NHS
Leicestershire Partnership
NHS Trust

Secure Handling and Storage of Prescription Stationery Policy

This policy has been developed to ensure the security of prescription forms against theft and abuse and details action to be taken for the reporting of any loss or theft of prescription stationery.

Key Words:	Prescription Forms; Security; Pharmacy Services Work Instruction; FP10; Authorised Prescribers; FP10SS
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Name of Author:	Andrew Moonesinghe
Name of responsible Committee:	Medication Risk Reduction Group
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Target audience:	All LPT Staff
Type of Policy	Clinical ✓	Non Clinical
Which Relevant CQC Fundamental Standards?	Regulation 15 Regulation 17	

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Version Control and Summary of Changes

Version number	Date	Comments (description change and amendments)
Version 1.1	24/05/2012	Contribution list updated / Results of monitoring to Divisions – statement removed (section 9)
Version 1.2	02/04/2015	6: Who can write prescriptions 7.3: Destruction and Disposal Appendix F: Incident Response Appendix G: Key responsibilities in incident investigation Appendix H + I: Prescription Log Sheet
Version 1.3	20/10/2015	4.7 - Transporting and Taking Prescription Stationery Home 4.8 - Posting of Completed Prescriptions Reformat in line with LPT Policy
Version 2.0	12/02/2020	General Review in light of new documentation from NHSCFN 4.9 Lost or Stolen Prescription Forms 4.11 Duplicate and spoiled prescriptions 9. References and Bibliography Appendix I – Useful contacts

For further information contact:

Head of Pharmacy
0116 295 3709

Pharmacy Services Manager
0116 295 8999

Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policy documents that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. It takes into account the provisions of the Equality Act 2010 and promotes equal opportunities for all. This document has been assessed to ensure that no one receives less favourable treatment on the protected characteristics of their age, disability, sex (gender), gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity.

Due Regard

LPT will ensure that Due regard for equality is taken and as such will undertake an analysis of equality (assessment of impact) on existing and new policies in line with the Equality Act 2010. This process will help to ensure that:

- Strategies, policies and services are free from discrimination;
- LPT complies with current equality legislation;
- Due regard is given to equality in decision making and subsequent processes;
- Opportunities for promoting equality are identified.

Please refer to due regard assessment (Appendix I) of this policy.

Definitions that apply to this Policy

Prescription Forms (Manual FP10HNC)	Hand-written prescriptions uniquely numbered pre-printed stationery for GP's and Hospitals. Issued in pads of 50 forms. (Green)
Prescription Forms (FP10P)	Hand-written prescriptions uniquely numbered pre-printed stationery for Non-medical prescribers. Issued in pads of 50 forms. (Lilac)
Authorised Prescribers	Registered medical or non-medical practitioners working within the Trust.
Authorised Specialties	Those specialist departments registered to receive FP10 prescription forms.
CDAO	Controlled Drugs Accountable Officer
Ulysses	Electronic Reporting Form (Safeguard).
LCFS	Local Counter Fraud Specialist.
LSMS	Local Security Management Specialist.
NHSCFA	NHS Counter Fraud Authority
Prescriptions Forms (Electronic FP10ss)	Blank prescriptions for use with the Trusts electronic prescribing system, issued in packs of 100 forms.
Specialty Code	Code used to identify a specific prescriber or specialty.
NMP	Non-Medical Prescribers.
Due Regard	Having due regard for advancing equality involves: •Removing or minimising disadvantages suffered by people due to their protected characteristics. •Taking steps to meet the needs of people from protected groups where these are different from the needs of other people. • Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

QUICK REFERENCE GUIDE

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For quick reference the guide below is a summary of actions required. This does not negate the need for the document author and others involved in the process to be aware of and follow the detail of this policy.

1. Prescription forms are a valuable asset and must remain protected and secure at all times.

2. Clear records will be kept on prescription stationery stock that is received and distributed. This will allow a full audit trail in the event of any security incident.

3. Stocks of prescription stationery should be kept in a secure room with access limited to those responsible for prescription forms.

4. Distribution of prescription forms within the Trust should be discreet.

5. Clear records will be kept of the prescriptions ordered by and issued to authorised prescribers.

6. Prescribers are responsible for the security of prescription forms once issued to them and should ensure they are locked away securely when not in use.

7. In the event of a loss or suspected theft or misuse of a prescription form, the prescriber or staff member should notify the Head of Pharmacy or Pharmacy Services Manager and complete an Electronic Incident Reporting form on Ulysses, as soon as possible.

