

**REPEAT PRESCRIPTIONS POLICY**

(Revised October 2016)

**Responsibility**

Prescribing (including repeat prescribing) is the doctors’ responsibility. They may distribute tasks to appropriately trained staff, but at the end of the day the doctors are responsible for making sure they are done properly.

**Deciding to add a repeat prescription**

* Before a medication is changed from acute to repeat prescription, the **doctor** should check with the patient that:
  + - the medication has worked for him/her
    - the medication has not caused serious side effect
    - the patient is taking it regularly
    - the doctor and patient agree it is necessary to continue treatment
* When patients are discharged from hospital, a doctor should add, change or delete repeat prescriptions him/herself. If he/she instructs a member of staff to make these changes, he/she should check the new repeat list immediately afterwards. At the same time he/she may set a new review date.
* Ideally the amount on each prescription should be lined up so that all the repeat prescriptions are due on the same date.
* A review date should be set.

**Requesting a repeat prescription**

* The **patient** is responsible for requesting a repeat prescription. Either the patient him/herself, or his/her family/carer, should make the decision to ask for the prescription.
* The patient should only request items he/she is running out of, and not everything on the repeat list.
* If the patient no longer takes a medication, he/she should inform the surgery.
* Patients are encouraged to use Online Access to request repeat prescriptions.
* The patient can ask a pharmacy to pass on his request and collect the prescription. The pharmacist should obtain consent from the patient, and only order the items that the patient actually needs.

**Issuing a repeat prescription**

* **Receptionists** may assist in the printing of paper prescriptions.
* Before issuing the prescription, the receptionist should check the request and compare with the computer records.
* If the medication is:
  + - not on the repeat list
    - due for review (number of permitted issues used up)
    - requested much earlier than the usual date
    - requested for additional amounts
    - the receptionist should refer the request to the doctor.
* The receptionist should prepare the printed prescriptions for the doctor to sign when he/she is free.
* The doctor may make additional checks, including cancelling unnecessary items.
* Receptionists should file the signed prescriptions in a safe place for collection.
* They should check the collection file regularly (for example monthly) to look for uncollected prescriptions. These may require follow up.

**Reviewing repeat prescriptions**

* Each repeat item should have a review date (usually every 6 months or yearly). When the review is due, **doctors** should check whether:
  + - the medication is suitable
    - the dose of medication is sufficient
    - the patient appears to be taking the medication regularly (if not, why?)
    - any monitoring tests need to be done (for example, drug levels)
    - there is another cost-effective option
    - any medication has become unnecessary

**Ensuring safety**

* Staff should be trained before any role in repeat prescribing, and have regular updates
* Blank prescriptions should be locked away when not in use
* Staff and doctors should carry out audits from time to time

Approved by Dr N Sivananthan