



## MCA Training Made Easy

### MODULE 1

### Working in a Pharmacy

#### Learning objectives



#### After reading this module you will:

- Be able to assist in the sale of over-the-counter (OTC) medicines
- Know how to manage a request for an OTC medicine from a customer
- Be able to assist in the supply of OTC medicines
- Understand the responsibilities that come with working in a pharmacy
- Understand the way medicines are classified
- Be aware of the different types of medicine formulations available
- Understand the importance of knowing your pharmacy's Standard Operating Procedures
- Be confident in handling a prescription and in ensuring the right prescription medicines are given to the right patient

The Track and Train Medicines Counter Assistant Course is accredited by the General Pharmaceutical Council as providing the essential knowledge required to work in a pharmacy as a Medicines Counter Assistant.

#### PART 1: THE MEDICINE COUNTER

#### What is special about a pharmacy?

A pharmacy is a unique place to work because medicines are involved and the health and safety of people are at stake.

Because of this, the premises and the pharmacists and the pharmacy technicians that work in them are all regulated by the General Pharmaceutical Council (GPhC).

The GPhC is an independent regulator (similar to the British Medical Council that regulates doctors) that ensures everyone in the pharmacy works to the highest standards so that the health, safety and wellbeing of the public are maintained.

Working in a pharmacy is therefore not like working in any other shop. It's often the first place people will come to when they want advice about their minor ailments and where they drop off a prescription for more serious conditions. It's important that customers feel they are being cared for, at a time when they may not be feeling their best.

Of course, working in a pharmacy comes with added responsibilities – the incorrect advice on a medicine can cause serious side effects and handing out the wrong prescription medicine can be extremely dangerous.

#### Medicines counter

As a Medicines Counter Assistant (MCA), you will be mainly working on the medicine counter. Customers come in hoping that you're going to be able to help them, usually by recommending a medicine for them to take. You will have access to lots of excellent tried and tested medicines. Not all medicines will be suitable for everyone and some will have side effects. It is, therefore, really important to make sure that you take great care to recommend the right medicine for the right person.

#### Dispensary

The dispensary is the part of your pharmacy where prescriptions are prepared by qualified pharmacy technicians and pharmacists. Part of your role will be to take in and hand out prescriptions. Later you will learn some more about the Standard Operating Procedures

(SOPs) that say how this is done in your pharmacy.

#### Confidentiality

Your customer might feel nervous or embarrassed talking about his or her illness or symptoms. Remember what you might not find embarrassing, someone else will, so take care and always be discreet when talking to customers and suggest using the consulting room if appropriate.

Overall this means:

- Respecting and protecting the dignity and privacy of others
- Taking all reasonable steps to prevent accidental disclosure or unauthorised access to confidential information
- Ensuring that you do not disclose confidential information without consent

Patients have the right to expect that information you obtain about them is kept confidential and is used only for the purposes for which it was given. Maintaining a patient's confidentiality is fundamental to the partnership between yourself and the patient. A patient may be less likely to seek advice if they do not feel confident that their privacy is respected.

#### Confidential information includes:

- Personal details (including information that is not directly relevant to a patient's medical history)
- Information about a patient's medication (both prescribed and bought without a prescription)
- Other information about a patient's medical history, treatment or care

Patient confidentiality is really important. It is so important that your pharmacy will have a written policy (e.g. SOP) about it. You will meet SOPs on many aspects of work in the pharmacy.

You also have a legal responsibility under the Data Protection Act to maintain confidentiality of any records that you hold about a patient, whether they be on computer or on paper in the pharmacy.

#### Records

Pharmacies have to maintain records of which prescription drugs have been



**It is important to find out who the medicine is for. It might be for a child, pregnant woman or someone with other conditions, which means special considerations need to be made. Always ask!**

**Your role as an MCA is to help customers with minor health problems**

**Always ask the pharmacist if you are not sure about something – never guess**

dispensed to patients as part of what is called their 'duty of care' as outlined in the pharmacists' (and pharmacy technicians) professional rules, called the General Pharmaceutical Council's Standards of Ethics, Conduct and Practice. This is normally done by using a dispensary computer which records the patient's name and personal details together with the exact details of the medicines they are on and when they were dispensed.

These records are very important. As well as being a legal requirement they are essential for both the patient and pharmacist. Records can be used for checking whether any prescription medicines a patient is taking will interact with something they want to buy over the counter or for helping a patient request a new prescription from their doctor.

You may be involved in helping the pharmacist collect the patient's details. See later in this module.

### Limits of your own knowledge

Every member of the pharmacy team has their own role.

#### Your role as a MCA is to:

- Help customers who are making purchases
- Advise customers on what medicines they can buy for their health problems
- Refer customers to the pharmacist when they have a problem that needs more in depth medical advice
- Take in prescriptions
- Give out dispensed medicines
- Maintain stock and place orders

Your role as a MCA is to help customers with minor health problems, for instance colds and headaches. By helping these customers, you will be freeing up the pharmacist to concentrate on managing patients with more serious health issues.

When you first start to work at the medicines counter, you may not know enough to help the customer, however, the more you learn the more confident you will become. Some customers will of course come to the pharmacy with issues which are more complicated. When this is the case it is very important that you refer to the pharmacist.

### Always ask – never guess!

### Customers

Often customers coming to your counter will be feeling poorly or will have a poorly family member at home. They might not be in the best of moods so you must always do your best to help them promptly and politely.

