47.1%)
Included by GP practice but not requested	61 (23.2%)
Pharmacy managed repeat	20 (7.6%)
Other	53 (22.1%)

Table 1- Analysis of reasons for unrequested items, pharmacy audit 2011, Isle of Wight
Total interventions 263, total number of items dispensed in this period approx. 102,000

The majority of items not required were ordered by the patient, but a significant number were included on FP.10's for other reasons.

Reducing the numbers of unwanted medicines supplied to patients can improve patient safety and also result in efficiency savings for the NHS in times of austerity.

Community pharmacy teams are ideally placed to work in partnership with GP practices to both identify unwanted prescription items and educate patients around appropriate medicines management and ordering. With notifications being passed back to the GP practices detailing all interventions pharmacies can also make a significant contribution to appropriate updating of patient records to ensure any missed changes to repeat medicines lists are highlighted

Service aims

The "Not dispensed service" aims to improve prescribing by informing GP practices about unwanted patient medicines that have been included on FP.10. Relevant information will be fed back to GP practices providing information on these items and the reasons why an item had been included that

was not required at the point of prescription handover. The service also aims to educate patients with regard to medicines ordering, reduce waste and thereby generate efficiency savings for the NHS.

Service scope

Community pharmacy teams are not contractually obliged to check that prescribed medicines are required by the patient. It is assumed that they have been prescribed and are therefore required and should be supplied in a timely manner with appropriate supporting information. The “Not dispensed service” adds another check at the point of handover to ensure that all medicines prescribed are actually required by the patient. All medicines identified as not required **must not** be supplied, the relevant prescription clearly endorsed as “not dispensed” in the manner proscribed by the prescription pricing division, data entered on the electronic data capture system and details of the intervention fed back to prescriber to avoid future issue. This notification is automated.

Reasons for not dispensing an item covered by this service are:

1. Medicine discontinued so no longer required
2. Prescription duplicated
3. Item ordered by patient but no longer required
4. Item ordered by pharmacy but no longer required
5. Included on FP.10 by GP practice but not required
6. Cheaper to buy

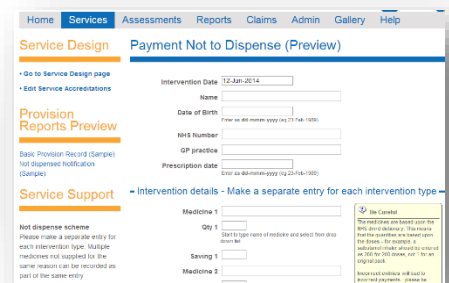
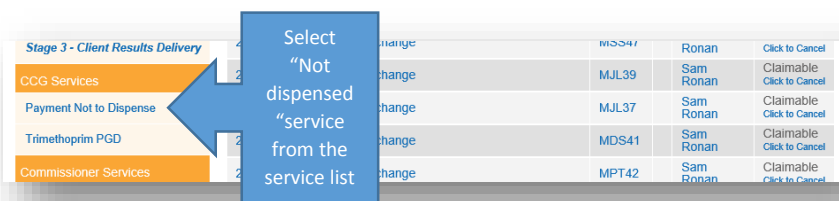
Service description and data capture

At the point of prescription handover an additional check should be carried out to ensure that all prescription items are current and all are required by the patient. Those items identified as not required should not be dispensed. The prescription form should be clearly endorsed to reflect that the item(s) have not been supplied. **A copy of the prescription must be retained for 6 months to facilitate post payment verification checks.**

PharmOutcomes will be used to record all interventions. All details of the intervention should be entered onto PharmOutcomes. The service question set will be visible from the services tab at the pharmacy

Screenshot of typical PharmOutcomes service screen above left and data capture right

The service question set must be completed in full. This will ensure all relevant information is passed back to the commissioner for service



evaluation and notification is sent to the appropriate GP practice. The question set details:

1. Patient demographics and registered GP
2. Date of intervention
3. Items returned to stock that have not been supplied at the point of prescription handover

4. The associated cost saving attached to the intervention
5. Reasons why the item had not been dispensed
6. Details of the intervention made by the pharmacist to educate the patient and avoid recurrence i.e. MUR
7. The pharmacist contact name

Clicking the orange save button in the data capture screen will save data, automatically populate the commissioner audit of service and ensure the claim for the pharmacy is sent. The GP notification will be auto-sent using secure messaging when data is saved. The notification process ensures all relevant information is fed back to the patients GP practice.

Service audit and payment

Service audit, GP notification and claim for service delivery is automated through the use of PharmOutcomes. This means that once data is entered service audit and claim is complete, there is no paper return necessary. This allows the pharmacist to focus on service delivery.

Not dispensed interventions are paid for at the rate of £4.59 per intervention recorded. This fee will be subject to annual review and any change agreed through discussion with local representative committee.

Post payment verification

As the system generates a GP notification detailing medicines not dispensed and an NHS number there is no need to send in copies of prescriptions as patient reconciliation can take place using the service outputs. You are required to keep a copy of the prescription at your Pharmacy for a period of 6 months after service delivery to facilitate post payment verification checks. A random sample will be taken to ensure that service audit takes place across all providers offering service.