

Reporting organisation and prescriber changes to NHS Business Services Authority (NHSBSA) prescription services

Introduction

Practices are responsible for ensuring the information NHSBSA prescription services hold about their prescribers is correct. Please use this guidance to check that your list of practice prescribers held by the NHSBSA is up to date and to ensure that any prescriber changes are updated in line with this guidance.

NHSBSA prescription services use prescriber and organisation codes to identify where prescription costs should be assigned. The codes are pre-printed on FP10 pads and are entered into the prescribing system to be printed on computer generated FP10s.

There are financial, governance and medico-legal implications if practices continue to use and sign prescriptions of a prescriber who has left, and financial and governance implications if NHSBSA -prescription services is not updated to reflect prescriber changes.

The ICB Medicines Optimisation Team will contact GP Practices quarterly to confirm the prescriber details held on the database are accurate.

Changes to Prescribers

- ***Medical prescribers***

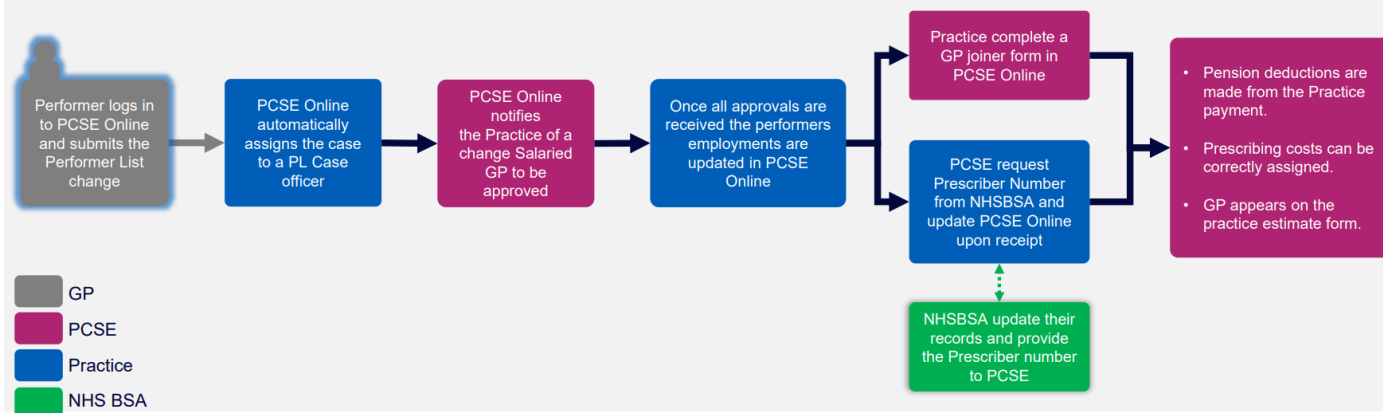
A doctor receives a General Medical Council (GMC) number on qualification. If a doctor chooses to enter general practice in England or Wales, a further 6-digit number is allocated by the NHSBSA prescription services. This number is referred to as the DOCTOR INDEX NUMBER (DIN), which is used as their prescribing code on prescriptions. This code is unique and will move with the GP from practice to practice. NHS Prescription Services use the DIN number to derive the GENERAL MEDICAL PRACTITIONER PPD CODE by prefixing it with a leading character and adding a check digit at the end. This is the code entered into the clinical prescribing systems.

GP prescriber changes are actioned by **Primary Care Support England (PCSE)**. Any GP offering primary care in an NHS setting is required to be registered on the National Performers List. PCSE processes all National Performer List applications. Practice managers authorise status changes for GPs joining, leaving or changing their role within the practice. Further information is available [here](#)



All PL changes begin with the Performer submitting the change in PCSE Online.

Employment changes for a Salaried GP then follow this process:



You can check GPs registered to a practice on the ODS Portal: [NHS Digital ODS Portal](#)

GPs prescribing at more than one practice/cost centre

If a GP is working at more than one practice or cost centre then a **spurious code** is required to avoid all prescribing costs being attributed to one practice/cost centre. The HWE ICB Authorised Signatory can apply for a spurious code. They may also apply for a spurious code for hospital doctors who are not issued with a DIN code but are providing a service in primary care. To request a spurious code email hweicbhv.medicinesoptimisationteam@nhs.net

The Authorised Signatory may request further information if required prior to completing the relevant proforma on the NHSBSA website and sending to prescriptioninformation@nhsbsa.nhs.uk

If a GP prescriber has left a practice, the practice must immediately cease to use the prescriptions and prescribing number of that GP prescriber. Printed prescriptions should be shredded and computers must be updated so they cannot appear on prescriptions.

- **Non-Medical Prescribers (NMPs)**

To request addition, change or removal of an NMP to an NHSBSA prescriber list the requestor should email hweicbhv.medicinesoptimisationteam@nhs.net with the following information:

1. NMP title (e.g. Mr/Mrs/Miss/Ms)
2. NMP name
3. NMP Professional Registration Number (We use this to check they are qualified to prescribe).
4. Start/leaving date (or change of details). Ambiguous dates such as "as soon as possible" or "immediately" are not acceptable.
5. Which practice(s) they will be prescribing in
6. The requestor should confirm in the email that they have the authority to make this change.

Dr Jane Halpin, Chief Executive

Rt. Hon. Paul Burstow, Chair

NMPs can be added to more than one practice/cost centre using their professional body registration code (e.g. NMC pin, HCPC code, GPhC number, etc) as the prescriber code. They do not need a separate code.

If a NMP has left a practice then the practice must immediately cease to use the prescriptions and prescribing number of that non-medical prescriber. Printed prescriptions should be shredded and computers must be updated so they cannot appear on prescriptions. For non-GP prescribers the new employer needs to request they are added to the new practice's systems, only the ICB staff can request they are removed by NHSBSA from your practice code.

Junior and Locum staff

Junior doctors should use the prescribing code of the doctor for whom they are assigned.

Locum doctors should use the prescribing code of the doctor for whom they are providing locum services (unless there are no GPs left in the practice as then a spurious code will be issued).

Locum non-medical prescribers who prescribe as part of their role should use the details of another non-medical prescriber who is registered with the practice and has the same qualification.

Cost Centres

Cost centre additions or deletions or changes (such as, change of address) should be sent to hweicbhv.medicinesoptimisationteam@nhs.net to be reviewed and actioned if appropriate.

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Developed by:	Lucy Wright; Prescribing Support Pharmacy Technician, Herts and West Essex ICB
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