



Preparing for EPS in your GP practice

Business Process Change workshop help sheet

These help sheets are designed to support you in a key part of the planning for EPS. As indicated in the Standard Deployment Model, the business process change session should include:

- A walkthrough of current prescribing and dispensing processes with both the practice and pharmacy, looking at how these will change with EPS Release 2.
- Both practice and local pharmacies in attendance to “sign off” processes
- A discussion on business continuity.

This help sheet covers key points that you can use to think about how you can change your current processes to make the most of using electronic prescriptions.

Areas covered in this pack:

- | | |
|--|---|
| 1. Smartcards | 6. Repeat prescriptions |
| 2. Nomination | 7. Split prescriptions |
| 3. Process to support electronic prescribing | 8. Repeat dispensing |
| 4. Urgent prescriptions | 9. Cancellation |
| 5. Signing electronic prescriptions | 10. Business Continuity |
| | 11. Raising Support Calls |

Smartcards

Done	Action
<input type="checkbox"/>	Ensure that anyone dealing with electronic prescriptions has a Smartcard
<input type="checkbox"/>	Ensure that the right roles are on each Smartcard
<input type="checkbox"/>	Check the certificates are up to date on Smartcards and ensure old certificates have been ‘ended’ http://nww.hscic.gov.uk/eps
<input type="checkbox"/>	Check the Smartcards work prior to going live
<input type="checkbox"/>	Ensure Smartcards are being used at all times
<input type="checkbox"/>	Ensure that you know who to contact for Smartcard issues/updates

Every time you interact with the Spine you will need to use your Smartcard. Consider:

- Who will be creating prescriptions?
- Who will be signing prescriptions?
- Who will be setting nominations, changing nominations and removing nominations?
- Who will be cancelling prescriptions?

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Nomination

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	Will the practice proactively capture nominations?	Speak to patients about the service when they come in to drop off or collect prescriptions or during consultations	
<input type="checkbox"/>	How far in advance of going live will the practice start gathering nominations on paper?	Usually about 8 weeks in advance is enough time to gather a good quantity of nominations	
<input type="checkbox"/>	How will nominations be captured?	On paper forms/ patient information captured in a book	
<input type="checkbox"/>	Will the practice target specific patients to contact?	Patients on regular repeat prescriptions/house bound patients/patients with a high volume of prescription items/stamp book patients	
<input type="checkbox"/>	How will the practice communicate with patients about EPS and nomination? What methods will the practice use to support this?	Face-to-face/email/text message/leaflets/posters/video in the waiting room/message on RHS of prescriptions/answer machine	
<input type="checkbox"/>	Where will EPS literature be obtained from?	Produced by the practice/downloaded from the EPS website /provided by the local NHS?	
<input type="checkbox"/>	How will you inform patients that their nomination will be used each time they request a prescription	Poster in the waiting room/info added to voicemail or telephone order line/info added to email responses	
<input type="checkbox"/>	If a patient has more than one nomination (for example a pharmacy and a DAC) how will the practice know which nomination to use for each prescription?	Some practices are using patient notes to add this information	
<input type="checkbox"/>	Process for inputting the nominations onto the system (ensuring this is done in a timely way)	At the end of the day/during quiet times	
<input type="checkbox"/>	Who will be responsible for checking/ changing and removing nominations (again ensuring this is done in a timely way and with patient consent)	Receptionists/prescription clerks	

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Processes to support electronic prescribing

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	Which scripts will your practice use EPS for?	All prescriptions/repeats only/repeat dispensing	
<input type="checkbox"/>	Will EPS be used for telephone consultations?	This will help the patient as they can go straight to the pharmacy once the prescription has been generated	
<input type="checkbox"/>	Who will be responsible for locating electronic prescriptions? For example to see when prescriptions have been signed and who by and what pharmacy they've been sent to	Receptionist/prescription clerk	
<input type="checkbox"/>	Will the practice use post dated prescriptions?	Post-dated electronic prescription will be held locally within the clinical system and will only be sent to the EPS service on the specified date. Electronic repeat dispensing should be used instead of post dated prescriptions wherever possible	
<input type="checkbox"/>	How will you communicate with the pharmacy about electronic prescriptions?	Telephone/pharmacy notes on the prescription/email	
<input type="checkbox"/>	Will the practice ever issue prescription tokens to patients?	For repeat dispensing only/for acutes only	
<input type="checkbox"/>	In what circumstances may you wish to print off a prescription token for the patient to take to the pharmacy?	For acute prescriptions during a face to face consultation/to mark the end of the consultation/if patient wants a copy of the RHS/if usual pharmacy is shut/if out of stock	

Prescriptions - urgent

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	How will the practice deal with urgent prescriptions?	Electronic prescription with an electronic message	
<input type="checkbox"/>	How will the prescriber be informed that the prescription is urgent and requires signing immediately?	Electronic sticky note/adding a note to the electronic prescription, such as "urgent prescription – please sign immediately"/communicate /MSN message	
<input type="checkbox"/>	How will the pharmacy be informed that they will need to prepare the prescription urgently?	Telephone the pharmacy/fax/note to the pharmacist on the electronic prescription	

