Electronic Prescription Service (EPS) Release 2

Implementation Guidance for Pharmacies V2.2
Dear Pharmacy Manager

As you are aware we are rolling out the new Electronic Prescription Service Release 2 and the GP Practice in your area is planning to switch it on shortly. This will mean that you will start to receive electronic prescriptions so you will need to change the way that you work in the pharmacy.

The CSU will be managing the rollout but you will need to liaise closely with your system supplier to ensure that your system is upgraded and you receive full training before you start using the system.

You will need to go through the checklist before we allow the Practice(s) to start sending you prescriptions so please ensure that all tasks are completed before the go live date.

There are a number of tasks which you will need to do to be able to receive the EPS Release 2 prescriptions from the GP Practices and this document sets out what they are. The main points are outlined below.

- **ALL** of your staff will need to be registered and have a Smartcard
  - We will only give out the Smartcards once **ALL** staff are registered
  - You must have an **EPS Release 2 compliant system**
  - You need the correct software to enable you to manage Smartcard certificates
  - You need to have looked at your processes and ensure that you can manage the EPS R2 process safely.
  - Contact the EPS R2 GP Practices in your area and talk to them about their processes and what types of prescription they are going to be sending to you.
  - You will need a stock of **EPS Dispensing Tokens** available from TVPCA
    
    (TVPCA  
    [www.tvpca.nhs.uk](http://www.tvpca.nhs.uk)  
    0118 918 3333)

We recommend you start collecting nominations from patients who wish to use you for EPS R2 prescriptions well before go live date so that patients can use your system from day one – see notes below on Nominations.

We will be organising workshops for you and the GP Practices that are implementing EPS R2 to help you work out how you will manage the EPSR2 scripts you will be getting.

Additional information is also available on the EPS part of the Health & Social Care Information Centre website: [http://systems.hscic.gov.uk/eps](http://systems.hscic.gov.uk/eps)

If you have a video information screen it may be a good idea to show a powerpoint presentation on there to inform patients of the change while they are waiting.

**Contacts for the Project are:**

**Project Manager**  
Janet Bate  
[janet.bate@nhs.net](mailto:janet.bate@nhs.net)  
07776 161218

**Smartcard Contacts:**

**RA Manager**  
Jim Sinclair  
[jim.sinclair@nhs.net](mailto:jim.sinclair@nhs.net)
Main Points

Ensure that you also have Smartcard software as detailed on Page 8

Install EPS R2 system

Obtain EPS R2 Smartcards

Get training from system supplier

Enable system using EPS R2 Smartcard

Order FP10 DT from Thames Valley PCA

Start to enter Nominations onto system

Confirm date GP starting EPS R2 Scripts

Go Live Day

Download EPS R2 Scripts

Print script onto FP10 DT forms

Process script and attach FP10 DT to drugs

Dispense to patient and make as 'Dispensed'

Keep FP10 DT to send to PPA as normal

See details on Smartcard page 2

Produce ‘Golden Script’ to enable payment and ensure that you appear on GP System. May take 1 week plus for this to happen

TVPCA www.tvpca.nhs.uk 0118 918 3333

Liaise with GP Practice from early on

Include FP10 DT’s as normal scripts as they will ask for them!
Patients must not be offered any reward or inducement to nominate a pharmacy by either the Pharmacy or GP Practice.

Patients can only nominate one community pharmacy and one dispensing appliance contractor at a time.

In each case a specific location must be nominated. An organisation or chain of premises cannot be nominated.

Once the patient has been provided with the information they need to support their choice of nomination, a member of staff can set the nomination on the patient’s personal demographics service (PDS) record **within 24 hours**. Nominations can be collected before a dispensing location goes live with EPS Release 2.

To record the nomination, the staff that have the necessary rights authorised on their Smartcard, can process the nomination by searching for the patient’s name, registered address, date of birth and gender. They can also use just the NHS number to locate the patient if this is available. The record can then be updated with the patients chosen dispensing contractor. The process will have to be repeated if the patient would also like to nominate an appliance contractor.

