



## **Procedure for Lost, Stolen and Fraudulent Prescriptions**

**NHS England - North Midlands  
(Derbyshire & Nottinghamshire)**

## **Procedure for Lost, Stolen and Fraudulent Prescriptions**

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Classification: OFFICIAL

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## 1 Introduction

- 1.1 This document details the local procedure for lost, stolen and fraudulent prescriptions for NHS England North Midlands in Derbyshire and Nottinghamshire.

It seeks to provide guidance and establish the principles that independent primary care contractors should follow (GPs, Independent Prescribers, Dentists and Community Pharmacists), for initiation of a local notification/alert process, and includes good practice guidance on the security and safe handling of prescriptions. See NHS Protect aide-memoires for Prescribers and Practice Managers (Appendix 2 and 3).

- 1.2 The NHS Protect security of prescriptions document highlights lost, stolen or fraudulent prescription forms and their consequent misuse as an area of concern for a number of reasons. All prescription forms have a financial cost attached. Blank computer prescription forms were originally considered to be of a low security risk but there are now an increasing number of instances when theft and computer software has been used to generate fraudulent prescriptions. The theft often only becomes apparent when fraudulent prescriptions are presented at pharmacies and work is then carried out to identify how and from where they have been stolen. Prescription forms should be treated as 'blank cheques' which, in the wrong hands, can lead to a misuse of NHS resources. Prescription forms/prescription pads are small items that are easy to conceal and move. Lost, stolen or fraudulent individual prescription forms, or prescription pads, can be used to illegally obtain controlled drugs (CDs), as well as other medicines either for illegitimate personal use, or for the purpose of selling them on. The prescription forms themselves are items of value which can be sold to a third party.

- 1.3 This procedure is intended for use by those in the following roles in primary care settings within Derbyshire & Nottinghamshire.

- Prescribers of medicines (including locum staff)
- Independent Prescribers
- Supplementary Prescribers
- Pharmacists and dispensing staff
- Staff who manage and administer prescription form stock

- 1.4 NHS England North Midlands (Derbyshire and Nottinghamshire) Primary Care Contracting will have overall responsibility for any amendments to this procedure, its ongoing development and distribution.

- 1.5 Due to NHS organisational changes, it is acknowledged that this is an evolving procedure and that there may be changes in practice and new situations that may arise before the next formal review of this procedure. Staff should therefore use professional judgement, be aware of their own limitations, seek advice and consult with senior staff where necessary if they are unsure of what action to take.

## 2 Aims

- 2.1 The main aim of this procedure is to ensure a simple, rapid, failsafe system is in place:
- so that an alert can be implemented, following report of identified prescriptions which have been lost, stolen, or are fraudulent, and
  - to minimise the risk to the health community of prescription forms being used illegally, which may result in harm.
- 2.2 Organisations must ensure that effective arrangements have been put in place to ensure that incidents and risks are reported and dealt with in accordance with the NHS Protect standards.

## 3 Roles and Responsibilities

- 3.1 All organisations that manage and use prescription forms have a duty to implement procedures and systems to ensure, as far as practicable, that all prescription stationery is properly protected and secured. Primary Care independent contractors have a role in following this procedure if they identify or suspect prescriptions forms are lost/stolen/fraudulent.
- 3.2 It is important that there are effective processes in place for staff to report incidents. In the event of a loss, suspected theft or a fraudulent prescription staff should be supported and encouraged to report and be assured that the incident will be investigated and appropriate action taken.
- 3.3 **NHS England North Midlands (Derbyshire and Nottinghamshire) Primary Care Contracting Team have the responsibility of implementing the local alert procedure.**

## 4 Prescriptions

This procedure applies to the following prescription types, although not all of the subtypes may be in circulation within NHS England North Midlands (Derbyshire and Nottinghamshire).

