

Health and Adult Social Care Policy and Scrutiny Committee

19 March 2020

Review of the changes to repeat prescription ordering.

Summary

In August 2019, the NHS Vale of York Clinical Commissioning Group (CCG) submitted a paper with the City of York Council Health and Adult Social Care Policy and Scrutiny Committee detailing the recommendations made to GPs on changing the process of repeat prescription ordering. Subsequently, the CCG was invited to a Committee meeting in September 2019 for further discussions, the CCG agreed to attend a future meeting to discuss the impact of the recommendations. This paper provides some of the early findings from analysis so far.

Background

In early summer of 2019, the NHS Vale of York CCG introduced recommendations to change the process of repeat prescription ordering. The recommendation was that from the 1st of September 2019, GPs should no longer accept repeat prescription requests from dispensing/appliance contractors such as a community pharmacy. A number of options and choices were still available for patients to choose from including:

- Using GP online services or downloading the new NHS App onto a mobile phone or tablet device
- Handing in the tear-off part of the repeat prescription in person to the GP surgery
- Posting the repeat slip to the GP surgery
- Ringing the GP surgery

The key aims of the recommendations were to improve patient safety by reducing the risk of errors in what is dispensed, and to reduce the number of unwanted medicines being received by patients.

Built in to the changes was the option for vulnerable patients to be exempted from the changes, as well as a prolonged 2 month roll out period to allow for a gradual implementation of the service. Information

(including patient leaflets and posters) were also distributed to all practices and pharmacies by our Medicines Management Team.

Analysis

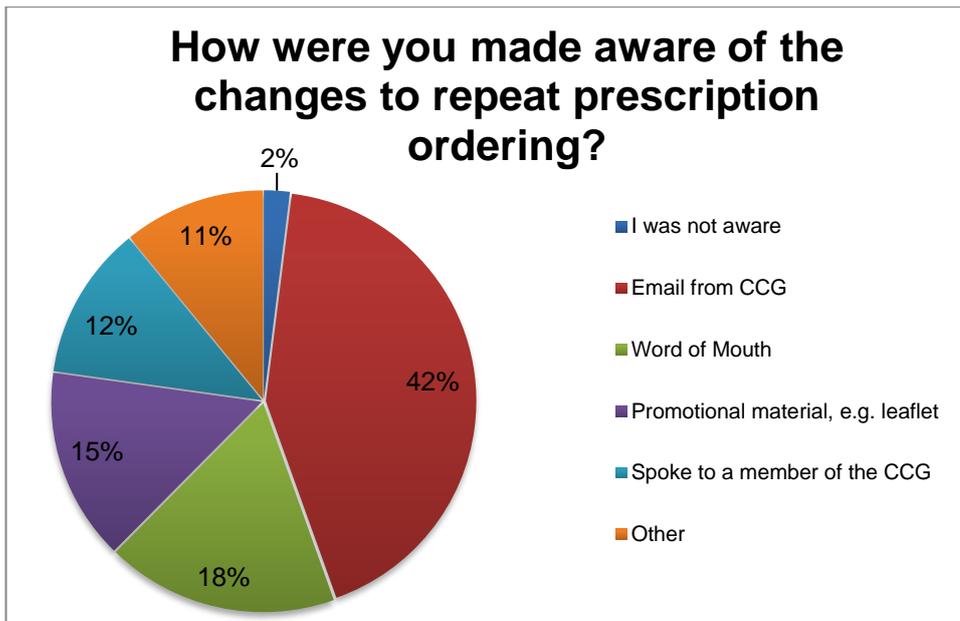
When the recommendations were first introduced, there was some public scrutiny concern which we had expected. Our patient relations team reported the following number of complaints regarding the recommendations:

- July - 2
- August - 34
- Sept - 18
- Oct - 4
- Nov - 4
- Dec - 2

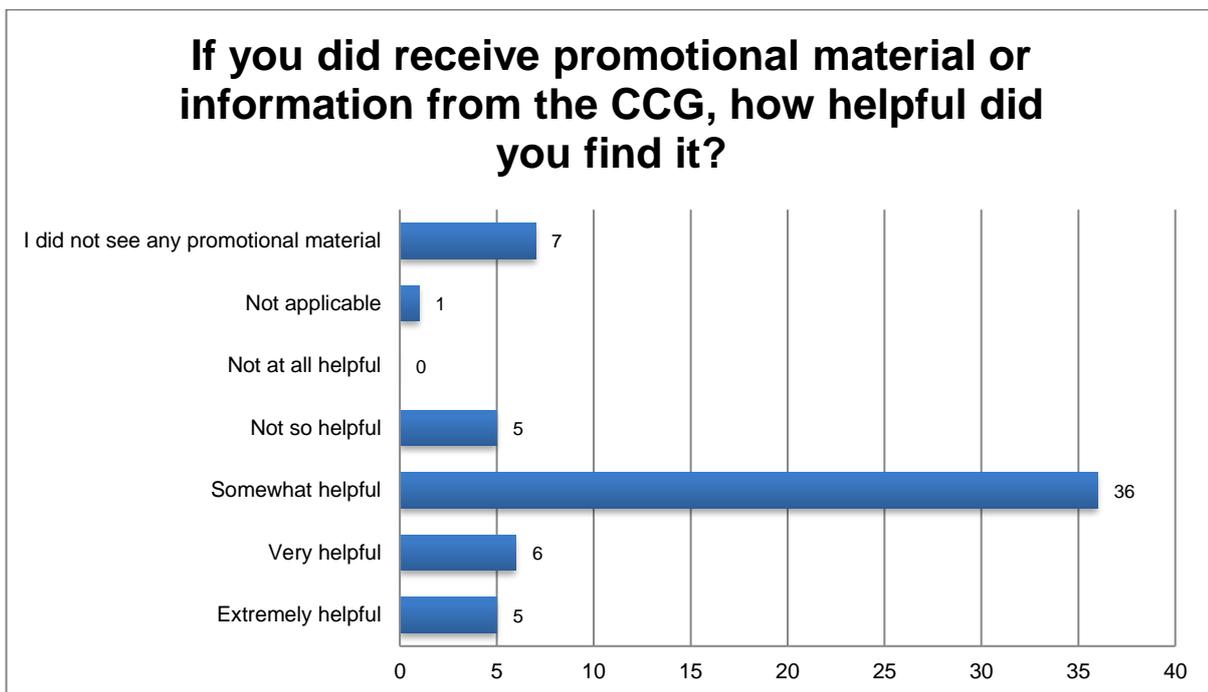
In total, 64 complaints were received regarding the changes, the majority of which were received *prior* to the implementation of the recommendations, indicating patients were aware of the incoming changes. In all instances, when the complainants were informed of the reasons for the change and the measures which had been taken to reduce inconvenience and the risk of harm, their concerns were allayed.

Subsequently, the CCG has conducted an audit with primary care practice teams to understand their views on the implementation of the recommendations. The CCG was able to successfully engage with almost 80% of the GP surgeries in the Vale of York with a total of 63 completed audits. Almost 50% of the audits were completed by GPs; the remaining audits were completed by practice pharmacists, nurses, and other administration staff.

Of the respondents, only 2% reported they were unaware of the recommended changes to repeat prescription ordering. The majority of respondents had been made aware of the changes by the CCG.

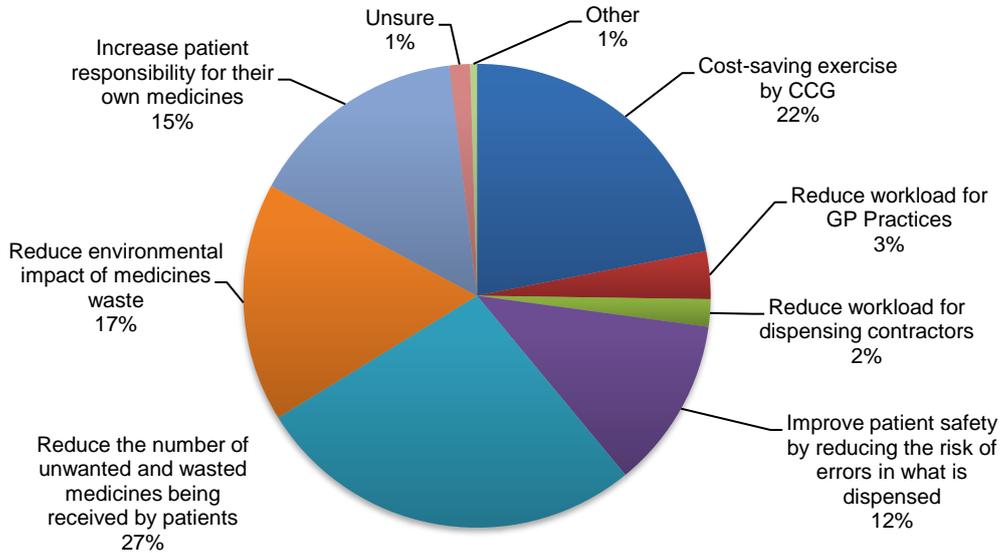


We wanted to know how the patient information packs had been received, whether these were found to be as useful as they were intended to be. Also we wanted to know if practice staff had been made aware of the information packs. The majority of respondents found the information packs helpful.



