NHS
Kent and Medway
Clinical Commissioning Group

ELECTRONIC REPEAT DISPENSING INFORMATION

VERSION	DATE	COMMENTS
V1	Jun-20	First draft written by Shelley Johnston, Lead Medicines Optimisation Technician (Medway & Swale)
V1.1	Jul-20	Updated with comments from; Bal Minhas, Tapan Shah, Louise Downs, Teresa Watson and Reuben Hart.
V1.2	Jul-20	Updated with information regarding eRD patient consent requirements, page 6, during COVID.
V1.3	Aug-20	Additions of Vision screenshots in FAQ.

BACKGROUND

Two thirds of prescriptions issued in primary care are repeat prescriptions and they account for nearly 80% of NHS medicines costs.[1]

Across Kent and Medway during the year 2019-20 nearly 35 million items were dispensed costing £285 million.[2]

On average, each week, a GP issues around 375 repeat medicines.[3]

Managing repeat prescriptions creates a lot of work and a significant amount of time is spent processing them.

Electronic Repeat Dispensing (eRD) is an integral part of the Electronic Prescription Service (EPS) which offers many benefits over paper and electronic repeat prescribing.

eRD allows the prescriber to issue 'batch' prescriptions for suitable patients who are taking regular and ongoing medicines for up to one year. These 'batch' prescriptions are store securely on NHS IT national EPS system (also known as 'The Spine') which delivers the prescriptions to the patient's nominated community pharmacy or dispensing appliance contractor at regular intervals, specified by the prescriber.

eRD provides many benefits for patient, GP and Pharmacy. Managed effectively it can save up to 46 minutes a day of GP time, remove the need for the patient to contact their prescriber so frequently to request repeat medications which consequently saves patient an prescriber time, allowing better prioritisation of resources.

eRD will enable the prescriber to authorise a prescription with a specified number of issues; each issue contains the same prescribed items, these will then wait on 'The Spine 'and will be released for each individual prescription issue.

The first issue of the prescription will be available as soon as the prescription is received by the Spine, subsequent issues will be created on the Spine ready to be downloaded by the patient's nominated pharmacy once a previous issue is marked as complete.

To allow pharmacists to prepare medicines for dispensing in advance of a patient visiting the pharmacy, a repeat dispensing prescription will be automatically downloaded seven days before it is due. It is also possible for a pharmacy to download prescriptions in advance of them being sent automatically from the Spine, to enable patient flexibility for travel circumstances.

Basic EPS/eRD Process

Prescription Issued Electronically by GP

Prescription automatically downloads from the spine when ready for dispensing
Immediately or Post-dated

Pharmacy dispense and await patient collection or delivery

eRD Prescription
Countdown to next prescription begins. Next issue is automatically released for dispensing 7 days before it is due

Successful patient collection/delivery of medication

Pharmacy mark Rx as 'claimed' on prescription tracker

Rx sent electronically to PPA for payment

BENEFITS OF eRD[3]

PATIENT BENEFITS:

✓ Patients can collect repeat prescriptions directly from a pharmacy without visiting their GP, or requesting a new prescription from them (for up to 12 months).
✓ A simple process for patients, as their prescriptions are sent to their pharmacy just once or twice a year.
✓ Improved safety for patients as a result of regular pharmacy-led consultations.
✓ Improved care for patients as a result of greater collaboration between the practice and the pharmacy.
✓ Patients won't have paper prescriptions to lose.
✓ Patients can make arrangements with their pharmacy to enable them to spend less time waiting in the pharmacy.
✓ The service is reliable, secure and confidential.
✓ If clinically appropriate, the next issue can be requested early or more than one prescription obtained, e.g. when going on holiday - reducing a visit to the surgery.

BENEFITS FOR THE GP PRACTICE:

✓ Reduced prescription workload (see below).
✓ Encourages multidisciplinary working around repeat medication.

In 2015, NHS Digital undertook an audit of GP practices and spoke to over 100 practice staff about EPS. Specifically related to electronic Repeat Dispensing, they found that:

✓ Practice staff save an average of 73 minutes each day by producing eRD prescriptions rather than paper repeats.
✓ An average general practice saves an average of 80 minutes of GP time every day from signing eRD prescriptions versus paper prescribing.
✓ Practices save an average of 27 minutes every day by cancelling prescriptions electronically versus paper.