### Customer Care:

- Be prepared with a ready smile and a warm hello
- Use an open body posture
- Remember, they might need to tell you things that are personal, so you need to be interested and caring
- Don't be intrusive, give them space and time to browse, and look for signs that they need help
- Don't keep a customer waiting. Helping them is more important than lower priority tasks such as stacking shelves

The person coming to your counter asking for a medicine might not be the person who is going to take that medicine. It is important to always find out who the medicine is for. It might be for a child or for someone with other conditions so you need to know this before you can recommend something suitable.

You must also be aware that many customers have special needs. Some you can see (like some physical disabilities) but some will not be obvious. You must always be sensitive and do your best to help, whatever your customers' needs are. Some of the things you will encounter are:

### Disabilities

There are over 10.5 million disabled people in the United Kingdom and many of them will use the pharmacy to buy medicines and collect prescriptions. The Equalities Act 2010 made it illegal to discriminate against anyone. This single piece of legislation replaced the Disability Discrimination Act, the Sex Discrimination Act and the Race Relations Act and also prohibits discrimination on the grounds of age. This is also outlined in the GPhC's 'Standards of Ethics, Conduct and Practice', which provides guidance on behaviour and professionalism of pharmacists.

Shops have had to make changes to their premises to allow better access for disabled people. Other things that can be done to help people with disabilities include providing larger print leaflets and medicine labels for people with visual impairment, and having ramps and wide aisles to allow more space for wheelchairs.

When dealing with patients with disabilities it's important to make sure that you make them feel comfortable regardless of what their disability is. Be sensitive to practical issues they may have e.g. not being able to reach the shelves because of a wheelchair. Also ensure that the way you communicate with them takes into account their situation, for instance using paper and pen or basic sign language for customers with hearing difficulties.

### English as a second language

Some of your customers may not have a good

command of the English language and may come from another country. In all situations it is still important that you have the information you need in order for you to recommend the right medicine and that the customer understands how to take the medicine.

Try using signs or pictures to communicate with these customers or ask them to bring along a family member who speaks English. If you really can't understand what a customer wants it's better to wait and get an interpreter (maybe another member of staff) to get the correct information than to guess and sell the wrong thing.

Some pharmacies keep a list of additional languages that the staff can speak or you might have a simple dictionary to help translate.

## Learning difficulties

Some customers are unable to understand concepts and instructions as easily as everyone else. Here it is especially important that the customer understands how to take the medicine. If you feel that a customer doesn't understand what you are saying, try other ways of explaining things to them. You can use pictures or write things down on a piece of paper for them. Make sure you use simple English and try not to use complicated words.

**REMEMBER: When dealing with customers with any special needs you need to be especially patient and may need to enlist your pharmacist's help.**

## Colleagues

You will not be alone working in your pharmacy. In fact a whole team of people will be working with you both inside and outside the pharmacy. The Pharmacy team may consist of:

Pharmacists, Pharmacy Technicians, Pharmacy Assistants and of course Medicines Counter Assistants, each having an important role to play.

## Pharmacist

Pharmacists have studied for four years at University for a pharmacy degree. They will then have worked for a year under the supervision of a qualified pharmacist (their pre-registration [pre-reg] year) and taken an exam before qualifying as a practising pharmacist. They are registered with the GPhC. They have many legal and professional responsibilities. These include the supervision of dispensing, sale of medicines and the training and development of staff in the pharmacy.

As well as dispensing medicines pharmacists have many other important roles which are constantly expanding. These can include things like:

- Counselling patients and giving out advice

- Providing Medicine Use Reviews (MURs) and New Medicines Service (NMS) for patients to make sure they are taking their medicines properly
- Providing specialist pharmacy services such as 'Stop Smoking' services or blood pressure monitoring

Your pharmacy may provide a number of special services and it's important that you know what these are so you can tell your customers about them.

The pharmacist who is in overall charge of a registered pharmacy is called the 'Responsible Pharmacist'. The 'responsible pharmacist' has specific responsibilities as described in GPhC regulations. His or her name must be displayed in the pharmacy at all times and a record of the times and dates that s/he is in charge must be kept.

## Pharmacy Technicians

There may be one or more Pharmacy Technicians in your pharmacy. Pharmacy Technicians are pharmacy professionals in their own right, registered with the General Pharmaceutical Council (GPhC) and although working under the supervision of a pharmacist, are professionally responsible for their own safe and accurate work and actions.

To qualify as Pharmacy Technicians students must undertake training on-the-job, towards the Level 3 NVQ Diploma in Pharmacy Service Skills (QCF) together with an accredited knowledge course studied at college or by distance learning leading to the Level 3 Diploma in Pharmacy Science. This takes about 2 years to complete

Pharmacy Technicians in Community Pharmacy may be involved in a wide range of activities such as:

- Dispensing prescribed medicines which can include, labelling and dispensing prescriptions, working out doses and quantities.
- Making such items as simple ointments, dilutions and mixtures
- Maintenance of pharmacy records including patient records, using computer systems, registers etc.
- Procurement and control of pharmaceuticals
- Advising patients on how to use and store their prescription medicines and advising on the use of over the counter medicines and how to manage minor ailments.
- Sale of over the counter medicines.

## Dispensing Assistants

The GPhC requires that anyone who has a role in the supply of medicines must be suitably qualified to do so. Dispensing Assistants undertake training to NVQ Level 2 which takes around 6 months to 1 year to complete. Dispensing assistants will have had some specialist training in working in the dispensary, dispensing prescriptions and checking off stock. Anything that



## Time Out

Find out about the aids your pharmacy sells to help make life easier for people with disabilities.

