

# Tower Hamlets GP Care Group Standard Operating Procedure and Policy for the use of FP10 Prescription Forms

Date Issued	1 <sup>st</sup> August 2016
Date to be reviewed	Periodically or if statutory changes are required
Title	Standard Operating Procedure and Policy for the use of FP10 Prescription Forms
Supersedes	All previous Policies
This policy will impact on	All staff
Financial Implications	No change
Policy Area	Governance
Version No	1
Issued By	Ruth Walters, Interim Director of
_	Quality & Assurance
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# 1.1.1 Approval Record

	Committees / Groups / Individ	Committees / Groups / Individual		
Consultation	Governance Committee			
Approved by	Dr Joe Hall: Chair of Governance Committee	14	31/01/2017	



#### 1. INTRODUCTION

Prescribing for patients in community settings will often occur on FP10 prescription forms which can be taken to a community pharmacy for dispensing. It is the aim of the THGPCG to support the access to IT and develop clinical practice to minimize prescribing in this format and to facilitate electronic prescribing via the EMIS system wherever possible. FP10 prescription forms are controlled stationary and therefore must be managed safely and securely.

#### 2. PURPOSE

To ensure that patients in need of immediate treatment can be issued with a prescription that can be taken to a pharmacy of their choice.

To ensure that a secure system is in place for the ordering, storage and use of FP 10 prescription pads.

This policy covers all types of prescriptions written by prescribers within the THGPCG and given to patients.

#### 3. DUTIES

**3.1** The Governance Committee will approve the policy prior to being ratified by the THGPCG. The Director of Quality & Assurance is responsible for the implementation and dissemination of this policy.

### 3.2 Prescribers

- · Will only use FP10 pads in the situations stated
- Will return any pads they have at the end of the clinic/day for secure storage
- Will sign for any individual pads they received and return any that they no longer require, or when leaving the Trust to the THGPCG Quality team.
- Are responsible for the safe keeping of any prescriptions in their possession
- Must ensure that all prescriptions issued are recorded in the EMIS record of the individual patient
- Report any missing prescriptions immediately to their line manager, Director of Quality & Assurance and the Chief Operating Officer.

#### 4. MANAGEMENT OF FP10 PRESCRIPTION PADS

#### 4.1 Use of FP10 Forms

The FP10 forms will only be used by the clinician named on the pre-printed pad

### 4.2 Prescribing on FP10 forms

- FP10 forms must not be used to prescribe for inpatients or discharge patients
- FP 10 forms must not be used to prescribe for private patients
- FP10 forms must not be used for staff or their families
- Medicines should be prescribed generically where possible, unless branded prescribing is recommended in the TH Medicines Management



prescribing formulary

- When considering the quantity to be prescribed prescribers should consider the risks to the patient of self harm or the risk of diversion of the prescribed item and if there is deemed to be a risk in either of these areas smaller supplies should be issued (eg 7 days)
- A contact telephone number must be included on the FP10 in case the community pharmacist needs to contact the prescriber
- If using handwritten FP10 prescribers must document the prescription in the EMIS Community record as soon as possible and within one working day after the prescription is issued

### 4.2 Ordering, Storage and Access to FP10 forms

- The Quality & Assurance team are responsible for ordering, receiving and storing FP10 prescription pads for the THGPCG staff.
- A designated time slot will be arranged and on delivery the receiver will check the actual delivery against the order and the delivery note and record any discrepancies on the delivery order before signing for delivery. Following this, as soon as practically possible, the serial numbers of the FP10 prescription pads should be checked against the delivery note
- Failed deliveries will be reported to the suppliers on the same day to enable discrepancies to be identified quickly.
- The FP10 prescriptions will be stored in a locked metal cupboard within the locked offices of the THGPCG. Access to keys to the cupboard is limited to the Director of Quality & Assurance and the Office Manager
- The Director of Quality & Assurance is responsible for identifying prescribers who have left or have been suspended from prescribing duties and will ensure that prescriptions are recovered and securely destroyed. He/she is also responsible for maintaining the current register of non-medical prescribers and will update this.
- Forms which are to be destroyed will be shredded and disposed of in confidential waste
- FP10s for individuals are ordered from the Quality & Assurance Team using the request form (appendix one). The can be collected by prior arrangement from the THGPCG Office, St Andrews. A signature is required on collection
- When not in use they must be stored in a locked cupboard or drawer.
   Access to the drawer must be restricted to prescribers only