| Colour of prescription | Prescription type:                     | Who they are used by:   |
|------------------------|--|---|
| Green                  | FP10<br>FP10SS                         | GP<br>Nurse Prescriber<br>Nurse Independent/Supplementary Prescriber<br>Independent Prescribers<br>Supplementary Prescribers<br>Hospital Unit |
|                        | FP10NC                                 | GP  |
|                        | FP10HNC                                | Hospital Unit   |
| Blue                   | FP10MDA-SS                             | GP<br>Nurse Independent/Supplementary Prescriber<br>Independent Prescribers<br>Supplementary Prescribers<br>Hospital Unit                     |
|                        | FP10MDA-S                              | GP  |
|                        | FP10MDA-SP                             | Independent Prescriber<br>Supplementary Prescribers   |
|                        | FP10HMDA                               | Hospital Unit   |
| Yellow                 | FP10D                                  | Dentist   |
| Pink                   | FP10PCDSS                              | Private prescribers issuing Schedule 2 and 3<br>Controlled Drugs dispensed by community<br>pharmacy   |
|                        | FP10PCDNC                              |   |
| Lilac                  | FP10PN                                 | Community Practitioner Nurse Prescriber<br>Nurse Independent/Supplementary Prescriber   |
|                        | FP10SP                                 | Community Practitioner Nurse Prescriber<br>Nurse Independent/Supplementary Prescriber   |
|                        | FP10P-REC<br>(Non-FP10 supply<br>form) | Out of Hours Prescribers (used by OOH to<br>record items supplied directly to a patient, not<br>dispensed by a community pharmacy)            |

<http://psnc.org.uk/dispensing-supply/receiving-a-prescription/is-this-prescription-form-valid/>

## 5 Lost or Stolen Prescriptions

### Reporting:

- 5.1 If a prescriber or community pharmacy staff member suspects that a prescription(s) has been lost or stolen then the prescriber or staff member must contact NHS England – North Midlands, Primary Care Contracting Team based at Birch House either by email or telephone as soon as possible after the event i.e. **within 1 working day**:

📧 Derbyshire - [e.derbyshirenottinghamshire-pharmacyderbys@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacyderbys@nhs.net)

📧 Nottinghamshire – [e.derbyshirenottinghamshire-pharmacynotts@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacynotts@nhs.net)

☎ Telephone: 0113 8251854

A series of questions will be asked in order for NHS England – North Midlands to complete the standard information form (Appendix 4). See flowchart which outlines actions to be taken (Appendix 1).

- 5.2 The prescriber or staff member should notify:

- the designated person with overall responsibility for prescription forms in their organisation
- the Controlled Drugs Accountable Officer (CDAO) if applicable and
- the Police as required (by dialling 101).

Prescribers/Practice Managers should also refer to the NHS Protect security of prescriptions forms guidance.

[http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security\\_of\\_Prescription\\_forms\\_Updated\\_August\\_2015.pdf](http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security_of_Prescription_forms_Updated_August_2015.pdf)

The matter should be recorded as a security incident on the organisation's incident reporting system. NHS Protect should be notified of the incident by completing their notification form which should be emailed to NHS Protect at [prescription@nhsprotect.gsi.gov.uk](mailto:prescription@nhsprotect.gsi.gov.uk).

- 5.3 The Primary Care Contracting Team will send an alert (Appendix 5 or 6) by email to the contacts on the lost/stolen prescription distribution list and Practice Manager, Pharmacist or reporter. If the incident occurs on the border of Derbyshire or Nottinghamshire, the neighbouring region or regions will also be informed by the alert administrator.
- 5.4 The Primary Care Contracting Team will electronically record the alert letter and alert dissemination details.
- 5.5 In the event of loss or theft of a prescription pad the Primary Care Contracting Team may allocate a specific number for the prescriber to quote on their prescriptions and will specify the colour of the ink to be used to sign prescriptions

(normally red or green) for a period of 2 months following the loss/theft. This number must be written on the bottom right hand corner of the prescription(s).

- 5.6 In the event that the prescriber's name is unknown on the lost/stolen prescription(s), all prescribers within the practice must sign their prescription in the agreed colour of ink and use the allocated number for a period of 2 months as in section 5.5

## 6 Out of Hours

- 6.1 If the incident occurs out of hours contact the Primary Care Contracting Team immediately on the next working day.

## 7 Fraudulent Prescriptions

- 7.1 When pharmacists have any doubts about the authenticity of a prescription they, or a member of the dispensing staff should contact the prescriber to establish if the prescription is genuine or is fraudulent. If this is done by telephone, the number should be obtained from an alternative source e.g. the telephone directory rather than relying on the information on the prescription form. All prescribers and staff dealing with prescriptions should be aware of these requirements, to ensure that the relevant checks are conducted.

