

Gazette

YOUR MONTHLY DISPENSARY GAZETTE

News and Updates on Dispensing Doctor Issues



PCN Training Funding

Seize the opportunity now and secure your portion of the 2023/2024 PCN Contract Specification for training funding before the approaching March 31st deadline! Whether you're a Practice Manager seeking operational efficiency, a Dispensary Manager looking to enhance CD management or a Team Lead dedicated to improving communication and collaboration within your practice, investing time in leadership and management training can yield substantial rewards.

Dispex is a renowned provider, offering a comprehensive leadership and management package tailored to meet the diverse needs of healthcare professionals. Moreover, financing options through your PCN make this training accessible to practices of all sizes. For further details, please click [here](#) and see page 3.

Dispex not only fulfils your training requirements, but another key advantage of being a Dispex member is the ability to tap into a network of support helplines. Whether you have questions about prescribing or dispensing, regulatory compliance or you need

assistance with profitability management, Dispex helplines are there to provide timely and accurate information.

Members have confidence knowing that help is just a phone call or email away!

Email: enquiries@dispex.net training@dispex.net

Tel: 01604 859000 10am-1pm

Web: www.dispex.net

Additionally, there is a webpage called "Dispex Answers," where our specialists offer responses to frequently asked questions, quoting the relevant regulations where appropriate. We will continue to add more questions and answers as time goes on. Members can click [here](#) to login. Non-members looking to join, please click [here](#).

Best Wishes,

Claudy Rodhouse

Dispex Design and Editorial Contributor

The Dispensary Gazette

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leuprorelin acetate

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consistency is
essential.




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Indicated in men for high risk localised, locally advanced and metastatic prostate cancer.²

Always consult the SmPC before prescribing.

[Click here for prescribing information](#)

Adverse events should be reported. Reporting forms and information can be found at www.mhra.gov.uk/yellowcard. Adverse events should also be reported to Aspire Pharma Ltd on **01730 231148**.

10106062191 v1.0 February 2024

ASPIRE[®]
PHARMA

Staladex[®]
leuprorelin acetate

References: 1. Leuprorelin Amdeepcha, Public Assessment Report-2019; Available from: https://mri.cts-mrp.eu/portal/details?productnumber=DE%2FH%2F5485%2F001#:~:text=PAR%20%7C%2001_DE5485_1_DC%20Leuprorelin%20Amdeepcha_draft%20PAR (Last Accessed February 2024).
2. Staladex-SPC, electronic medicines compendium (emc); Available from <https://www.medicines.org.uk/emc/product/10951/smcp#gref> (Last Accessed February 2024)

Last month we looked at Returned Scripts and Disallowed Scripts and it was noted that the vast majority of Disallowed items are for Vaccinations which MUST be claimed on the FP34D Bulk Vaccination claim form.

Completing the FP34D (FP34PD for non-dispensing practices) should be fairly simple process, but there are pitfalls to be aware of. The FP34D/PD Appendix form must be used for only the following vaccinations: Influenza, Typhoid, Hepatitis A, Hepatitis B, Pneumococcal and Meningococcal and any combination of these. Note that Vivotif (a seldom used oral Typhoid vaccination) must be claimed on the FP34D and it is deemed to be a Personally Administered item by NHSBSA, although most patients will take it at home and this from an HMRC point of view, you can claim the full VAT back.

The table at the bottom of this article lists all currently available Vaccinations that MUST be claimed on the

FP34D/PD Appendix Form.

NOTE: REVAXIS must be claimed on a green FP10 and NOT on the FP34D.

The NHSBSA is particularly keen to stress that the Brand name and the Brand Manufacturer's should be used as most Returns or Disallowed items are because the generic name alone is not enough information. Most clinical systems will have a Report for the FP34D/PD. At the end of the month, this report can be downloaded and saved as a Word document and any vaccinations which do not have the Brand or Manufacturer's name, can be corrected. Adjusting the FP34D/PD report and allocating all Vaccinations to the doctor with the least vaccinations for that month could enhance your dispensing fees significantly – especially during the Flu season. The system generated FP34D/PD can be attached to the NHSBSA FP34D/PD Appendix form and sent with the monthly returns.

Be sure to include the brand name if the maker produces more than one brand of a vaccine.

Ensure the brand/ maker's name is stated against each vaccine you're claiming for.

Please use numbers, not words.

FP34PD (Appendix) Practice PCT: Practice Tel
CLAIMS FOR VACCINES PURCHASED AND PERSONALLY ADMINISTERED UNDER SFE PART 4
PARAGRAPH 23 DURING MONTH OF

Only details of the following six vaccines or combinations of the listed vaccines e.g. Twinrix, Hepatyrix, to be entered below. Incomplete details may result in payment delays.