8. In the event of an incident, the Head of Pharmacy will conduct an investigation and/or request advice from the Local Counter Fraud Service, and/or notify the police, as appropriate.

1. Purpose of the Policy

This policy has been developed to ensure the security of prescription forms against theft and abuse and details action to be taken for the reporting of any loss or theft of prescription stationery. It has been formulated in response to the NHS Counter Fraud Authority document "Management and control of prescription forms".

This Policy applies to all staff throughout Leicestershire Partnership NHS Trust, particularly to all authorised prescribing and dispensing staff, and those non-prescribing staff who manage or administer prescription forms across all areas and at all levels within the Trust

2. Summary and Key Points

This policy is for prescribers of medicines (including contractors, locum staff, NMP's in all settings, pharmacists, dispensing staff, heads of Pharmacy, staff who manage and administer prescription forms in the NHS, accountable officers for controlled drugs, Local Security Management Specialists (LSMSs) and Local Counter Fraud Specialists (LCFSs).

The policy document defines the precautions necessary to reduce the risk of prescription loss, theft and fraud in services provided by the Trust and describes the process that must be followed when such an incident occurs. The document discusses a range of measures available to prevent and tackle the problem of prescription form theft and misuse at a local level and outlines the recommended action for when an incident occurs.

3. Introduction

Prescription forms are a valuable NHS asset and must remain protected and secure at all times. Systems must be in place to ensure records are kept of prescription forms issued and that those in receipt of prescription forms are aware of their responsibility to ensure the security of prescription forms in their possession.

It is important that all staff are vigilant and adhere to the guidance contained within this policy.

4. Process

4.1 Prescription Stationery Stock Control

Clear and unambiguous records will be kept of prescription stationery stock that is received and distributed (suitable form is attached in Appendix F & G). Records will be kept of

- What has been received, i.e. quantities, specialty code, serial numbers
- Where items are being stored
- When prescription forms are issued to a specialty or individual prescribers

- Details of who issued the forms
- To whom prescriptions forms were issued, along with the serial numbers of the forms
- The serial numbers of any unused prescription forms that have been returned
- Details of prescription forms that have been destroyed (all records relating to FP10 prescription issues must be kept for 3 years from the date of the last record made)

4.2 Ordering

All new specialties and NMP's will be registered on the NHS Business Services Authority (NHSBSA) database before prescription forms can be ordered. The Pharmacy Services Manager or NMP Lead is responsible for registering new specialties or individual prescribers with the NHSBSA.

The Pharmacy Services Manager / NMP lead and approved deputies are responsible for ordering stocks of prescription forms on behalf of the Trust and are registered with the NHSBSA for this purpose. The process for ordering prescription forms is detailed within local procedures. For security reasons the procedure will not be available within this policy.

New prescription forms will not be issued to prescribers who have left or moved employment or who have been suspended from prescribing duties. All unused prescription forms relating to the prescriber should be returned to the person who issued them, who should in turn update their records. The prescription forms should then be destroyed. This process should be witnessed by an independent member of staff and the record updated accordingly.

4.3 Delivery

The contracted secure printer for the NHSBSA will deliver the prescription forms to the Trust. The forms will be in a sealed package which has to be signed for. Deliveries of prescription forms should be stored securely and must not be left in a public place or an area where there is unsupervised access.

The process for delivery of prescription forms to hospital pharmacies, hospital outpatient clinics, health centres and community hospitals, etc., is detailed within local procedures. For security reasons the procedure will not be available within this policy.

4.4 Receipt and Storage

A record will be kept of stocks of prescription forms that are delivered and stored. These records will be kept at each stage of the delivery process, e.g. by Pharmacy, by specialty and by prescriber. The following information should be recorded on a stock control system:

- Date of delivery
- Name of the person accepting delivery
- What has been received (quantity and serial numbers)

- Where it is being stored
- When it was issued
- Who issued the prescription forms
- To whom they were issued
- The number of prescriptions issued
- Details of the prescriber
- Serial numbers of the prescriptions issued

Records of serial numbers received and issued should be retained for at least three years.

Stocks of prescription stationery should be kept in a secure room with access limited to those responsible for prescriptions forms, where a secure room is unavailable a safe or locked cupboard with restricted access may be used. Keys or access rights should be controlled and an authorisation procedure implemented that includes details of those allowed access. This should allow a full audit trail in the event of any security incident.