Examples of fraudulent activity may include:

- Addition (amendment to the original prescription)
- Excessive quantities
- Medicine known to be commonly misused
- Uncharacteristic prescribing or method of writing prescription by a known doctor
- Dr inserted before (or after) the prescriber's signature

These precautions should be considered by community pharmacy staff for all prescriptions for all drugs, but particularly controlled drugs and those drugs liable to misuse.

- 7.2 Pharmacists and dispensing staff are encouraged to be proactive in questioning any discrepancies on prescriptions. Under no circumstances should pharmacy staff compromise their safety; only challenging presenting individuals if it is safe and appropriate to do so.
- 7.3 If the prescription is found to be fraudulent the community pharmacy staff member should contact the Police by telephoning 101.

## Reporting:

- 7.4 If a prescriber or community pharmacy staff member suspects that a prescription(s) is fraudulent then the prescriber or staff member should contact NHS England – North Midlands, Primary Care Contracting Team based at Birch House either by email or telephone as soon as possible after the event i.e. **within 1 working day.**

📧 Derbyshire - [e.derbyshirenottinghamshire-pharmacyderbys@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacyderbys@nhs.net)

📧 Nottinghamshire – [e.derbyshirenottinghamshire-pharmacynotts@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacynotts@nhs.net)

☎ Telephone: 0113 8251854

A series of questions will be asked in order to complete a standard information form (Appendix 4). See flowchart which outlines actions to be taken (Appendix 1).

- 7.5 If the forged prescription is due to the false amending of an original legitimate prescription then the Primary Care Contracting Team will compose a standard alert letter (Appendix 7) and then email this to contacts on the fraudulent prescription distribution list.
- 7.6 The pharmacist or community pharmacy staff member must inform the Controlled Drugs Accountable Officer if the prescription contains a controlled drug as soon as possible after the event i.e. **within 1 working day.**
- 7.7 If the forged prescription has been stolen, the Primary Care Contracting Team may allocate a specific number to quote on the prescriber's prescriptions and the colour of the ink the prescription must be signed in (normally red or green). This number must then be written on the bottom right hand corner of the prescription form. Both the ink colour and the number must be used for a period of 2 months from the date of the theft or loss. The Primary Care Contracting Team will compose a standard alert letter (Appendix 7) and then email this to contacts on the stolen prescription list.

## 8 Out of Region

- 8.1 If the Primary Care Contracting Team is informed of a lost/stolen/fraudulent prescription from a locality outside the North Midlands region (Derbyshire or Nottinghamshire) or the prescription originated from a nearby region the notification will be cascaded to the Derbyshire and Nottinghamshire distribution list.

## 9 Pharmacy Reward Scheme

### Part XIVA - Reward Scheme - Fraudulent Prescription forms

Payments to pharmacies who claim a payment under Regulation 97(1) of the National Health Service (Pharmaceutical and Local Pharmaceutical Services)

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Regulations 2013 for England and under Regulation 18B of The National Health Service (Pharmaceutical Services) Regulations 1992 (as inserted by SI 1999/696) for Wales.

The scheme allows pharmacies to claim a financial reward where they have identified a fraudulent prescription form and thereby either prevented fraud or contributed with valuable information to the investigation of fraud. A reward is payable where:

- Fraudulent activity can be proven
- The conditions for the scheme are met as set out below.

The NHSBSA, NHS Protect (Referred to below as the Authority) is responsible for receiving and considering claims for reward payments in England.

### **Retention and Reporting Reward: claims where a pharmacy**

- (a) has not provided the drugs, medicines or listed appliances ordered on the fraudulent prescription form, or
- (b) has provided the drugs, medicines or listed appliances ordered on the fraudulent prescription form, but had reason to believe at the time or subsequently came to have reason to believe that the form is fraudulent, and reports this to the relevant authorities as laid out below.

The chemist will be eligible for a payment of £70, where all the conditions for either the retention element of the reward or the reporting element of the reward are met. Only one reward will be payable for each dispensing occasion.

