

## Statement on Prescribing intervals

Cornwall and Isles of Scilly Integrated Care Board aligns with the British Medical Association guidance for prescription intervals, which states:

*'Doctors should provide prescriptions for intervals that they feel are clinically appropriate, taking into account such factors as possible reactions, the stability of the treatment, patient compliance, and any necessary monitoring.'*

The ICB does not support rigid adherence to a default 28 day prescribing interval, but encourages a flexible approach, with safe and appropriate repeat prescription intervals adapted to the needs of individual patients.

Strict policies stipulating a fixed interval of 28 days' supply are associated with significant increases in dispensing and other transaction costs, reductions in compliance, and an increase in dissatisfaction amongst patients because of travel costs, carbon footprint, and time to obtain regular medicines. It can also place significant and unnecessary workload on the prescribers and surgery staff in processing more prescription requests and items.

Longer intervals must only be used where there are effective systems for oversight, review and management. As an alternative to increasing quantities (or prescribing intervals) electronic repeat dispensing (eRD) may be appropriate for some patients.

Longer duration prescriptions (e.g. 56 or 84-day prescriptions) may be appropriate when:

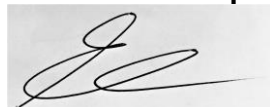
- The dose is stable and unlikely to change during the authorised repeat prescription.
- It is very likely to improve patient compliance.
- The risk of harm to the patient (or others) of having larger amounts of medication is low.

Shorter duration prescriptions (e.g. 28-day or less) may be most appropriate when:

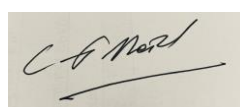
- Controlled drugs are included (recommended duration of 30 days maximum).
- Drugs require regular monitoring and/or dose changes.
- Medications are first started, as changes or dose adjustments are more likely.
- Patients are at the end of life as frequent changes may be required.
- The item involved is very expensive or has a short shelf-life.

Routine seven-day prescriptions are generally discouraged. They may be appropriate if there is good clinical reason to restrict a patient's supply to seven days.

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