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Prescriptions - signing

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	How will information that needs to be relayed to the prescriber prior to signing the prescription be communicated?	On a note to prescriber on the electronic prescription/via virtual sticky note	
<input type="checkbox"/>	How will scripts be divided in the practice for signing?	<ul style="list-style-type: none"> • Scripts divided equally between doctors i.e. 100 electronic prescriptions to electronically sign per day, 10 GP's in the practice equals 10 prescriptions each to sign per day. • The duty doctor could be responsible for signing all scripts • Trainees to sign all the straight forward repeats (ones that are not urgent or do not need review) • All scripts to be assigned to one doctor but anyone can sign by viewing "all" • Scripts assigned on a daily or weekly rota basis 	
<input type="checkbox"/>	How will you take annual leave into consideration when allocating prescriptions?	Check rota	
<input type="checkbox"/>	How will you re-allocate prescriptions if prescriber has to leave the practice at any point (for example if on call or home visit)	Reallocate to duty doctor/by dividing equally/ask prescriber to 'view all' and sign each others prescriptions	
<input type="checkbox"/>	Who will be responsible for the end of day process – ensuring that all scripts have been signed?	In the first few weeks electronic calendar reminders could be added in between consultations to remind prescribers to check and sign electronic prescriptions throughout the day Task allocated to receptionist or prescription clerk	
<input type="checkbox"/>	How will prescribers be reminded to sign electronic prescriptions?	<ul style="list-style-type: none"> • Prescribers can add a diary note in the first few weeks as a reminder to keep checking and signing electronic prescriptions • Prescribers can sign prescriptions in small batches and often throughout the day • Prescribers can sign prescriptions in between patient consultations 	

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Repeat prescriptions

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	Who will prepare the prescriptions that are not straightforward repeats?	Prescription Clerk, pharmacist, prescriber can all prepare electronic prescriptions	
<input type="checkbox"/>	Who will edit or amend the prescriptions? How and when will this be communicated to the prescriber?	Communicate with the prescriber via virtual sticky note/email or verbally	
<input type="checkbox"/>	Who will amend or edit the patient repeat master?	Prescriber or other allocated staff member	
<input type="checkbox"/>	How will the practice inform patients about the timescale from placing a repeat prescription request to collection of the prescription at the pharmacy?	Poster in reception/waiting area/face-to-face/reinforced at the pharmacy	

Split prescriptions

Consider:

- There are some prescription items that cannot be transmitted electronically, for example it is currently not permitted to issue an electronic prescription for a Controlled Drug specified in Schedule 1, 2 or 3 of the Misuse of Drugs Regulations (referred to as 'out of scope').

- Not all systems handle split prescriptions in the same way. Refer to your training manual /supplier to find out how your system deals with these.

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	How will patients who may have split prescriptions be identified?	Discuss with patient their suitability for using EPS if all items are out of scope (Revert all items to FP10) Remove patient's nomination if they are unsuitable for EPS	
<input type="checkbox"/>	How will the practice deal with split prescriptions?	<ul style="list-style-type: none"> Replace the item with another description of the same product that is dm+d mapped and can be sent through EPS. Ask the patient to collect out of scope items on a paper FP10. Ask the pharmacy to collect paper prescription on behalf of the patient (if close by) and add note to dispenser advising of extra items on PCS 	

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Repeat dispensing

Done	Action/Consideration	Options/further information	Y/N (Notes)
<input type="checkbox"/>	Does the practice currently have patients on paper based repeat dispensing?		
<input type="checkbox"/>	If yes how will these patients be contacted to transfer them to electronic repeat dispensing?	Face-to-face during consultation/letter/SMS text	
<input type="checkbox"/>	If no how will you contact potential patients suitable for repeat dispensing?	Face-to-face during consultation/letter/SMS text	
<input type="checkbox"/>	Who will set up electronic repeat dispensing regimes?	All prescribers/selected prescribers/Nurse prescriber	
<input type="checkbox"/>	Which patients will be suitable for repeat dispensing?	Any on repeats, MDS – professional judgement required	
<input type="checkbox"/>	When will you ask patients if they wish to participate?	During medication review/during a long term conditions review/at the end of current authorised issues/during an ad hoc consultation	
<input type="checkbox"/>	How long will the regimes be set up for?	Prescribers may wish to start patients on three months and then increase to 6/12 months where required clinical judgement should be used	

Prescription cancellations

Done	Action/Consideration	Y/N (Notes)
<input type="checkbox"/>	Who will be responsible for cancelling electronic prescriptions?	
<input type="checkbox"/>	Who will be responsible for contacting the patient and/or pharmacy to inform them of the cancellation?	

Consider:
Prescriber/prescription clerk/receptionist

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Business Continuity - communicating with pharmacies

Done	Action/Consideration	Y/N (Notes)
<input type="checkbox"/>	How are you going to work with local pharmacies if: <ul style="list-style-type: none"> GP practice system is unavailable and you are unable to generate electronic prescriptions? A patient's prescription does not arrive at the pharmacy straight away? Pharmacy reports their system is unavailable and they cannot dispense electronic prescriptions? 	

Consider:

- Using the Prescription Tracker
- How long the issue could last and take steps accordingly
- Avoiding reverting to paper if patient's prescription is not urgent

Raising support calls

Done	Action/Consideration	Y/N (Notes)
<input type="checkbox"/>	Do you know how to log calls to your supplier and the escalation procedures?	
<input type="checkbox"/>	Do you have a person in the GP practice that is responsible for raising calls?	
<input type="checkbox"/>	Do you have a book to keep a log of calls made to the helpdesk and reference numbers?	
<input type="checkbox"/>	Do you know how to follow up and escalate further where required?	