Patients who are currently registered with a community pharmacy for a prescription collection service cannot be automatically “migrated” on to EPS for nomination purposes. However these patients may be approached by the pharmacy individually where appropriate and the patient will be able to nominate them.

Provision of information

Before a nomination is set by a patient, it is up to the nominator (prescriber or dispenser that is setting the nomination on behalf of the patient) to ensure the patient has been given all specific information and that the patient fully understands the nomination process. This information should help the patient make an informed decision as to whether or not nomination is suitable for their circumstances. If nomination is being considered then the following information must also be provided:

- EPS involves electronic transmission of prescriptions safely and securely. Paper is not always required.
- Any dispensing contractor operating Release2 can be nominated.
- Patients are not restricted to nominating a dispensing contractor close to their home or GP practice.
- The prescription will be sent automatically to the dispensing contractor that has been nominated.
- If a patient chooses not to use their nominated dispensing contractor for a particular prescription, they must notify the practice at the time of requesting the prescription.
  - This includes when they are part way through a repeat dispensing cycle;
  - The remaining prescriptions which have not been downloaded will be accessed by the new nominated contractor.
- When a dispensing contractor has been nominated this gives the dispenser the opportunity to access the electronic prescription and prepare the prescription in advance of the patient arriving at the pharmacy to pick up the prescription.
• If the patient decides to go to a different dispensing contractor to the one that has been nominated, the dispenser may not be able to access the prescription, unless they have been given a dispensing token by their GP.

• Patients do not have to partake in the Electronic Prescription Service, if that is the opted choice by the patient then they will not be able to nominate a specific pharmacy nor will they be able to use any of the other services associated with EPS, they will carry on collecting their medication as they have been doing so.

This information can be communicated verbally to the patient and/or to the carer or they can be given the patient information literature to read in their own time before making the decision.

**Using the Nomination**

Once a nomination has been set by the prescriber or dispenser, all electronic prescriptions thereafter will be sent automatically to the nominated dispensing contractor unless the patient requests otherwise from their GP at the time of issue.

If the patient takes their prescription token to a different dispensing contractor, there is a strong possibility that the prescription will have already been retrieved by the original nominated dispensing contractor in anticipation of the patient's arrival. In this case, the patient should be encouraged to return to their nominated dispensing contractor to collect their prescription items.

**Changing the Nomination**

Changing the nominated dispensing contractor of the same type will instantly overwrite the existing nominated dispenser.

**Any electronic prescriptions that have not been retrieved by the previous dispensing contractor will be transferred over to the new nominated site (including any outstanding repeats).**

The patient should be advised by the prescriber or dispenser that s/he will be registering the change. When changing the nominated site midway through a cycle the patient may have to collect the current issue (owed items) from the previous nominated site, if the prescription had been retrieved before the new nomination had been processed.

**It is important to inform the patient that the best time to change their nomination is soon after they have collected an issue, this reduces the risk of the previous nominated dispensing contractor retrieving the prescription in anticipation of the patient’s arrival.**

**Cancelling the Nomination**

Initially if a patient cancels a nomination and doesn't nominate an alternative dispenser and they are part way through an electronic repeat dispensing cycle, they will need to go back to their GP to obtain a paper based repeatable prescription, as electronic repeat dispensing will only be available to patients who decide to use a nominated dispensing contractor.

The person requested to remove the nomination must **clear the nomination within 24 hours** of the patient making the request. From this point onwards the patient will receive a paper prescription to take to the pharmacy of their choosing.
Checklist to support pharmacies going live with EPS

In line with the Standard Deployment Model

<table>
<thead>
<tr>
<th>Steps to consider</th>
<th>Done</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Use Release 1 – scan prescriptions to cleanse patient data.</td>
<td></td>
</tr>
<tr>
<td>2. Obtain Release 2 Smartcards for all staff dealing with prescriptions (dispensing technicians, pharmacists etc.).</td>
<td></td>
</tr>
<tr>
<td>3. Order EPS system (and sign contract where applicable) with supplier and agree a go live date (lead time varies between 4-8 weeks).</td>
<td></td>
</tr>
<tr>
<td>4. Check deployment map for activity in your area.</td>
<td></td>
</tr>
<tr>
<td>5. Ensure that your pharmacy details are up to date on the NHS Choices website.</td>
<td></td>
</tr>
<tr>
<td>6. Order dispensing tokens.</td>
<td></td>
</tr>
<tr>
<td>7. Check with your supplier the requirements for EPS Release 2 hardware.</td>
<td></td>
</tr>
<tr>
<td>8. Agree how you will handle nominations.</td>
<td></td>
</tr>
<tr>
<td>9. Consider your approach to patient communications.</td>
<td></td>
</tr>
<tr>
<td>11. Consider your training approach and book this with system supplier consider two stage training approach (nomination training followed by more detailed dispensing training/refresher training/locum training).</td>
<td></td>
</tr>
<tr>
<td>12. Attend business process change session at GP practice. Consider current processes, and how these will change in Release 2.</td>
<td></td>
</tr>
<tr>
<td>13. Know who to contact in the event of a problem. Ensure you have considered the IT Troubleshooting Guidance.</td>
<td></td>
</tr>
</tbody>
</table>

Dispensing staff (Get the most)

www.hscic.gov.uk/epspfpharm

Get started (Why use EPS, preparation and start using)

http://systems.hscic.gov.uk/eps/dissemin/research

Help (Factsheets, FAQs, service status, raising issues)

http://systems.hscic.gov.uk/eps/dissemin/help

Standard Deployment Model

Checklist to support GP practices going live with EPS

In line with the Standard Deployment Model

<table>
<thead>
<tr>
<th>Steps to consider</th>
<th>Done</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Confirm that local pharmacies wishing to go live with EPS Release 2 are enabled or have placed an order for EPS Release 2.</td>
<td>☐</td>
</tr>
<tr>
<td>2. NHS orders GP system upgrade through GPSoC Schedule A process.</td>
<td>☐</td>
</tr>
<tr>
<td>3. NHS orders and arranges GP system training (supplier or NHS delivered) for all staff dealing with prescriptions (prescription clerks, receptionists, GPs, nurse prescribers etc.).</td>
<td>☐</td>
</tr>
<tr>
<td>4. NHS follows process to gain approval for practice go live date in line with Authorisation Operating Guidance.</td>
<td>☐</td>
</tr>
<tr>
<td>5. NHS ensures all staff have Smartcards with correct role based access controls.</td>
<td>☐</td>
</tr>
<tr>
<td>6. Ensure business process change session is scheduled to consider current processes and how they will change in EPS Release 2 (invite all GP practice staff and local pharmacy staff).</td>
<td>☐</td>
</tr>
<tr>
<td>7. Agree how you will handle nominations.</td>
<td>☐</td>
</tr>
<tr>
<td>8. Consider your approach to patient communications.</td>
<td>☐</td>
</tr>
<tr>
<td>9. Ensure you are using the most up to date drug dictionary.</td>
<td>☐</td>
</tr>
<tr>
<td>10. Ensure system back ups are in place.</td>
<td>☐</td>
</tr>
<tr>
<td>11. Know who to contact in the event of a problem.</td>
<td>☐</td>
</tr>
</tbody>
</table>
**Smartcards for EPS R2**

All staff needing to use EPS R2 will need a smartcard. This includes Dispensing Technicians and Medicine Counter Assistants.

To get your pharmacy team registered with smartcards, you need to contact one of the RA Agents for your county as listed below:

RA Manager       Jim Sinclair       jim.sinclair@nhs.net

The process will then be:-

1. The RA Agent will send the pharmacy manager a spreadsheet to complete detailing the pharmacy team.

2. He/she will need to decide what position each member of the team will need from the table below:

<table>
<thead>
<tr>
<th>Position</th>
<th>Job Role / Activities</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPS Enabled Pharmacist</td>
<td>R8003 Health Professional Access Role</td>
<td>Use as basis for pharmacists who require access to all relevant EPS dispensing functionality.</td>
</tr>
<tr>
<td></td>
<td>B0572 Manage Pharmacy Activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0825 Amend Patient Demographics</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0401 View Patient Medication</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0068 Verify Prescription</td>
<td></td>
</tr>
<tr>
<td>EPS Enabled Pre Registration Pharmacist</td>
<td>R8004 Healthcare Student Access Role</td>
<td>Use as basis for pre-registration pharmacists who initially require limited access to the EPS to view and record dispensing activity under the supervision of a pharmacist.</td>
</tr>
<tr>
<td></td>
<td>B0401 View Patient Medication</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0068 Verify Prescription</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0825 Amend Patient Demographics</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0570 Perform Pharmacy Activities</td>
<td></td>
</tr>
<tr>
<td>EPS Enabled Dispensing Technician</td>
<td>R8008 Admin/Clinical Support Access Role</td>
<td>Use as basis for pharmacy dispensing technicians who require access to all relevant EPS dispensing functionality.</td>
</tr>
<tr>
<td></td>
<td>B0572 Manage Pharmacy Activities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>B0068 Verify Prescription</td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>B0401 View Patient Medication</td>
<td></td>
</tr>
<tr>
<td>EPS Enabled Medicine Counter Assistant</td>
<td>R8008 Admin/Clinical Support Access Role</td>
<td>Use as basis for dispensing staff who require access to the EPS to view and record dispensing activity under the supervision of a pharmacist.</td>
</tr>
<tr>
<td></td>
<td>B0570 Perform Pharmacy Activities</td>
<td></td>
</tr>
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<td></td>
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<tr>
<td></td>
<td>B0401 View Patient Medication</td>
<td></td>
</tr>
</tbody>
</table>

3. Once the RA Agent has received this information a meeting can be set up at the pharmacy for the staff to be registered.

4. At this meeting, all staff must have completed the RA01 form and have their 3 forms of ID (originals) with them. Their photo will be taken at this point to go on the smartcard.
5. The nominated sponsor for the pharmacy will check and sign off the RA01 forms and after this the RA team will create the smartcard.

**IMPORTANT**

**Smartcard Software**

Smartcards will **only be released** to the pharmacy if they have the following software:-

1. IA V11
2. MyID V8

Access to the NHS Spine Portal will also be required ([https://portal.national.ncrs.nhs.uk](https://portal.national.ncrs.nhs.uk)).

This will allow the pharmacy to manage their own smartcards and passcodes.

The pharmacy manager will be set up as a ‘Smartcard Administrator’.

They will be able to:-

- Unlock smartcards that have become locked (this happens when the incorrect password has been entered more than 3 times)
- Renew smartcards that have or are about to expire (smartcards expire after 2yrs)

The pharmacy manager can select other staff in their team to be ‘Smartcard Administrators’ if required.
Electronic Prescription Service

The EPS Release 2 validation process and the validation script: guidance for dispensers and PCTs.

This document explains the validation process, which has to be completed as part of your preparation for EPS Release 2. When this process is complete you will be able to use EPS Release 2.

What is the validation process?

The validation process is a key activity that has to be completed before a dispensing site can go live with EPS Release 2. The process uses a validation prescription to:

- trigger the one-off EPS Release 2 allowance of a £1000 payment to the dispensing contractor
- show the dispensing site as EPS Release 2 enabled on the NHS Choices website, and therefore able to be nominated.
- allow patient nominations to be created for this dispensing site at other sites

Once the validation process is complete the dispensing site is referred to as ‘fully commissioned’.

What is the validation prescription?

It is a synthetic EPS Release 2 prescription that has been specially prepared to support the validation process.

When can patients’ nominations be processed?

Patient nominations for the dispensing site can be processed at the dispensing site once the site has submitted the validation prescription.

Nominations for the dispensing site can only be processed from other locations once the site is fully commissioned and therefore showing as EPS Release 2 enabled on NHS Choices.

When can electronic prescriptions be processed?