Influenza Typhoid Hepatitis A Hepatitis B Pneumococcal Meningococcal



Please note:

1. Individual FP10s for these vaccines WILL NOT be accepted in doctors accounts.
2. CLAIMS FOR VACCINES OBTAINED FROM CENTRAL SUPPLY SHOULD NOT BE INCLUDED ON THESE FORMS.

Name of Doctor (see note 6.1)	Doctor Index Number (see note 6.1)	Vaccine	Brand / Maker's Name (see note 6.2)	Presentation / Pack Endorsement (see note 6.3)	Patient Dosage (see note 6.4)	Total Number of Doses Administered in the month (see note 6.5)
Dr Jones	123456	Influenza	Abbott Imuvac	1	0.5ml	35
		Influenza	Abbott Influvac	1	0.5ml	10
		Hep A	Avaxim	10	0.5ml	3
Dr Smith	987654	Influ. Inact	Pfizer - Enzira	1	0.5ml	138
		Hep B	Engerix B	Pre-filled 10	1ml	4
		Hep A	Havrix Mono	10	1ml	3
Dr Green	654321	Influenza	Wyeth Pharm	10	0.5ml	140
		Hep A + B	Twinrix	Pre-filled - 10	1ml	3
		Typhoid	Typhim VI	1	0.5ml	2
Dr White	456789	Influenza	Novartis Agripool	10	0.5ml	36
		Influenza	Novartis Fluvirin	1	0.5ml	10
		Hep A	Havrix Junior	1	0.5ml	3
		Hep B	HB Vax PRO	Pre-filled - 1	1ml	2

When submitting your prescriptions at the end of the month, the NHSBSA has developed Best Practice Do's and Don'ts

Submitting your account – Best practice

 Do	 Don't
Send by 5th day of the month	Do not leave staples, pins or paper clips attached
Separate exempt and chargeable prescriptions	Do not obscure any information
Use an appropriate envelope or box	Do not leave any sticky residue on forms
Use postal tracking	Remove the right-hand side of the form
Include your FP34D and Appendix Form	Do not fold prescriptions
	Do not attach invoices to prescriptions

Thanks to Mark Gibbon and the NHSBSA Prescription Service for supplying information and slides.



Business Services Authority

UPCOMING WEBINARS

BOOK HERE

training@dispex.net
 01604 859000 (10am-1pm)

Endorsing
 April 23rd
 June 18th

Batch Submission
 March 14th
 May 21st
 July 16th

FP34D/PD VACCINATIONS ALLOWED

© Hexagon6 Ltd

Influenza	Typhoid	Hepatitis A	Hepatitis B	Combinations	Meningococcal
<p>Quadrivalent influenza vaccine (split virion, inactivated) suspension for injection 0.5ml pre-filled syringes (Sanofi)</p>	<p>Typhim Vi 25micrograms/0.5ml vaccine solution for injection pre-filled syringes</p>	<p>Havrix Monodose vaccine suspension for injection 1ml pre-filled syringes</p>	<p>HBvaxPRO 40micrograms/1ml vaccine suspension for injection vials</p>	<p>Ambirix vaccine suspension for injection 1ml pre-filled syringes</p>	<p>MenQuadfi vaccine solution for injection 0.5ml vials</p>
<p>Adjuvanted quadrivalent influenza vaccine (surface antigen, inactivated) suspension for injection 0.5ml pre-filled syringes (Seqirus)</p>	<p>ViATIM vaccine suspension for injection 1ml pre-filled syringes</p>	<p>Avaxim Junior vaccine suspension for injection 0.5ml pre-filled syringes</p>	<p>Enerix B 10micrograms/0.5ml vaccine suspension for injection pre-filled syringes</p>	<p>Twinrix Paediatric vaccine suspension for injection 0.5ml pre-filled syringes</p>	<p>Menveo vaccine powder and solvent for solution for injection 0.5ml vials</p>
<p>Cell-based quadrivalent influenza vaccine (surface antigen, inactivated) suspension for injection 0.5ml pre-filled syringes (Seqirus)</p>	<p>Vivotif vaccine gastro-resistant capsules (Patientric Ltd) 3 capsule</p>	<p>Avaxim vaccine suspension for injection 0.5ml pre-filled syringes</p>	<p>Enerix B 20micrograms/1ml vaccine suspension for injection pre-filled syringes</p>	<p>Twinrix Adult vaccine suspension for injection 1ml pre-filled syringes</p>	<p>Nimenrix vaccine powder and solvent for solution for injection 0.5ml pre-filled syringes</p>
<p>Influvac sub-unit Tetra vaccine suspension for injection 0.5ml pre-filled syringes (Viatris)</p>		<p>Havrix Junior Monodose vaccine suspension for injection 0.5ml pre-filled syringes</p>	<p>HBVAXPRO 5micrograms/0.5ml vaccine suspension for injection pre-filled syringes</p>	<p>ViATIM vaccine suspension for injection 1ml pre-filled syringes</p>	
<p>Supemtek Quadrivalent vaccine (recombinant) solution for injection 0.5ml pre-filled syringes (Sanofi)</p>		<p>VAQTA Paediatric vaccine suspension for injection 0.5ml pre-filled syringes</p>	<p>PreHevbri 10micrograms/1ml suspension for injection vials</p>		
<p>As Fluenz Nasal is centrally supplied, it MUST NOT be claimed either on an FP34D or and FP10</p>		<p>VAQTA Adult vaccine suspension for injection 1ml pre-filled syringes</p>	<p>Fendrix 20micrograms/0.5ml vaccine suspension for injection pre-filled syringes</p>		