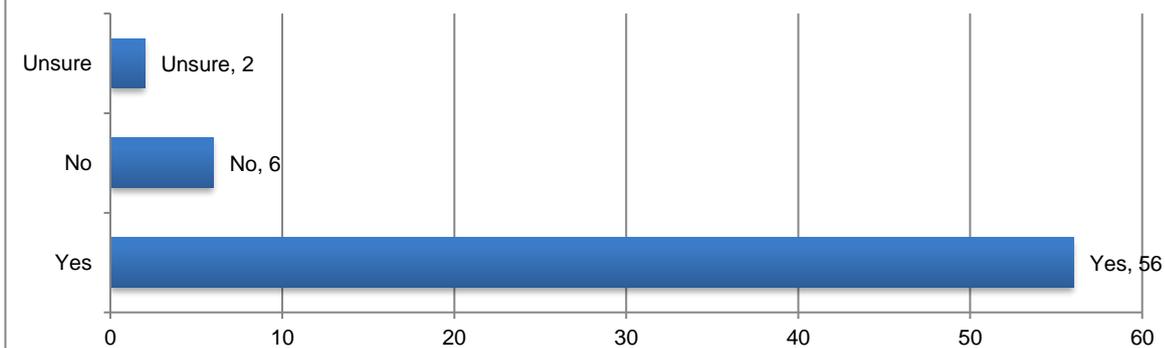
The key aims of the recommendations were to increase patient safety and reduce medicines waste. We wanted to understand if the ethos of the recommendations had been understood across primary care. It was positive to see the majority of the respondents were aware of the aims of the recommendations

What do you understand to be the reason(s) for the recommendations?



Exemptions to the recommendations were in place to ensure patients who required additional assistance would not be disadvantaged or at a risk of coming to harm. The CCG created a wealth of resources to help GP and community pharmacy teams, identify and process vulnerable patients.

Were you aware of the exemptions?



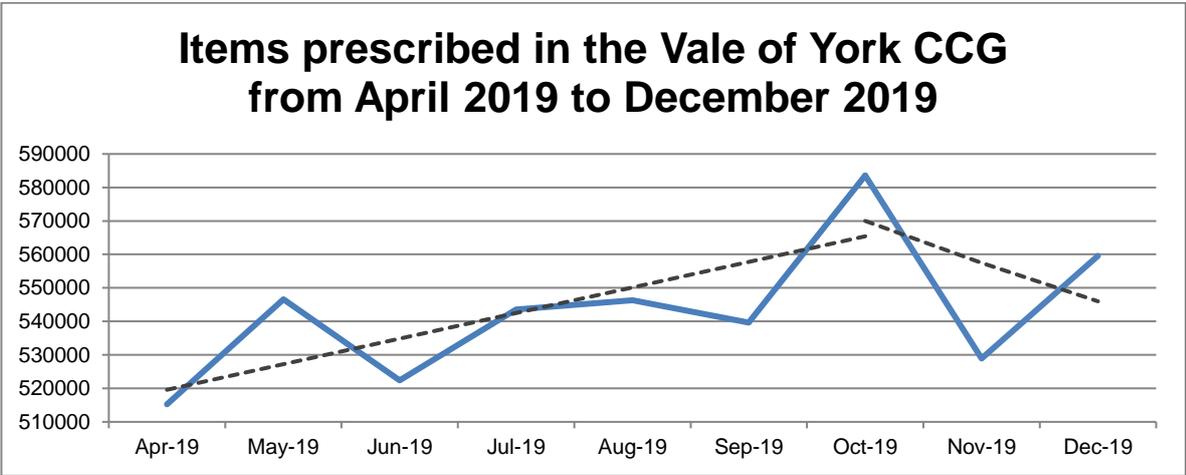
We have also liaised with our local hospital, York Foundation Trust, regarding the scheme and no concerns were raised.

Measures of success

At the onset of this project, it was understood that a real measure of success would be difficult to define; we would rely on pooling information sources and completing retrospective analysis.

A measure of reduced medicines wastage would be to see a decrease or a non-increase in the number of prescribed items compared to previous months and years. This prescribing information is available from the NHS Business Services Authority (NHSBSA) and is made available in roughly 3 month arrears. A number of factors will impact on the variance in the number of items prescribed in primary care, including, treatment duration, repeat interval, quantity of medicine supplied, change in prescribing or formulary, lost medication, or use of surplus stock. Loosely, the prescribing data can be used to indicate if there has been a reduction in the amount of medicines being prescribed. For a definitive answer, case studies would be needed which would retrospectively review the prescribing in patient cohorts.