Prescribers are responsible for the security of prescription forms once issued to them and should ensure that they are locked away securely when not in use and never left unattended. Prescribers should keep a record of the serial numbers of prescription forms issued to them. This will help to identify any prescriptions lost or stolen overnight.

4.5 Distribution

Hospital Prescribers

Distribution of prescription forms within the hospital should be discreet. The container used to distribute the forms should be sealed to prevent access during transit. Those awaiting collection should be stored securely and not left in a public place or in an area where there is unsupervised access. When distributing forms between hospital sites, the driver should sign for the consignment.

On distribution within and between hospitals and their sites a designated person must sign for the prescription forms received from delivery staff and record the serial numbers.

Community Based Prescribers

Upon receipt of the prescription forms, a process must be in place to record the relevant details of prescriptions received. The prescriber will ensure there is a system in place at their base to store prescription forms securely promptly upon delivery.

The process for delivery of prescription forms to hospital pharmacies, hospital outpatient clinics, health centres and community hospitals, etc., is detailed within local procedures. For security reasons the procedure will not be available within this policy.

4.6 Security of Computer Systems

Single sheet prescription forms (FP10ss) for use with the ePrescribing system should be afforded the same security controls as prescription pads. It must be recognised that these forms are acceptable in handwritten form, so it is not acceptable to leave the forms in printer trays when not in use.

All staff who have access to the ePrescribing computer system should have an individual password. Passwords should only be known to the individuals concerned and systems will prompt users to change them on a regular basis. Staff should not share their passwords with their colleagues as prescribing information will be attributed to the individual whose details are printed at the bottom of the FP10ss form. Each member of staff is liable for all drugs ordered in their name.

4.7 Transporting and Taking Prescription Stationery Home

Teams that work across many sites, visit patients at home or cover a large geographical area will need to transport prescriptions and may need to take them home at the end of the day. Prescribers working in the community should take suitable precautions to prevent the loss or theft of prescriptions, such as ensuring prescription pads are carried in an unidentifiable lockable carrying case and out of site in a vehicle (e.g. glove compartment or boot). Only a small number of prescriptions should be transported based on that days' anticipated workload to minimise loss. Staff should also record the serial numbers of prescriptions they are carrying. As far as possible, prescriptions should not be left unattended in a vehicle. If they have to be left unattended in a vehicle, they should be stored out of sight, in a locked compartment (e.g. glove compartment or boot) and the vehicle should be fitted with an alarm. At the end of the shift, prescriptions can be taken home if necessary. The prescriptions should be stored in a safe and secure location in the house. Prescriptions must not be left in the car overnight.

4.8 Posting of Completed Prescriptions

Ideally, prescriptions are handed to the patient/parent at the time of their appointment. However it can be necessary to provide a prescription to a patient without the need to see them. For the convenience of our patients, it is possible to post completed prescriptions. When posting is necessary, the following should be considered to ensure that this process is done as safely as possible:

1.   Post the prescription to a nominated Pharmacy rather than the patient's home. This will reduce the risk of delivery error and someone else in the household intercepting the prescription.

2.   Ensure that the address (of the pharmacy) is correct.

3.   It is considered good practice to post prescriptions for controlled drugs via recorded delivery as its' journey can be tracked.

4.   Patients/parents should be notified once the prescription is posted, so they have a rough time frame as to when they can collect it.

4.9 Lost or Stolen Prescription Forms

In the event of a loss or suspected theft of a prescription form, the person discovering the incident should initiate a search and try to establish the circumstances under which the forms have gone missing. If the missing forms cannot be accounted for, the matter should be reported to the Head of Pharmacy (or deputy) for further action.

In the event that a patient reports a lost prescription form, the incident should be recorded in the Ulysses reporting system. Before a replacement prescription is provided, a risk assessment should be undertaken to ensure that the reported loss is genuine and not an attempt to commit prescription fraud; a risk assessment should include consideration by the Team Leader / Team Manager and prescriber of the circumstances surrounding the loss of the prescription and what support the patient might require to arrange dispensing of the prescription.

As this prescription is likely to be signed by an authorised signatory with all the relevant data, the loss should be treated like all other prescription losses and local escalation and reporting procedures followed.