Ensure you hold sufficient stock to accommodate the Easter Bank Holiday.

Dosette Boxes

7 Day Disposable Compliance Aids

The dosette system has been designed for patients in the community who need help ensuring they take their medicines regularly in order to achieve the best health outcome!

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More Choice

For a very long time now, there has been little movement in the GnRH Agonist market, but that is about to change. As with all prescribing and dispensing, the patient must come first and prescribing the most appropriate medication on clinical ground is paramount. Urologists have allowed GPs to select the GnRH agonist they wish to prescribe and many of you have been using Prostag or Zoladex. There has been a push from ICBs to prescribe Decapeptyl, on cost grounds.

There is however a rising player in the market. Staladex, from Aspire Pharma Ltd, is a leuprorelin product that's equivalent to Prostag. Staladex comes as a 11.25mg implant in a pre-filled syringe. The implant contains 11.25 mg leuprorelin acetate (equivalent as 10.72 mg leuprorelin) and is the identical dosage to Prostag 11.25mg (Leuprorelin 11.25mg powder and solvent for suspension for injection pre-filled syringe). Prostag can be prescribed generically as Leuprorelin 11.25mg powder and solvent for suspension for injection pre-filled syringe, and Staladex can be prescribed generically as Leuprorelin 11.25mg implant pre-filled syringes. If you are changing from Prostag to Staladex and prescribing generically, then Staladex must be prescribed as Leuprorelin 11.25mg implant. Prostag requires pre-mixing and is an injection that's administered subcutaneously or intramuscularly, usually into the arm, thigh or tummy. Staladex is injected subcutaneously under the abdominal skin.

Prostag earns 2 Dispensing Fees and Staladex 1. The price of Staladex is lower than Prostag.

Product			Basic Price
Zoladex	Goserelin	AstraZeneca	£235.00
Prostag	Leuprorelin	Takeda	£225.72
Staladex	Leuprorelin	Aspire	£208.79
Decapeptyl	Triptorelin	Ipsen	£207.00

To complicate matters, not all GnRH agonists are available from all 3 main wholesalers. Although Prostag is available from all 3, the enhanced Manufacturer's Discount Scheme (MDS) is only available if it is ordered from Alliance. Decapeptyl is only discounted and available via PSUK. Zoladex is currently only discounted and available from AAH (keep an eye on future Gazettes as this is due to change from July and new sign-ups will be required). Staladex is available from all 3 main wholesalers and the same discount is available from all 3.

Product	Basic Price	Available From			Discount Available		
		AAH	Alliance	PSUK	AAH	Alliance	PSUK
Zoladex	£235.00	Y	N	N	Y	N	N
Prostag	£225.72	Y	Y	Y	N	Y	N
Staladex	£208.79	Y	Y	Y	Y	Y	Y
Decapeptyl	£207.00	N	N	Y	N	N	Y

For practices who are already benefiting from the Aspire existing MDS deal, there is no need to sign up again, as the Staladex deal will be added on to your existing MDS. For those practices who are not signed up to the Aspire MDS, it is advisable to contact info@aspirepharma.co.uk

To see the effect of the discounts on profitability, visit the **Brand Comparisons** members' only section of the Dispex website. Changing 20 patients (who receive 4 injections a year) to the most profitable GnRH agonist could improve profitability by £1,800 per annum, whilst saving the NHS £1,350 per annum. A win, win, win.

31st March 2024



**DON'T
MISS!**

Dispex provides a comprehensive Leadership & Management package, which can be financed through your PCN.

Leading and Motivating a Team

This course aims to give you the knowledge needed to understand how to lead and motivate a team, through effective communication, motivation and individual team development.

Personally Administered Items & VAT

This in-depth and CPD Certification Service approved course will give you the knowledge you need to understand dispensing personally administered items and VAT in a Dispensing Doctor setting.

Organising and Delegating

This course will give you the knowledge you need to understand the core skills required to deal with management responsibilities and to develop as a leader.

Performance Management

This course will build your knowledge of the core skills needed to manage performance and underperformance and to give feedback in the workplace.

A Comprehensive Guide to Controlled Drugs

This in-depth and CPD Certification Service approved course will give you the knowledge you need to understand and manage dispensing of Controlled Drugs in a Dispensing Doctor setting.

Understanding Leadership

This course will develop your understanding of leadership styles and qualities, providing you with the core skills needed to progress as an effective leader.

Induction of New Staff

Induction training is an important form of employee training for new staff. It enables them to perform their duties and be productive as quickly as possible, and to feel comfortable in their new profession or job role. Effective induction training covers key information such as health and safety, and specific training on any duties and skills required for a new job role.

Claim your PCN funding before the 31st March deadline! Alternatively, your practice can fund this package. You have 12 months to complete all 7 courses! **£363 per member or £528 per non-member**

CLICK HERE



Following numerous enquiries regarding moving to digital record-keeping and determining the appropriate retention period, we've decided to compile this resource to address any apprehension.

As far as Dispex is concerned digital records, as long as they are kept safe and secure, could be used instead of paper records.

- **Fridge temperature records**

There are no regulatory timescales, but it is recommended that fridge records should be retained for at least one year and be available for audit.

- **Room temperature records**

Yet again there are no regulatory timescales, but it's best practice to keep them for 1 year.

Further Resource: [Dispex SOPs](#) - DPX-D3 Refrigerator Monitoring, DPX-QC1 Ordering & Storage of Medication and DPX-D2 Room Temperature Monitoring

- **Delivery of medications to patients**

These should be kept for 1 year.

- **Submission documents**

There may be financial reasons to keep for a period of time, should there be a query on payments received. Financial documentation are normally kept for 7 years.

- **DSQS staff competency assessments forms**

It is advised to just keep the previous year's submission and relevant paperwork for reference. In terms of destroying staff records, whether for DSQS or not, this would be a HR question as there are wider implications on this.

Further Resource: [Dispex SOPs](#) QC14 DSQS

- **Paper DRUM forms**

Paper DRUMs can be scanned into your clinical notes. Once the DSQS payment has been made you can then discard the paper copies, there are no regulatory timescales. For further guidance on DRUMs, check out our online learner-led course [here](#).

- **Prescription form movement records**

These should be kept for 3 years.

- **NHS prescriptions**

PAPER must be kept for 2 years. NHS paper scripts are scanned by NHSBSA and kept on their servers. The record of what has been prescribed is also on the GP clinical system. ELECTRONIC must be kept for 2 years.

- **Private prescription**

PAPER must be kept for 10 years. ELECTRONIC must be kept for 2 years, unless there's a VAT charge on a private script, then its 6 years.

Further Resource:

The **Human Medicines Regulations 2012** state that a prescription may be kept electronically, and must be kept for a period of 2 years – whether it is private or NHS. As **VAT is charged on private prescriptions**, the VAT regulations come into play – You must keep VAT records of all supplies and purchases for at least 6 years from the date of supply or purchase – the record, again can be kept electronically. There is a slight variation for **Private CD prescriptions** – the original needs to be sent to NHSBSA every month, but a copy will need to be kept for 6 years for VAT purposes.

In conclusion, if these records are kept digitally, then they could effectively be kept forever. Digital copies of the paper records would ensure there is an easy way of recovering data as all of it will be date stamped.



LUNCHTIME Tutorials

March 2024

- 13th Mar- Controlled Drugs Part 2
- 14th Mar- NHSBSA Batch & Switching (W)
- 20th Mar- Controlled Drugs Part 1

APRIL 2024

- 17th Apr- Drug Tariff & Endorsing
- 18th Apr- DispexCD (W)
- 23rd Apr- NHSBSA Endorsing inc Referred Backs (W)
- 24th Apr- Controlled Drugs Part 2

MAY 2024

- 15th May- Controlled Drugs Part 1
- 21st May- NHSBSA Batch & Switching (W)
- 22nd May- DSQS Guidance

JUNE 2024

- 12th June- Controlled Drugs Part 2
- 18th June- NHSBSA Endorsing inc Referred Backs (W)
- 26th June- Drug Tariff & Endorsing

Time: 1pm-2pm **Webinar Time:** 12pm start

Delegate Prices:

Members: £50+vat pp/ps **Non:** £75+vat pp/ps

W= Free webinar



dispex.net/training



training@dispex.net

 **BOOK NOW**



DISPEX Stay connected

Stay current with the most recent dispensing and Dispex updates in between the Gazette and mid-month mailings by connecting with us:



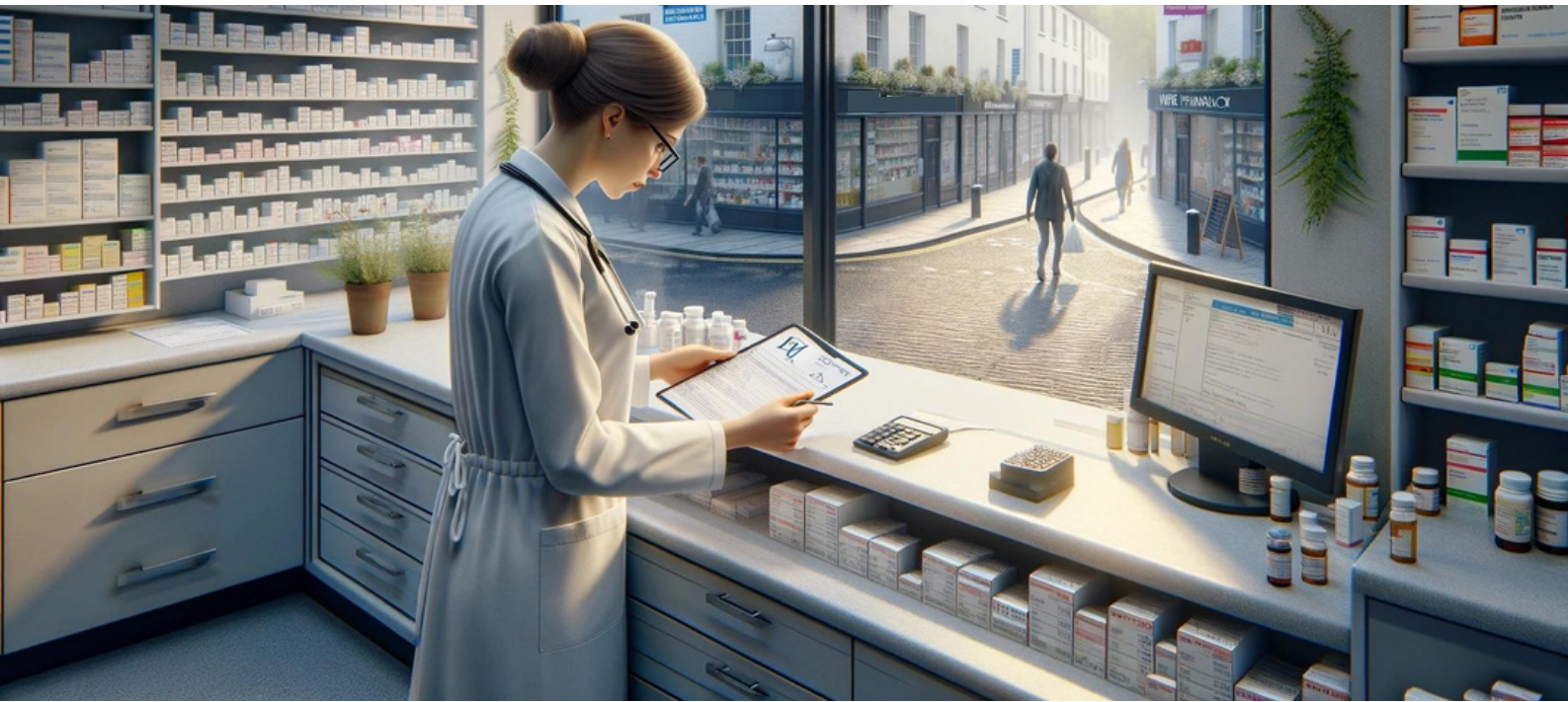
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Picture the Scene: A dispenser diligently reviews the day's prescriptions, and among them, a script lies unsigned, with the exemption box TICKED. There's a flicker of recognition – it's a familiar name. This patient, they recall does falls under exemption criteria, however, a cautious approach requires verification. Delving into the patient's records, the dispenser validates the patient's exemption status. Armed with certainty, the Dispenser make a decision, backed by protocol, to sign the prescription on the patient's behalf.

In this case, the prescription in question included four items, each with a prescription fee of £9.65. By addressing the unsigned script, the dispenser has saved the dispensary £38.60. While this amount may appear inconsequential, when multiplied over the average number of unsigned prescriptions you may encounter in a month, it could be costing the practice hundreds of pounds!

We are all human and in the bustling environment of a dispensary, amidst the numerous tasks undertaken, this confirmation step can often be overlooked. Although it's ideal to inspect EACH prescription for a signature while the patient or their representative is present. If you come across an unsigned exempt script, in line with NHS England and **The Drug Tariff**, you are permitted to act as a patient's representative and sign on behalf of the patient- as long as exemption status checks are carried out.

We highly advise that you and the entire dispensary team review your current Standard Operating Procedures concerning this process. This is especially crucial if there's a new addition to your team. Remember, Dispex members have access to the online SOPs library.

DPX P12-The Prescription Reverse

Emphasis is placed on the importance of meeting the legal requirements associated with completing the FP10 reverse when the dispensed prescription is handed out to the patient or their representative at the dispensary hatch.

DPX P10-Handing Out a Prescription

The purpose of this SOP is to ensure that patients receive the dispensed medicines/items intended for them and with relevant information to enable them to use the items effectively and as intended by the Prescriber.

The procedure covers the handing out of all dispensed medicines to patients and their representatives;

- If patient/representative is COLLECTING a dispensed prescription
- If patient/representative has been WAITING for the prescription
- If patient has NOT previously used the medicine/item(s)
- If the patient has had the medicine/ item(s) in the past:

Known Risks

- New staff.
- Patients with commonly occurring surnames.
- Patients with the same name, living at the same address.
- Patients collecting more than one prescription.
- Third-party (eg. nurse, carer) or patient representative collection.
- Patients with sensory disabilities.
- Patients with language or literacy problems.
- Patients who are too busy for counselling.
- Items stored in other locations (eg. fridge, CD cabinet, bulky items)
- Prescriptions that have been dispensed into more than one bag.
- Prescriptions for different patients, that need to be collected together.

DISPEXCD

The Electronic CD Register

FREE FOR MEMBERS

dispensingcd.co.uk

“We’ve been using DispexCD for several months’ now, we’ll never go back to paper. Shouldn’t have waited so long to go electronic”.

DISPENSARY MANAGER IN LINCOLN

The system is proving invaluable for dispensing practices, we have many sites using our platform! Attend our FREE webinar to discover the benefits and advantages of our digital CD Register for your Dispensary.

LEARN MORE



Dispex can provide you with all your needs in Controlled Drugs Management!

- *Electronic Controlled Drug & Returns Register-FREE for members*
- *Paper Controlled Drug Registers*
- *Paper Returns Registers*
- *Paper Drs bag CD Registers*
- *Denaturing Kits*
- *Controlled Drug SOPS*
- *1 hour tutor-led tutorials*
- *Online learner-led Guide to Controlled Drugs- 6 hours*

Should you have any CD prescribing or dispensing enquiries, please email: enquiries@dispex.net

AH, WE HAVE A SOP FOR THAT



The Dispensary

The Prescription

Controlled Drugs

Quality Control

High Risk Medicines

JOIN NOW

dispex.net sales@dispex.net

Dispex members are able to access our comprehensive SOPs library! SOPs are a vital part of the DSQS requirements and an important element to ensure safe and quality practice and procedures are followed by all members of staff.

Our Templates will provide a guide, according to the DSQS requirements minimum, for you to amend as relevant to your own Dispensary. You will be able to customise the procedures content to your own circumstances and adjust each one to reflect the way your own Dispensary operates, within the recommended guidelines.

Subjects Covered:

- THE DISPENSARY
- QUALITY CONTROL
- THE PRESCRIPTION
- HIGH RISK MEDICINES
- CONTROLLED DRUGS

Members can click **here** to download the full library. Non-members looking to join, please click **here**.

Benchmark your Dispensing

HOW DO YOU COMPARE?

NHS Quit Smoking App

Download your social media resources at campaignresources.dhsc.gov.uk

Quit Smoking Start Saving

Join the thousands of people who are quitting smoking.

Download the free NHS Quit Smoking app to get started.

GET IT ON Google Play | Download on the App Store



Consider going electric

If you are going to replace a car that you also use for business purposes, then you might want to consider going electric. This is good for the environment but can also be good for your finances.

There is a lot of information available on the benefits to employers providing Electric Vehicles (EVs) to their staff as part of a salary sacrifice arrangement but as this is not available to partners what are the benefits of purchasing a car privately?

Purchasing an EV for your business can be tax efficient, but the extent of tax relief depends upon your business mileage. As for all business assets, the tax relief is restricted for any personal use. For example, care needs to be taken as the commute to surgery is private use, which does not qualify for tax relief.

Where a new vehicle is bought outright or on a Hire Purchase agreement, Capital Allowances can be claimed which qualify as Enhanced Capital allowance and so the tax relief is accelerated as 100% First Year Allowances are permitted for electric cars. Capital allowances do not apply if you acquire a EV using PCP.

Other benefits of EVs also include being exempt from some urban charging zones fees and improving the environmental credentials of your business.

How the tax relief works for partners

Where an EV is purchased: Capital Allowances can be claimed by the partner where an EV is purchased and used by the partner in the partnership trade.

- ▶ In both cases the Capital Allowances are restricted for any private use
- ▶ 100% First Year Allowances can only be claimed on the purchase of new and unused cars with CO2 emissions of 0g/km, or where the car is electric.

Where an EV is leased: tax relief is instead given on the monthly lease costs rather than the cost of the EV, again restricted for any private use.