---

---

---

---

---

---

---

---

---

---

**When supervising dispensing, the pharmacist also reviews the prescription to check for issues such as drug interactions, or any other reason why the medicines prescribed might not be suitable for the patient**





## Time Out



Check with your pharmacist how they want to be involved in the sale of a P medicine

---

---

---

---

---

---

---

---

---

---

**The Responsible Pharmacist may be absent from the pharmacy for up to 2 hours in a day but the sale of 'P' must only take place when the pharmacist is present. GSL medicines may be sold when the pharmacist is not there. Always follow your SOP**

**You must always ask some important questions (see later) to make sure the medicine is appropriate and safe for your customer before you sell it to them**

they dispense needs to be checked by the pharmacist. If the prescription has been clinically checked by the pharmacist, the dispensing can be checked by an ACT.

Becoming a pharmacy technician is a career progression which some assistants may have the required qualifications to consider for the future.

### Medicines Counter Assistant (MCA)

The GPhC requires anyone working on the medicines counter in a registered pharmacy complete an accredited medicines counter assistants course. This usually takes about 3 – 6 months. So when you have successfully completed your MCA course, this is what you will become. Your duties may include: providing information and advice for simple health issues such as coughs and colds, selling over the counter medicines, taking in and giving out prescriptions under the direction and supervision of a pharmacist.

### Other healthcare professionals

Your pharmacist will also be working closely with other local healthcare professionals – especially General Practitioners (GPs) and Practice Nurses. You might also occasionally come across Inspectors who visit pharmacies from time to time to check on professional standards. If you work for a pharmacy chain there will be a Superintendent Pharmacist who you might also meet. He/she has responsibilities for the professional standards within all the pharmacies in the company.

## PART 2: MEDICINES

The sale and supply of medicines is controlled by the Human Medicines Regulations 2012 which have largely replaced the Medicines Act of 1968. Medicines fall into three different types – known as medicine classification:

### 1. General Sales List (GSL) medicines

These can be bought from any shop, including supermarkets, convenience stores, newsagents, garage forecourts and even vending machines. There is no need for a pharmacist to be involved in the sale. GSL medicines do not have to have any label saying they are GSL but you may find the letters GSL on the back of some boxes

2. **Pharmacy (P) medicines** can only be sold from a registered pharmacy, and when there is a pharmacist on the premises. They cannot be available for self-selection by customers. You can tell which products are pharmacy medicines as they will have a 'P' symbol on the back of the pack.

GSL and P medicines are also known as over-the-counter or **OTC** medicines and, unless you work in the dispensary, these will be the main medicines you work with.

### 3. Prescription Only Medicines (POM)

These cannot be sold without a valid prescription (see later in the module for more information on this) and are stocked in the dispensary. A prescription medicine will have the symbol POM on the back of the pack

**NB** Sometimes medicines are changed from one category to another. These changes are most commonly from POM to P or from P to GSL. When this happens full information is given to pharmacies by the medicines manufacturers (see Switch Medicines).

Increasingly, OTC products are becoming available that to all intents and purposes seem to be medicines but are not officially classified as such. They are called **Medical Devices** and have been officially approved as safe and effective. They have a CE mark on the label or package and are sold in the same way as GSL medicines.

## Understanding GSL and P medicines

### GSL medicines

GSL medicines are generally regarded as being reasonably safe and can be sold in such places as supermarkets, general stores and even garages. They can also be sold from a pharmacy when the pharmacist is absent (up to 2 hours per day). There are however rules which govern these sales:

The largest **pack size** of paracetamol that can be sold is 16 tablets. The larger pack of 32 can only be sold under the supervision of a pharmacist.

The highest **strength** of ibuprofen that can be sold is 200mg. The higher strength 400mg can only be sold under the supervision of a pharmacist.

Just because GSL medicines are more easily accessible does not mean that they are harmless. All medicines can cause serious side effects. For example, paracetamol is a pain reliever that is available as GSL, but taking too much of it can cause liver damage and even death. It is important that you always follow Standard Operating Procedures when selling GSL medicines.

### P medicines

In general, P medicines are stronger than



GSL medicines. Many OTC medicines are only available as P medicines, others are available in higher strengths or larger packs than GSLs and may need the guidance of a pharmacist before a sale. This means that P medicines are kept either behind the counter or in a locked cabinet on the shop floor. They must be sold from a registered pharmacy under the supervision of a pharmacist. The need to display P medicines behind the pharmacy counter may change in the future.

## Switch medicines

Sometimes POM become available for people to buy without a prescription – this is called a POM to P switch. These are important because when a medicine becomes available to buy there is often a lot of marketing activity and you will often get asked for these products. They are highly effective and powerful medicines and so, as with all other products, you must be sure that the medicine is right for the person who will be taking it. Your pharmacist may decide to sell switch medicines personally, at least for a while until s/he is sure that they are safe to be sold by MCAs.

Medicines can also switch from P to GSL, that is, they no longer need to have a pharmacist present to allow them to be sold and they can be moved from behind the pharmacy counter to the main shop floor.

All the information needed to take a medicine properly is included on the pack and in a patient information leaflet (PIL) inside the pack.

## Medicines terminology

Medicines can be classified according to their:

- Generic name (or active ingredient)
- Brand name (if applicable)
- Formulation
- Strength
- Indication

These are normally listed on the front of the box or bottle.

**Generic name:** this is the name of the active ingredient, and is the name of the drug that causes the effect. Examples of generic names include paracetamol, aspirin or ibuprofen. Generic products, that is unbranded medicines, are generally cheaper and patients may ask for a medicine by this name.

**Brand name:** a brand name is the name given to a generic medicine by the company who makes it, examples of this include Nurofen, Panadol and Aspro-Clear. Branded products tend to be more expensive than generic ones. Customers may ask you what the difference is between them. In general the active ingredients

between are normally the same, but they may have different formulations, for example some pain killers may be formulated as liquid capsules so they work faster.

**Formulation:** medicines come in many different formulations or forms. Examples are:

- Oral – taken by mouth, e.g. tablets, capsules (these can be easier to swallow than tablets), soluble (these are dissolved in water so customers can drink the medicine), effervescent (these fizz when put in water), solutions/syrups/suspensions (these are all liquids and are often given to children, who are generally too young to be able to swallow tablets)
- Topical – meaning applied externally and directly to the affected part, such as the skin, eyes, nose, e.g. creams, ointments, gels, sprays, lotions, oils, drops
- Rectal – e.g. suppositories, these are inserted into the back passage (rectum) and can be useful in small children who refuse to take oral medicines. Some laxatives and treatments for haemorrhoids (piles) are also contained in suppositories
- Vaginal – e.g. pessaries, these are inserted into the vagina

**Strength:** this is the amount of active ingredient a medicine contains. It is normally measured in grams or milligrams. The higher the amount the more active ingredient, so the stronger the medicine is. Different active ingredients have different potencies so you can't compare the strength of two different active ingredients and assume, for instance, that ranitidine 75mg is stronger than famotidine 10mg. You can however compare the strengths of the same drug e.g. aspirin 300mg is stronger than aspirin 75mg.

**Indication:** Medicines can also be classified according to what they do. For instance, paracetamol, aspirin and ibuprofen known as pain-killers. This may also be used on the box.

## Knowing more about medicines

Once you understand about the name, strength and formulation you will need to understand what is written on the back of the box and in the patient information leaflet found inside (PIL). This will contain information about the dosage, warnings, contraindications, interactions and side effects.

**Dosage:** the dosage is the amount of medicine a person should take. It's usually different across the age groups. For example, with Piriton Syrup for hayfever, adults can take two 5ml spoonfuls, a child aged 6-12 can take one 5ml spoonful and a child aged 2-5 can be given 2.5ml.

**Warnings and contra-indications:** no medicine is safe for everyone and the PIL will give specific examples. If your customer falls into any one of the following categories, you must also



## Time Out

Ask your pharmacist to show you examples of different formulations. Think about when these might be suitable.

**Some topical formulations may be faster acting than oral treatments and may reduce the risk of side effects**



**WWHAM and ASMETHOD are techniques to help you ask customers the right questions so you can recommend the right medicines for them**

refer them to the pharmacist for further advice:

- Babies and young children
- Elderly
- People with long term conditions (i.e. taking prescription medicines)
- Pregnant or breastfeeding women
- People with kidney and liver problems

**Interactions:** Some medicines react badly with other medicines (this is called a 'drug interaction') and so should not be used together. You always need to check if a customer is taking any other medication (including herbal medicines). If they are, you should refer them to the pharmacist.

**Side effects:** all medicines have the potential to cause side effects; these are listed in the patient information leaflet. Most side effects are minor. Where more serious side effects occur, generally the medicine is only available in small pack sizes to prevent someone overdosing and causing dangerous side effects.

### Selling medicines

You will by now realise how important it is to make sure that the right customer is given the right medicine. Each pharmacy must have a written SOP for selling a P medicine. This has usually been written by the pharmacist and outlines the questions you need to ask a customer who wants to buy a medicine, and when you should refer the customer to the pharmacist for further advice. This can be different in different pharmacies and even in different stores in the same chain. Differences will occur because a pharmacist may want to be involved with the sale of certain medicines, for example a recent POM to P switch, or medicines that can be abused. Make sure you read the SOP and speak to your pharmacist if you have any questions.

A customer at the medicine counter may ask for a medicine directly or ask you to recommend something. In both situations you will need to ensure that the medicine is suitable for them.

#### **If the customer asks for a medicine by name:**

- Ask if they have had it before – this is an example of where a closed question is fine! If they have not had the medicine before follow the procedure in the next section
- If they have then just check that they have not had a new medical condition or another medication prescribed since they last took the medicine
- Make sure the customer knows the important points about their medicine, for example if it will make them drowsy, or if they have to avoid taking it with other products
- If the customer has had the medicine before and you are happy with their answers to your

questions, you can sell them the medicine provided it is not a P medicine that the pharmacist has said they want to sell themselves or want to be informed of the sale.

#### **If the customer wants you to recommend a medicine:**

When a customer asks you to recommend something for them, you will need to ask some questions to find out more about them and their symptoms. This will help you to decide what, if anything, to sell to your customer or whether to refer them to the pharmacist.

There are some techniques to help you to remember what to ask. The two best known are the ASMETHOD and the WWHAM.

The **ASMETHOD** stands for:

- A** – Age and appearance: taking note of how a customer looks will help you to understand how bad their symptoms are. The age of the customer is also very important, for example some problems need extra care in children and the elderly.
- S** – Self or someone else: make sure you determine who the medicine is for.
- M** – Medication: find out what other medicines the customer is taking even if they are over the counter.
- E** – Extra medicines: find out whether the customer has taken anything for the current problem.
- T** – Time persisting: find out how long the problem has been going on for.
- H** – History: find out whether the customer has any other health problems, e.g. diabetes, heart problems.
- O** – Other symptoms: ask the customer if they have any other problems, sometimes customers will only talk about the worst symptom, even though they have other problems as well.
- D** – Danger symptoms: remember to look out for any 'danger' symptoms that will need immediate medical attention or referral to the pharmacist. These include things like coughing up blood and unexplained weight loss. Examples of these are included in each module.

The other technique is the **WWHAM** questions.

- **W**ho is the medicine for?
- **W**hat are the symptoms?
- **H**ow long have the symptoms been present?
- Has any **A**ction been taken so far?
- Are any other **M**edicines being taken

In this course we will focus on the use of the **WWHAM** technique, so you will see it throughout the course modules. Let's look at each of the **WWHAM** questions in more detail.

## Who is the medicine for?

You can't assume the medicine is for the person standing in front of you in the shop. Often people buy for other members of their family, as well as for friends and work colleagues, and remember that some medicines are not suitable for pregnant women.

Make sure that if the person is buying medicines for someone else they can answer the questions below.

### When to refer:

When the medicine is for:

- A child under the age of 2 years or an elderly person
- Pregnant or breastfeeding woman
- If the customer regularly buys the same product or they want large amounts of a medicine

## What are the symptoms?

In most cases as you become more experienced you will be able to identify what is wrong with a customer from the symptoms they describe. If you are unsure it is always fine to refer to the pharmacist.

### When to refer:

Always refer the following 'danger symptoms'.

- Severe pain
- Pain starts suddenly
- An on-going problem where other OTC treatments have not worked
- Shortness of breath
- Dizziness
- Bleeding

### How long have the symptoms been present?

Most of the common problems you'll see in the pharmacy will only last for a few days. But if symptoms carry on for longer it could be a sign of something more serious.

### When to refer:

- The symptoms are there for longer than normal
- The symptoms are still there, even though another treatment has been used
- Symptoms are severe

### Has any Action been taken so far?

Some customers may have already got advice from friends, family or another pharmacist or doctor. You need to find out what advice they have had and if they have taken any other medicine as you don't want to give them the same product again.

### When to refer:

- If they have tried other things that should have been effective and the symptoms are still there

### Are any other Medicines being taken?

This will tell you if the person who needs the medicine has another medical problem, in which case some P and GSL medicines won't be suitable. It will also allow you to check whether an OTC medicine will interact with anything they are already taking.

### When to refer:

- If the customer is on other medicines
- If the customer has any other health problems even if they seem unrelated to their symptoms

## Procedures

All pharmacies have written down SOPs and these must be followed at all times by everyone who works in the pharmacy. They are there to safeguard your customers by ensuring consistently high standards in key areas.

Have a look at the SOPs for your pharmacy. For your work on the medicines counter the sales of medicines protocol will be the most important SOP. Others covering prescription handling will also be relevant to you.

## Information sources

Your most important source of information as you learn about working in your pharmacy will be your colleagues and especially your pharmacist. Other sources of information are:

- **Books** – there will be reference books in your pharmacy. Find out where these are kept and ask your colleagues which they find useful and why
- **Leaflets** – all medicines have a PIL in the box. These contain lots of very useful information. Have a look at two or three so you know what kind of information they contain
- **Internet** – the internet is a fantastic resource, without it you would not be able to do this course! It contains information on just about everything you can think of, including medicines. Just remember that anyone can put information on the internet and can say just about anything they like. Be very cautious when you use information and make sure it is from trusted sites



## Time Out

[illegible]

**Refer to your pharmacy's Standard Operating Procedure to find out what to do when handing out prescriptions**

## PART 3: TAKING IN PRESCRIPTIONS AND HANDING OUT MEDICINES

As well as selling OTC medicines pharmacy staff will also be involved with the handling of prescriptions. Dispensing prescriptions is a part of the work that the pharmacy does under the contract it has with the NHS. Your role in this will include:

- Taking in prescriptions and helping patients fill out the back of the form as need be
- Giving out medicines dispensed by the pharmacist

This is a very important role and the GPhC requires each pharmacy to have its own SOP that outlines in writing what pharmacy staff should do when handling prescriptions or dispensing prescription medicines.

Pharmacies are able to receive prescriptions transferred electronically from the doctor and other prescribers. This is called ETP (electronic). The customer may nominate a specific pharmacy where they can collect their prescription. Eventually it is intended that paper prescriptions will only be used in exceptional circumstances.

Until then, we still have a wide range of paper forms that can be dispensed in your pharmacy. Most of the prescriptions you will handle are NHS prescriptions and can be different colours depending upon who has written them. The table (see later) gives the most common types of prescription, their colour and number.

### Taking in prescriptions

Check your pharmacy SOP to make sure you know the right procedure for handling prescriptions for your shop.

When taking in a prescription it's vital that you are professional and remember patient confidentiality at all times.

### Your job is to make the pharmacist's job as easy as possible. Check the prescription making sure that:

- The patient's name and address is clear – this is to ensure the prescription doesn't get confused with another patient with a similar name
- That the prescription is signed and dated by the prescriber and the date is not more than 6 months ago. (This may be shorter for prescriptions for Controlled Drugs – see later)
- That the back of the form is filled in

Once you have checked these points, you can pass the prescription to the pharmacist. Depending on how busy it is, the pharmacist

may be able to tell you how long it will be and if he or she has everything in stock. Make sure you give the patient some indication of this as soon as you can.

