

21 December 2023

Information Rights & Compliance Team
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Tel: 01727 804227
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Our Ref: FOI/04997

Thank you for your request concerning medicine pill pouches.

Your request has been considered and processed in accordance with the requirements of the Freedom of Information (FOI) Act 2000.

1. Within your Organisation

a) Are you using medication pill pouches for your patients?

No

b) Who provides these pouches? E.g., Hospitals, community pharmacies (Please state name & address).

Not applicable.

1. On discharge (long or short term)

Not applicable

a) Do you discharge patients on medication pill pouches?

No

b) Who provides the medication pill pouches?

Not applicable.

c) Do you provide other medication prompts aids?

No

d) Do you provide medication prompt visits?

No

Should you require further clarification, please do not hesitate to contact me.



Please find enclosed an information sheet regarding copyright protection and the Trust's complaints procedure in the event that you are not satisfied with the response.

Yours sincerely

Sue Smith

Sue Smith
Information Rights Officer

Enc: Copyright Protection and Complaints Procedure Information Leaflet.

If you would like to complete a short survey in relation to your Freedom of Information request please scan the QR code below or click [here](#).