4.10 Reporting Missing/Lost/Stolen or Suspected Misuse of NHS Prescription Forms

In the event of a loss or suspected theft or misuse of a prescription form, the prescriber or staff member should notify the Head of Pharmacy as soon as possible. In the event of such an incident, the Head of Pharmacy will conduct an investigation and/or request advice from the LCFS and/or notify the police, as appropriate.

The member of staff reporting the incident should complete the Missing/loss/stolen NHS Prescription notification form (Appendix D) and an incident form on Ulysses. Any theft or loss report must include the following details:

- Date and time of loss/theft
- Date and time of reporting loss/theft
- Place where loss/theft occurred
- Type of prescription stationery
- Serial numbers
- Quantity
- Details of the LSMS to whom the incident has been reported.

Prescription losses should be shared with the local intelligence network. Staff may also report any concerns about fraud to the confidential NHS Fraud and Corruption Reporting Line on 0800 028 4060.

4.11 Duplicate and spoiled prescriptions

If a duplicate prescription is accidentally written or if an error is made in a prescription, best practice is for the prescriber to do one of the following:

- Put a line through the script and write 'spoiled' on the form , signed and dated by the prescriber

- Cross out the error, sign and date the error, then write the correct information

There may be reasons for a prescription to be deemed spoilt other than error. Rather than just destroying or returning these forms, best practice is to retain them securely for local auditing purposes for a short period before destruction.

4.11 Destruction and Disposal

New prescription forms should not be issued to prescribers who have left or moved employment or who have been suspended from prescribing duties, and all unused prescription forms relating to that prescriber should be recovered and securely destroyed. The person responsible for the recovery and destruction of forms should be in a position of suitable seniority. This will require liaison within NHS England and subsequently NHS Business Services Authority (NHSBSA) to ensure the suppliers of the forms are aware of prescriber changes. In the case of personalised forms, suppliers will reject order details that do not match the data supplied by the NHSBSA.

Prescription forms which are no longer in use should be securely destroyed (e.g. by shredding) before being put into confidential waste, with appropriate records kept. The person who destroys the forms should make a record of the serial number of the forms destroyed. Best practice would be to retain these prescription forms for local auditing purposes for a short period prior to destruction. The destruction of the forms should be witnessed by another member of staff. Records of forms destroyed should be kept for at least 3 years.

4.12 Alerts

The NHSCFA operates a national alert system to notify LSMS and LCFS networks of potential threats, individuals, organisations, requests for information from the police, security breaches and risks of fraud and corruption. The local LSMS/LCFS officer(s) should inform the Head of Pharmacy of any potential incident who, in turn, will cascade the information to Departmental Pharmacy Managers for transmission within the pharmacy organisation.

4.13 Incident Investigation

The level of investigation of missing, lost or stolen prescription forms will depend on the nature of the incident. In the event of an incident, the Head of Pharmacy will conduct an investigation and/or request advice from the LCFS, and/or notify the police, as appropriate.

Any incident must be recorded, investigated and communicated in accordance with the organisation's Incident Reporting Policy.

5. Duties within the Organisation

- The Head of Pharmacy is responsible for overseeing the ordering, receipt, storage, transfer, access to and overall security of prescription stationery.
- The Pharmacy Services Manager will act as a deputy or second point of contact in the absence of the Head of Pharmacy and will be responsible for keeping an account of the prescriptions ordered and issued to authorised specialties.
- NMP Leads will be responsible for ensuring that suitable arrangements are in place for keeping an account of the prescription forms ordered and issued in their Division.
- Operational Managers / Service Leads will be responsible for ensuring that records are kept of the prescriptions ordered by and issued to authorised prescribers.
- Authorised prescribers will be responsible for the safe keeping of prescription forms in their possession at all times, and for maintaining records of prescription form serial numbers issued to them.
- All staff are responsible for ensuring the security of prescription forms and the reporting of incidents to the Head of Pharmacy or their deputy.

5.1 The following people can write NHS prescriptions:

- General practitioners/doctors/GP locums

- Hospital prescribers – can prescribe medication to be dispensed in community pharmacies. Prescribers working in hospital outpatient substance misuse clinics can also issue special instalment NHS prescriptions.

- Non Medical Prescribers - For further detail regarding the professional groups to which this applies and their authority to prescribe, refer to the Trust Non-Medical Prescribing Policy.

6. Training needs

There is no training requirement identified within this policy however, staff are responsible for reading and acting within the Secure Handling and Storage of Prescription Stationery Policy. The staff carrying out the duties as described in this policy must have agreed with their manager that they are competent to do so. Staff and their managers have a joint responsibility to highlight any training needs which may arise in the implementation of this policy.