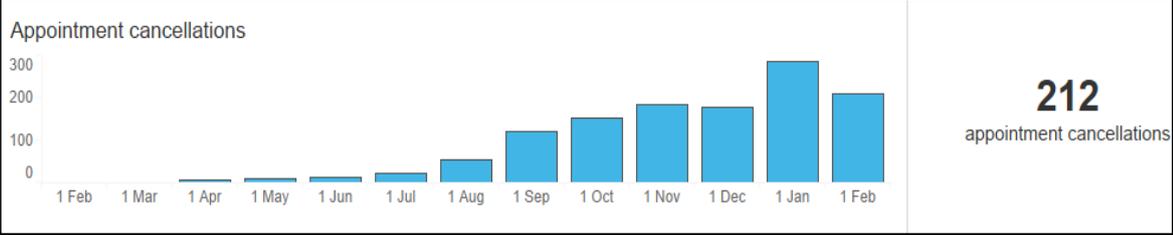
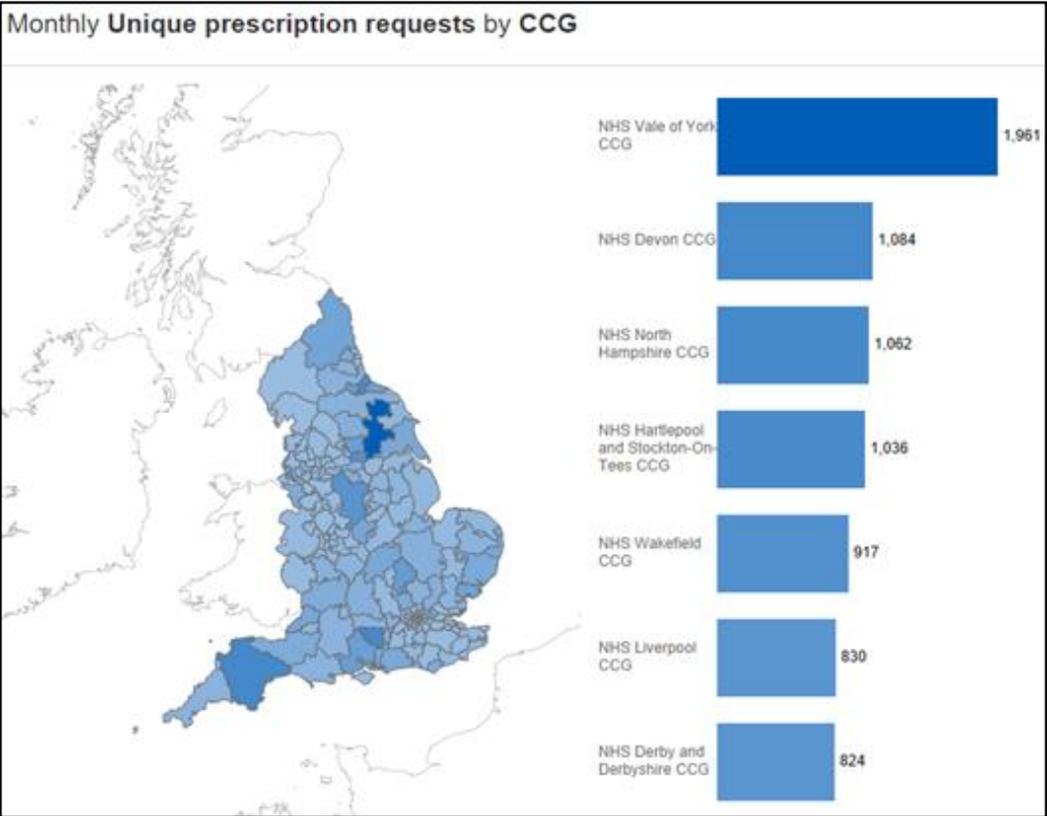
The most recent data available from NHSBSA is to December 2019, the number of items prescribed in primary care have been illustrated below for the financial year 19/20 until December 2019. Whilst it is still early to consider the full impact of the recommendations, the implementation of the recommendations appear to have reversed a rising trend in prescribing.