The conditions for the retention element of the reward are:

- i the drugs, medicines or listed appliances specified on the fraudulent prescription form have not been provided, the prescription form has been retained by the chemist, and NHS England has been informed as soon as practicable, in accordance with Regulation 97(1)(a) of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013;
- ii a claim is made by contacting the Authority as soon as practicable, normally within 7 days of the form having been presented. A claim form provided by the Authority must be completed and returned to the Authority, along with the original prescription form, normally within 28 days of the form having been presented; and
- iii the form presented as a prescription form was not a genuine order for the person named on the form. An order would not be a genuine order if, for example, it had been stolen or counterfeited and not signed by an authorised prescriber; or had been altered otherwise than by the authorised prescriber by whom it was issued.

The conditions for the reporting element of the reward are:

- i the drugs, medicines or listed appliances specified on the fraudulent prescription form have been dispensed, but the chemist has reason to believe at the time or subsequently comes to have reason that the order is not genuine;
- ii the chemist has notified NHS England as soon as practicable, in accordance with Regulation 97(1)(b) of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013;
- iii a claim is made by contacting the Authority as soon as practicable, normally within 7 days of the form having been presented. A claim form provided by the Authority must be completed and returned to the Authority along with the original prescription form, normally within 28 days of the form having been presented;
- iv a detailed explanation of why the chemist felt it necessary to dispense must be included on the claim form. A reward will only be payable where the Authority is satisfied that the chemist had good and sufficient reasons to dispense; and
- v the form presented as a prescription form was not a genuine order for the person named on the form. An order would not be a genuine order if, for example, it had been stolen or counterfeited and not signed by an authorised prescriber; or had been altered otherwise than by the authorised prescriber by whom it was issued.

Where the time-limits for either contacting the Authority and NHS England or for returning a claim form to the Authority, as specified above, are exceeded, the Authority will nevertheless consider a claim if there are exceptional circumstances justifying the delay.

**Pharmacists who are eligible to claim a reward under the scheme should contact:**

NHS Protect  
Information, Security and Systems  
Citygate  
Gallowgate  
Newcastle Upon Tyne  
NE1 4WH  
Freephone: 0800 068 6161  
Tel: 0191 2046300

## 10 Private Controlled Drugs Prescriptions

- 10.1 Pink Private CD Prescriptions forms (FP10PCD) were introduced in 2006. These are for any private prescriptions of schedule 2 and schedule 3 controlled drugs. A private prescriber is required to have a private prescriber identification number allocated by NHS England Controlled Drugs Accountable Officer. Pharmacists must not dispense any private prescriptions for CDs unless they are written on a FP10PCD.

- 10.2 All prescribers that are registered to prescribe controlled drugs privately are responsible for the safety and security of their prescription pads.
- 10.3 If a prescriber suspects that a private controlled drug prescription or prescriptions have been lost or stolen, then they must follow the procedure as outlined in section 5 as applicable and contact the Controlled Drugs Accountable Officer for NHS England North Midlands.

## 11 Storage, Security & Transportation

- 11.1 The effective management of prescription forms, for example how they are stored and accessed by authorised prescribing and non-prescribing staff is very important and requires that appropriate security policies, procedures and systems are in place. These should also be supported by security-aware staff that treat prescription forms as items of value and manage their use effectively. The security of prescriptions is the responsibility of each individual prescriber, who should ensure that the prescriptions are kept safe and secure at all times. It must be recognised that the single sheet prescription forms are acceptable in handwritten form, so it is not advisable to leave the forms in printer trays when not in use or overnight.

Prescribers should refer to the NHS Protect security of prescriptions forms guidance available at:

[http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security\\_of\\_Prescription\\_forms\\_Updated\\_August\\_2015.pdf](http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security_of_Prescription_forms_Updated_August_2015.pdf)

- 11.2 Prescription forms for Schedule 2 controlled drugs should not routinely be sent to the patient's pharmacy via the postal system, but should be collected from the surgery by the patient or their representative. NHSBSA state that if the transportation of controlled drug prescriptions needs to be done via mail, taxi service or equivalent then a standard operating procedure should be developed which reflects a risk management process e.g. this may apply to specialist drug addiction services.
- 11.3 Whilst legislation came into force 01 July 2015 to allow Schedules 2 and 3 Controlled Drugs to be prescribed and dispensed using Electronic Prescription Service (EPS). This process is still not possible until technology and security issues are resolved by NHS Digital for both GP and dispensing systems, and to ensure legislation requirements are met (**expected Autumn 2017**).