COMMUNITY PHARMACY:

✓ eRD allows community pharmacies to plan and manage repeat prescription workload more efficiently.
✓ eRD encourages multidisciplinary working around repeat medication and long term condition management
✓ eRD reduces medication waste.
✓ eRD enables utilisation of pharmacists' skills in the repeat medication process.

Therefore, all GP practices and pharmacies should be encouraged to use electronic Repeat Dispensing.

PRACTICE SUPPORT INFORMATION

SUITABLE PATIENTS

Whilst electronic Repeat Dispensing will bring benefits to the patient, the practice and the pharmacy, it is important to understand that not all patients will be suitable or eligible. Those deemed to be most suitable for eRD include:[3]

Those on a stable list of medicines with:
- No significant changes in the last 6 months.
- No changes anticipated for the duration of the batch of prescriptions (usually 6 or 12 months).
- Stable dosage regimens.

Those with stable medical conditions. E.g:
- No recent unplanned hospital admissions (in the previous 6 months).
- No new conditions diagnosed in the past 6 months.

Those who are up to date with their medication monitoring:
- Medication review completed within last 6 months prior to first eRD prescription. (If not, could be considered for a telephone review).

Those with up to date disease monitoring. E.g:
- Attendance at any required clinics.
- Appropriate monitoring functions (e.g. blood tests, BP) performed within appropriate timeframe and recorded in the patient notes.

UNSUITABLE PATIENTS

The following medicines are NOT suitable or eligible for eRD:
- Schedule 2&3 Controlled drugs (including temazepam, tramadol, gabapentin and pregabalin).
- Benzodiazepines.
- Hypnotics.
- Drugs which require close and careful monitoring e.g. methotrexate.
- Unlicensed medicines.

Practices and pharmacies should be aware of these suitability criteria and ensure that eligibility can be checked at the GP practice as part of the authorisation process.

PATIENT CONSENT

Before a patient can be enrolled onto eRD they must first specify their nominated pharmacy. This can be done in the pharmacy or GP practice (and can be changed if necessary).

Part of the consent process requires that patients give explicit permission for the sharing of information about their medications between their GP surgery and the community pharmacy of their choice. This communication is crucial to the running of the service and patients cannot take part in the eRD service without giving this consent.

The patient can give verbal consent as formal written consent is not required; details of this should be entered into the patients' notes.

Consent can be coded in the patients notes ('patient consent given for Repeat Dispensing information transfer'):

CTV3 code: XaKRX

V2 code: 9Nd3

SNOMED CT code: 416224003

PATIENT CONSENT AMENDMENTS DURING COVID-19[4]

During the current COVID-19 pandemic using the powers granted by the National Health Service (Amendments Relating to the Provision of Primary Care Services During a Pandemic etc.) Regulations 2020, NHS England and NHS Improvement has agreed with the Secretary of State that in certain circumstances this requirement can be temporarily suspended.

The requirement for patient consent has been suspended until 30 September at the earliest, at which time the suspension will either be extended or revoked.
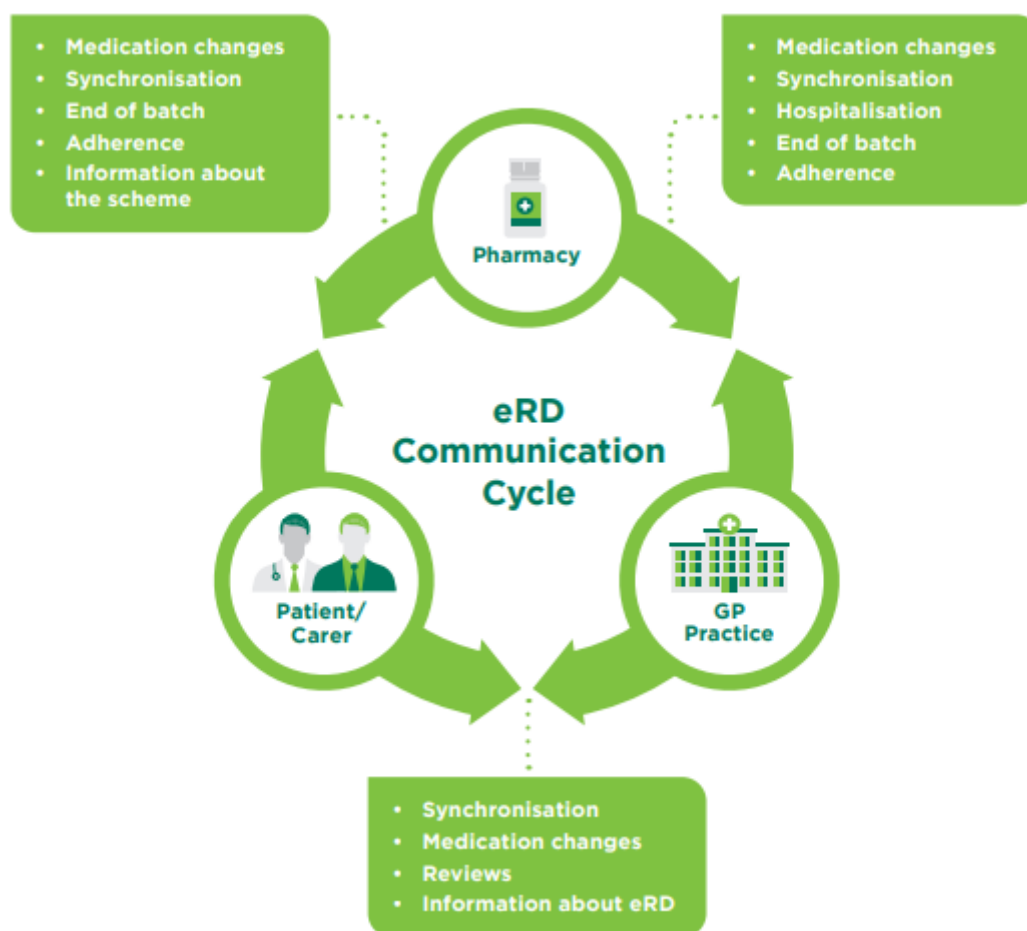
Practices in England may transfer any clinically suitable patient onto eRD if they are already receiving, or have agreed to receive, electronic prescriptions. This means any patient that meets any of the following criteria:
- They have previously had medication dispensed by means of the electronic prescription service (EPS).
- They have recorded a nominated pharmacy either via the practice, pharmacy or NHS App.
- They have a practice that is live with EPS Phase 4.

COMMUNICATION[3]

Effective communication between patients and/or their carers, GP Practices and community pharmacies is essential for all parties to realise the full benefits of the eRD process.

National communication resources are available at:
https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/prescribing-and-dispensing/electronic-repeat-dispensing-erd/erd-resources#jumplink7

As some communication will be via telephone, both GP practices and pharmacies should consider implementing a process to ensure all such communications are recorded and acted on effectively. E-mail may be a great way to communicate but to be secure, pharmacies must use an @nhs.net account.

Practices and pharmacies should agree their preferred method of communication. If this is agreed to be NHS mail, the pharmacy <u>must</u> ensure that it has a system in place to check and act on emails received every day.

PHARMACY COLLABORATION

Repeat dispensing is one of the "Essential Services" which are provided by all pharmacy contractors under a clinical governance framework that includes clinical audit and information governance requirements.

Before dispensing an eRD prescription the dispensing site must establish that the patient is taking or using their medication appropriately and that there are no reasons why the medication in question should not be supplied.

They should ask the following four questions:

1. Have you seen any Health Professional (GP, Nurse or Hospital Doctor) since your last repeat was supplied?
2. Have you recently started taking any new medicines either on prescription or that you have bought over the counter?
3. Have you been having any problems with your medication or experiencing any side effects?
4. Are there any items on your repeat prescription that you do not need this month?

NB: If there are any discrepancies or concerns the pharmacy should contact the patients prescriber for advice before dispensing the next issue. We would encourage strong communication links between the GP surgery and the patient's pharmacy

TRAINING RESOURCES

In response to COVID-19, Wessex ASHN (Academic Health Science Network) are supporting the wider deployment of eRD across all GP practices. This builds on work they have been doing to increase their utilisation of eRD in Wessex over a number of years.

