**EXPLANATORY MEMORANDUM TO**

# THE NATIONAL HEALTH SERVICE (GENERAL MEDICAL SERVICES CONTRACTS) (PERSONAL MEDICAL SERVICES AGREEMENTS) AND (PHARMACEUTICAL SERVICES) (AMENDMENT) REGULATIONS 2005

**2005 No.28**

1. This explanatory memorandum has been prepared by the Department of Health and is laid before Parliament by Command of Her Majesty.

   This memorandum contains information for the Joint Committee on Statutory Instruments.

## 2. Description

2.1. This Statutory Instrument amends three sets of Regulations, changing the incorrect reference to "Leicester Primary Care Trust" to "Leicester City West Primary Care Trust", enabling the latter to operate repeatable prescribing and repeat dispensing.

2.2. The Statutory Instrument also amends the definition of "supplementary prescriber" in the National Health Service (Pharmaceutical Services) Regulations 1992 to rectify an error in that definition made by S.I. 2004/1771 and so make it clear that pharmacists may act as supplementary prescribers.

## 3. Matters of special interest to the Joint Committee on Statutory Instruments.

3.1. These Regulations breach the 21 day rule as they are to correct an error by which pharmacists have been inadvertently excluded from the definition of supplementary prescriber. It is believed that pharmacists will have been continuing to act as supplementary prescribers, as it was the intention that they do so, and therefore it is important that the situation is rectified as soon as possible.

3.2. As indicated in the headnote, the procedure for free issue has been applied. This is because the Regulations correct defects in the original Regulations. The amendments are necessary to make clear which of the two Primary Care Trusts in Leicester is eligible to operate repeatable prescribing and repeat dispensing, and to ensure that pharmacists are included in the definition of supplementary prescriber.

## 4. Legislative Background.

4.1. These Regulations amend the National Health Service (General Medical Services Contracts) Regulations 2004, the National Health Service (Personal Medical Services Agreements) Regulations 2004 and the National Health Service (Pharmaceutical Services) Regulations 1992 , changing the reference

to “Leicester Primary Care Trust” to “Leicester City West Primary Care Trust”.

4.2. The Regulations also amend the definition of “supplementary prescriber” in regulation 2(1) of the National Health Service (Pharmaceutical Services) Regulations 1992 to rectify an omission of detail in S.I. 2004/1771, which amended the 1992 Regulations.

**5. Extent.**

5.1. This instrument applies to England.

**6. European Convention on Human Rights**

6.1. Not applicable.

**7. Policy Background.**

7.1. Repeat dispensing means patients having medicines dispensed in several episodes rather than going back to their GP for a new prescription each time. The benefits of repeat dispensing include making it easier for patients with chronic conditions to obtain repeat prescriptions, speeding up services and relieving pressure on GP surgeries. It is also an opportunity to make better use of pharmacists’ skills by helping patients get the most out of their medicines and reducing waste.

7.2. In order to understand fully what effect the arrangements have on workloads, costs and income from prescription charges, the system is being introduced through a phased programme of pathfinder sites based in PCTs. The first wave of 32 PCTs went live in May 2003. The second wave extended the programme to 57 additional pathfinder sites.

7.3. This amendment will enable Leicester City West Primary Care Trust to operate repeat dispensing. This is a correction to statutory instruments 2004/291, 2004/627 and 2004/922 where Leicester City West Primary Care Trust was misnamed as Leicester Primary Care Trust.

7.4. In the definition of supplementary prescriber, SI 2004/1771 erroneously replaced the whole of paragraph (a) of that definition, rather than paragraph (a)(i), which it was intended to replace. This amendment will correct that error, making it clear that pharmacists may act as supplementary prescribers.

**8. Impact**

8.1. No regulatory impacts have been identified.

8.2. The impact on the public sector is to allow repeat dispensing within Leicester City West Primary Care Trust. This could save GPs the time they currently

spend filling out repeat prescriptions. It also has the potential to reduce medicines waste.

8.3. Leicester City West Primary Care Trust has received £7,000 to contribute to implementation of the arrangements. Repeat dispensing fees for community pharmacies are in the Drug Tariff and are funded centrally.

## 9. Contact

Ralph Mold at the Department of Health Tel: 020 79722818 or e-mail: Ralph.Mold@dh.gsi.gov.uk can answer any queries regarding the instrument.