## 12 References

NHS Protect - *Security of Prescription forms guidance updated August 2015.*  
[http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security\\_of\\_Prescription\\_forms\\_Updated\\_August\\_2015.pdf](http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security_of_Prescription_forms_Updated_August_2015.pdf)

Pharmaceutical Services Negotiating Committee (PSNC) (2017)  
<http://psnc.org.uk/>

NHS Drug Tariff July 2017.  
<http://www.nhsbsa.nhs.uk/PrescriptionServices/4940.aspx>

## Appendix 1

### Lost, Stolen and Fraudulent prescription reporting flowchart for use by Prescribers and all staff dealing with prescriptions

1. Prescriber/staff discovers prescription form(s) is lost/stolen/fraudulent and notifies NHS England – North Midlands Primary Care Contracting Team:

- 📧 Derbyshire - [e.derbyshirenottinghamshire-pharmacyderbys@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacyderbys@nhs.net)
- 📧 Nottinghamshire - [e.derbyshirenottinghamshire-pharmacynotts@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacynotts@nhs.net)
- ☎️ 0113 82 51854

Designated individual at the organisation must report the incident to the Controlled Drugs Accountable Officer (CDAO) if applicable, and the Police (by dialling 101) in line with practice local arrangements



2. Prescribers/Practice Managers must follow the NHS Protect security of prescriptions forms guidance.

- 📄 [http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security\\_of\\_Prescription\\_forms\\_Updated\\_August\\_2015.pdf](http://www.nhsbsa.nhs.uk/Documents/SecurityManagement/Security_of_Prescription_forms_Updated_August_2015.pdf)

Designated individual at the practice/organisation undertakes an investigation (as appropriate) and the NHS Protect notification form is sent to

- 📄 [prescription@nhsprotect.gsi.gov.uk](mailto:prescription@nhsprotect.gsi.gov.uk)



3. In the event of multiple lost or stolen prescriptions the Primary Care Contracting Team may allocate a specific number to quote on the Prescriber's prescriptions and advise whether the prescriber must sign in a specific colour of ink for a period of time.

Primary Care Contracting Team will issue an alert.

Pharmacy Reward Scheme

Consider if Pharmacy Reward Scheme applies

## Appendix 2



Protect

### Security of prescription forms

#### Aide-mémoire for prescribers

- Be aware that blank prescription forms in the wrong hands are like a blank cheque with an extremely high street value.
- Prescription form stock in possession of prescribers should always be stored securely when not in use.
- Prescribers should keep a record of the serial numbers of prescription forms issued to them. The first and last serial numbers of pads should be recorded.
- Prescribers should be encouraged to use prescription forms in number sequence order to aid tracking of usage, should a potential loss occur
- To reduce the risk of misuse, blank prescriptions should never be pre-signed.
- Patients, temporary staff and visitors should never be left alone with prescription forms or allowed into secure areas where forms are stored.
- Prescribers on home visits should, before leaving the practice premises, record the serial numbers of any prescription forms/pads they are carrying. Only a small number of prescription forms should be taken on home visits – ideally between 6 and 10 – to minimise the potential loss.
- Prescribers on home visits/working in the community should take suitable precautions to prevent the loss or theft of prescription forms. Keep them out of sight when not in use and do not leave any prescription forms in vehicles overnight.
- Prescribers using the FP10PCD forms should exercise extra caution as there is greater potential for misuse of these forms.
- Blank or signed prescription forms should never be left at patients' homes, care homes or community pharmacies for GP or locum visits.
- Personalised forms which are no longer in use should be securely destroyed (e.g. by shredding) before being put into confidential waste, with appropriate records kept.
- Spoiled or cancelled prescription forms should be retained for audit purposes.
- In the event of a loss or theft of prescription form stock, local procedures should be followed and the Practice Manager, Area Team, Controlled Drugs Accountable Officer and the Police should be notified as required. The incident should also be recorded on the organisation's incident reporting system. NHS Protect should also be notified at [prescription@nhsprotect.gsi.gov.uk](mailto:prescription@nhsprotect.gsi.gov.uk) using the form at annex B of the Security of prescription forms guidance document.



