

## CRITERIA FOR HANDLING DISPENSING ERRORS

This paper sets out the agreed criteria regarding the handling of dispensing errors.

Where there is a need to clarify the lead organisation, the information should be referred to the PNG for discussion/decision.

### Criteria

Cases should be referred to the Department for discussion if one or more of the following criteria are true:

- There is suspicion of ill-health or substance abuse by the pharmacist
- There is suspicion that the individual significantly departed from agreed recognised professional standards and/or legal requirements and in doing so took an unacceptable risk
- There is suspicion of other misconduct that would form the basis of a complaint
- There is suspicion that there are repeated/multiple dispensing errors by a single pharmacist or within the same pharmacy premises which are of a level that gives cause for significant concern
- There is suspicion of recklessness or intent
- The dispensing error led to death or moderate or severe harm (as defined by NPSA guidelines), or had the potential to do so (without, for example, the intervention of another person)
- There was suspicion that there was an attempt to conceal the facts or that the pharmacist failed to co-operate with the investigation
- There is evidence that the drugs were particularly potent/required very careful handling and additional checks to be in place, or that the dosage dispensed was substantially greater than that prescribed or substantially beyond the usual treatment range

All other cases should be investigated by the Board

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