

Electronic Repeat Dispensing (eRD) - Business Change



These help sheets are designed to support you in the implementation and use of eRD.

Areas covered in this pack:

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GP Practice—Housekeeping	
Done	Action/Consideration
<input type="checkbox"/>	Ensure all PDS mis-matches are dealt with as these prevent the patient from having any prescriptions sent electronically
<input type="checkbox"/>	Deal with, and convert all non-dm+d drugs and quantities to ensure the maximum number of items can be sent via EPS

Getting Started

Done	Action/Consideration	Notes
<input type="checkbox"/>	Familiarise yourself with the contents of the eRD practice support pack	<ul style="list-style-type: none"> https://digital.nhs.uk/media/651/eRD-toolkit/pdf/eRD-toolkit1
<input type="checkbox"/>	Review you surgery's eRD strategy and amend/update this frequently (include admin team and clinical team)	<ul style="list-style-type: none"> Review current eRD performance (add link) Involve local pharmacies Be prepared to invest some 'set-up' time in the practice
<input type="checkbox"/>	Set realistic eRD targets for the practice as a whole	<ul style="list-style-type: none"> Start small –slowly increase numbers as the confidence of the practice grows

Advertise eRD in the surgery.
This should only be done once the surgery has a robust system in place for processing these requests and the practice is confident in the use of eRD

Consent

Patients are required to give **explicit consent for repeat dispensing**. This can be verbal, as formal written consent is not required.

"Patient consent given for Repeat Dispensing information transfer"

- CTV3 code: XaKRX
- V2 code: 9Nd3.
- Snomed CT code: 416224003

Pharmacists can highlight suitable patients and inform the surgery

Nominations

Done	Actions/Considerations	Notes
<input type="checkbox"/>	An EPS nomination must be in place to use eRD	<ul style="list-style-type: none"> In the future patients will not be required to have a set nomination
<input type="checkbox"/>	Pharmacy nomination can be changed in the middle of the repeat dispensing regime	<ul style="list-style-type: none"> Any outstanding issues, which have not been downloaded, will be available to the new nominated pharmacy

Effective communication with the patient is paramount. The service will fail if patients continue to reorder their prescriptions as before or become confused

Tokens

Done	Actions/Considerations	Notes
<input type="checkbox"/>	The patient no longer requires a copy of the eRD prescription	<ul style="list-style-type: none"> A token can still be printed if requested by the patient Your clinical system may still default to print tokens Emis can 'store' the automatic RA for it to be deleted later
<input type="checkbox"/>	Issuing an RA token to the pharmacy is no longer necessary when starting a repeat dispensing prescription regime	

Identifying Suitable Patients

Done	Actions/Considerations	Notes
<input type="checkbox"/>	The wider teams to support practices to implement eRD	<ul style="list-style-type: none"> Medicines optimisation teams Practice pharmacists Local pharmacists
<input type="checkbox"/>	Consider any patients whose medication is expected to remain stable between reviews	<ul style="list-style-type: none"> Please refer to NHS Digital Guidance
<input type="checkbox"/>	Consider any patient, who's repeat medication is due, for eRD	<ul style="list-style-type: none"> If they are prescribing a suitable regime for a suitable patient, they should choose eRD by default

There are some prescription items that cannot be transmitted electronically. For other products with a dm+d error, replace the item with another description of the same product that is dm+d mapped and can be sent through

Identifying Unsuitable Items

Done	Actions/Considerations	Notes
<input type="checkbox"/>	Medication unsuitable for eRD	<ul style="list-style-type: none"> Controlled drugs schedule 2 and 3 Medications requiring frequent review such as methotrexate and lithium

Preparing Repeats for eRD

Done	Actions/	Notes
<input type="checkbox"/>	For patients already receiving repeat medication a 'stop gap' prescription of some medication may be required to ensure all medications are due again at the same time in the future	<ul style="list-style-type: none"> 'bridge the gap' with a one-off script—if other medications are running out e.g. next week, until ready to start a new eRD batch for all items
<input type="checkbox"/>	Consider issuing items in separate batches—e.g. CD 4 or 5, or when required (PRN) items (irregular use duration)	<ul style="list-style-type: none"> Use the patients usage history to calculate PRN intervals e.g. 4 issues in 12 months = 84 days between issues If the patient runs out of medication the next issue can be requested and dispensed early
<input type="checkbox"/>	Synchronise all items to be issues in the same eRD batch	<ul style="list-style-type: none"> This assists the patients to collect all of their medication at the same time from their chosen pharmacy
<input type="checkbox"/>	Any Schedule 5 or prescription only medication issues on eRD MUST be dispensed, for the first time, within 6 months from the effective date of the prescription	
<input type="checkbox"/>	For Schedule 4 Controlled Drugs, the first issue must be dispensed with 28 days of the effective date	
<input type="checkbox"/>	Any item issued with a 'variable use' duration will need to be managed separately	<ul style="list-style-type: none"> The nominated pharmacy would need to know to leave this issue on the spine EVERY time they refreshed their systems