Pharmacists are responsible for ensuring that the right medicines are given out as prescribed by the prescriber and also ensuring it is suitable for that patient. They will also counsel patients (give them any special instructions needed with the medicine). They will also refuse to dispense a prescription if they think it has been forged.

### GUIDELINES ON TAKING IN PRESCRIPTIONS

- Check the patient's details are correct
- Check if the patient, or their representative, has completed the relevant sections on the back of the prescription form
- If they are exempt and you don't know the patient, or the pharmacy has no record of seeing an exemption certificate, note on the back that you have not seen their certificate
- Collect the prescription charge if they pay – if they get a lot of medicines regularly you can advise them that it may be more cost-effective to buy a pre-payment certificate
- Hand the prescription to the dispensary staff to get ready – it is good practice to check if items are in stock. If they are not, then you can tell the patient so they can decide if they want to come back or take the prescription to another pharmacy
- Tell the patient how long the prescription will be – they could be in a hurry and can't wait
- There are some prescriptions that require extra care, for example, those for Controlled Drugs – check with the pharmacist what you need to do

### Special cases

When taking in a prescription you will have to deal with many different types of patients, some of these may have special needs:

**Patients with disabilities:** Consider access to the counter for patients with wheelchairs, walking frames and sticks. Remember that patients with walking difficulties are not able to stand for long periods of time and will need a seat. Patients who are blind will need help with filling in the back of the prescription form and those that are deaf may not hear their name being called out to receive their medication.

**Patients with English as a second language:** May need help with filling in the back of the form and explaining what and how to take their dispensed

**Always check the patient's details against the prescription and that they have completed the back of the prescription form correctly**





medicines. Try and use pictures or signs to communicate or find someone who speaks their language.

*Mothers with children:* Are often distracted and in a hurry. Make sure you tell them how long their prescription will take so they can either come back later or are prepared for the wait. You can help by helping them to fill in the back of their prescription form. If your pharmacy has a lot of children visiting you could speak to your pharmacist about getting in some books or toys to help keep children occupied while they are waiting.

*Patients with urgent prescriptions:* May be in a hurry or in a lot of discomfort. Speak to the pharmacist to see if their prescription can be dealt with first. If this is possible then you will need to explain to the waiting customers that an urgent prescription will have to be dealt with first. If it is not possible make sure you explain politely to the patient how long they will have to wait.

## Giving out dispensed medicines

When you give out medicines you will need to:

- Check patient's details (full name and address)
- Check whether the pharmacist needs to speak to the patient
- Give any information on any medicines owing
- Counsel the patient where appropriate

## Labelling bags

Many pharmacies have a system of putting the completed prescription in a prescription bag ready for handing out. The docket or original prescription will be attached to the bag and is the main way you can identify the matching patient. If using the original prescription it should be attached in such a way that the customer's prescription details remain confidential. It is very important that you check the patient's details against those on the docket/prescription before handing it out. This is to make sure that you don't accidentally give the wrong medicines out. This can be extremely dangerous. It is the pharmacy's responsibility to ensure that the right medicines are given to the right person. If someone is collecting medicines for someone else they should still be able to give the correct details to you. The system for labelling bags of dispensed medicines may vary from one pharmacy to another. Again, your pharmacy will have an SOP for handing out prescription medicines.

## Owings

If there is not enough stock to complete the prescription, the medicine is then 'owing' to the patient. Tell the patient when the balance is due in and give them an 'owings' slip.

## Counselling

Sometimes the pharmacist will need to talk to the patient when they arrive to collect their prescription. Always check with your pharmacist if it is alright to give out the dispensed medication.

With time you will learn how to counsel patients on certain medications. This will include information on how to take their medicine and how to store them correctly. Some medicines have special instructions on how to take it, for instance a course of antibiotics should always be finished even if the person is feeling better, and some medicines should be taken with food or others on an empty stomach. This information is usually on the label and so it's a good idea to have a look before you give the bag out. Medicines should normally be stored in a dry cool place and out of reach of children. Some medicines have special requirements such as storage in the fridge. If these instructions are not followed the medicine may become inactive and not work. Again information about this is normally on the medicine pack. Ask your pharmacist if you are not sure.

## Prescription delivery

Some pharmacies may provide a delivery service of dispensed medicines to patients. It is vital that the correct medicines are delivered to the right address. Pharmacies are not allowed to post medicines through the letterbox or leave them with someone else unless previously agreed by the patient. Always consult your local SOP.

# PART 4: PRESCRIPTIONS

## Understanding the prescription form

### The front of the prescription

The front of the prescription should contain:

- The patient's name, address, age and date of birth. The date of birth is legally required for children under 12 years
- Space for the pharmacy details once the prescription has been dispensed
- The items to be dispensed (including the amount, the dose, the form and how to take the medicine)
- Space for the pharmacist to record what has been dispensed so the pharmacy gets the correct payment for it
- The prescriber's signature, the date of the signature and their name and address

A prescription can be written by a number of prescribers; GP, dentist and some nurses or pharmacists with a special qualification can all write prescriptions. Not all prescribers can prescribe everything and your pharmacist will need to check whether the items on the prescription form match their formulary.

Pharmacy Stamp

Age: 0-16

Name, Postcode, Surname & Address

When last prescribed for this condition: 12/12/12

Number of days' treatment: 14

St. Charles Health & Wellbeing

FR10-S-0404

Signature of Pharmacist

For completion by patient or person on form

**NHS**

**NOTE:** Patients who don't have to pay must fill in parts 1 and 3. Those who pay must fill in parts 2 and 3. Penalty charges may be applied if you make a wrongful claim for free prescriptions. If you're not sure about getting free prescriptions, ask and ask for an NHS receipt (RS2). You can't get one later. The RS2 tells you about getting a refund.