The resources available on their website are is extensive and up to date. https://wessexahsn.org.uk/projects/120/electronic-repeat-dispensing

SUGGESTED MATERIALS:

Consent Regulations – updated 04/06/20
https://wessexahsn.org.uk/img/projects/C0546-electronic-repeat-dispensing-letter-4-june-2020%20(1).pdf

Electronic Repeat Dispensing eLearning, with quiz.
https://learning.necsu.nhs.uk/nhs-digital-electronic-repeat-dispensing-elearning/

Wessex ASHN eRD Handbook – a comprehensive guide to eRD set-up
https://wessexahsn.org.uk/img/projects/Electronic%20Dispensing%20Handbook_Digital_WEB_S-1589995676.pdf

Helping GP Practices get started with Repeat Dispensing
https://wessexahsn.org.uk/img/projects/Helping%20Practices%20Get%20Started%20with%20Repeat%20Disensing%20Leaflet.pdf

GLOSSARY, REFERENCES AND ACKNOWLEDGEMENTS

GLOSSARY

The Spine
The Spine allows information to be shared securely through national services such as the Electronic Prescription Service, Summary Care Record and the e-Referral Service. It is the digital central point allowing key NHS online services and allowing the exchange of information across local and national NHS systems. The Spine connects pharmacy teams with GP practice staff, patients and other NHS organisations.

EPS (Electronic Prescription Service)
EPS allows prescribers to send prescriptions electronically to a dispenser (such as a pharmacy) of the patient's choice. This makes the prescribing and dispensing process more efficient and convenient for patients and staff.

EPS Prescription Tracker
If you work at a prescribing or dispensing site, use this tracker to check the status of a prescription (N3 connection needed).

REFERENCES

1. NHS Swale CCG Medicines Optimisation Guidance for Electronic Repeat Dispensing (eRD), V1.5, Jan-19.

2. ePACT Prescribing Data for 2019-20 accessed on 23/06/20 via https://www.nhsbsa.nhs.uk/epact2

3. Wessex Academic Health Science Network, Electronic Repeat Dispensing Handbook, V2, May-20.

4. NHS Business Services Authority, eRD website resources, accessed on 23/06/20 via: https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/prescribing-and-dispensing/electronic-repeat-dispensing-erd

5. NHS Digital website, via: https://digital.nhs.uk/

6. East Kent CCGs, COVID-19 eRD Implementation Plan, V1, Mar-20

ACKNOWLEDGEMENTS

Wessex Academic Health Science Network.

APPENDIX 1 – EPS PRESCRIPTION TRACKER

The Tracker tool allows GP practice staff and pharmacy teams to check the status of an EPS prescription. Visit: https://portal2.national.ncrs.nhs.uk/prescriptionsadmin (Smartcard and N3/HSCN connection required).

Explanation of EPS tracker statuses (EPS terms)
- To be dispensed – On the 'spine', ready to download (can be recalled).
- With dispenser – Pharmacy have downloaded the prescription (can be recalled – need to phone pharmacy and request prescription release).
- Dispensed – With the patient OR awaiting collection.
- Claimed – Prescription complete and cannot be recalled, processed by pharmacy for payment.
- Awaiting release ready
- Repeat dispensing future instance

Search by Prescription ID – copy & paste from GP system

Search by NHS number and My Site

Prescription and dispensing details…

Prescription and Dispensing Details ❓

Prescription ID	**Nominated Dispenser**
ED9B09-C83059-9835C5	BOOTS UK LIMITED (FYJ76)
Prescription Treatment Type	**Dispenser Organisation**
Repeat Prescribing (0002)	BOOTS UK LIMITED (FYJ76)
Prescription Type	**Dispenser Contact**
General Practitioner Prescribing - GP (0101)	01205 362138
Date/Time Signed	**Patient NHS ID**
22-Jun-2015 12:42:44	
Prescriber Organisation	**Prescription Status**
GREYFRIARS SURGERY (C83059)	With dispenser
Prescriber Contact	**Applied Cancellations**
01205 311133	None
	Pending Cancellations
	None

[Prescription Type]

…and full event history for the prescription

Prescription Event History ❓

Message	Sent Date	Organisation	From Status	To Status
Prescription upload successful	22-Jun-2015 11:43:11	C83059	None	To be dispensed
Nominated Release Request successful	22-Jun-2015 14:09:13	None	To be dispensed	With dispenser

[Close] [Show Barcode]

All issues have the same Prescription ID

The status of the prescription changes as it passes from Spine to Pharmacy to Patient.

