

# Prescription Ordering Direct Service

## Adults Care, Adults Health and Housing Overview & Scrutiny Committee

Date: 7<sup>th</sup> February 2017

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Wards:	All Wards
Locality Affected:	All Locality Area
Parishes Affected:	All Parish Area

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### 1. Purpose and Reasons

- 1.1 This report provides the Adults Care, Adults Health and Housing Overview and Scrutiny Committee with an update on the Prescribing Ordering Direct service.

### 2. Recommendations

The Committee is recommended to:

- 2.1 Note the report.

### 3. Detail

- 3.1 Swindon CCG Prescription Ordering Direct (POD) is a new method for ordering repeat prescriptions based on a call centre model first developed in Coventry and Rugby CCG. Patients from any GP practice who has signed up to use the POD can telephone a single number to request a repeat prescription.
- 3.2 The NHS POD is currently based at Swindon CCG, The Pierre Simonet Building, North Swindon Gateway, North Latham Road, Swindon, Wiltshire, SN25 4DL.
- 3.3 The POD provides an additional method for patients to order their repeat prescriptions enabling increased patient empowerment and the ability to take control of their own repeat medication requirements. The telephone lines are manned by trained prescription clerks and supported by a registered pharmacist from Swindon CCG. The service started in August 2016 covering two practices with opening hours from 10am – 2pm. Opening times have increased to 9am until 5pm. These opening hours are currently under review, and will increase according to need.
- 3.4 As of 1 January 2016 there are eleven CCG practices using the POD. These are: Abbey Meads Medical Practice, Ashington House Surgery, Great Western Surgery, Hawthorn Medical Practice, Kingswood Surgery, Lawn Medical Centre, Moredon Medical Centre, Priors Road Medical Centre, Taw Hill Medical Practice, Victoria Cross Surgery and Westrop Surgery.

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- 3.5 Up take of the scheme is good with call volumes increasing from 849 calls taken in August to 7105 calls taken during December. To manage this call volume staffing levels have increased to 9 prescription clerks, and staffing levels will continue to increase as more practices join. Monday mornings are particularly busy, with the entire CCG medicines management team also taking calls.
- 3.6 The first time a patient calls, the service is explained to them and explicit consent is gained before accessing their medical records. Patients are asked about what medication is needed at that time. Patients are asked about their existing stocks of medication to ensure they are only ordering what is required.
- 3.7 The POD service uses the NHS Electronic Prescription Service. For each patient the POD issues an electronic prescription for the required medication, which needs to be signed electronically by the GP, before passing directly to a pharmacy nominated by a patient.
- 3.8 Patients are encouraged to order their medication around 7 days before it is due to run out. This allows plenty of time for the GP to sign and the pharmacist to dispense their medication.
- 3.9 In addition to issuing repeat medication the POD can, subject to agreement of the GP:
- Issue medicines from past or acute medication screens with a message informing the GP of its source.
  - Amend quantities to ensure that patients do not have excess of their medications.
  - Remove items to “past” if they have not been ordered for more than 6 months.
  - Add comments to the consultation record if deemed appropriate. An example could include a reminder to book in for a medication review.
  - Remove medication to the past screen when the patient has reported that they are no longer taking a medicine and document a reason informing the GP where appropriate.
  - Synchronise quantities of all repeat medication to the same length of treatment.
- 3.10 Experience from Coventry and Rugby shows around 1 in every 10 medicines ordered is not required, and early local figures suggest the same is true in Swindon CCG. The main advantage of the POD is therefore to reduce medicines waste and reduce the potential harm of having a build-up of medication at the patients’ home. Reducing the volume of medicines supplied by 10% will also lead to significant cost savings on the prescribing budget.
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- 3.11 It is anticipated the POD will free up time in both practices and pharmacies, as well as encouraging patients to take responsibility for ordering and taking medication.

#### **4. Alternative Options**

- 4.1 None

#### **5. Implications, Diversity Impact Assessment and Risk Management**

##### Legal and Human Rights Implications

None

##### All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

None

##### Diversity Impact Assessment

This Service is not suitable for those who are hard of hearing, cannot speak English or cannot use a telephone for any other reason

##### Risk Management

None

#### **6. Consultees**

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

#### **7. Background Papers**

- 7.1 None.

#### **8. Appendices**

- 8.1 None.