**Naenae Medical Centre**

**Repeat Prescribing Policy & Procedures**

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Rationale:

# Naenae Medical Centre provides a repeat prescribing service for its members. In order to ensure this service is delivered in a safe and effective way it is necessary to have clear procedures with defined roles and responsibilities which align with legal scopes of practice

# Objective:

# Naenae Medical Centre has a clear, effective, and safe process for managing requests for repeat prescriptions

* Staff members involved in delivering this service have clear roles and responsibilities which align with their respective scopes of professional practice

# Desired Outcomes:

* Procedures are in place for processing requests for repeat prescriptions
* Staff are aware of these procedures and adhere to them
* Roles and Responsibilities of team members are clear and followed
* Patients are clearly informed of the process

**Policy:**

* + - A clear process is defined for the processing and invoicing of patients who have requested repeat prescriptions
		- Staff follow the procedures to ensure that all patients are treated the same
		- Staff will ensure they adhere to their responsibilities and act within their scope of professional practice
		- Staff are allocated time daily to manage the repeat prescription process
		- The designated staff members ensure all procedures for generating, storing and destroying uncollected repeat prescriptions are followed.
		- Repeats will be available in 48 hours or 2 working days from being ordered, unless exceptional circumstances prevent this from happening
		- Prescriptions that remain uncollected after three months are to be processed and destroyed
		- Prescriptions will not be handed to persons under 16 years old, unless prescription is for that person
		- The person picking up the prescription will be the patient, or a person authorised by the patient to act on their behalf
		- Patients have a variety of ways of requesting a repeat prescription, placing responsibility on different staff to initiate them. This includes via Manage My Health (Doctor’s responsibility), script line (Nurse’s responsibility), phone and walk-in request (Receptionist’s responsibility).

# Repeat Prescribing Procedures

Prescriptions for Long term Conditions (LTC’s) will be generated for a maximum 3/12 supply. Conditions for which a repeat prescription may be appropriate include but are not limited to:

* + - Oral contraception
		- Hypertension
		- Gout
		- Cardiovascular disease
		- Hyperlipidaemia
		- Eczema and chronic skin conditions
		- Epilepsy
		- Asthma/COPD
		- Diabetes
		- Thyroid conditions
		- Or any other chronic condition for which regular medication is prescribed and the condition is stable

**Responsibilities**

**Administration Responsibilities**

* Administration staff will take request for repeat prescriptions by way of a written list **only** (pharmacy receipt would be ideal) which then must be passed onto a nurse for processing. Alternatively, they can refer patients to the nurse prescription line or MMH.
* Once the prescription has been generated, signed and returned to reception in-tray, the receptionist will complete the invoice and file the prescription in the prescription box
* When the prescription is emailed, details will be documented in the daily record/accounting screen for reference
* Reception staff will monitor the prescription box for uncollected prescriptions at least every three months and give any uncollected prescriptions to the delegated nurse/NP/GP for documentation and destruction

**Nurse Responsibilities**

* All prescription request that come in via the phone script line or reception are to be triaged by a nurse then put through to the patient’s doctor or appropriate prescription template
* Will prepare the prescription implementing the following criteria:
* Verify the patient’s:
	+ Name
	+ Address
	+ NHI
	+ Date of birth
	+ Patients preferred pharmacy
* Determine which medications are required and will:
	+ Confirm drug name
	+ Confirm drug strength
	+ Confirm drug dose
	+ Assess appropriate use of all LTC medications
	+ Will check patient’s record to ensure relevant laboratory tests and blood pressure have been performed in a reasonable time frame
	+ Will ensure good adherence by checking the date of last prescription
	+ Will check that screening is up to date
	+ Will check any Specialist Authority is current and alert prescriber that this is due if it is close to expiry/expired.
	+ Will check if Specialist recommendation is required and current
* Prescriptions for LTC’s may be generated for a maximum of up to **3-month** supply
* If an appointment is to be made with the patient’s GP and bloods are required, the nurse will organise for bloods to be tested prior to their doctor’s appointment.
* The patient may be asked to make an appointment with the nurse or doctor at the time they request a repeat prescription for medical review
* If there is documentation by the GP/NP of a need for clinical review or if the patient has not been seen by a GP/NP within the required timeframe a nurse will decline the request by way of-
* A declined repeat prescription text stating “your prescription request has been declined as you are due to see a GP. Please phone reception to book an appt, should your prescription be urgent speak to a nurse who can organise a short prescription until your appointment”, or,
* A phone call explaining the above