EPS Prescription Tracker shows each issue individually

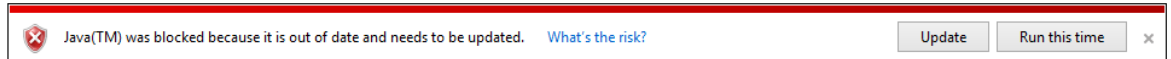[10 ▾] records per page   Search

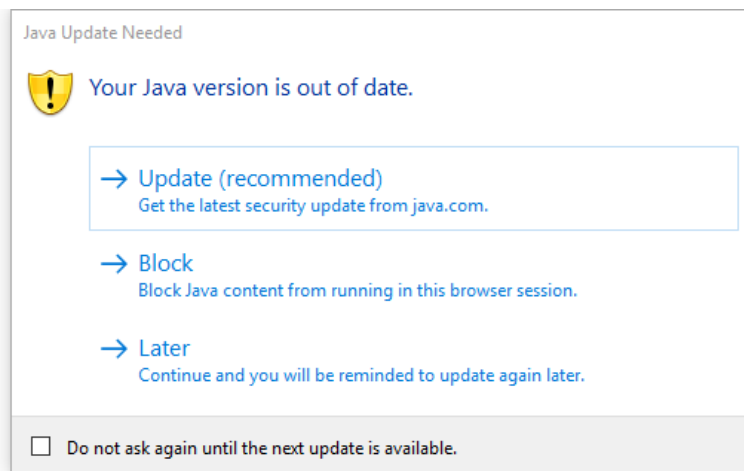|	▲	Prescription ID	Status	Issue Date	Prescription Treatment Type
☐		03EXXX-A81036-6F7200	Claimed	09-Jul-2015	Repeat Dispensing (0003) Issue 1 of 6
☐		03EXXX-A81036-6F7200	Claimed	24-Jul-2015	Repeat Dispensing (0003) Issue 2 of 6
☐		03EXXX-A81036-6F7200	Claimed	01-Sep-2015	Repeat Dispensing (0003) Issue 3 of 6
☐		03EXXX-A81036-6F7200	Awaiting release ready	09-Jul-2015	Repeat Dispensing (0003) Issue 4 of 6
☐		03EXXX-A81036-6F7200	Repeat dispense future instance	09-Jul-2015	Repeat Dispensing (0003) Issue 5 of 6
☐		03EXXX-A81036-6F7200	Repeat dispense future instance	09-Jul-2015	Repeat Dispensing (0003) Issue 6 of 6

Showing 1 to 6 of 6 entries   ← Previous 1 Next →

How to access eRD tracker

- https://portal2.national.ncrs.nhs.uk/prescriptionsadmin/ - Copy this link into internet explorer with your smartcard inserted for specific practice.
- A pop-up may appear with 'unable to execute Java' or another may pop-up at the bottom of the page (as per example below). You will need to click 'run this time'.

| ⊗ Java(TM) was blocked because it is out of date and needs to be updated.   What's the risk? | Update | Run this time | × |

- Then another pop up box will appear (see below), then proceed to click on 'later'.

- You will then be asked to 'run' the spine. You should then have access! Please note that it does time out fairly quickly if you don't use it, so you have to go through all of the steps above to gain access.

APPENDIX 2 – FREQUENTLY ASKED QUESTIONS

Q: Do we need to print prescription tokens each time an eRD is set up?
No, it is no longer mandatory to issue an RA token at the start of a repeat dispensing prescription.