## Security of prescription forms

### Aide-mémoire for practice managers

- Develop a prescription security awareness culture amongst practice staff and Prescribers.
- Ensure that robust policies and procedures are in place to manage the effective security of prescription forms in the practice.
- Designate a member of staff to accept overall responsibility for overseeing the whole process involved – from the ordering, receipt, storage and transfer of prescription forms to their overall security (including access to them).
- Maintain an up-to-date list of all Prescribers within the practice to account for those who have left, moved employment/CCG area or been suspended from prescribing duties.
- Check deliveries of prescription form stock from the Area Team/supplier whilst the delivery driver is present, to check order and amount are correct and packaging is sealed and unbroken.
- Report and investigate irregularities at delivery stage immediately with the Area Team/supplier.
- Transfer prescription form stock to secure storage immediately.
- Ensure access to secure storage is restricted and all staff access to/from secure storage is recorded.
- Maintain clear and unambiguous records on prescription form stock received and distributed.
- Patients, temporary staff and visitors should never be left alone with prescription form stock or allowed into secure areas where forms are stored.
- Prescribers conducting home visits should be alerted to and be mindful of the potential dangers associated with carrying around prescription forms or leaving them unattended.
- Personalised prescription forms which are no longer in use should be securely destroyed, e.g. by shredding, before putting into confidential waste.
- Spoiled or cancelled prescription forms should be retained for audit purposes.
- In the event of a loss or theft of prescription form stock, local procedures should be followed and the Area Team, Controlled Drugs Accountable Officer and the Police should be notified as required. It should also be recorded on the organisation's incident reporting system. NHS Protect should also be notified at [prescription@nhsprotect.gsi.gov.uk](mailto:prescription@nhsprotect.gsi.gov.uk) using the form at annex B of the Security of prescription forms guidance document.



## Appendix 4

### Lost/Stolen/Fraudulent Prescription(s) data capture form (for use by NHS England only)

Name of reporter & contact details: \_\_\_\_\_

\_\_\_\_\_

Reporting practice/pharmacy name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

CCG: \_\_\_\_\_

Name of Prescriber(s): \_\_\_\_\_

Practice/Prescriber Address: \_\_\_\_\_

\_\_\_\_\_

**Questions to ask re:  
lost/stolen prescription(s)**

The number of prescriptions involved?

\_\_\_\_\_

Serial Number(s)  
(if known)

\_\_\_\_\_

Date/time prescription presented to pharmacy?

\_\_\_\_\_

**Questions to ask re:  
fraudulent prescription(s)**

What was the original medicine written on the script?

\_\_\_\_\_

Forged prescription states?

\_\_\_\_\_

Patient name and address on the prescription:

\_\_\_\_\_

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Prescription re-printed with prescriber details:

Yes

No

Police informed:

Yes

No

Date of incident:

\_\_\_\_\_

Details of incident:

Lost

Stolen

Fraudulent

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Call taken by:  
(NHS England)

\_\_\_\_\_

Date/time of call:

\_\_\_\_\_

| Action required  | Completed Yes/No | Date and time undertaken | Officer sending Email |
|--|------------------|--------------------------|-----------------------|
| Complete alert letter and email to lost/stolen/forged distribution list;   |                  |                          |                       |
| Copying in: <ul style="list-style-type: none"> <li>• Practice manager of practice concerned;</li> </ul>  |                  |                          |                       |
| <ul style="list-style-type: none"> <li>• Nottinghamshire Police CD Liaison Officer</li> <li><b>or</b></li> <li>• Derbyshire Police CD Liaison Officer</li> </ul> |                  |                          |                       |
| <ul style="list-style-type: none"> <li>• NHS Protect if applicable</li> </ul>  |                  |                          |                       |

## Appendix 5



### Example letter – LOST/MISSING Prescription

Date:

#### Emailed to All Pharmacies in Derbyshire & Nottinghamshire

Primary Care Contracting Team  
NHS England  
North Midlands  
Birch House  
Ransom Wood Business Park  
Southwell Road West  
Mansfield  
Nottinghamshire  
NG21 0HJ

Email:

 [e.derbyshirenottinghamshire-pharmacyderbys@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacyderbys@nhs.net)

 [e.derbyshirenottinghamshire-pharmacynotts@nhs.net](mailto:e.derbyshirenottinghamshire-pharmacynotts@nhs.net)

 0300 300 1234

Dear Pharmacist

#### Re: LOST/MISSING PRESCRIPTION

NHS England North Midlands have been notified today of a lost/missing prescription. If this prescription is presented please do not dispense.