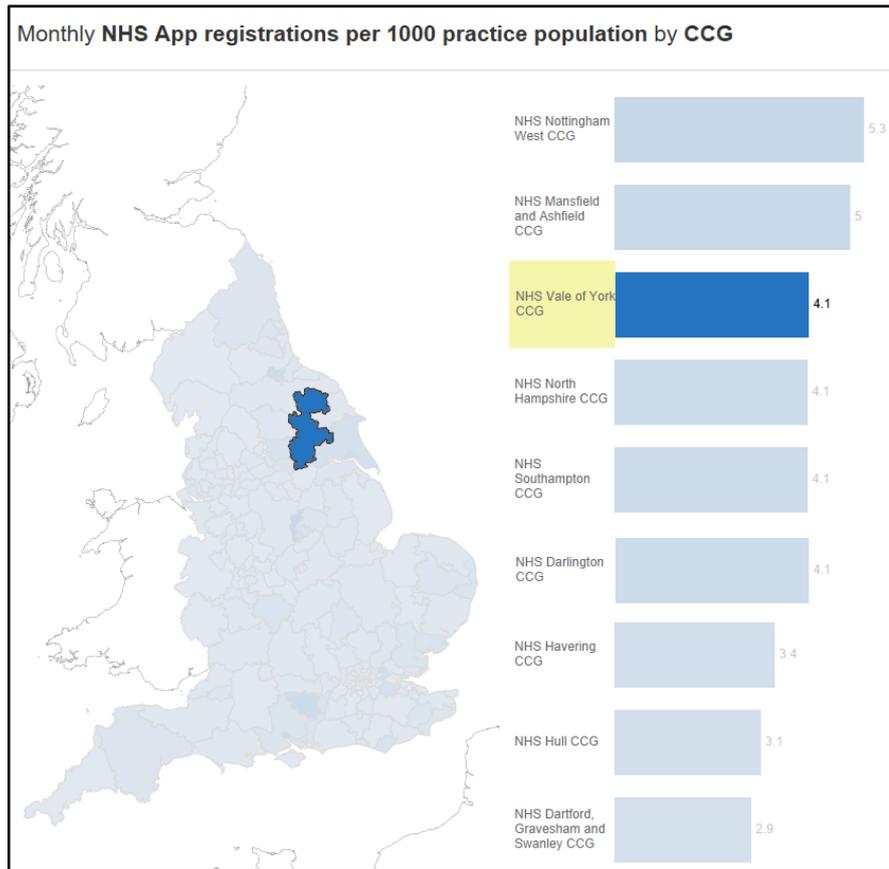


Throughout this project, the CCG encouraged the use of online ordering of repeat prescriptions, in particular the NHS App or online platforms such as the GP website. The added benefits of the NHS App allow users to book or cancel appointments, check symptoms, and view their GP record. Further information on the NHS App has been made available by NHS England and is available to view [here](#).

There have also been unexpected benefits of the changes such as an increased uptake of the NHS App. Data which NHS England has made available has shown the use of the NHS App against a number of

different comparators. The Vale of York’s use of the NHS App is currently the highest compared to any other CCG in the country for ordering repeat prescriptions. The Vale of York has the third highest number of NHS App registered patients per weighted population. In addition, the use of the NHS App in that time period has led to over 200 appointments that were no longer wanted being cancelled via the NHS App. This frees up the appointments for other patients who need them.





The Vale of York CCG medicines management team led on the roll out of the recommendations, and have been working closely with the medicines management teams that oversee Hull CCG, North East Lincolnshire CCG, East Riding CCG, and North Lincolnshire. These CCGs are launching their recommendations on the 1st of April 2020 with an 8 week transition period as with the Vale of York. The recommendations are identical to the recommendations in the Vale of York, the promotional material is the same, and the exception criteria is also the same. Across the Yorkshire and Humber STP footprint, all of the CCGs in the area will have implemented the recommendations to change the way repeat prescriptions are ordered.

Conclusion

The Vale of York CCG implemented recommendations in September of 2019 to change the way repeat prescriptions are ordered. These recommendations have regrettably caused some disruption and concern for patients and carers alike. There was always an expectation this project would cause some displeasure to the public due to the perceived convenience of 3rd party prescription ordering, the expectation was the complaints would subside once patients had adjusted to the

recommendations, which it has. We will continue to closely monitor the effect of this change on our population.

As an NHS organisation with patient, environmental and fiscal responsibilities, we are often required to make difficult decisions but always do so with the best intentions for the population we serve. This initiative has improved uptake of digital solutions, unexpectedly reduced wastage of GP appointments, and will reduce the risk of over-prescribing and medication errors. Any cost savings that emerge will also enable us to continue to fund sustainably health services that patients value and need.

Recommendation

Members are asked to note and comment on the contents of this report.

Reason: To inform Members of the findings from analysis into the changes in the process of repeat prescriptions ordering.

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