<u>EMIS:</u> System suppliers are in the process of updating their systems to stop this printing. However, ticking the STORE function button will stop a token being printed.
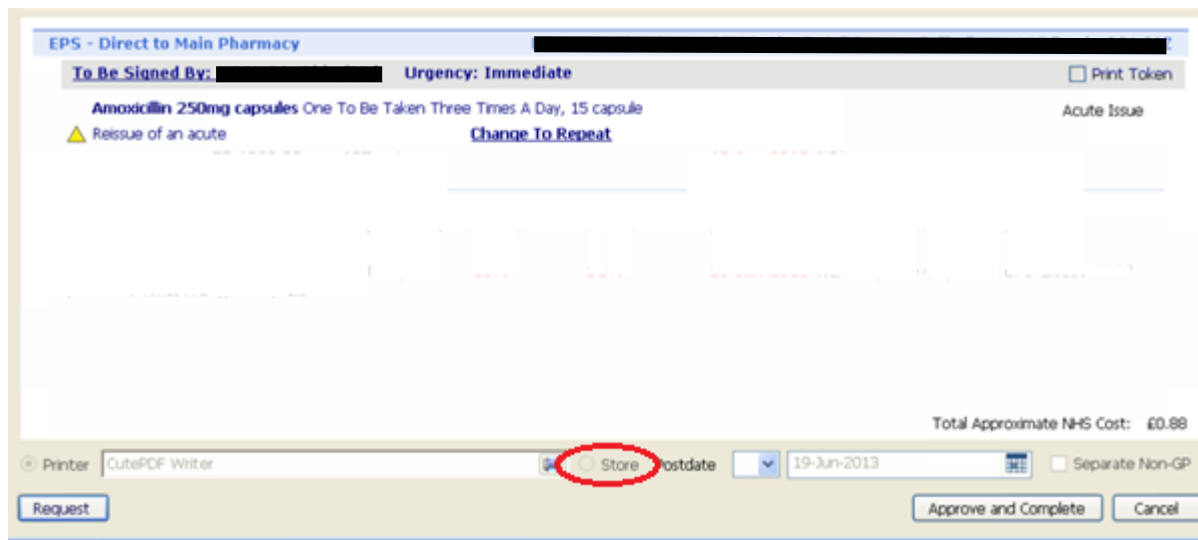
<u>VISION:</u> The system does not automatically print tokens if the patient has a nominated pharmacy. When finalising the eRD batch, the 'e' symbol will appear in prescription manager to indicate that the script is being sent electronically.
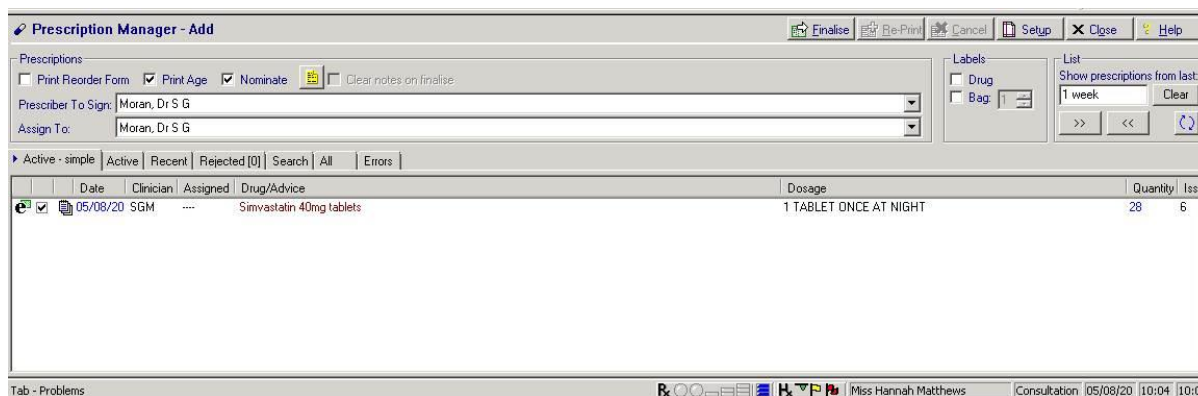
Q: What if a Patient wants to change their nominated pharmacy during the duration of the repeat dispensing?
Patients can change their nominated pharmacy before the end of the repeat dispensing period. Any outstanding issues which have not been downloaded will be available to download by the new nominated pharmacy. Any repeat dispensing issues that have already been downloaded should be returned to the spine if they have not left the pharmacy yet.

Q: What If you need to make changes to a repeat dispensing batch, i.e. change or strength or dose?
Once an eRD regime has been signed it cannot be amended, it has to be cancelled and re-issued.

