NHSGGC Safe and Secure Handling of Medicines	
Guidance Section 12	
Supply of medicines for patients to take away from hospital	
Approved by: ADTC Safer Use of Medicines Committee	November 23
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The term "Medicine Prescription Form" is used to describe electronic or paper documents used in NHSGGC to instruct and document medicine administration e.g. Hospital Electronic Prescribing and Medicine Administration (HEPMA) record; GGC approved paper-based kardexes etc.

12.1 General principles

12.1.1 Inpatients will routinely be provided with at least 7 days supply of all required medicines when they are discharged from hospital. This may be either via medicines dispensed at the point of or prior to discharge and / or ongoing use of Patients Own Drugs (PODs) brought in to hospital and / or the issue of Patient Packs. When a short course of treatment is required e.g. reducing course of steroids / short courses of antibiotics, the quantity of medicine required for the complete course will be provided, where appropriate.

12.1.2 An authorised prescriber must generate a GGC approved prescription / Immediate Discharge Letter (IDL) for all currently prescribed medicines on discharge from hospital.

12.1.3 Patients attending out-patient clinics will usually have changes in their medication / new medication initiated by their GP. Please refer to GGC Guidance (hosted on the GGC Medicines site) - "Supply of medicines following specialist service review or clinic appointments." Link **here**

12.1.4 All medicines issued to patients to take away must be labelled to comply with legal requirements with:

- Name of patient.
- Name of medicine.
- Strength.
- Dosage instructions.
- Hospital name.
- Date dispensed.

12.1.5 The patient / carer must be provided with verbal and written information about their medicines, e.g. patient information leaflet, as required.

12.1.6 A copy of the IDL / Prescription must be appropriately retained in relevant records (electronic or paper).

12.1.7 Staff should refer to relevant eGuides for electronic prescribing systems e.g. for the Clinical Portal-based IDL system please access guidance held on the eHealth section of Staffnet - link **here**.

12.2 Patient Packs

12.2.1 Certain wards / departments (e.g. A&E units, short-stay surgical units) may keep a small supply of pre-labelled medicines that can be issued to patients on discharge – these supplies are termed 'Patient Packs'.

12.2.2 Medicines that can be supplied as Patient Packs must be agreed by the Lead Clinician and Lead Clinical Pharmacist for that area. Patient Packs will be supplied from pharmacy with agreed labels / instructions attached.

12.2.3 Any medicine supplied as a Patient Pack must be appropriately prescribed for discharge e.g. on an electronic IDL. Local approved procedures must be followed. A separate local record of stock supplied should be kept in the ward / department.

12.2.4 Where medicines are issued to the patient directly from a ward or department using a Patient Pack, the Assigned Nurse / Midwife or Manager in Charge must ensure that medicines are issued only by staff that he or she has authorised, and that authorised staff are trained and competent in the processes involved in issuing medicines to patients and the checking procedures required.

12.3 Issuing discharge medication to patients

12.3.1 On receipt of the discharge medication at ward / department level, nursing or pharmacy staff must check that what has been prescribed in the IDL / prescription is in line with the current Medicine Prescription Form for that patient (e.g. via HEPMA) as the dose of certain medicines may be altered up until the point of discharge or may be discontinued.

12.3.2 If any discrepancy is found whilst checking the IDL / Prescription against the Medicine Prescription Form the prescriber must be contacted so that necessary amendments can be made. Discrepancies may be intentional but should be confirmed and documented in the patient's notes.

12.3.3 If a Medicine Prescription Form has been changed after the patient's IDL / Prescription has been dispensed, a new IDL / Prescription must be written. The originally dispensed medication must be returned to pharmacy staff for amendment (if appropriate).

12.3.4 Nursing or pharmacy staff must also check the accuracy of the drugs supplied by pharmacy against the IDL / Prescription before issuing to the patient or patients representative.

12.3.5 Check that the following details are on the IDL / Prescription:

- Patient's name.
- Patient's address.
- CHI number
- Ward or department.
- Prescriber name.

12.3.6 Check that the patient name and CHI on the IDL / Prescription matches the patient's name band and, if possible, get the patient to verbally confirm their name (or use other locally agreed means of confirming identity).

12.3.7 Check the following information on the label for each item against the IDL/ prescription:

- Medicine name and medicine supplied.
- Strength.
- Form.
- Dose.
- Quantity of tablets, liquid, etc.
- Frequency.
- Length of course, where applicable.
- Instructions for administration, where applicable.
- The patient's name.
- Check expiry date (if applicable) on medicines.

12.3.8 If the label instructions are different from the directions on the IDL / Prescription, contact pharmacy staff to arrange amendment of the medicine labels.

12.3.9 Ensure that at least a 7-day supply of each medicine is provided unless a longer or shorter course of treatment is appropriate, e.g. post-op pain relief.

12.3.10 Discharge medication will be explained to the patient, or, when appropriate, to the carer, prior to discharge.

12.3.11 When issuing an IDL / Prescription to a patient, staff must ensure this is carried out appropriately to ensure information is communicated with the patient's primary care team. In the case of the Clinical portal-based IDL system specific guidance must be followed to ensure the IDL pathway is completed at discharge to ensure an electronic copy of the IDL is issued to the primary care team. (Guidance is available on the eHealth Staffnet pages) – link **here**.

12.3.12 Patients should receive a copy of their IDL / Prescription on discharge, whether or not they require discharge medication.

12.3.13 If a patient refuses to wait for their discharge medication and does not return to collect their medication on the day of discharge, this should be documented in medical notes and the Lead for the team looking after the patient advised. The patient's General Practitioner (GP) surgery should be contacted by

telephone by the ward staff if an urgent prescription is required and appropriate information shared to ensure ongoing safe care.

12.3.14 Non-issued discharge prescription medications should be returned to pharmacy.

Controlled Drugs : Additional Requirements

12.3.15 All CDs issued to patients on IDL / Discharge prescriptions must be recorded in the Ward Controlled Drugs Register or the Controlled Drug Register for Patients Own Drugs and Discharge Prescriptions if this is in use - guidance on use of this is located at the front of each register. (If the Ward Controlled Drug register is used the entry must be made under "Controlled drugs on discharge prescription – Out". The entry must include

- the date of issue
- the name, form, strength and quantity of each CD issued
- the signature of the person making the issue
- the signature of a witness
- the patient's name).

12.3.16 When issuing Schedule 2 CDs to patients or their representatives on wards the nurse / midwife or pharmacist should ascertain to whom they are issuing the medicine and obtain a signature from that person on the IDL / Prescription itself. In addition a record should be made in the Controlled Drug Register for Patients Own Drugs and Discharge Prescriptions or the Ward Controlled Drugs Register of who the medication was issued to.

12.3.17 If any non-issued discharge prescription medication contains CDs, pharmacy must be contacted to arrange disposal. (The CD component must be stored safely and securely in the CD cupboard at all times, suitably marked to ensure it is not inadvertently mixed with ward CD stock / other discharge CD medication etc.).