#### 4.3 Recording of Prescription Pads

- A signed record that prescribers have read, understood and will comply
  with the policy and a record of pads supplied will be maintained by the
  Quality & Assurance Team (refer to appendix two)
- The prescribers is responsible for the security of the pad at all times and must ensure that the pad is stored in a locked cupboard or drawer whenever not required for clinical activities.
- The prescriber will record the number of the prescription issued in the EMIS record alongside the clinical details of the medication prescribed. (This is to enable tracking of missing prescriptions should a theft occur)

### 4.4 Loss or theft of Prescription Pads

As there is the possibility that an attempt could be made to forge prescriptions if they are lost the following steps must be taken to reduce the risks associated with a loss or theft of FP10 prescription pads

- If a criminal activity is suspected, inform the Senior Manager on-call (telephone 07714 741806) who will contact the police
- Inform the Director of Quality & Assurance, Chief Operating Office



- and Medical Director by email
- Follow the THGPCG Incident Policy
- The Director of Quality & Assurance will contact NHSE (email: england.on-pharmacy@nhs.net tel; 020 1824993) to request that the missing prescription numbers are cascaded to community pharmacies
- The Director of Quality & Assurance will cascade information to the clinical teams and request that all prescriptions issued from the service for a minimum of two months following the incident are written in a coloured ink, the colour will be determined at the time of the incident.
- The Director of Quality & Assurance will report the incident to NHS
  Protect (email address: <a href="mailto:prescription@nhsprotect.gsi.gov.uk">prescription@nhsprotect.gsi.gov.uk</a>) including
  the following information: date and time of loss/theft, date and time of
  reporting of loss/theft, address of incident, serial numbers, quantity)

# 5 Prescribing Practice

- Prescribers will adhere to the guidelines in the THGPCG Non-Medical Prescribing Policy
- Prescribers will not use FP10 prescriptions to prescribe dressings (dressings must be ordered via Accelerate CUC Dressing Supply service)
- Prescribes must use the Tower Hamlets Medicines Management Formulary for all products prescribed

### 5. MONITORING COMPLIANCE WITH THIS DOCUMENT

Aspect of Compliance	Method	Individual Responsible	Frequency	Committee receiving reports	Team responsible for completing any actions
Storage and supply of FP10 pads	Audit of record keeping in THGPCG office	Director of Quality & Assurance	Annual	Governance Committee	Quality & Assurance Team
Recording of prescriptions issued	Audit of EMIS records	Clinical Leads in services	Annual	Governance Committee	Clinical Leads



6. APPENDICES



To:

# Order supply of FP10 Prescription Forms

Quality & Assurance Team, Tower Hamlets GP Care Group

## Please allow 14 days for delivery



# **Appendix Two**

# RECORD OF PRESCRIPTION PADS SUPPLIED

I have read and understood the THGPCG Standard Operating Procedure and Policy for the use of FP10 Prescription Forms
Prescribers Name
Signature
Date

# Prescription Pads Issued to the above prescriber

Date	Prescription numbers	Issued by (signature)	Received by (signature)
			100 4 5 1 1 1 1 1
		: 33	
_			
**			(3.0)(5
y//			



# **Prescription Pads returned**

Date	Prescription Numbers	Received by	
		•	

Prescription Pads destroyed

Date	Prescription Numbers	Witnessed by (one of whom must be Service Lead or THGPCG Director