The details on the prescription are as follows:-

**Name:**

**Address:**

**DOB:**

**Drug(s):**

**Dose:**

**Quantity:**

**From:**

**Instalments:**

**Prescriber:**

**Pharmacy:**

**Additional information:**

If you are presented with a prescription for dispensing for the above named person and you have reason to doubt its authenticity you should contact the prescriber then if found not to be genuine you should contact the Police **immediately** by phoning 101.

Yours sincerely

**Primary Care Contracting Team**

Cc: GP/Prescriber



## Appendix 6

### Example letter – Multiple LOST/STOLEN prescriptions

Primary Care Contracting Team  
NHS England  
North Midlands  
Birch House  
Ransom Wood Business Park  
Southwell Road West  
Mansfield  
Nottinghamshire  
NG21 0HJ

Date:

#### Emailed to All Pharmacies in Derbyshire & Nottinghamshire

Email:

 [e.derbyshiren Nottinghamshire-pharmacyderbys@nhs.net](mailto:e.derbyshiren Nottinghamshire-pharmacyderbys@nhs.net)  
 [e.derbyshiren Nottinghamshire-pharmacynotts@nhs.net](mailto:e.derbyshiren Nottinghamshire-pharmacynotts@nhs.net)

 0300 300 1234

Dear Pharmacist

#### Re: LOST/STOLEN PRESCRIPTION(S)

NHS England North Midlands have been notified by **Dr X** of **SURGERY ADDRESS** that a number of prescriptions have been **lost/stolen**.

**(Give an example of the loss)** e.g. Stolen from car, when, where.

The serial numbers on the prescription(s) are **xxxxxxxxxxxx** and included the following items (or were blank):

#### Example

|                          |            |
|--------------------------|------------|
| Diazepam 5mg Tablets     | 30 tablets |
| Co Codamol 8/500 Tablets | 30 tablets |

For security purposes **Dr X will sign all prescriptions in (COLOUR INK) and issue using the number X (Refer to NP number issue sheet)** for a period of two months with effect from today.

The details on the prescription form are as follows:-

**Dr X    Surgery            Street    Town    Post Code**

If any prescription forms from Dr x are presented to you for dispensing, that do not show the above allocated number or colour within this two month period, you should treat with caution and contact the prescriber to confirm its authenticity, then if found not to be genuine you should contact the Police **immediately** by phoning 101.

Yours sincerely

**Primary Care Contracting Team**

Cc:    GP/Prescriber

## Appendix 7



**Example letter – FORGED/STOLEN  
Prescription(s)**

Primary Care Contracting Team  
NHS England  
North Midlands  
Birch House  
Ransom Wood Business Park  
Southwell Road West  
Mansfield  
Nottinghamshire  
NG21 0HJ

Date:

**Emailed to All Pharmacies in Derbyshire & Nottinghamshire**

Email:

 [e.derbyshirenotttinghamshire-pharmacyderbys@nhs.net](mailto:e.derbyshirenotttinghamshire-pharmacyderbys@nhs.net)  
 [e.derbyshirenotttinghamshire-pharmacynotts@nhs.net](mailto:e.derbyshirenotttinghamshire-pharmacynotts@nhs.net)

 0300 300 1234

Dear Pharmacist

**Re: FORGED/STOLEN PRESCRIPTION(S)**

NHS England North Midlands have been notified that a prescription form was presented to a pharmacy today, which after investigation appeared to have been stolen and presented as a forgery. Please be advised that there may be similar forged/stolen prescriptions that may still be in circulation. Therefore we ask that you remain vigilant.

The details on the prescription were as follows:-

**Serial number xxxxxxxx**

**Name: xxxxxxxx**

**Drugs: xxxxxxxx**

**Prescriber: xxxxxx**

**Prescriber address xxxxxxxxxxxx**

If you are presented with a prescription for dispensing for the above named person and you have reason to doubt its authenticity you should contact the prescriber then if found not to be genuine you should contact the Police **immediately** by phoning 101.

Yours sincerely

**Primary Care Contracting Team**

Cc: GP/Prescriber