7. Monitoring Compliance and Effectiveness

The effectiveness in practice of all procedural documents should be routinely monitored (audited) to ensure the document objectives are being achieved. The

process for how the monitoring will be performed should be included in the procedural document.

The details of the monitoring are:

1. For the Pharmacy Service – The Head of Pharmacy will monitor compliance with the policy as part of the Medicines Management Audit process. Results of audits will be reported annually to the Medicines Management Committee and escalated where required.

2. For all Departments or individual prescribers using FP10HNC / FP10SS / FP10P Prescription Forms – Departments should implement their own methods for monitoring compliance and maintaining an audit trail for those forms issued to them.

Ref	Minimum Requirements	Evidence for Self-assessment	Process for Monitoring	Responsible Individual / Group	Frequency of monitoring
1	Prescribing / Use within Trust guidelines.	-	Review usage	Medicines Management Group (MMC)	Annually
2	Review records management.	-	Review usage	Local	Local

8. Standard Performance Indicators

No performance indicators are attached to this policy.

9. References and Bibliography

1. NHS Counter Fraud Agency Management and control of prescription forms: A guide for prescribers and health organisations March 2018 Version 1.0

2. NMP Policy - Leicestershire Partnership Trust (2014) Non –Medical Prescribing Policy.

3. NHS Counter Fraud Agency Management and control of prescription forms. Aide-mémoire for practice managers

4. NHS Counter Fraud Agency Management and control of prescribers. Aide-mémoire for prescribers

Appendix A - The NHS Constitution

The NHS will provide a universal service for all based on clinical need, not ability to pay. The NHS will provide a comprehensive range of services

Shape its services around the needs and preferences of individual patients, their families and their carers	X
Respond to different needs of different sectors of the population	☐
Work continuously to improve quality services and to minimise errors	X
Support and value its staff	☐
Work together with others to ensure a seamless service for patients	X
Help keep people healthy and work to reduce health inequalities	X
Respect the confidentiality of individual patients and provide open access to information about services, treatment and performance	X

Appendix B - CONTRIBUTION LIST

Key individuals involved in developing the document

Name	Designation
Anthony Oxley	Head of Pharmacy
Andrew Moonesinghe	Pharmacy Services Manager
Zeibun Patel	Lead Pharmacist – Medicines Management Committee
Joanne Charles	Divisional Lead Pharmacist – Community Health Services
Tejas Khatau	Lead Pharmacist – FYPC

Circulated to the following individuals/groups for comments

Name	Designation
LPT Pharmacy Management Team	
LPT Medicines Management Group	
Patient Safety and Experience Group	

Appendix C - Missing/lost/stolen prescription form flowchart

Prescriber/ NHS staff discovers prescription forms are missing/lost/stolen.

Complete notification form and Incident Form.

Head of Pharmacy, Accountable officer for Controlled Drugs and Police notified as required.

Head of Pharmacy or Pharmacy Services Manager initiates local notification / alert process.

Head of Pharmacy or Pharmacy Services Manager reports the stolen/lost/missing prescription forms to the LSMS

LSMS initiates investigation as appropriate and sends the notification form to NHSCFA

NHSCFA database is updated with information of stolen/lost/missing prescription forms

Appendix D - Missing/lost/stolen NHS prescription form(s) notification form

Return this completed form by email to PharmacyManagementLPT@leics.nhs.uk

Organisation:	**Leicestershire Partnership NHS Trust (LPT)**
Date reported:	
Contact name:	
Contact address:	
Contact telephone number:	

The following numbered NHS prescriptions forms have been identified to us as lost or stolen:

Date of theft/loss	
Name of person reporting (GP, practice manager, nurse, trust pharmacist)	
Telephone number	

Full details of theft/loss (please fill in details below)

Include the following information:
• Date and time of loss/theft
• Date and time of reporting loss/theft
• Place where loss/theft occurred
• Type of prescription stationery
• Serial numbers
• Quantity
• Details of the LSMS or nominated security management specialist to whom the incident has been reported.

