







Dispensing under regulation 61

16 April 2020

To: GP practices

Community pharmacies

Dear Colleagues

The CCGs and NHSE/I colleagues have received a number of enquires in response to the notification of the relevance of Regulation 61 in the current circumstances. Following discussion with representatives of NHSE/I, YORLMC, CPNY (LPC) and the CCGs, we recognise the need to provide some clarity to avoid misapplication.

NHSE/I is the commissioner of all NHS primary care dispensing services and the local office is finalising a process to consider requests to dispense under regulation 61 of the Pharmacy Regulations. Prior to this, a dispensing practice would consider the emergency circumstances, alternative options and, if appropriate, may choose to ask NHSE/I to dispense for a specified time period to non-dispensing patients. Local NHSE/I colleagues intend to create a process for consistent application irrespective of which part of Yorkshire you are located, so ideally this will apply to all of North Yorkshire and York. NHSE/I colleagues recognise the value of local knowledge and will include relevant CCGs and LPCs to ensure the most appropriate decision is reached for each case. It is hoped the process will be quick and effective for both pressing circumstances as well as for requests for more extended issues.

It should be noted, that Regulation 61 does not allow dispensing practices to dispense to non-dispensing patients when NHS dispensing pharmacy services are available and reasonably accessible in the area. If pharmacies are open or about to open within a short travel time (e.g. 30 minutes), then this would remain the channel through which non-dispensing patients should have their prescription dispensed.

Electronic transfer of prescriptions (EPS) is the preferred method of sending prescriptions to pharmacies where regulations and technology permit.

Clinicians may wish to consider exceptional circumstances where a patient is in urgent need of treatment. Further guidance will follow to assist practices and pharmacies to work together to identify and respond to urgent prescriptions. But if no community pharmacy services are open within reasonable travel time, then the risk to patient care should be considered on an individual basis. For example:

- URGENT TREATMENT WITHIN 1 HOUR: if a patient needs to start treatment within an hour and this would not be possible through local pharmacy dispensing, then the dispensing practice may wish to dispense in the best interests of patient care.
- URGENT TREATMENT WITHIN SAME DAY: if a patient needs to start treatment that day and there will be no local pharmacy services available for









the rest of that day, then the dispensing practice may wish to dispense in the best interests of patient care.

We have been in consultation with the local office of NHSE/I with regards to this advice but please note further guidance is expected on the Regulation 61 process.

We hope this provides you with some clarity to recognise the appropriate circumstances for dispensing practices to dispense to non-dispensing patients and trust all parties will follow appropriately.

Many thanks for your continued support, cooperation and collaboration regarding these matters.

Sally Tyrer - Chair NY Branch of YORLMC
Ian Dean (CEO) and Jack Davies (Chairperson) - CPNY LPC
Laura Angus – Head of Prescribing, NHS Vale of York CCG
Ken Latta – Head of Medicines Management, North Yorkshire CCG
Rachel Ainger – Strategic Lead Pharmacist, NHS North Yorkshire CCG