EMIS: This warning will appear if you try to edit a medication on eRD. It will ask you if you want to cancel any future issues on the spine of the medication you are editing. Press Ok to cancel future issues. If you do not press OK, the **original medication and the edited version** of that medication will be available on the spine
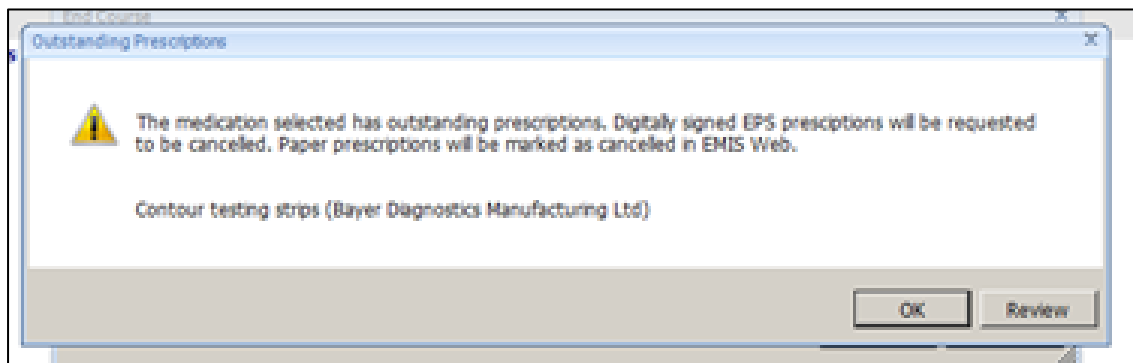
To change medication there are a few options;
- Cancel **ALL** outstanding **items** on the Spine and replace with a new batch
- Cancel **individual** item(s)
- **'Bridge the gap'** with a one-off script – if other medications are running out next week generate a one-off script until ready to start a new eRD batch for all items.

Single Item Cancellation   highlight **single** item, right click, and then cancel issue.

Multiple Item Cancellation highlight **ALL** items, right click, then cancel issue.

It is essential that any changes are communicated effectively, within a timely manner, between the prescriber and pharmacy.

VISION: The remaining prescriptions will need to be cancelled and a new batch set up with the changed strength or dose.

To cancel a batch, right click on the repeat master and click 'delete'. The following message will appear:

Press 'Yes'. If there are outstanding issues on the spine, the following message will appear, and you will have the option to delete just one item or the entire prescription:

The repeat master will now be removed and the outstanding prescriptions cancelled. You will be able to create a new batch with the updated strength and dose.

Q: Why can I not cancel an eRD?
EMIS: You may find that when cancelling a repeat dispensing issue you see a message flash up in a yellow bar above the patients details 'Prescription Batch Was Not Cancelled With Dispenser Take Manual Means To Cancel Prescription'.

This means that part of the batch has already been downloaded by the patients nominated pharmacy and you will have to contact that pharmacy and inform them that you are trying to cancel an item, in normal circumstances they will need to return the prescription to the spine, so this cancellation can be successful

The Cancellation Rejection task now needs to be actioned.
If the patient has been given the medication tick 'leave as issued'.
If not, and the item has been successfully cancelled tick 'mark as cancelled'

'Workflow – Medicines Management – Cancellation Rejections'
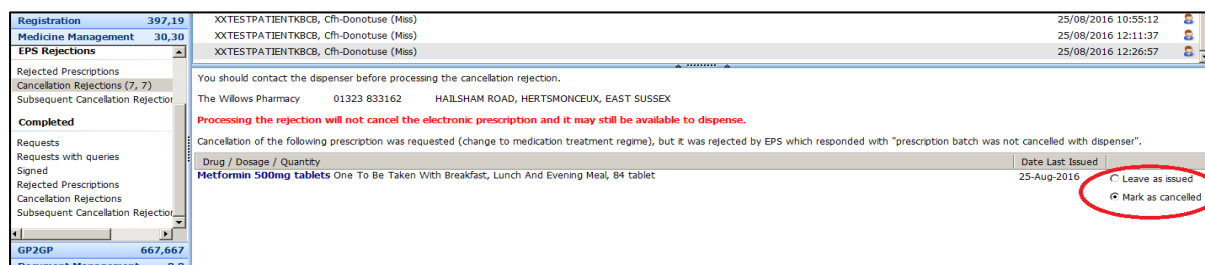
VISION: When you cancel an eRD prescription, you will need to wait for a response. The table below details the types of messages you may receive and the action that needs to be taken:

Category	Description	Action required
Successful	The cancellation was successful.	None
At pharmacy	The prescription has been downloaded by a dispensing contractor, but has not yet been dispensed.	Contact the pharmacy
Already Dispensed	The prescription has been dispensed to the patient.	Contact the patient
Transmission Issue	The message could not be transmitted due to a messaging issue.	Contact the patient
Prescription not found	This may be because the cancellation message arrived before the electronic prescription. The spine cancels the prescription automatically when it arrives.	None

Why has the batch/prescription gone into print/store function?
EMIS: Firstly check if the PDS box on the right of the patient blue bar is red or blue. If it is red, it will default to print a prescription. This red PDS box means some patient details need to be checked, click the box and select the current patient information. If you do not check this and then select the store function when issuing, the printed prescription will be stored and thus never printed.