Details of doctor/department/dentist/nurse etc from whom prescription form(s) have been stolen or lost

Name	
Personal dispensing or identification code/number	
Address	

Serial number(s) lost or stolen

From ☐☐☐☐☐☐☐☐☐☐☐ To ☐☐☐☐☐☐☐☐☐☐☐

Details of NHS prescription form type lost or stolen (tick appropriate box)

Issue	Colour	Please indicate type lost/stolen
FP10NC	Green	
FP10HNC	Green	
FP10SS	Green	
FP10MDAS	Blue	
FP10HMDAS	Blue	
FP10MDASP	Blue	
FP10MDASS	Blue	
FP10PN	Lilac	
FP10CDF	Buff/pale yellow	
FP10SP	Lilac	
FP10P	Lilac	
FP10D	Yellow	
FP10PCDSS	Pink	
FP10PCDNC	Pink	

	Yes	No
Has this incident been reported to the police?		

Name and police station of investigating police officer (please fill in details below)

	Yes	No
Has an alert and warning been issued to all local pharmacies and GP surgeries within the area? (please tick box)		

Please give details of any ink change or security measures and the effective dates of these measures (please fill in details below)

Name:	
Position	
Signed:	
Date	

Appendix E - Incident Response

NATURE OF INCIDENT	WHO SHOULD BE CONTACTED?
• Discrepancy in prescription forms ordered and received.	Contact supplier Ask the driver to remain on-site while the supplier is contacted.
• Following enquiries with the supplier, if discrepancy in prescription forms ordered and received cannot be accounted for, and forms are still missing.	Notify the Head of Pharmacy or deputy with overall responsibility for prescription forms at the organisation, the CDAO, LSMS or nominated security management specialist and police as required. Report the matter using the organisation's incident reporting system (Ulysses). The matter must be reported as a security incident and an alert/warning circulated locally and/or nationally. Serial numbers of the missing forms must be submitted to the NHS Protect database using the appropriate notification form.
• If prescription forms are lost through negligence or by accident.	Notify the Head of Pharmacy or deputy, LSMS and police as required. Report the matter using the organisation's incident reporting system (Ulysses). The matter must be reported as a security incident and an alert/warning circulated locally and/or nationally. Serial numbers of the missing forms must be submitted to the NHSCFA using the attached notification form (Appendix D).
• If prescription forms are stolen.	Contact the police and report the matter using the organisation's incident reporting system (Ulysses). Notify the LSMS or nominated equivalent. The matter must be reported as a security incident and an alert/warning circulated locally and/or nationally. Serial numbers of the missing forms must be submitted to the NHSCFA using the attached notification form (Appendix D).
• If it is suspected that a presented prescription form is forged.	Check with Prescriber then, if appropriate, notify the, police and contact NHS Fraud and Corruption Reporting Line on 0800 028 40 60.
• If it is suspected that prescription forms are being misused.	Check with Prescriber then, if appropriate, contact NHS Fraud and Corruption Reporting Line on 0800 028 40 60; contact the police.

Appendix F - Prescription log sheet

Prescriptions HP / SS   **Prescriber / Team** _____

Orders Received

All records relating to FP10 prescription issues must be kept for 3 years from the date of the last record made

Date ordered	Ordered by (initials)	Method of order	Amount ordered	Date received	Amount received	Received by (initials)	Serial numbers	Stored by (initials)

Appendix G - Prescription log sheet

Prescriptions HP / SS   **Prescriber / Team** _____

Prescriptions Supplied

All records relating to FP10 prescription issues must be kept for 3 years from the date of the last record made

Date Issued	Taken by (initials)	Given to: prescriber/ location	Quantity	Serial numbers	Comments

Appendix H – Useful contacts

NHS Counter Fraud Authority
Fourth Floor, Skipton House,
80 London Road,
London, SE1 6LH

Telephone: 020 7895 4500

Email: prevention@nhscfa.gsi.gov.uk

Web: https://cfa.nhs.uk/

NHS Fraud and Corruption Reporting Line
Tel: 0800 028 40 60
Online: https://cfa.nhs.uk/reportfraud

Print Contract Management Team
Julie Hickling
Email: juliehickling@nhs.net

Prescription Form Suppliers
Xerox (UK) Ltd

Customer service
Telephone: 0300 123 0849

Email: For any queries relating to orders placed or deliveries email nhsorders@Xerox.com

For any queries relating to invoices please contact NHSAR@Xerox.com

Primary Care Support England (PCSE)

pcse.enquiries@nhs.net

Telephone: 0333 014 2884

Appendix I – Due Regard Screening

Section 1	
Name of activity/proposal	Secure Handling and Storage of Prescription Stationery Policy
Date Screening commenced	12/02/2020
Directorate / Service carrying out the assessment	Enabling Services
Name and role of person undertaking this Due Regard (Equality Analysis)	Andrew Moonesinghe – Pharmacy Services Manager

