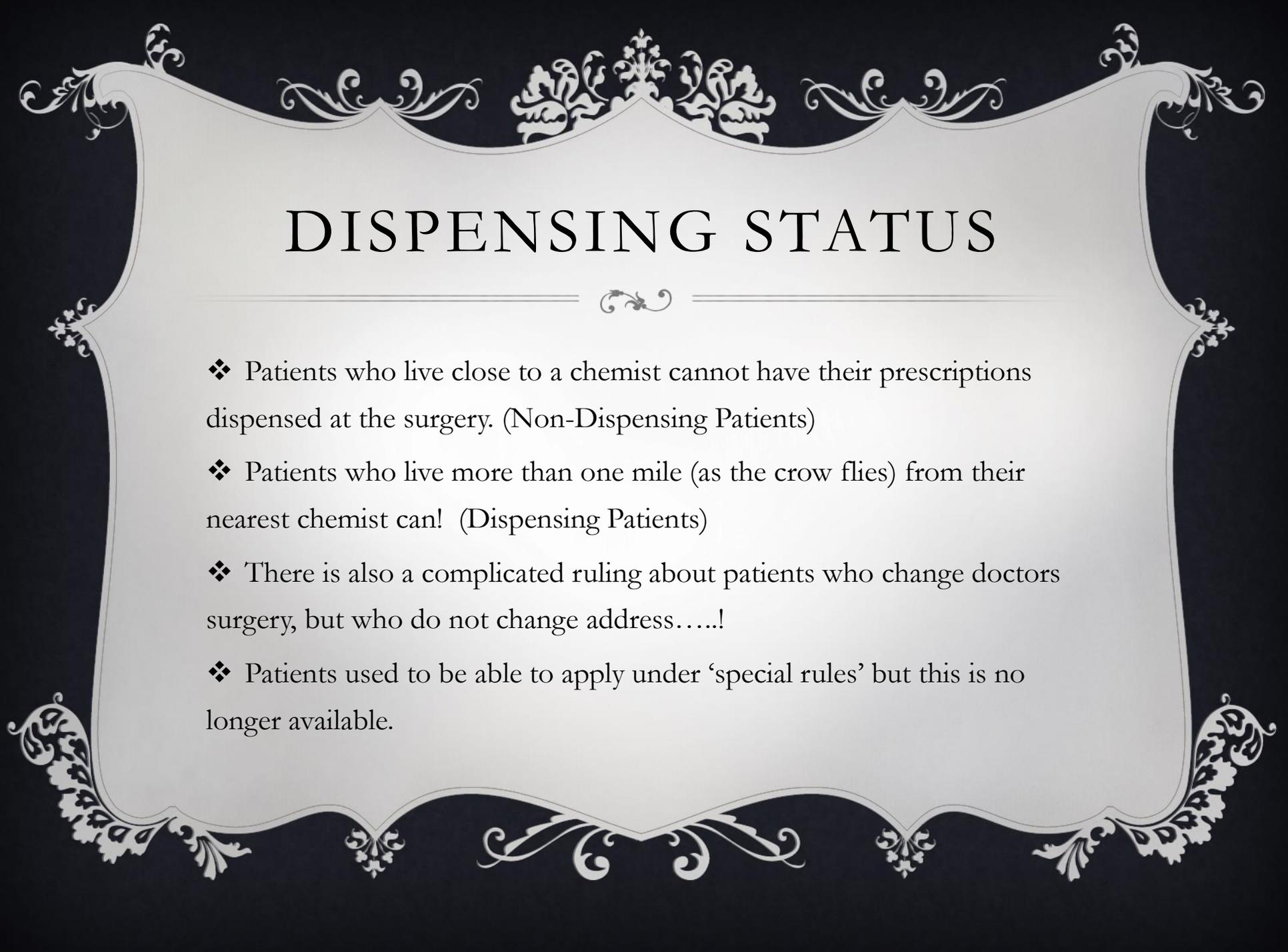


# DISPENSARY

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- ❖ We are one of a very small number of Practices in Cornwall who have a dispensary.
- ❖ This is because we are designated as a rural area.
- ❖ A dispensary is different to a chemist
- ❖ The rulings about who we can and cannot dispense for, are outside of our control and can be quite difficult to explain!



# DISPENSING STATUS

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- ❖ Patients who live close to a chemist cannot have their prescriptions dispensed at the surgery. (Non-Dispensing Patients)
- ❖ Patients who live more than one mile (as the crow flies) from their nearest chemist can! (Dispensing Patients)
- ❖ There is also a complicated ruling about patients who change doctors surgery, but who do not change address.....!
- ❖ Patients used to be able to apply under 'special rules' but this is no longer available.

