

Private Controlled Drugs Prescriptions and Dental Prescribing

1. Background

The Shipman Inquiry concluded that there were shortcomings in the systems used for the safe management of controlled drugs and consequently made a number of recommendations to improve their management. The Government's response to the Inquiry's 4th report "Safer Management of Controlled Drugs" agreed that arrangements should be introduced to record and monitor information on private prescribing and dispensing of controlled drugs. A number of changes are therefore being implemented to the way in which controlled drugs are prescribed and dispensed. The changes came into force on 1st April 2006 and subject to Parliamentary approval, will be given statutory backing by amendments to the Misuse of Drugs Regulations in early summer.

The key changes are:

- Introduction of special forms (FP10PCD) for any private prescription of schedule 2 and 3 controlled drugs (CDs) dispensed by community pharmacists.
- A new requirement for patients or other persons collecting medicines on their behalf to sign for them (this will also affect NHS prescriptions for controlled drugs). Where the prescription is for a schedule 2 controlled drug proof of identity should also be asked for by the pharmacist.
- Prescriptions for schedule 2, 3 and 4 controlled drugs will be valid for 28 days (previously this was 91 days)
- Strong recommendation that prescriptions for schedule 2, 3 and 4 controlled drugs is limited to a quantity necessary for up to 30 days clinical need. Where it is considered there is a clinical need to prescribe for more than 30 days, the clinical reason for this should be recorded in the patient records.
- The Misuse of Drugs Regulations (MDR) apply in England Wales and Scotland. Northern Ireland make their own regulations which mirror the MDR. However, the arrangements for implementation may differ in each country. Dentists should check with the relevant authority how the changes are being taken forward.

2. Key changes for private controlled drugs (CDs) prescribers

- a) As detailed above dedicated prescription forms will be used for non-NHS prescribing of schedule 2 and 3 controlled drugs (FP10PCD). In England, these forms will be provided by the registered PCT (see (c) below).

Community pharmacists will only be able to dispense private prescriptions for CDs on form FP10PCD. Where possible the patients' NHS

number should be included. Although this is recommended good practice at this stage, it is likely to become mandatory in due course in order that individuals' usage of CDs can be monitored. Prescriptions for controlled drugs may be computer generated. Amendments to the Misuse of Drugs Regulations 2001 that came into force at the end of last year allow all details on prescriptions for CDs, except for the prescriber's signature to be computer generated.

- b) The Prescription Pricing Division of the NHS Business Services Authority will allocate unique code for private dental prescriptions to each PCT. There are different arrangements for doctors to reflect the difference in the potential volume of prescribing.
- c) Each private CD prescriber will be assigned to a designated local NHS Primary Care Trust (PCT). This will generally be the one in whose geographic area the prescriber is registered or where most of the prescribing takes place.
- d) Pharmacists will send private prescription forms (FP10PCD) to the NHS BSA Prescriptions Pricing Division (PPD) on a monthly basis for analysis. PCTs will be responsible for monitoring private prescribers use of schedule 2 and 3 CDs and will use information from PPD for this purpose. This data will be provided using a system that mirrors the ePACT system. The Healthcare Commission will provide external assurance of all aspects of the new arrangements, including the systems set up by PCTs to ensure the safe management of CDs by all healthcare providers operating in their local area.

Therefore in future dentists who wish to prescribe schedule 2 and 3 controlled drugs under private arrangements will need to ensure that their local PCT is aware they issue private prescriptions for this purpose. The PCT will then request the NHS BSA Prescription Pricing Division to allocate a unique identifier code to the PCT and will arrange for prescription forms to be printed and issued. The cost of the forms will be invoiced by the PCT to the dentist (or their employer), however, it is not anticipated this will be significant.

Further guidance on private controlled drugs prescriptions and changes to the prescribing and dispensing of controlled drugs can be found on the Department of Health website at: www.dh.gov.uk/controlleddrug (Gateway reference 6212). A list of schedule 2, 3 and 4 controlled drugs is detailed in the guidance.