As soon as the dispensing site is fully commissioned, it will be able to use EPS Release 2. This means that a patient can nominate the site at their GP practice and that they could come to the site to collect their medication, expecting their electronic prescription to have been processed.

www.connectingforhealth.nhs.uk
EPS R2: Have you planned staff training?

A key lesson from the implementation of EPS Release 2 to date has been the importance of staff training. Where staff training has been inadequate, problems have arisen that have created unnecessary workload for pharmacies and in some cases, risked financial loss, for example the omission of prescription charge exemption information in reimbursement claims sent to NHS Prescription Services.

To fully realise the potential of the Electronic Prescription Service and to minimise disruptions, all pharmacy staff must be trained in using the service and understand changes to local business processes. The following list of tips to consider when organising training has been compiled from feedback on experiences to date:

Plan training in advance
- Planning is a must - consider setting out a plan with a rough timetable outlining who will be available and when.
- Make provision for part time staff and locums.
- Different staff will have different training needs. For example, counter staff may need to understand the nomination functionality but not how to submit a reimbursement claim. Training needs to be relevant to an individual's role.
- For part-time staff, some pharmacies have chosen a 'train the trainer approach', training a member of the pharmacy team to train part time workers.
- In some of the cases where problems have arisen to date, pharmacy staff were offered training but chose not to take it because they felt that use of the system was intuitive. This meant that they missed out on key messages, causing problems at a later date. It is important to make sure that everyone participates in training.

When is the best time to undertake EPS training?
- Make sure that the training is delivered at a point in time that ensures training messages are absorbed. It has been found that a few hours prior to go live is the best time to deliver training to pharmacy staff. Any more than a few days and key messages can be forgotten.
- If the pharmacy is going-live well in advance of receiving electronic prescriptions, consider whether it is better to deliver training in two stages with basic training on the go-live day and more in-depth training at the point that the pharmacy starts receiving electronic prescriptions. The key is to ensure that messages are delivered at the time they are relevant.
- Where pharmacies have captured large volumes of nominations prior to a local surgery going live, this has enabled staff to cement business process change early. Where low numbers of nominations are recorded, the re-education of staff to new processes has been slower.
- Consider arranging training in quieter periods/when the pharmacy is closed or when there is locum cover. This will allow staff to concentrate fully.

What kind of training will work best in my pharmacy?
- Find out what kind of training your system supplier is offering. For example one to one staff training, the provision of a training environment, webinars, training videos, user manuals, quick reference guides and/or desk aids and help files on the system.
- Make sure that you take time to read any information packs you receive from your supplier as these could contain links to manuals, videos or dates of Webinar sessions.
- If the supplier is offering an e-learning facility, ensure that the computers in the pharmacy are capable of accessing and running the e-learning module including playing any videos and sound.

What should I do about business change?
- To maximise the benefits of EPS Release 2, pharmacies need to adapt existing business processes. These changes also need to be communicated to staff.
- Whilst locums may have received training in system functionality at another pharmacy, business processes are unique to every pharmacy so ensure locums are briefed on these changes.
- Holding planning meetings with local GP practices to agree changes to processes will help smooth implementation. In some areas, PCTs are running workshops or awareness sessions to support discussions on business change.
- During system setup, ask your supplier to check the system is configured in line with your expectations on business processes and ensure that time is spent making any optional configurations to the system to meet your needs.

Post Training support?
- Some pharmacies have found it helpful to schedule brief weekly troubleshooting sessions which would give staff an opportunity to talk to each other, discuss new ways of working and make suggestions on how new processes can be optimised.
- Staff members need to know who they can contact for day-to-day support. Consider appointing an EPS champion within the pharmacy that staff can go to for support.
- All staff should be made aware of the helpdesk process for system issues and keep the contact details visible in the event of any issues.

Information on training resources is available from individual suppliers. Background information on EPS Release 2 can be found online at: www.pbsc.org.uk/eps
Electronic Prescription Service

**Downloading electronic prescriptions at the pharmacy**

- It is likely that the pharmacy will retrieve the electronic repeat prescription prior to the patient arriving to collect their items. This will give the pharmacy chance to prepare the prescription in advance of the patient’s arrival and order out of stock items where required.

- When a nominated electronic prescription is signed, it is sent to EPS. It can then be retrieved by the nominated pharmacy’s system in the following ways:
  - automatic download overnight
  - manual download throughout the day (as frequently as the dispensing contractor requires) some may choose to do this:
    - over lunch
    - every hour
    - during quiet times during the day, for example when the GP surgeries are closed for lunch
    - before deadlines for wholesale orders
    - first thing on a morning prior to opening the pharmacy.

- Pharmacies can identify electronic prescriptions from paper prescriptions awaiting collection in the following ways:
  - dispensing token stapled to bag
  - bag scanned to mark as dispensed automatically
  - bags for electronic prescriptions and paper prescriptions stored on different shelves
  - bags marked with marker pen “E” or a sticker.

- The dispense notification message informs EPS which medication has/has not been supplied to the patient. Dispense notifications must be sent as soon as prescriptions/prescription items have been collected or delivered to the patient.

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**Top tips**

- Develop a pharmacy SOP to tell staff when they should be downloading prescriptions throughout the day.
- Check how you filter and display prescriptions – ensure that you can see if there are any prescriptions that need dispense notifications or claims to be sent.

**Top tips**

- Send your dispense notifications straight after the patient has been given their prescription items to enable you to manage your workload more effectively.

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When sending a message to the Spine to say that item(s) have been dispensed, the term used on the system you are using may differ. For example:

- Dispensed
- Collected
- Complete
Troubleshooting and raising queries and issues

If a dispensary is experiencing problems connecting to EPS, this is most likely due to reasons other than a problem with the Spine. For example, a broadband connectivity issue or a problem with a system supplier’s central message handler. It is important to report problems to system supplier helpdesks, making sure you get a reference number when you call. If the problem persists the matter should be escalated to the PCT.

NHS CFH system alerts

The NHS CFH Service Bridge can provide high severity service incident communications to dispensers via email and SMS.

If you work in a pharmacy using EPS, you can register to receive text or email alerts when there are incidents affecting the NHS CFH components that support EPS. This includes EPS itself, the Personal Demographics Service (PDS) and the Spine.

Simply download and complete the NHS CFH service incident alert request form from the business continuity section of the EPS website www.nhs.nhs.uk/eps/dispenses. Email it to cfh.nhs.servicebridge@nhs.net and NHS CFH will send you an alert when the component is unavailable and again when normal service is resumed.

Pharmacy troubleshooting

✓ Does the patient have a nomination set with you?
✓ Are the patient’s details correct e.g. do they have a valid address registered on your system?
✓ Does your Smartcard have correct roles in order that you can receive EPS Release 2 prescriptions?
✓ Is your Smartcard valid? Ask your Smartcard sponsor to check if your card or certificate requires renewing.
✓ Match prescriber on EPS Release 2. You should only need to ‘match’ the prescriber once. Speak to your system supplier to enable the settings so this does not have to be repeated for each electronic prescription received from

Use the pharmacy IT troubleshooting guide to help you resolve issues quickly and efficiently. Visit www.nhs.nhs.uk/eps/dispenses.

Download more factsheets like this from www.library.nhs.uk or submit your feedback to feedback@nhs.uk.
Electronic submission of prescriptions for reimbursement

Release 2 will support the electronic submission of reimbursement for prescriptions from a patient’s nominated dispensing contractor to the NHS Prescription Services (NHSRxS).

Endorsement

The process for endorsing and submitting paper prescriptions for reimbursement continues and is unchanged. Guidance on this available on the NHSRxS website http://www.nhsbsa.nhs.uk/PrescriptionServices/1119.aspx. For EPS Release 2 the endorsement guidance is exactly the same as for paper prescriptions but the endorsement is entered and submitted electronically.

EPS Release 2 month end process

With EPS Release 2 the submission for reimbursement is significantly simpler and quicker. Most contractors submitting EPS Release 2 prescription messages will however, also continue to submit their paper prescriptions for reimbursement in the usual way.

