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Dear Colleague

**Re: Prescribing periodicity – collaborative working between prescribers and community pharmacists and care providers**

We write to encourage continued collaboration at a local level between prescribers and community pharmacists to determine:-

- a) the appropriate support necessary for the patients to optimise medicines adherence (via the Medicines Assessment Tool<sup>1</sup>) and
- b) the most appropriate periodicity of the prescription.

Both dispensing contractors and GPs have a duty to take necessary and reasonable steps to assist those patients that qualify under the Equality Act 2010 (EA) to comply with taking their medicines. To help identify appropriate support for patients qualifying under the EA, Sheffield health and social care partners developed the, previously mentioned, Medicines Assessment Tool. **The use of this tool together with inter-professional interpretation will help to identify any necessary support for the patient.**

There are many intervention options that may help qualifying patients to take their medicines as prescribed and each case should be considered independently, e.g. MAR charts, reminder charts, non-child lock containers, large print labels, Monitored Dosage Systems (MDS). Note that the Sheffield Medication Policy<sup>2</sup> (the management of medicines in social care in Sheffield) identifies bottle and boxes as the primary packaging for medication which acknowledges, amongst other factors, the well documented safety issues associated with MDS. Environmental factors of single use Monitored Dosage Systems may also have an impact on shared decision making. However, an unplanned withdrawal from MDS could potentially increase the risk of errors.

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<sup>1</sup> Medicines Assessment Form -

<http://www.intranet.sheffieldccg.nhs.uk/Downloads/Medicines%20Management/PatientAssessmentForm.pdf>

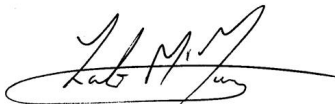
<sup>2</sup> Sheffield Medication Policy <https://www.sheffield.gov.uk/content/dam/sheffield/docs/disability-and-mental-health/resources-for-professionals-care-providers/sheffield-medication-policy-april-2019.pdf>

Although work is currently being undertaken to identify long term solutions to a number of issues involving patients receiving health and social care support, the current pandemic has placed extra pressures on the system. Health and social care providers should be mutually aware of issues faced by each other. **Pharmacists, GPs and social care providers are encouraged to work together to agree on a locally shared approach to requests for medicines assessments, MDS and weekly prescriptions** See overleaf examples of weekly prescriptions may be appropriate. If such prescribing is deemed appropriate then the prescriber may wish to consider Repeat Dispensing (EPS or by FP10) to reduce workload.

Yours faithfully,



Dr Andrew McGinty:  
Clinical Director: Sheffield Clinical Commissioning Group



Dr Zak McMurray  
Medical Director: Sheffield Clinical Commissioning Group



Dr David Savage:  
Secretary: Sheffield Local Medical Committee



David Russell  
Chair: Community Pharmacy Sheffield



Simon Richards:  
Head of Quality and Safeguarding: Sheffield City Council

**Examples of when prescribing or dispensing medicines may require these to be done at shorter intervals, such as weekly.**

- The stability of the medicines may only be guaranteed for short periods of time outside of the manufacturer's original packaging
- The patient is at risk of deliberate or accidental self-harm by taking all their medicines in one go
- There may be risk to the patient or others (for example, young children or animals) from having a large quantity of medicines in the home
- The patient may require a change in either dose and/or the medicines which they are taking (once the MDS has been dispensed, new medicines should not be added, nor unwanted medicines removed)
- The patient who may be regularly admitted into hospital possibly resulting in changes to the medicines