# THE ROLES OF DISPENSER

- ❖ **Processor** - receives the medication requests, issues medication and puts queries to the GP. Prompts patients to attend for routine checks as advised by their doctor.
- ❖ **Front Desk** – dealing with patients face-to-face, receiving medication requests and queries; handing out dispensed medication and non-dispensing prescriptions.
- ❖ **Telephone** - receives requests for medication and handles queries from both patients and other healthcare professionals.
- ❖ **Dispensing** - we aim to have at least one Dispenser who is constantly dispensing prescriptions.

# THE ROLES OF DISPENSER

- ❖ **Dosette Boxes** - dispensing a weeks supply of medication into one sealable tray. We have a lot of patients on these; they are prepared on a weekly basis.
- ❖ **Administration** – paperwork and administrative tasks, audits and record keeping. Keeping up to date with all the latest guidelines.
- ❖ **End of Month Submission** – all the prescriptions have to be counted and submitted with the relevant forms to the Prescription Pricing Authority.
- ❖ **Management** – ensuring the smooth-running of the department. Sonia Roganovic is the Dispensary Supervisor.

# THE ROLES OF DISPENSER

- ❖ **Electronic Tasks** – medication queries and tasks are circulated between colleagues electronically, ensuring information is accurately and safely updated on patients records, for instance after discharge from hospital.
- ❖ **Delivery to Patients** - we offer a twice weekly delivery service for patients; this is mainly for housebound patients. There are also three rural delivery points.

# PRESCRIPTION REQUESTS

- ❖ A request for medication can be made in many different ways, which include-
- 1). In person, at the front desk of dispensary
  - 2). By putting a slip in at the post boxes located on the outside of the building and in the foyer. Boxes are emptied four times a day.
  - 3). By email via either The Waiting Room system or [marazion.dispensary@nhs.net](mailto:marazion.dispensary@nhs.net)
  - 4). By fax – 01736 719909
  - 5). By telephone where you speak to a trained member of dispensary staff

## ON THE DAY PRESCRIPTIONS

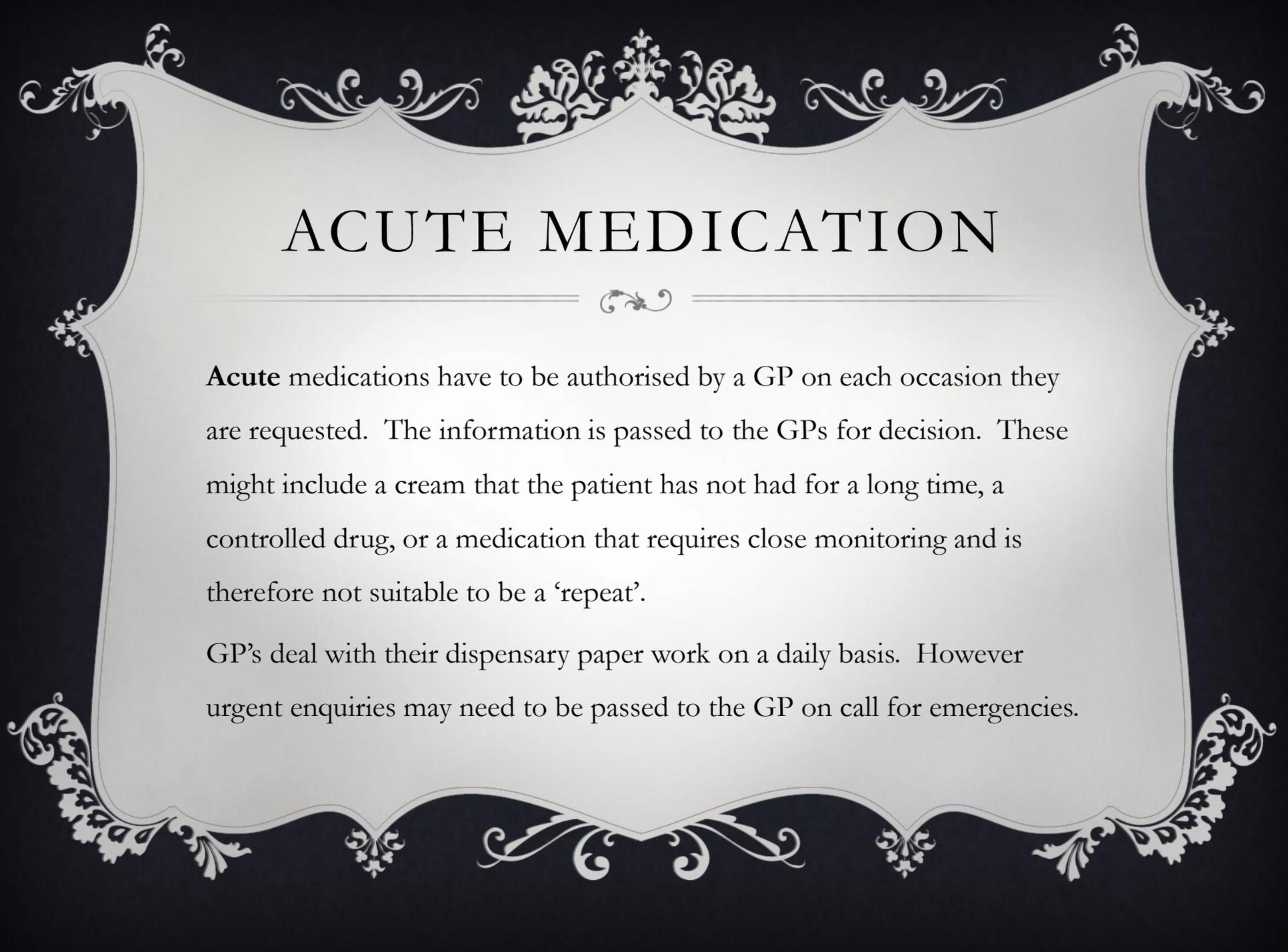
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- ❖ A dispensing patient is given a prescription by GP as a result of a telephone consultation/ face to face consultation. This can be dispensed straight away if the medication is in stock. If it is not in stock it will be ordered ready for the next delivery.
- ❖ A non-dispensing prescription will be signed by the GP, for the patient to take to a chemist of their choice.