The FP34

The FP34 Submission Document will continue to be the official means of claiming payment and contractors should complete the document as follows:

At the end of the month, pharmacy contractors must use this form to declare the combined total of paper and electronic prescriptions, for both messages and items, being submitted to the NHSRxS for reimbursement.

The pharmacy contractor must also tick the Electronic Prescriptions box to confirm that EPS Release 2 prescription messages have been included within the monthly submission.
### The FP34 document and the month end process

<table>
<thead>
<tr>
<th>Paper prescriptions. (FP10s with or without a barcode)</th>
<th>EPS Release 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endorse the paper prescriptions. Guidance is on the <a href="https://www.nhsrxs.nhs.uk">NHSRxS website</a>.</td>
<td>Endorse electronically. Endorsement requirements for EPS are the same as for paper.</td>
</tr>
<tr>
<td>Sort paper prescriptions by patient charge group. Segregate according to the guidance on the FP34 form and on the <a href="https://www.nhsrxs.nhs.uk">NHSRxS website</a>.</td>
<td></td>
</tr>
<tr>
<td>Isolate RA (repeat authorisation) forms and FP57 forms.</td>
<td>Submit claim messages electronically.</td>
</tr>
<tr>
<td>Bundle all paper prescriptions following the guidance on the FP34 form.</td>
<td>Bundle unsorted EPS tokens that are required by the NHSRxS. (See notes)</td>
</tr>
</tbody>
</table>

#### Completing the FP34 document

<table>
<thead>
<tr>
<th>Complete Part 1 of the FP34 form with:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• numbers of prescriptions</td>
</tr>
<tr>
<td>• number of items</td>
</tr>
<tr>
<td>• total of items</td>
</tr>
<tr>
<td>• total of prescriptions</td>
</tr>
<tr>
<td>• the number of FP57 forms submitted</td>
</tr>
<tr>
<td>• the FP57 total amount submitted</td>
</tr>
<tr>
<td>• the FP57 total amount refunded</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Complete Part 1 of the FP34 form with:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The number of EPS Release 2 prescription reimbursement messages and items submitted online <strong>added to</strong> the number of paper FP10 prescriptions and items. Enter the combined figure for each in the appropriate box.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tick the box in the Part 1 to show:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• if Repeat Authorisation forms are being sent</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Tick the appropriate boxes in Part 1 to show:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• if EPS tokens for non-payment are being sent (See notes)</td>
</tr>
<tr>
<td>• that EPS Release 2 reimbursement messages have been submitted and included in the Part 1 totals of prescriptions and items submitted.</td>
</tr>
</tbody>
</table>

#### Complete the Part 2 Declarations

Dispatch within five days of the end of the month with sorted prescription bundles and unsorted EPS tokens.
The number of EPS Release 2 prescription reimbursement messages and items submitted online added to the number of paper FP10 prescriptions and items. Enter the combined figure for each in the appropriate box.

Tick if EPS tokens for non-payment are being sent (See notes)

Tick if EPS Release 2 prescription reimbursement messages have been submitted and included in the Part 1 totals of prescriptions and items submitted.

Notes

Where a prescription token or a dispensing token has been used to record a signature for a non-age related exemption or the patient has signed the token and paid for the items the dispensing contractors must submit these to the NHSRxS monthly along with the FP34 Submission document. These tokens, which are required for audit purposes, do not need to be sorted. They must be bundled separately from the paper FP10 prescriptions. Paper FP10 prescriptions must continue to be sorted according to the guidance on the FP34 form.

Resolving issues

Initially it will not be possible for the NHSRxS to electronically return prescriptions submitted this way. Issues will either be resolved using either a paper representation of the claim as usual or by phone call. Ultimately the transfer of electronic prescriptions will become all encompassing.

Schedule of payments

The Schedule will provide information on the number of prescription forms and items received electronically for each month. The numbers provided will relate to the physical receipt of the paper and electronic forms and items before the calculation of any additional fees. This figure will exclude any paper tokens for non-payment received by the NHSRxS for audit purposes as outlined in the notes above.