**Exceptions**

* Requests for Controlled Medicines need to be referred directly to the designated prescriber and will require a **3** monthly review unless care is shared with a specialist.
* Patients requiring a medical review may be prescribed existing treatment for a period of 2-4 weeks agreed by the designated prescriber. The nurse will then be responsible for organising and communicating an appointment date and time to the patient.
* Exceptions requiring a **12** monthly clinical review include oral hormonal contraception and stable uncomplicated conditions (allergic rhinitis, asthma, eczema, psoriasis, epilepsy and thyroid disease)
* Repeat prescriptions will not be generated for acute conditions.
* Patients on Warfarin or Clozapine will be processed according to separate protocols
* Requests for non-regular medications will be declined and an appropriate clinical review organised; exemption is made for appropriate action plan medications that have previously been approved by the patients GP (eg prednisone for asthma, prednisone/antibiotics for exacerbation of COPD/bronchiectasis)

**Prescriber Responsibilities**

* Ensure that all patients’ LTC medicines are current and that adequate follow up has been arranged i.e. recalls for required bloods
* Will ensure repeat prescriptions presented for signing are appropriate for that patient
* Will check for accuracy
* Will check appropriate use of medication
* Check lab results are current
* Consider titration of dose – (may need to see patient for this)
* Consider need to continue medication
* Will ensure repeat prescriptions are signed promptly
* If the prescriber does not agree with any aspect of the generated repeat prescription, they will ensure that the prescription is corrected before signing

**Patient Responsibilities**

* Patients shall in the first instance request a repeat prescription by way of MMH, nurse phone Rx line or in person to reception with a pharmacy receipt.
* Patients will indicate which pharmacy they want to pick their prescription from
* Patient is to allow 48 hours for completion of prescription
* Patients on long term medications will take responsibility as able to arrange regular 6 - 12 monthly review with their regular provider unless alternative arrangements have been made with their provider.

**Naenae Medical Centre Medication Audit**

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| **Audit** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **NHI** |  |  |  |  |  |  |  |  |  |  |
| **Māori/Non-Māori: (M or NM)** |  |  |  |  |  |  |  |  |  |  |
| Is the patient who received the request authorised to do so in accordance with the Repeat Prescribing Policy |  |  |  |  |  |  |  |  |  |  |
| Is the date of last medical consultation in accordance with the requirement of the policy? |  |  |  |  |  |  |  |  |  |  |
| Is there a medication review within the past 12 months (to ensure prescription is still appropriate) |  |  |  |  |  |  |  |  |  |  |
| Had the patient’s medicines been reconciled and updated correctly? |  |  |  |  |  |  |  |  |  |  |
| Was the request record as per Repeat Prescribing Policy? |  |  |  |  |  |  |  |  |  |  |
| Did the requested script follow the usual process/steps as per the Repeat Prescribing Policy? |  |  |  |  |  |  |  |  |  |  |

**Auditor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Role: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

#  Policy Review Schedule

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| **Organisation**  | **Title**  | **Author**  |  | **Changes/Updates** | **Review Date**  | **Approved By/Date**  |
| Naenae Medical Centre | Repeat RX Policy and Procedure 1.0 | Directors of Naenae Medical Centre 2021 |    |  | November 2022 | Chris Polaczuk2021 |
| Naenae Medical Centre | Repeat RX Policy and Procedure 1.1 | As above |  |  | November 2023 | Antoinette ToumouaNovember 2022 |
| Naenae Medical Centre | Repeat RX Policy and Procedure 1.2 | As above |  |  | November 2024 | Antoinette Toumoua November 2023 |