

NORTH YORKSHIRE LOCAL PHARMACEUTICAL COMMITTEE

Chief Officer;

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TO ALL NORTH YORKSHIRE AND YORK PRACTICES AND PHARMACIES.

EPS RELEASE 2

A number of practices in North Yorkshire have now gone or are in the process of going live with EPS Release 2 and various issues are frequently cropping up, many of which are due to a lack of preparation prior to the go live. HSCIC are in the process of deploying EPS Release 2 to the whole of England and therefore if you are switched on to use EPS, you need to be ready now as you could receive an electronic prescription from anywhere in the country at any point.

To avoid the issues associated with go lives and to encourage closer working between pharmacies and practices, the LPC has come up with following actions that will help to smooth the transition process.

What pharmacies can do prior to local surgeries going live:

Speak to the Practice

If a prescription is not bar-coded start asking why. This could be because a drug is not dm+d matched or because the prescriber is not using their smartcard when issuing prescriptions.

Please encourage practices to send bar-coded scripts and scan them at your pharmacy. Using EPS Release 1 (bar-coded scripts) helps to test that the Spine messaging in your system is working – if you have any issues with speed, please report these to your system supplier ASAP – this will only get worse if you do not address it.

*Sometimes when you scan prescriptions, the system won't accept the way in which the quantity is written, this changes in Release 2 since the GPs have to prescribe in whole number quantities rather than pack sizes. i.e. 56 tablet, rather than 2*packs or 2*28*

If items are ordered in the wrong format, i.e not drug/strength/form then they are probably not dmd matched. An example would be amoxicillin 125mg/5ml SF suspension is dmd matched, whereas if ordered as amoxicillin 125mg/5ml suspension SF it isn't.

Find out what your local practice policy is on which scripts they will send electronically, e.g. repeats, acutes, non repeatable etc. This will vary from surgery to surgery as some practices prefer to give acute prescriptions directly to the patients at the end of a consultation. If you are a co-located pharmacy discuss setting the patients' expectations with the surgery in terms of them being able to walk to the pharmacy faster than the time it takes the pharmacist to dispense the medication.

To check how drugs are listed in the dm+d list, use this dm+d browser

<http://dmd.medicines.org.uk/DesktopDefault.aspx?tabid=1>

Attend the Business Change session – these are usually a week before the surgery goes live.

Check your own smartcards

Ensure the right roles are on smartcards for the function that person carries out, for instance you might want counter staff to be able to set nominations and scan barcodes to draw scripts down but not submit claims to NHS BSA.

Set Nominations:

Don't wait, Nominate!! Set the nominations on the system now, don't keep paper forms in the cupboard!

See here for more info: <http://systems.hscic.gov.uk/eps/library/dontwaitnominate.pdf>

Get Trained:

Contact your supplier to find out how to process an Electronic Script

Order Tokens and contact your supplier to make sure your printer is configured to print tokens from a second printer tray:

If you cannot print a token for a patient who needs to sign for an exemption, you cannot dispense and you will lose business – don't delay – check the printer tray.

For more information, please visit the EPS Website: <http://systems.hscic.gov.uk/eps/dispensing>

What practices can do prior to going live;

Ensure all drug conversions are complete so that all possible drugs are dm+d matched, but avoid specifying generic brands. Speak to your NHS Contact for more details relevant to your system.

Encourage the use of EPS compatible quantities e.g. inhalers 400 doses not 2 inhalers, 56 tablets not 2 packs or 2*28

Involve local pharmacies in your EPS meetings and identify a member of staff to lead on EPS and liaise with pharmacies, giving pharmacies a direct line number if possible.

For more information, please visit the EPS Website: <http://systems.hscic.gov.uk/eps/gppractice>

I hope you find this helpful,

Kind regards

A handwritten signature in black ink, appearing to read 'Thomas', with a long horizontal line extending to the right.