Another reason the prescription may be printing could be that 'Dr @ XXXX' is assigned to prescription (as per example below). An active GP at the practice needs to be assigned who is able to issue electronic prescriptions. In this instance all

issues need to be cancelled and then re-authorised for this patient. The batch will need to be reissued.
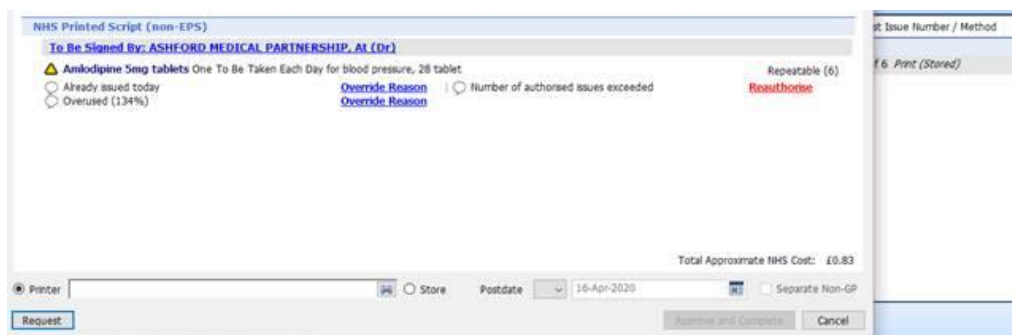
VISION: On Vision, if you are trying to issue an eRD batch and prescription manager indicates the prescription will be printed rather than sending electronically, you will need to troubleshoot before finalising the script.

Firstly, check that the patient has no unresolved PDS issues. When you open the patient's record, these will appear in a warning message. If these are not resolved, national services may be disabled for the patient.

Then check that the patient has a nominated pharmacy. If no pharmacy is nominated, prescriptions will automatically print.

Finally, check that the doctor you have assigned the prescription to is still an active prescriber at the practice who has been set up for electronic prescribing. If the prescriber is a generic GP (e.g. 'Dr at Whitehorse Surgery) you will not be able to send the prescription electronically.

What about Post-dated Prescriptions on EMIS?
There are issues around GP's not seeing that a prescription is post-dated. When the GP goes to sign a prescription the post-dated element is hidden at the bottom of the page and so as a result have had a few rejected at first by the GP. It may be worthwhile with each post-dated prescription to 'add task comment' and put a message as per below so this will appear in an area that GPs usually look at when signing prescriptions.
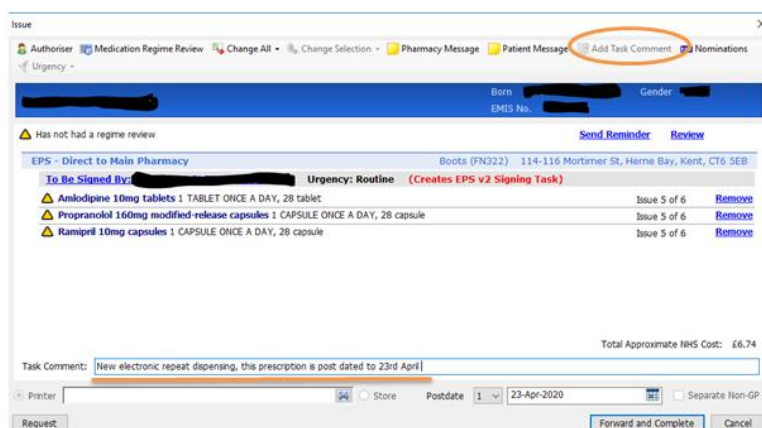
Why won't the medication synchronise?
This may be due to pack size of a product, all products need to be either 28 or 56 pack size and not a mixture (30 or 60).