

Prescription direction

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‘Prescription direction’ occurs where a patient is being directed by their GP practice to a certain pharmacy to have their prescription dispensed. Patients have a free choice between any community pharmacy and in some cases, a GP dispensary. Actions by practices seeking to influence a patient’s choice of pharmacy can undermine relationships with patients, as well as damaging trust and cooperation between healthcare professionals. Financial arrangements between community pharmacies and GP practices should be transparent.

The British Medical Association and the Pharmaceutical Service Negotiating Committee agree that guidelines to ensure proper prescription practices should be followed. Providing advice that can be seen as prescription direction is against good practice. Whilst most of the following activities would be initiated by the practice, it is recognised that a pharmacy may often be involved. Pharmacy owners and pharmacists are also strongly advised not to request or become complicit in such activities.

The following list illustrates activities to avoid in order to maintain good practice:

- Providing a practice endorsement for a pharmacy
- Allowing a practice database to be used to facilitate the promotion of a pharmacy, or any other promotional activity
- Suggesting that the practice/GP/member of staff would like a patient to use a particular pharmacy
- Allowing a patient to believe that the level of care they receive from their medical practice could be influenced by their choice of pharmacy
- Recommending that the patient collects a prescription from a certain pharmacy which is not the pharmacy that the patient had chosen
- Manipulating the prescription management process in favour of a particular pharmacy, including, but not limited to, offering a pharmacy privileged access to prescriptions generated by the practice
- Failing to be equitable when liaising with pharmacies, by offering differing levels of cooperation such as for repeat prescriptions
- Ignoring a patient’s freely stated choice of pharmacy
- Misrepresenting a practice’s relationship with a pharmacy
- Showing a lack of candour when providing information about dispensing and pharmacies (including, for example, making unsubstantiated or misleading claims about a particular pharmacy)
- Failing to be transparent about a financial relationship between a practice and a pharmacy
- Any other practice, which is designed to unduly influence a patient’s choice of pharmacy

Where there is a financial link between a pharmacy and a medical practice, it is particularly important to ensure that appropriate procedures are in place to prevent prescription direction. A nominated partner and the superintendent pharmacist should oversee this, and ensure that everyone working in the pharmacy and medical practice is aware of their responsibilities.

If GP practices or pharmacies become aware of cases of prescription direction, there may be a role for LMCs and LPCs to intercede in the first instance to resolve a problem at a local level. They should be consulted prior to referral to regulators or contractual bodies, to establish whether the local contractor representatives could bring about a more swift resolution. If unable to resolve the issue on a local level, the relevant professional regulator and NHS contractual body should be informed.