# REPEAT MEDICATION

There are two types of medication **Repeat** and **Acute**

Repeats are regular medications. The GPs will have reviewed the individual patient and decided for how many months the patient should receive the medication before they wish to review the patient's medication again. The dispensing staff can issue the medication on a monthly basis for the set number of months. When this period is due to expire, the patient is brought to the attention of the doctor. The doctor will check that the patient is suitable to continue the medication and has attended for any relevant check ups or tests; this is called a 'medication review'.



# ACUTE MEDICATION

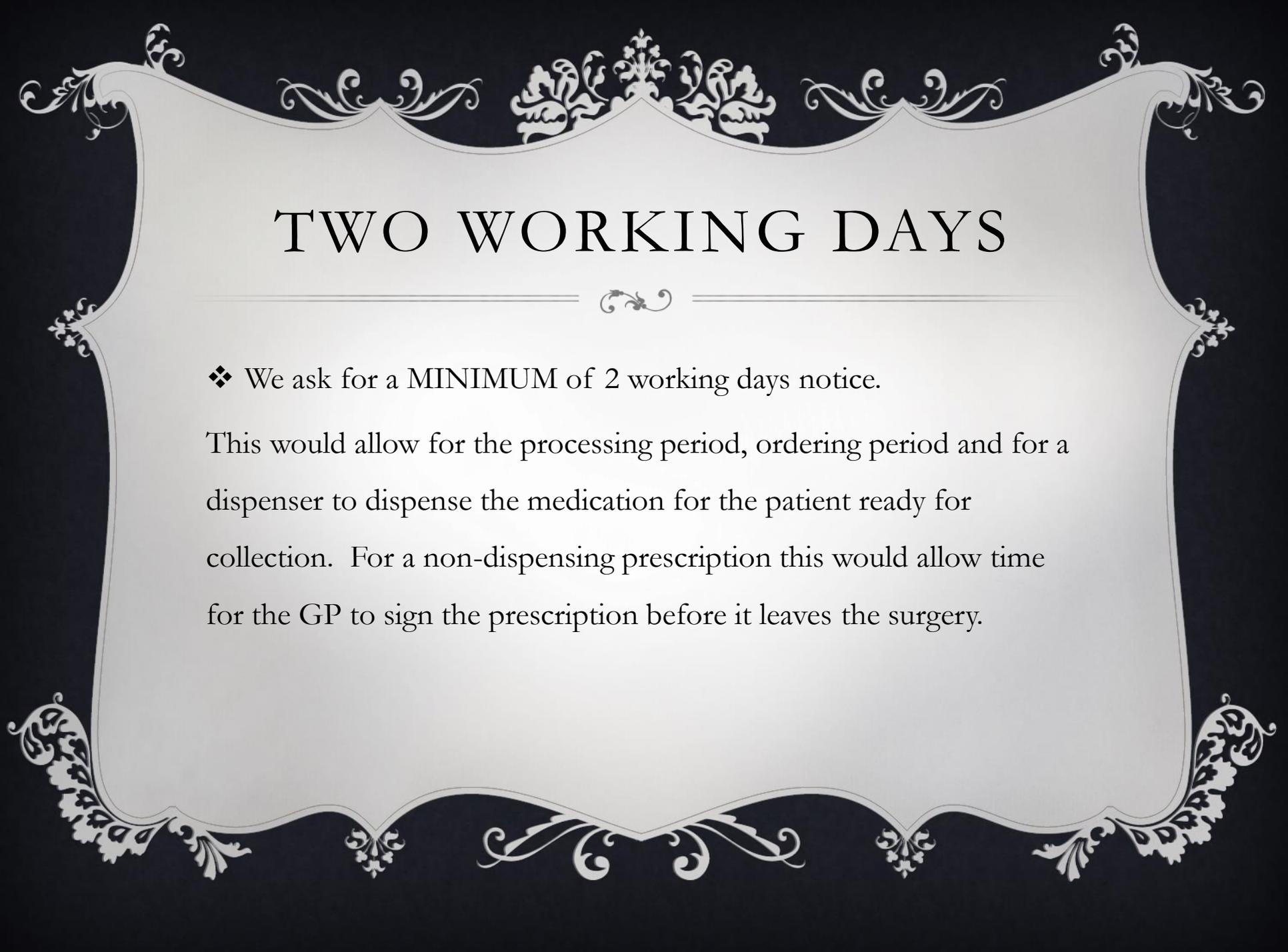
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**Acute** medications have to be authorised by a GP on each occasion they are requested. The information is passed to the GPs for decision. These might include a cream that the patient has not had for a long time, a controlled drug, or a medication that requires close monitoring and is therefore not suitable to be a 'repeat'.