New EV charging points: full expensing is also available for the purchase of new EV charging points for expenditure incurred up to 5 April 2025, again subject to any personal use adjustments required.

When the EV is sold: a balancing adjustment will arise. Where the proceeds exceed the tax written down value in the Capital Allowances pool a balancing charge will arise, this decreases the Capital Allowances for the year and is treated as an additional trading profit.

Claiming the tax relief: the tax relief for Capital Allowances will be given to the individual partner by way of reducing the taxable share of partnership profits.

For example:

EV leased / owned by the individual partner:

- ▶ £1,000 lease payment per month for a 36-month lease starting in April 2023
- ▶ £50,000 if bought outright
- ▶ 20% business use (i.e. your actual business miles are 2,000 out of a total of 10,000 miles) 40% taxpayer.

For more information please contact:

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Tax relief

- ▶ Leased: Cost per year = £12,000
 - Allowable deduction of £12,000 restricted to 20% = £2,400
 - Gives a tax saving for a 40% taxpayer of £960 for the year.
- ▶ Purchased: Total cost = £50,000
 - First Year Allowances of £50,000 restricted to 20% = £10,000
 - Gives a tax saving for a 40% taxpayer of £4,000 in the year of purchase. Note, there will be a balancing adjustment when the car is sold (see above).

Next steps:

If you are intending on making a purchase of an EV, tax relief will be claimed in the tax year the car is purchased, i.e. on or before 5 April 2024 for tax relief in the current 2023/24 tax year. All partners will be assessed to tax on profits up to 31 March/5 April 2024 for the 2023/24 tax year due to Basis Period Reform, therefore, if your normal practice year end is not 31 March you will still receive tax relief in the 2023/24 tax year with a purchase on or before 5 April 2024.

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Within the intricate web of prescription pricing in England, a significant challenge arises when the Pricing Authority and dispensing practices find themselves at odds over the charge group assigned to a prescription. This phenomenon, known as prescription switching, carries far-reaching implications for both dispensaries and patients.

Prescription switching occurs during the pricing process when the Pricing Authority disagrees with the designated charge group (paid or exempt) assigned to a submitted prescription. For forms initially declared as exempt, any incomplete declaration of exemption triggers a switch to chargeable, resulting in prescription charges deducted from the contractor's payment for each item. Conversely, for chargeable forms, a switch to exempt occurs if a completed declaration of exemption or valid patient age exemption is identified, leading to the waiver of charges for the items on that form. If prescriptions are switched from exempt to chargeable, and the dispensary has not charged the patient for those prescriptions, then the dispensary will suffer a financial loss from this process.

PharmData has requested and analysed data on prescription switches for pharmacies and dispensing doctors in England and revealed some insights on the scale of the issue. In August 2023, **3,859** out of 10,953 pharmacies and **849** out of 880 dispensing doctors had at least one prescription switch. Additionally, for the 12 month period up to and including August 2023, only 4 dispensing doctors in England had zero prescription switches, compared to over 2,000 pharmacies. Some details about Dispex training packages here. You can view the full PharmData report [here](#).

Further Resources

- Click [here](#) to see Dispex's article on understanding prescription charges taken by the practice compared with prescription charges deemed to have been taken by NHSBSA.
- Click [here](#) for details on the NHSBSA & Dispex FREE endorsing, batch submission and switching webinars.

WHO Are They?



The PharmData team, consisting of accomplished pharmacists, is dedicated to creating customised

software solutions for pharmacies and dispensing doctors. PharmData removes all the difficulty in processing the vast amount of data available from the NHS, making it accessible so that you can effectively monitor and improve your business.

In 2021, PharmData collaborated with Dispex to introduce **DispexCD**, a customised electronic Controlled Drugs register exclusively for Dispex customers. This online register is specifically tailored to meet the requirements of dispensing doctor dispensaries and is fully compliant with NICE guidelines.

Understanding Prescription Charges- PART 4

In this article on the PCSE Drug Statements we will be dealing with Understanding the NHSBSA Referred Back Items and Disallowed Items. Click [here](#) to read in full.

Dispensary Cleaning Standard Operating Procedures

As the cold and flu season is in full swing, perhaps it's time for a thorough deep clean!

While dispensary work surfaces must be wiped down with a clean, hygienic cloth at the beginning and the end of each working day. In addition to conducting daily checks on all dispensing equipment to ensure cleanliness and functionality, it might be opportune to schedule a deep clean, addressing not only the nooks and crannies, but also focusing on high-touch areas.

It's advisable to verify the presence of a cleaning Standard Operating Procedure (SOP) and check sheet in your operational protocols. Dispex members can login [here](#) to download our SOP [D1-Dispensary Cleaning](#).

