

Guidance on third party requests for appliance and nutritional feed prescriptions

Introduction

In primary care the majority of prescriptions provided to patients are dispensed by a community pharmacist. However, some items such as stoma appliances and nutritional feeds are bulky and therefore many patients choose to use an order and delivery service via a manufacturer.

In this situation, the companies supplying the prescribed items make a request for the prescriptions on behalf of a patient and subsequently deliver the products to the patient's home.

Whilst this is a convenient service for patients it could potentially lead to over-ordering, wastage and inappropriate requests for items.

This guidance is designed to assist practices to look at current systems for accepting prescription requests from third parties for appliances and nutritional feeds. For the purpose of this pack a third party is defined as an appliance contractor, appliance manufacturer or manufacturer or supplier of nutritional products that are available on NHS prescription.

Practices may wish to review their repeat prescribing protocol to ensure this includes details for dealing with prescription requests from third parties.

Background

The Prescribing Advisory Team has received reports from practices of third parties requesting prescriptions for appliances or nutritional products that are no longer required by patients. There have also been reports of retrospective prescriptions being requested for items which have been delivered to patients. Under the NHS (Pharmaceutical Services) Regulations 2005ⁱ this is not allowed unless it is requested by the prescriber as an emergency supply.

With regards to requests for retrospective prescriptions the practice should generally refuse to accept such requests and appliance contractors have already been informed of this by letter from the PCT (see Appendix 1).

Recommendations

1. Practices receiving requests for home delivered prescription items from the supplier should check with the patient or care home that the items and quantity being requested are actually required by the patient prior to issuing the prescription.
2. In the event of a discrepancy between the item or quantity requested by the supplier and the actual requirements for the patient the practice should contact the supplier to make them aware of this and to explain that a prescription will be issued according to the patient's requirements.
3. Do not accept any increases in quantity or new items unless they are known to be prescribed or recommended by an NHS professional (GP, stoma nurse, continence specialist, dietician etc).
4. The prescriber should have the opportunity to assess the prescription request prior to issue. This ensures the practice controls what the patient receives and not the supplier. In other words this is the same control that a GP would ordinarily use when issuing prescriptions for medicines.
5. Prescription requests for items already supplied to the patient should always be queried with the supplier, who should be informed that the practice does not accept retrospective requests and that requests should be made prior to items being delivered. Where this is not possible (e.g. assessment of patient required and items issued during visit) practices should insist on being notified of delivery and that a prescription is requested within seven days of delivery.
6. The practice should ensure that they are aware of the usual use by the patient and that any irregularities are reviewed with the patient or the care home.
7. If the patient dies, please ensure that it is recorded on the practice system and the supplier informed, such that no further prescriptions can be issued for that patient.

ⁱ NHS (Pharmaceutical Services) Regulations 2005
<http://www.legislation.gov.uk/ukxi/2005/641/contents/made>