

9: Template Standard Operating Procedure for Reporting Controlled Drug Lost/Stolen/Missing/Forged Prescriptions

Objectives

To minimise the risk of prescription forms used illegally to obtain controlled drugs (CDs), as well as other medicines, either for illegitimate personal use or to sell on.

Ensure a standard alerting system is implemented when Incidents and risks are reported to the practice.

Ensure incidents are dealt with in accordance with NHS Protect guidance and NHS England Area Team requirements.

Scope

This SOP encompasses all incidents of missing or stolen prescriptions blank, printed or written for controlled drugs and incidents of forged prescriptions reported to the practice.

Responsibilities

All clinicians and Practice staff are responsible for the safe management and use of controlled drugs prescriptions.

The CD GP Lead and the practice designated person(s) must be informed of any incident involving lost/stolen/forged prescription and a report sent to the NHS England area team.

A named deputy should take over the duties if the primary nominated person is not available for more than 24 hours.

Process and Records

- 1. FP10, FP10MDA, FP10PCD (for private prescriptions) forms and electronic prescription tokens, FP10DT, are controlled stationery and must be kept secure to avoid diversion. Please refer to the <u>Management of Prescriptions Forms</u> for further guidance.
- 2. Lost/stolen controlled drug prescriptions should be reported to NHS England North (Lancashire and South Cumbria) using the CD alert form. (see embedded documents in appendix 2)
- 3. Completed form should be emailed to england.lancscontrolleddrugs@nhs.net within 24 hours.



- 4. Lost/stolen prescriptions of controlled drugs (CD) should also be reported to the **police** telephone **101** and get **a crime number**.
- 5. Record the loss on patient's records.
- If a replacement prescription is needed, the practice should NOT delete the previous issue but should reprint it and record reason. On EMIS Web system, a pop up text box will appear which allows the reason for the reprint to be recorded. This record will remain in the drug history.
- 7. **'Duplicate'** should be printed automatically in capital above the signature box. If unclear, write it on the script in indelible ink where it can be clearly seen.
- 8. If the original prescription is later found, ask for it to be returned to the practice; report to the police and area team; record in patients' notes and destroy the prescription as per practice protocol.
- 9. For incidents within practice, the matter should be recorded as a security incident on the practice's incident reporting system by the designated person and a Significant Event Analysis should be undertaken.
- 10. Prescriptions should be signed in a different colour ink for a period of time up to 2 months following a missing prescription incident.
- 11. Review practice protocol for security and audit trail for blank and completed prescriptions. Aide memoire, guidance and templates available from NHS Protect and CQC.

References

- NHS Counter Fraud Authority: Management and control of prescription forms A guide for prescribers and health organisations, March 2018. https://cfa.nhs.uk/resources/downloads/guidance/Management%20and%20control%20of%20prescription%20forms_v1.0%20March%202018.pdf
- 2. Aide Memoire for prescribers from https://www.nhsbsa.nhs.uk/sites/default/files/2017-03/Aide-memoire Prescribers.pdf



3. The Care Quality Commission (CQC) inspection criteria for prescription security. Accessed online on 25.10.2017 from https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-23-security-blank-computer-prescription-forms

Appendix 2: Missing/lost/stolen NHS prescription form(s) notification form

