

**Repeat Prescription Ordering Services****Repeat Prescription Ordering Services Steering Group (RPOSSG)****Terms of Reference****1. Purpose:**

To improve the Repeat Ordering Services across Luton CCG for patients, carers, GPs and Community Pharmacy by improving systems in GP practices and community pharmacies and educating patients

- The majority of repeat prescriptions should be ordered by patient or carer direct to their GP surgery.
- Special provisions will be made on an individual patient basis to those patients who have difficulty ordering their medicines with the current or new provisions.
- Identify where GP repeat management systems may be improved particularly with regard to safety, efficiency and patients' perspective.

**2. Background**

Following extensive engagement with stakeholders and patient groups, a decision was made at Luton Clinical Commissioning Committee, on behalf of its member practices, to stop the pharmacy repeat prescription ordering service in its current format but also to seize this opportunity to make all-round improvements to repeat medicines systems. The actions to enable changes will be led by the practices supported by the CCG.

These changes, of course, will need a lot of planning and the CCG will be working very closely with patients, the public, Healthwatch Luton and other stakeholders including the LPC and LMC to support practices with any necessary changes to current systems.

The CCG has also committed to further patient engagement particularly in order to identify those patients who may be potentially adversely affected by any changes but also those patients who find difficulty with current systems to order their medicines. The aim is to complete changes as quickly and as safely as possible in order to mitigate the current risks. A timeframe of 3 months is envisaged as realistic.

The CCG will provide GP practices with robust support during the changes and will ensure that all stakeholders are aware of changes made at a practice level and when and what to expect from these changes.

**3. Roles & Responsibilities**

The role of the RPOSSG is to:

- Provide strategic direction and leadership necessary to the process of systems change in order to improve the management of repeat medicines across Luton CCG.
- Provide assurance to the Luton CCG Executive Committee that changes to the current repeat medicine systems are safe, effective and deliver the overall strategic direction.

## ***Clinical Commissioning Group***

- Provide regular updates to the Executive and seek decisions that may be required from the Executive
- To ensure that changes to the current repeat medicines systems are made as quickly and as safely as possible and within an agreed timeframe.

The responsibilities of the RPOSSG are:

- Make arrangements for suitable governance relating to the process of change
- Oversee continuing engagement with groups of patients identified as maybe negatively impacted in stopping repeats being ordered from practices through community pharmacy
- Oversee the support to front line staff during the process of change
- Put in place processes to monitor the implementation of changes and agree timescales for evaluation.
- Put in place mechanisms and structures to support patients and contractors through the process of change. This will include a PALS contact number and Q&As anticipating frequently asked questions.
- Recommend and seek approval for any additional resources including financial support to practices e.g. mail outs to patients.

### **4. Membership**

#### Core Membership

The core membership of the Task and Finish Group is as follows:

- David Foord – Chair (Director of Quality & Clinical Governance Luton CCG)
- Dr Fiona Sim (Clinical Director Medicines Optimisation Luton CCG)
- Dr Ian Hill-Smith (Prescribing Lead Luton CCG & Chair of Luton Primary Care Prescribing Committee)
- Heidi Newton (Leavale Practice Manager)
- Richard A Jones (Head of Medicines Optimisation Luton CCG)
- Tess Dawoud (Assistant Head of Medicines Optimisation Luton CCG)
- Penny Fletcher/Marcel Berenblut (Communications Manager Luton CCG)
- Patient Public Representative (Healthwatch Luton to organise representation)
- Sam Patel (Vice chair Bedfordshire LPC)
- Dr Peter Graves Chief Executive Bedfordshire & Hertfordshire LMC
- Secretariat- Layla Vardy (Medicines Optimisation Co-ordinator)

Others to be invited as appropriate e.g. IT, Prescription Clerk (GP practice)

### **5. Frequency**

- The RPOSSG will meet on a monthly basis at minimum and meet more frequently at the Chair's discretion.

### **6. Quoracy**

Chair or Deputy Chair

Head or Assistant Head of Medicines Optimisation

1 GP

1 LPC Representative (Community Pharmacist)

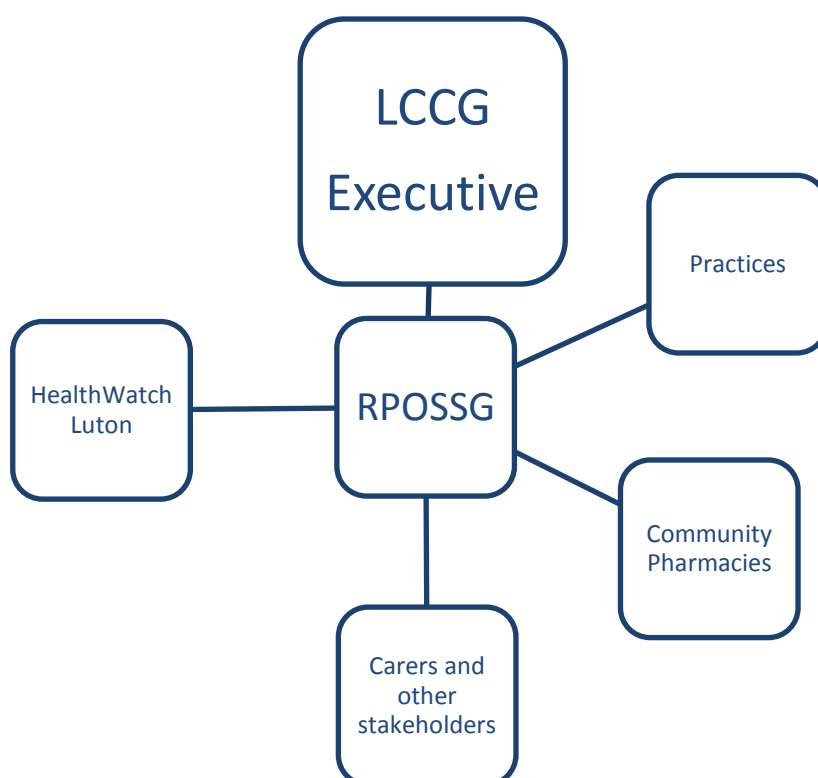
1x Patient Public Representative (Healthwatch Luton to organise representation)

## 7. Agenda & Papers

- The agenda and papers will be distributed by email to the group in advance of meetings through the Secretariat. This should be one week in advance for papers and minutes would be circulated one week after the meeting.
- Any actions taken will be recorded in the minutes and circulated to the group. Actions will be maintained in an action log to note all actions and signoff as completed.
- The Chair will be responsible for ensuring that the minutes of meetings, produced by the Secretariat are an accurate record of decisions taken and where appropriate that the views of individuals on the group have been taken into account.
- Minutes will be formally approved at a subsequent meeting or by email if deemed appropriate by the Chair.

## 8. Reporting Line

RPOSSG will report to the LCCG Executive Committee and provide progress update and feedback on any significant clinical issues to LCCC (Luton Clinical Commissioning Committee)



## 9. Declaration of Interests

Members of the group should declare any conflicts of interest at the beginning of each meeting