**Part 1:** The patient doesn't have to pay because he/she:

- A ☐ is under 16 years of age
- B ☐ is 16, 17 or 18 and is in full-time education
- C ☐ is 60 years of age or over
- D ☐ has a valid maternity exemption certificate
- E ☐ has a valid medical exemption certificate
- F ☐ has a valid prescription pre-payment certificate
- G ☐ has a valid War Pensioners' exemption certificate
- L ☐ is named on a current HC2 charges certificate
- X ☐ was provided free-of-charge contraceptive
- H ☐ \*gets Income Support (IS)
- K ☐ \*gets income based Jobseeker's Allowance (JSA) (IB)
- M ☐ \*is entitled to, or named on, a valid NHS Tax Credit Exemption Certificate
- S ☐ \*has a partner who gets Pension Credit guarantee (or Gift (PC/GC))

\*None

**Part 2:** I have paid: £ 1.00

**Part 3:** How high and tall in Part 2

How high and tall in Part 2

Sign here: John Smith (Name)

Print name and address: 123 Main St, London E1 1AA

Postcode: E1 1AA

FR10-S-0404



## NHS prescriptions

### England

Prescription Form Identifier	Colour	Who issues them
FP10 FP10NC FP10HNC FP10SS	Green	GPs or nurse and pharmacist prescribers, hospital doctors, supplementary prescribers or out of hours centres
FP10MDA FP10MDA-S FP10HMDA-S FP10MDA-SS FP10MDA-SP	Blue	Instalment dispensing prescription form for treating drug addicts
FP10P FP10PN (Practice Nurse) FP10CN (Community Nurse) FP10SP (Supplementary prescriber)	Lilac	Nurse and pharmacist prescribers and supplementary prescribers
FP10D	Yellow	Dentists

### Wales

Prescription Form Identifier	Colour	Who issues them
WP10 WP10SS WP10SP WP10HP WP10HSP	Green	GPs, hospitals and supplementary prescribers
WP10D	Green	Dentists
WP10CN WP10PN	Green	Nurse prescribers
WP10MDA	Green	Instalment dispensing prescription form for treating drug addicts

### Scotland

Prescription Form Identifier	Colour	Who issues them
GP10 GP10SS	Orange	GPs
GP10(N)	Purple	Nurse prescribers
GP14	Yellow	Dentists
HBP	Blue	From hospitals for dispensing in community pharmacies
HBP(A)	Pink	Instalment dispensing prescription for drug addicts

## Northern Ireland

Prescription Form Identifier	Colour	Who issues them
HS21 HS21CS	Green	GPs
HS21D	Yellow	Dentists
HS21M	Grey	Supplementary Prescribers
HS21N	Purple	Nurse prescribers

**Patients who pay charges and who receive repeat prescriptions need to pay each time a batch of medicines is dispensed**

You can dispense a prescription from a GP, dentist and nurse from any part of the country – though see later for information on possible differences in prescription charges.

### Back of the prescription form

The back of the form is split into three parts:

- **Part 1:** Patients who do not pay for their prescriptions must complete part 1, which says why they don't pay
- **Part 2:** Patients who pay for their prescription must complete part 2 to confirm that they have paid a charge
- **Part 3:** All patients must complete part 3 – signing the prescription form, unless they are over the age of 60 (as shown by the date on the front of the script) or unless it is for a child under 12.

### Prescription Charges

The back of the prescription is for the patient, or their representative, to complete. This is to say whether they have to pay for their prescription or not.

#### Paying patients

Those that pay are charged for the number of 'items' that are on the prescription. This is the number of 'different' medicines prescribed and does not relate to the quantity of the medicines given. Some medicines count as two 'items' even if they are in the same box. This is because there are two different medicines inside the box. Your pharmacist can explain in detail how charges work. Ask if there is an SOP for prescription charges.

Prescription charges have been abolished in Scotland, Wales and Northern Ireland; England is now the only part of the UK where prescription charges apply. But for English prescriptions dispensed in any other part of the United Kingdom, prescription charges must be paid. Prescription charges must also be paid for prescriptions from Scotland, Wales or Northern Ireland dispensed in England.

#### Exempt patients

Some people do not have to pay for their prescriptions – they are said to be 'exempt'.

A full list of the people that are exempt from payment is given on the back of the prescription, and includes:

- People under 16, under 19 and in full-time education or over 60 in most countries (see below for Wales)
- Women who are pregnant or have had a baby in the past year
- People with a low income
- People with a specific medical condition, e.g. diabetes, epilepsy, and who have the required exemption certificate
- A prescription for a contraceptive
- People with a current 3 or 12-month pre-payment certificate
- People who are an NHS Low Income Scheme member, or one of their adult dependents
- People with a specific War/Ministry of Defence disability pension

Please note: Prescriptions for people under 12 or over 60 only sign the back of the prescription if their age or date of birth is handwritten rather than printed on the form

**Patients who pay a charge and who receive instalment prescriptions only pay fees for the number of items on the prescription, not how many times the instalment is dispensed**

Patients must provide proof of why they don't pay a prescription charge. If they have not shown this (or has not shown it to you in the past) then there is a box on the back that you must complete with a cross if you have not seen proof. If the patient is known to you and you have seen proof, and it is still valid, then you don't need to complete the box.

