

## **Downland Practice Monthly Prescribing Statement: (for website)**

At our dispensing practice, we are dedicated to providing high-quality care while ensuring the responsible use of NHS resources. As part of this commitment, and following the advice of the Medicine Optimisations Team (part of the Integrated Care Board), we typically prescribe medications on a monthly basis. This policy is designed to achieve several important goals:

1. **Patient Safety** : By prescribing one month at a time, we can closely monitor your treatment and make timely adjustments if necessary, ensuring that you receive the most appropriate care.
2. **Cost Efficiency** : Prescribing monthly helps to reduce unnecessary costs to the NHS by minimising medication wastage. This approach ensures that resources are used effectively, benefiting all patients.
3. **Supply and Demand Management** : With ongoing challenges in medication supply, prescribing monthly allows us to better manage stock levels and ensure that medications are available when you need them.
4. **Reducing Wastage** : One of the main reasons this approach is encouraged is to minimise waste caused by medication changes or over-ordering. By limiting prescriptions to one month, we can help prevent the accumulation of unused medications, which can lead to wastage and environmental concerns.
5. **Equitability**: To ensure fairness, we treat all patients equally by adhering to a consistent prescribing policy. This means extended prescriptions are only considered in exceptional circumstances, ensuring that all patients receive equitable care.

There may be occasions when prescribers are asked to provide longer scripts, such as for holiday cover. In agreeing to these requests, we will need to ensure the next prescription is not issued until it is due, as this will impact the prescribing budget and increase the risk of medication abuse or overuse. You can find more information on Guidance for Travelling Abroad from the ICB here: [BOB ICB Primary Care Guidance for Travelling Abroad.pdf](#)

We understand that some patients may have experienced different prescribing practices in the past. Previous surgeries may have offered longer prescriptions due to

varying policies or patient needs. However, as a dispensing practice, we have a unique responsibility to balance patient care with the efficient management of NHS resources.

We recognise that there may be exceptional circumstances where a longer supply is needed. In such cases, please complete the **Downland Practice Extended Prescription Request Form** and a clinician will consider your individual needs and make a decision based on clinical judgement.

Thank you for your understanding and cooperation in helping us provide the best possible care while supporting the sustainability of NHS resources.

## **Downland Practice Prescription Duration Policy (To give patient)**

### **Purpose:**

The purpose of this policy is to outline the criteria and process for requesting more than one month of prescriptions at a time, ensuring patient safety, cost efficiency, effective resource management and equitability.

To ensure fairness, all patients are treated equally, and extended prescriptions are only considered for those with exceptional needs. If a patient believes their circumstances are significantly different from others suggesting they would gain greater benefit from an extended prescription, they may request consideration for this through the below form.

### **Downland Practice Extended Prescription Request Form**

Please complete this form if you believe you have a need for an extended prescription duration beyond the standard one-month supply. This will help us assess your request in line with our prescription duration policy.

#### **Patient Information:**

- Full Name: \_\_\_\_\_
- Date of Birth: \_\_\_\_\_
- Contact Number: \_\_\_\_\_
- Address: \_\_\_\_\_

#### **Section 1: One-Off Request**

##### **1. Reason for One-Off Request:**

- Please describe the reason for your one-off request for an extended prescription duration (e.g., travel, special occasion):

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#### **Section 2: Long-Term Request**

##### **1. Exceptional Circumstances:**

- Please describe the exceptional circumstances that you believe warrant a long-term extended prescription duration:

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## 2. Clinical Situation:

- Explain how your clinical situation differs significantly from others with the same condition, and why you believe you would gain greater benefit from a long-term extended prescription:
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## 3. Supporting Information:

- Provide any additional information or documentation that supports your long-term request:
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### Declaration:

I confirm that the information provided is accurate and true to the best of my knowledge. I understand that this request will be assessed based on the practice's prescription duration policy and that extended prescriptions are only granted in exceptional circumstances.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for completing this form. Our team will review your application and contact you regarding the outcome of your request within 4 weeks.

**Policy Statement: (SOP)**

At Downland Practice, we are committed to delivering high-quality care while responsibly managing NHS resources. In alignment with the guidance from the Medicine Optimisations Team (part of the ICB), we generally prescribe medications on a monthly basis. This approach supports patient safety, cost efficiency, supply and demand management, reduction of medication wastage, and equitability among patients.

**Eligibility Criteria for Extended Prescriptions:**

1. **Patient Safety:** Extended prescriptions may be considered if the patient's treatment is stable, and there is no anticipated need for frequent adjustments.
2. **Exceptional Circumstances:** Situations such as extended travel or holidays may warrant a longer prescription. Patients must provide relevant details to support their request.
3. **Clinical Judgement:** The decision to issue an extended prescription will be based on the healthcare provider's clinical judgement, considering the patient's individual needs and circumstances.
4. **Equitability:** To ensure fairness, all patients are treated equally, and extended prescriptions are only considered for those with exceptional needs. We cannot provide extended prescriptions to one patient unless there is a justifiable reason that applies consistently to others as well.

**Process for Requesting Extended Prescriptions:**

1. **Patient Request:** Patients seeking an extended prescription put into writing their request and exceptional circumstances with justification as to why they need extended prescriptions. Further information or evidence may be required.
2. **Dispensary Assessment:** For one off requests, considering patient safety, medication stability, and any exceptional circumstances this can be approved by a pharmacy technician. Note on the medication screen with reason, date and initials eg 2 month holiday prescription approved – ER17.7.25
3. **Clinical Assessment:** For long term requests, send PN to GP and put the patient's form in their tray. GP to assess exceptional circumstances, patient safety and medication stability. If approved, the extended prescription will be documented in medication screen with a reason, date and initials of the approving GP eg 2 monthly prescriptions approved (works away) – SW17.7.25

**Exceptions and Considerations:**

- Previous prescribing practices at other surgeries may differ; however, as a dispensing practice, we have a responsibility to balance patient care with efficient NHS resource management.
- Patients are encouraged to refer to the BOB ICB Primary Care Guidance for Travelling Abroad for more information on managing prescriptions during travel.

**Conclusion:**

We appreciate your understanding and cooperation in adhering to this policy, which helps us provide the best possible care while supporting the sustainability of NHS resources.