

Agreed quantities of medicines to be supplied to patients from Secondary Care

Types of Medicines	In-patient	Day case	Out-patient
Long term from HUTH	Minimum 14 days [#]	Not supplied unless initiated by HUTH/NLAG- then 28 days or until further review	28 days supplied if urgent* (except if review required within 28 days) See below for Red/Amber SCF drugs
Long term from NLAG			14-28 days supplied if urgent* (except if review required within 28 days) See below for Red/Amber SCF drugs
Long term from HTFT	Minimum 14 days [#]	N/A	28 days supplied if urgent* – depending on risk assessment/review of patient from Mental health services. See below for Red/Amber SCF drugs
Long term from CHCP	Minimum 14 days [#]	N/A	N/A
Long term from Navigo	Minimum 7 days [#]	N/A	28 days supplied if urgent* – depending on risk assessment/review of patient from Mental health services. See below for Red/Amber SCF drugs
Long term from RDASH	Minimum 14 days [#]	N/A	14 days supplied if urgent* – depending on risk assessment/review of patient from Mental health services. See below for Red/Amber SCF drugs
Short term e.g. analgesia, laxatives, antibiotics, dressings	<ul style="list-style-type: none"> • Full course of antibiotics, corticosteroids (unless long-term prophylaxis, or further review required) • Analgesia, laxatives, dressings – typically 1-2 weeks, up to maximum of 28 days, dependent on clinical need (7 – 14 day maximum for HTFT discharges) • Short term thromboprophylaxis (up to 6 weeks) – full course 		
Nutritional Supplements	<p style="text-align: center;">10 days for sip feeds, supplied from wards/pharmacy e.g. fortisips</p> <p>10-14 days for specialist cohort of patients e.g. oncology/enteral feeds (i.e. Nutrison) to allow homecare service to be set up</p>		

Red drugs	On-going supply prescribed by specialist – quantities will vary dependent on patient review	
Amber Shared care drugs	Up to 28 days on discharge#. Further supplies via out-patient clinic dependent on shared care framework	As per shared care framework
Medicines supplied in Multi Compartment Compliance Aids (MCAs) – also known as MDS, NOMADs	<p>HUTH, CHCP, NLAG, RDASH and Navigo do not supply medicines in MCAs. Where a patient’s medicines are usually supplied in MCAs, staff will consider individual circumstances and supply appropriate quantity of medicines in standard packaging or liaise with GP and/or community pharmacy for supply in an MCA.</p> <p>HTFT do supply MCAs for patient using prior to admission or initiate following assessment of compliance aid needs (i.e. MCAs is an essential enabler for self-administration at home)</p>	

* Where treatment is required following an out-patient clinic appointment and it is not necessary to start treatment within the next 28 days, a clinic letter will be sent to the GP.

If a patient presents as at risk of overdose, the appropriate number of days supply should be issued.

Document and version control	This information is not inclusive of all prescribing information and potential adverse effects. Please refer to the SPC (data sheet) or BNF for further prescribing information.		
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1	Jane Morgan	Principal Pharmacist - HUTH	Transferred to new template from previous HERPC document, reviewed by pharmacy in all providers