Give an overview of the aims, objectives and purpose of the proposal:
AIMS: This policy has been developed to ensure the security of prescription forms against theft and abuse and details action to be taken for the reporting of any loss or theft of prescription stationery. It has been formulated in response to the NHS Business Services Authority's Protect document "Security of Prescription Forms Guidance".   This Policy applies to all staff throughout Leicestershire Partnership NHS Trust, particularly to all authorised prescribing and dispensing staff, and those non-prescribing staff who manage or administer prescription forms across all areas and at all levels within the Trust
OBJECTIVES: This policy is for prescribers of medicines (including contractors, locum staff, NMP's in all settings, pharmacists, dispensing staff, heads of Pharmacy, staff who manage and administer prescription forms in the NHS, accountable officers for controlled drugs, Local Security Management Specialists (LSMSs) and Local Counter Fraud Specialists (LCFSs). The policy document defines the precautions necessary to reduce the risk of prescription loss, theft and fraud in services provided by the Trust and describes the process that must be followed when such an incident occurs. The document discusses a range of measures available to prevent and tackle the problem of prescription form theft and misuse at a local level and outlines the recommended action for when an incident occurs.

Section 2	
Protected Characteristic	**If the proposal/s have a positive or negative impact please give brief details**

Age	
Disability	
Gender reassignment	
Marriage & Civil Partnership	This policy is equality neutral as all staff are required to follow the procedures irrespective of their protected characteristic.
Pregnancy & Maternity	
Race	
Religion and Belief	
Sex	
Sexual Orientation	
Other equality groups?	

Section 3

Does this activity propose major changes in terms of scale or significance for LPT? For example, is there a clear indication that, although the proposal is minor it is likely to have a major affect for people from an equality group/s? Please <u>tick</u> appropriate box below.

Yes		No ✓	
High risk: Complete a full EIA starting click [here](#) to proceed to Part B		Low risk: Go to Section 4.	✓

Section 4

If this proposal is low risk please give evidence or justification for how you reached this decision:

This policy is equality neutral as it refers to specific processes which all employees relating to outpatient prescription activity need to follow, irrespective of their protected characteristic.

Signed by reviewer/assessor	Andrew Moonesinghe	**Date**	12/02/2020

Sign off that this proposal is low risk and does not require a full Equality Analysis

Head of Service Signed	Anthony Oxley	**Date**	22/02/2020

Appendix J – Data Privacy Impact Assessment Screening

Data Privacy impact assessment (DPIAs) are a tool which can help organisations identify the most effective way to comply with their data protection obligations and meet Individual's expectations of privacy. **The following screening questions will help the Trust determine if there are any privacy issues associated with the implementation of the Policy. Answering 'yes' to any of these questions is an indication that a DPIA may be a useful exercise. An explanation for the answers will assist with the determination as to whether a full DPIA is required which will require senior management support, at this stage the Head of Data Privacy must be involved.**	

Name of Document:	**Secure Handling and Storage of Prescription Stationery Policy**	
Completed by:	**Andrew Moonesinghe**	
Job title	**Pharmacy Services Manager**	**Date 25th February 2020**

Screening Questions	Yes / No	Explanatory Note
1. Will the process described in the document involve the collection of new information about individuals? This is information in excess of what is required to carry out the process described within the document.	No	
2. Will the process described in the document compel individuals to provide information about them? This is information in excess of what is required to carry out the process described within the document.	No	
3. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information as part of the process described in this document?	No	
4. Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?	No	
5. Does the process outlined in this document involve the use of new technology which might be perceived as being privacy intrusive? For example, the use of biometrics.	No	
6. Will the process outlined in this document result in decisions being made or action taken against individuals in ways which can have a significant impact on them?	No	
7. As part of the process outlined in this document, is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For examples, health records, criminal records or other information that people would consider to be particularly private.	No	
8. Will the process require you to contact individuals in ways which they may find intrusive?	No	
If the answer to any of these questions is 'Yes' please contact the Data Privacy Team via Lpt-dataprivacy@leicspart.secure.nhs.uk **In this case, ratification of a procedural document will not take place until review by the Head of Data Privacy.**		
Data Privacy approval name:		
Date of approval		