### Understanding the pre-payment certificate

A pre-payment certificate is useful for patients who have regular prescriptions. If a patient has more than 5 prescriptions items in 4 months or more than 14 items in 12 months then a pre-payment certificate will save them money. This certificate means that, for a flat-fee, patients can have unlimited items for either 4 or 12 months.

Some pharmacies sell pre-payment certificates but they can also be bought over the telephone, by post, by direct debit and over the internet.

### Understanding refunds

If a patient is waiting for the arrival of a pre-payment certificate or some proof that they



are entitled to exemption from payment, he or she has to pay for the prescription. They can get a refund if, when they are paying the prescription charge, they fill in a form in the pharmacy called FP57. The pharmacy then refunds the charge when the patient provides the proof of exemption. Refunds can be claimed from any pharmacy not just the one where the prescription was dispensed. Receipts for prescription charges (FP57) must be given at the time of dispensing the prescription and must be claimed within 3 months of the prescription being dispensed.

### Understanding private prescriptions

Pharmacies sometimes receive prescriptions for medicines prescribed privately, that is outside of the NHS. These prescriptions do not look like the NHS prescriptions, although they must have on them all the details required on a prescription. Unlike NHS prescriptions, the customer will pay according to the price of the actual medicine. Your pharmacy will usually have a standard formula for working out the price of a medicine on private prescription.

For doctors prescribing Controlled Drugs (CDs) privately, there is a special form (pink in England and Wales, beige or buff in Scotland) that must be used.

### Understanding repeat prescribing

When patients are on regular medication they can be put on a repeat prescribing service. This is where they can request their medication directly from the surgery without having to see their GP. They normally do this by filling out the 'Repeat Form' on the side of their last prescription and returning this to the surgery. They normally collect their prescription a day or two later.

Some pharmacies offer a collection service where the repeat form can be taken to the GP by the pharmacy and the prescription collected on the patient's behalf. Check with your store to see if you can offer this service.

### Understanding repeat dispensing

Many customers are on regular medication, with the same medicine repeated every month or so. For convenience, the patient and doctor may decide to use the Repeat Dispensing scheme to save the patient having to go back to the doctor for up to a year. The scheme is currently available as part of the pharmacy contract in England and Wales and is replacing the repeat prescribing system described above.

Using this system, the GP writes a prescription for the medicines on a Repeatable Authorisation form (RA) which looks like a normal prescription. This states the medication and how many 'repeats' there will be. The doctor also issues a further series of identical prescriptions, usually for a month or two months supply at a time. These forms are called batch prescriptions (or Repeat Dispensing [RD] forms). These are not signed by the doctor.

When the patient presents a RA form (together with all the batches) they fill out and sign the back of the RD1 form, which is the first repeat. Patients exempt from payment must declare this each time a batch of medicine is dispensed. The items from the RD form are then dispensed as usual. The pharmacy keeps hold of ALL of the prescriptions. When the next supply is required, the patient just comes back to the pharmacy and asks for their next repeat. This makes things much easier for both the GP and the patient.

### Understanding instalment dispensing

Some medicines are prescribed in instalments. For example Controlled Drugs to treat addiction are often prescribed for daily dispensing to prevent the risk of overdose or the drugs being sold on. The maximum is 14 days' supply. If the patient pays for a prescription, they are only charged for the items on the prescription, not the number of times an instalment has to be dispensed.

### Understanding patient group directions

A Patient Group Direction (PGD) is a protocol that allows a pharmacist to supply medicines specified on it, such as nicotine replacement therapy and emergency hormonal contraception, without the need for a doctor's prescription.

#### GUIDELINES ON HANDING OUT PRESCRIPTIONS

- Check that the completed prescription is going to the right person - check the patient name and ask them to confirm their address. Any mistakes can be fatal
- A sticker or note on the bag will indicate if the pharmacist needs to speak to the patient, so ask if specific instructions need to be given to the patient
- There may be some medicines that have to be stored in a special way, for example children's antibiotics and insulin need to be kept in the fridge. Make sure the patient is aware of this – you will also find that the prescription is not on the usual shelf but has been stored in the fridge
- Check if the patient wants to talk to the pharmacist about their medicine
- Ensure measuring spoons or oral syringes are provided where necessary
- Medicines should not be given out to children
- Stick to any special provisions you have for drug misusers, for example, some may have to be supervised by the pharmacist when drinking their daily methadone dose
- Ensure the back of the prescription is signed when Controlled Drugs are given out



### Time Out

Make a note of where you would find the following in your pharmacy:

- SOP on handling OTC medicines
- SOP on taking in prescriptions and handing out dispensed medicines
- Pre-payment certificate forms and FP57 forms
- Information on any patient group directions your pharmacy is involved in
- Guidance on calculating the cost for a private prescription
- Relevant reference materials for the pharmacy (e.g. The British National Formulary, MIMS, the Chemist & Druggist Price List)
- Information on which GP surgeries for which you operate a prescription collection service

**Always check that the right medicine is going to the right patient by checking that the details on their docket matches up with the docket on the prescription bag. Also check their name and ask them to tell you their" address before handing the prescription bag over**



### ▶▶ Complete your learning

Well done on completing the module! Now visit [www.trackandtrain.co.uk](http://www.trackandtrain.co.uk) to access:

- *Weblinks* to learn more and signpost your customers
- *Forum* to chat with other MCAs about your learning
- *Online* assessment to make sure you are on track