GP's deal with their dispensary paper work on a daily basis. However urgent enquiries may need to be passed to the GP on call for emergencies.

# MEDICATION SUPPLIERS

- ❖ Once the medication request has been issued by a dispenser it is then checked against the original request to ensure no items have been missed.
- ❖ The medication can then be ordered, we use three wholesalers as not all medications can be supplied from one alone. We have twice daily deliveries from all three to ensure the medication arrives in the dispensary in a timely fashion.
- ❖ There are unfortunately some occasions where the item is not obtainable from any of our suppliers due to manufacturers issues- in this case we would organise a signed prescription for the patient to source from a chemist. A chemist may have the item in stock as they hold larger volumes of stock or use a different supplier.

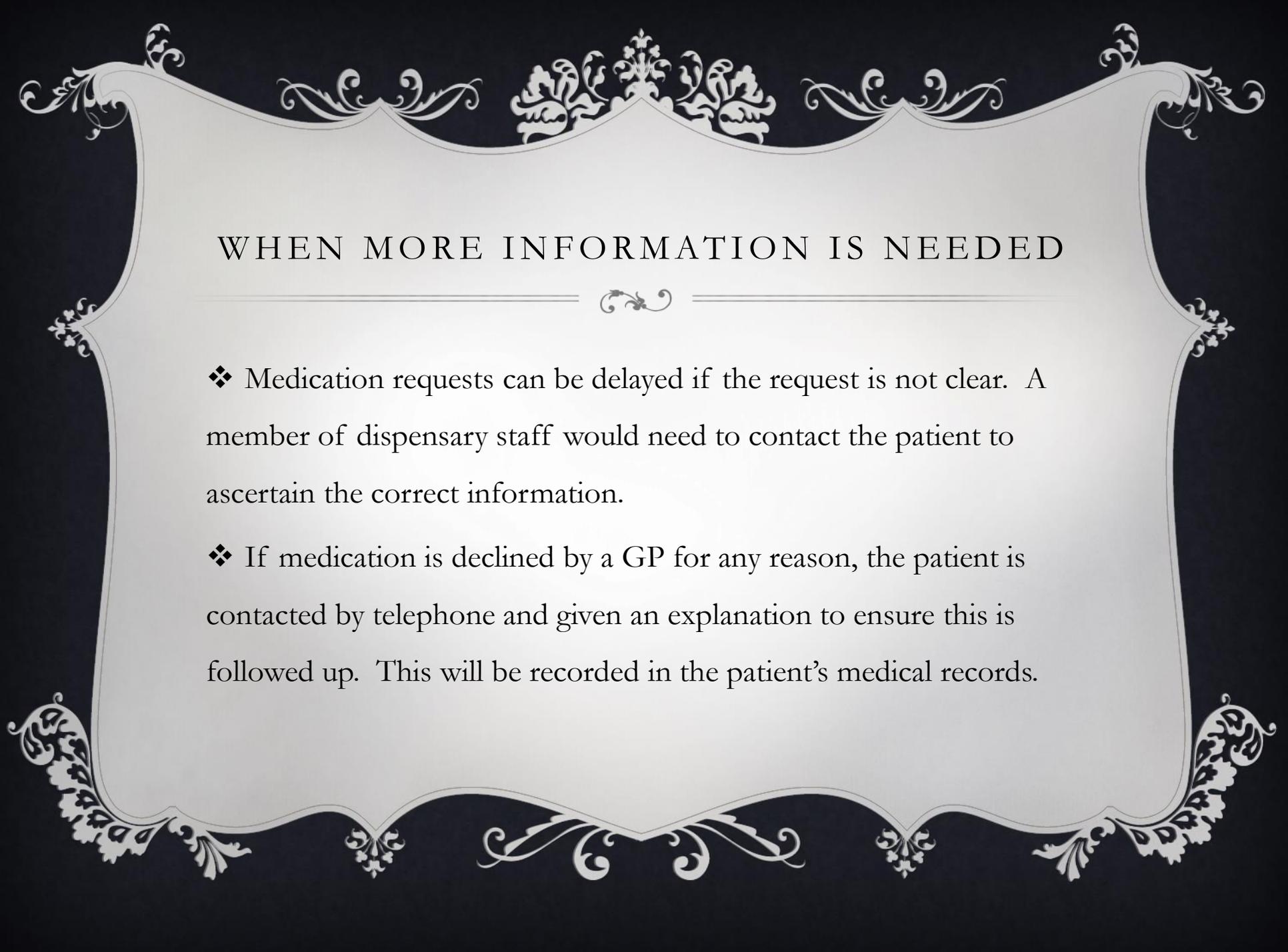


# TWO WORKING DAYS

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❖ We ask for a MINIMUM of 2 working days notice.

This would allow for the processing period, ordering period and for a dispenser to dispense the medication for the patient ready for collection. For a non-dispensing prescription this would allow time for the GP to sign the prescription before it leaves the surgery.



## WHEN MORE INFORMATION IS NEEDED

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- ❖ Medication requests can be delayed if the request is not clear. A member of dispensary staff would need to contact the patient to ascertain the correct information.
- ❖ If medication is declined by a GP for any reason, the patient is contacted by telephone and given an explanation to ensure this is followed up. This will be recorded in the patient's medical records.



# SHORT NOTICE REQUESTS

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❖ Sometimes a patient genuinely forgets to request medication and run out. Although for the individual patient this may be rare, for a Practice of this size it unfortunately this happens quite often.