While on the topic of cleaning and organising, lets take a look at Disposal of Medicines! This area deserves particular attention, especially if you have new staff, have an excess waste awaiting collection or inappropriate segregation of waste medicines!

Our comprehensive [SOP DPX-QC3 Disposal of Medicines](#), covers the following:

Refer to the guidance from your waste management contractor regarding waste licences or registered exemptions. **COSHH guidelines** to be adhered to throughout this process.

This SOP applies to waste general medicines and does not include waste CDs (refer to [SOP-CD destruction](#)).



Learning Styles

The concept of "learning styles" refers to the idea that individuals have preferred ways of learning and processing information. There are several recognised learning styles, some common types of learners include...click [here](#) to read in full.



UTILISE YOUR NEXT PROTECTED LEARNING DATE!

Customised face-to-face training

We can bring the training to you, our half day on-site training sessions allows full interaction between your team and our tutor. All we require is a suitable room where the group won't be disturbed. Access to your dispensary is handy, but not imperative.

While there are geographical limitations, if an in-person visit is not feasible, we can adapt most courses for delivery over a private Teams meeting.

Utilise your next PLT date, contact the training department for further details!

Easy to visit areas:

- Warwick
- Worcester
- Oxford
- Leicester
- Gloucester
- Northampton
- Buckingham



training@dispex.net

Half a million patients save money with the HRT PPC

Source: NHSBSA Newsletter

More than 500,000 HRT PPC have been purchased since the 1 April 2023 launch.

The certificate allows patients to access an unlimited number of listed HRT medicines over 12 months, for a one-off payment of £19.30. Patients save money with the certificate if they pay for more than two HRT prescriptions within 12 months. You can play a vital role in raising awareness of the HRT PPC with patients.

Free HRT PPC resources

Our new provider portal is available for everyone from 11 March

Source: The CQC 26.2.24

In just over two weeks all providers registered with CQC will be able to create an account on our new provider portal. We'd previously advised that our new portal would be available for all providers from 27 February. To ensure we give providers the best experience we are moving our launch date to 11 March. Our new portal will offer a better experience when submitting statutory notifications and completing some registration actions.

Here's what to do to get ready for these changes:

- Make sure all the contact details we hold for your organisation are correct (you'll need to sign up to the new portal using an email address we have on record)
- **Watch** the introduction to our new provider portal

Click [here](#) for the source and [here](#) for the video.

ARE YOU A GP? DO YOU HAVE A HYBRID PHARMACY

Join our free Facebook Group to
discuss all things Hybrid!

Search: "Dispensing GPs Hybrid Pharmacy Group"
in Facebook or scan the QR code!



Calendar of national campaigns

Handy links (text in **bold**) for upcoming national campaigns and awareness days to help you plan activities and your social pages.



MARCH

Ovarian Cancer Awareness Month

March

Ovarian Cancer Awareness Month

International Women's Day

8 March

International Women's Day

National No Smoking Day

13 March 2024

British Heart Foundation

International Transgender Day of Visibility

31 March

Workplace Pride



APRIL

Stress Awareness Month

April

Stress Management Society
Supporting our NHS people

Lesbian Visibility Day

26 April

#LVW24

Special Days

10th March- Ramadan expected to begin

10th March- Mothering Sunday

29th March - Good Friday BH

31st March- Easter Sunday

OFFICE *hours*



Easter Bank Holiday Closure:

FRIDAY, 29TH MARCH

MONDAY, 1ST APRIL

IMPORTANT INFORMATION

Please note, our bank account has changed to:
BARCLAYS BANK PLC Dispex Limited Account
Number: **23265552** Sort Code: **20-00-00**



enquiries@dispex.net

DISPEX ANSWERS

The experts at Dispex provide answers to the most common questions, quoting the relevant regulations.

Q: We have two GPs and we split prescriptions when sending to NHSBSA for reimbursement. However, we also have a Paramedic and a Pharmacist who rarely prescribe, but when they do, is a separate code required or can any scripts be included alongside the GPs? What's the best practice please?

A: Dispex members can login [here](#) to find out

We will continue to add more questions and answers as time goes on.

Here to HELP

Don't forget Dispex members have access to our support helplines!

 enquiries@dispex.net

 01604 859000 (10am-1pm)

 dispex.net

Join Dispex



dispex.net/membership



Dispex



DispexLtd

Rate our service on

 PRACTICE INDEX







RATE OUR SERVICE



Dispex is working with **Practice Index** to inform dispensing practices about the numerous benefits of our services and membership. We highly value your custom and would be grateful for your feedback regarding our services. It can take as little as 60 seconds to leave a review. Please click [here](#) to leave us your thoughts. **THANK YOU**



Time-saving profitability tools

Love DispexCD, we'll never go back to paper registers

The best bespoke CPD training

