

Policy Title

Self-Prescribing by Medical Staff Policy

Issue Date	Review Date	Version
June 2020	June 2023 (or sooner if changes are required)	1.0

Purpose

The purpose of this policy is to provide clear boundaries on self-prescribing by medical staff in conjunction with 'Good Practice in Prescribing Medicines' (2013) .

Who should read this document?

Trust wide
All prescribing staff (Including medical and non-medical)
All pharmacy staff (Including LloydsPharmacy)

Key messages

The self-prescribing by medical staff policy provides clear boundaries for prescribers and pharmacy staff in relation to the supply of medicines to anyone with whom the prescriber may have a close personal relationship.

Accountabilities

Owner	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director
Review	Medicines Governance Committee
Ratification	Medicines Governance Committee
Dissemination (Raising Awareness)	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director
Compliance	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director

Links to other policies and procedures

- Medicines Management Policy
- Refer to section 3.3 – Prescribing for Self/Family in the Medicines Management Policy at G:\DocumentLibrary\UHPT Trust Documents\Medicines Management – Pharmacy

Directive

Since, and in the light of, the Shipman Enquiry, the GMC published advice on Doctor's self-prescribing medication in its publication "Good Practice in Prescribing Medicines" (2013).

The advice says, 'Wherever possible you must avoid prescribing for yourself or anyone with whom you have a close personal relationship'.

Our pharmacy is inspected annually by the General Pharmaceutical Council and this issue is regularly raised by them.

Therefore, pharmacy staff **will not dispense** (including LloydsPharmacy) self-written prescriptions for doctors, their family members or pets. Medication should be prescribed by their GP.

Private prescriptions written by another clinician for the doctor or their family **will not** be supplied.

The policy above also applies to Non-Medical Prescribers.

Version History

1	June 2020	New policy to provide clear boundaries for prescribers and pharmacy staff in relation to the supply of medicines to anyone with whom the prescriber may have a close personal relationship.
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When using this document please ensure that the version you are using is the most up to date either by checking on the Trust Document Library or if the review date has passed, please contact the author.

Out of date policy documents must not be relied upon.

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available in the Document Library. Larger text, Braille and Audio versions can be made available upon request.

Core Information				
Document Title	Self-Prescribing for Medical Staff Policy			
Date Finalised	June 2020			
Dissemination Lead	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director			
Previous Documents				
Previous document in use?	No – New policy			
Action to retrieve old copies.	Not applicable			
Dissemination Plan				
Recipient(s)	When	How	Responsibility	Progress update
All prescribing staff (Including medical and non-medical)	June 2020	Vital Signs and Trust wide e-mail	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director	
All pharmacy staff (Including LloydsPharmacy)	June 2020	Vital Signs and Trust wide e-mail. Pharmacy meetings.	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director	

Review		
Title	Is the title clear and unambiguous?	
	Is it clear whether the document is a policy, procedure, protocol, framework, APN or SOP?	
	Does the style & format comply?	
Rationale	Are reasons for development of the document stated?	
Development Process	Is the method described in brief?	
	Are people involved in the development identified?	
	Has a reasonable attempt has been made to ensure relevant expertise has been used?	
	Is there evidence of consultation with stakeholders and users?	
Content	Is the objective of the document clear?	
	Is the target population clear and unambiguous?	
	Are the intended outcomes described?	
	Are the statements clear and unambiguous?	
Evidence Base	Is the type of evidence to support the document identified explicitly?	
	Are key references cited and in full?	
	Are supporting documents referenced?	
Approval	Does the document identify which committee/group will review it?	
	If appropriate have the joint Human Resources/staff side committee (or equivalent) approved the document?	
	Does the document identify which Executive Director will ratify it?	
Dissemination & Implementation	Is there an outline/plan to identify how this will be done?	
	Does the plan include the necessary training/support to ensure compliance?	
Document Control	Does the document identify where it will be held?	
	Have archiving arrangements for superseded documents been addressed?	
Monitoring Compliance & Effectiveness	Are there measurable standards or KPIs to support the monitoring of compliance with and effectiveness of the document?	
	Is there a plan to review or audit compliance with the document?	
Review Date	Is the review date identified?	
	Is the frequency of review identified? If so is it acceptable?	
Overall Responsibility	Is it clear who will be responsible for co-ordinating the dissemination, implementation and review of the document?	

Core Information		
Manager	Phil Hughes, Medical Director; Paul McArdle, Deputy Medical Director	
Directorate	Pharmacy	
Date	June 2020	
Title	Self-Prescribing by Medical Staff Policy	
What are the aims, objectives & projected outcomes?	The purpose of this policy is to provide clear boundaries for prescribers and pharmacy staff in relation to the supply of medicines to anyone with whom the prescriber may have a close personal relationship.	
Scope of the assessment		
See names and contributors on page one of the policy		
Does the document/service affect one group less or more favourably than another on the basis of:		
	Yes/ No	Rationale
Race	No	
Gender (Including transgender)	No	
Religion or belief	No	
Sexual orientation, to include heterosexual, lesbian, gay and bisexual people	No	
Age	No	
Disability – learning disabilities, physical disabilities, sensory impairment, and mental health issues	No	
Marriage and civil partnership	No	
Pregnancy and maternity	No	
Human rights	No	
If you have identified potential discrimination, are the exceptions valid, legal and/or justified?	N/A	
Involving and consulting stakeholders		
Internal involvement and consultation	The Medicines Governance Committee Medical Director Deputy Medical Director Interim Chief Pharmacist	
External involvement and consultation	No external consultation has been undertaken	