

GP guidance for identifying patients who may require additional assistance with repeat medication ordering- Assisted Patients

With the new proposals for repeat medicines ordering, it is important to identify patients who may need additional assistance from the practice or pharmacy to order their medicines. Please consider the following:

- Communicate with your local community pharmacies that you plan to implement the new proposal to restrict ordering of repeat prescriptions for the majority of patients. They have previously been advised of the change from the CCG directly.
- Let patients know of the changes to repeat prescription ordering methods, and the reasons why, before making the change. Please don't leave it to the pharmacies to explain the changes to patients.
- Provide the pharmacies with a named contact so they can liaise with practices about any issues and exceptions.
- Ask pharmacies to provide a rationale if they propose a certain patient to be an exception (who should keep getting their medicines ordered by the pharmacy) and the practice should communicate back the outcome of the practice decision with reasons why, so this can be communicated with the patient.

Rationale

A person who may require additional assistance is an individual who is at risk of being unable to order or manage their own medication supplies due to life circumstances such as age, mental illness or capacity etc. Such patients will be referred to as "Assisted Patients".

Assisted patients **may be** those patients who have or are:

- Their medication dispensed in a dosette box
- Elderly housebound/ socially isolated
- Palliative care
- Serious mental health issues
- Learning disabilities
- Hearing or visual disabilities
- Language difficulties
- No access to family or carers to support them
- No access to the internet and have mobility issues in terms of attending the GP practice or pharmacy to drop off their repeat prescription.

This is not an exhaustive list and other patients identified by practice staff as needing additional support in managing their medication can be added to the list.

Please note, if a patient receives their medication via delivery, they should not automatically be considered as housebound or socially isolated. Each patient should be reviewed on an individual basis against the criteria set out above before being considered as an Assisted Patient.

Method

1. Gain consent from the prescribing lead to carry out the activity

2. Agree the following with the practice manager and prescribing lead:
 - (a) How the patient will be informed – by phone call or by script note only
 - (b) How the information will be recorded in the patient's records
3. Inform the practice manager and any practice staff involved in the repeat prescription process of the details of the work being done, via a task on the clinical system
4. Search the practice clinical system for all patients aged over 18 years currently who have read codes for the following conditions:
 - Palliative care
 - End of life advance care plan
 - Gold standard framework
 - Best interest decision taken
 - On national service framework for mental health
 - Learning disabilities
 - Dementia
 - Alzheimer's disease
 - Memory issues
 - Other relevant codes

NB – **This is not an exhaustive list** and other factors such as Monitored Dosage System use may mean that a person would benefit from pharmacy assistance in ordering their prescriptions.

5. Review the patients' records accordingly to screen for exclusions listed below.
6. Possible exclusion criteria:
 - Patients who have a carer, who may be able to assist them with maintaining independence with ordering their medications from the GP practice.
7. Inform the patient about any changes to repeat medication ordering (as agreed in 2a). Please be mindful of additional support required for communication if English is not the patient's first language or they have specific needs (re: Accessible Information Standard).
8. Inform the community pharmacy of any patients that may require their assistance to order and/ or manage their repeat medications on a regular basis.
9. Add a patient reminder to the patients' home page on the clinical system, so that it is obvious to the practice staff that the patient may need assistance in managing their repeat medication (e.g. Patient is included on the practice register of Assisted Patients requiring community pharmacy assistance to order their repeat medications).
10. Document on the patient record why they are included on the Assisted Patients list that requires the assistance of pharmacy ordering schemes.
11. Review which patients remain on the list at regular medication reviews within the practice.
12. Community pharmacy contractors can highlight any patient who they think may require the assistance of pharmacy ordering schemes to the attention of the GP practice, via the prescriptions clerk to request they are included on the list. This must be agreed by the practice for inclusion on the list.

13. For patients identified as requiring additional support in ordering repeat medications by community pharmacy contractors and who are added to the list carry out points 7-10 above. This will ensure all parties are fully informed.
14. At the time of a patients routine medication review, ensure that all quantities and re-order intervals are appropriate, particularly for PRN medicines. Consider removing infrequently ordered PRN medicines from the repeat prescription list, particularly for high risk medicines (e.g. analgesics or hypnotics); advising patients that these can be requested at any time via the free text function online or by handwriting on the order form.