❖ In these instances patients often require medication at very short notice.

# SHORT NOTICE REQUESTS

- ❖ We may ask a patient to come back between 5pm-6pm that day- this would hopefully allow for all the paperwork to be dealt with, but sometimes if the GPs are very busy in surgery this can take longer.
- ❖ This also impacts on usual dispensing; the patients who have allowed 48hours for their requests can have a delay, as their request is being pushed back by urgent requests.
- ❖ Understandably this can cause additional stress to both staff and patients.

# TEMPORARY RESIDENTS

- ❖ Patients who are in the area on holiday often forget to bring their medication or have not brought enough medication last their trip.
- ❖ The dispenser would need to contact the temporary resident's usual GP surgery to ask for clarification of information; this can be time-consuming and is often not straight-forward.
- ❖ Sometimes depending on the nature drug the patient will need to see a GP to discuss it further.

# PRESCRIPTION READY!

- ❖ Dispensing patient - Once a prescription has been dispensed it is put on the shelves awaiting collection. We store medication for up to two months.
- ❖ Non-Dispensing patient - Once a prescription has been signed by a GP it is put in the box in dispensary for the patient to collect. Alternatively we can send it to a chemist of the patient's choice.



## PRESCRIPTION NOT COLLECTED

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- ❖ If medication is not collected after two months, a dispenser will contact the patient to ask why.
- ❖ If it is no longer required the prescription is removed and an entry is made in the patient's medical records to say that it was not collected. This is good record keeping , helping to keep track of patients medication and prescribing quantities.