Prescriber Notes

Done	Actions/Considerations	Notes
<input type="checkbox"/>	All issues of the eRD prescriptions are stored securely on the NHS Spine and automatically downloaded at the patient's nominated pharmacy at the intervals set by the prescriber	<ul style="list-style-type: none"> if the patient is due to go on holiday and will run out of medication the next issue can be requested and dispensed early
<input type="checkbox"/>	eRD allows the prescriber to authorise and issue a batch of repeatable prescriptions for up to 12 months with one digital signature	
<input type="checkbox"/>	It is always good practice to communicate with the patients nominated pharmacy about any changes made to the eRD prescription	<ul style="list-style-type: none"> Consider sending an electronic note to the dispenser with the new eRD prescription
<input type="checkbox"/>	eRD puts the prescriber in control, rather than allowing the patient or dispenser to continue re-ordering unnecessary items	<ul style="list-style-type: none"> Encouraging the patient to only re-order what they need prevents oversupply and stockpiling items

Cancellations

Done	Actions/Considerations	Notes
<input type="checkbox"/>	eRD allows the cancellation of the whole prescription or individual items	<ul style="list-style-type: none"> Cancelling an item will also cancel the items from all future issues of that prescription
<input type="checkbox"/>	If any cancellations are made and new drugs added, ensure that the new medication end date is aligned to the original batch end date	<ul style="list-style-type: none"> Consider generating a one-off script –if other medications are running our next week for example, until ready to start a new eRD batch
<input type="checkbox"/>	If the prescription is already with the dispenser, it must be returned to the Spine for the cancellation to take place. The amended eRD prescription can then be manually downloaded by the dispenser	<ul style="list-style-type: none"> It is good practice to communicate with the patients nominated dispenser about any changes to eRD prescriptions
<input type="checkbox"/>	eRD puts the prescriber in control, rather than allowing the patient or dispenser to continue re-ordering unnecessary items	<ul style="list-style-type: none"> If the dispenser continues to re-order this could lead to oversupply and stockpiling
<input type="checkbox"/>	Where the prescriber is the responsible party and the author moves to another practice, any outstanding RD batches must be cancelled and re-issued by another prescriber	<ul style="list-style-type: none"> The cost centre is transferred with the prescriber, therefore eRD prescriptions would move with the prescriber and be charged to their new practice Consider adding this to the leaver process for prescribers Adopt as part of the new starter process that the prescriber is made aware of the requirement to cancel all eRD batches from the previous practice

Dispenser Notes

Done	Actions/Considerations	Notes
<input type="checkbox"/>	Patients will still benefit from regular contact with their dispenser, who is responsible for checking that their circumstances haven't changed since the previous issue of the prescription was collected	<ul style="list-style-type: none"> • Have you seen any health professional (GP, Nurse or hospital doctor) since your last prescription was supplied? • Have you recently started taking any new medicines—either on prescription or that you have bought over the counter • Have you been having any problems with your medication or experiencing any side effects • Are there any items on your repeat prescription that you don't need this month
<input type="checkbox"/>	Improved stock control	<ul style="list-style-type: none"> • Issues of an eRD prescription are downloaded 7 days before they are due, allowing time for the dispenser to order in any out of stock items and time to prepare the prescription in advance of the patient arriving to collect their prescription
<input type="checkbox"/>	The patient has the ability to request multiple issues of medication in advance after clinical assessment by the pharmacist. This could be useful, for example, when patients are going on holiday	<ul style="list-style-type: none"> • If its clinically appropriate, the subsequent issues of the prescription can be manually downloaded from the Spine and dispensed in advance of the due date. The next issue is available once the dispense notification has been sent for the previous issue
<input type="checkbox"/>	When the patient collects the final issue of their eRD prescription, the pharmacist should remind the patient to contact their GP practice to re-order	<ul style="list-style-type: none"> • Consider working with your local pharmacies to ensure a robust process for medication reviews

Further Help and Support

- NECS Prescribing Systems and Processes Resources:
<http://medicines.necsu.nhs.uk/category/resources/systems-processes/>
- NHS Digital eRD for prescribers: <https://digital.nhs.uk/Electronic-Prescription-Service/Electronic-repeat-dispensing-for-prescribers>
- NECS/ NHS Digital e-learning, including system specific advice: <https://learning.necsu.nhs.uk/nhs-digital-electronic-repeat-dispensing-elearning/>
- NHS Digital EPS prescription tracker: <https://portal2.national.ncrs.nhs.uk/prescriptionsadmin/>
- NECS Model Repeat Prescribing System:
<http://medicines.necsu.nhs.uk/download/model-repeat-prescribing-system/>
- NHS Digital dm+d EPS factsheet:
[https://digital.nhs.uk/media/786/dmanddfact1/pdf/EPS dm d and prescribing systems combined factsheet Feb 17 v0-13](https://digital.nhs.uk/media/786/dmanddfact1/pdf/EPS_dm_d_and_prescribing_systems_combined_factsheet_Feb_17_v0-13)
- NHS Digital EPS benefits estimator:
<https://epsestimator.digital.nhs.uk/#!/prescriber>
- NHS Digital Toolkit:
<https://digital.nhs.uk/media/651/eRD-toolkit/pdf/eRD-toolkit1>

If you would like some additional onsite support for your practice please email the Business Change & Benefits Team on the email address below and one of the team will contact you to arrange a suitable date and time: