

Electronic Prescription Service (EPS) and Care Home residents

In the Electronic Prescription Service (EPS) the prescription is generated by the practice and sent electronically to the designated pharmacy as chosen by the patient making the prescribing and dispensing process more efficient and convenient for patients and staff.

In the care home setting, it is good practice for prescriptions to be checked by the care home prior to being sent to pharmacy for dispensing. This is due to the large number of items being ordered and also because of the need to request them well in advance. Each prescription needs to be matched against the order and checked to ensure it still reflects current medication regime since there may have been changes; any discrepancies can then be resolved with the practice. It is important to allow time for all the checking processes to be completed prior to the start of the monthly medication cycle (see guidance on monthly ordering process).

EPS is therefore not currently recommended for monthly prescriptions for residents in care homes unless there is an agreed system in place that allows the checking of the prescriptions by the care home. There will also be occasions where a prescriber cannot issue the prescription via EPS for technical reasons, the product is not listed in the NHS Dictionary of Medicines and Devices or it has not been entered onto the prescription in a way to be compliant with EPS.

Practices and pharmacies can print off hard copies of the electronic prescription, these are known as 'tokens'. There are two types of token, those printed by the practice on green (FP10) paper are known as 'prescription tokens' and those printed by the pharmacy on white stationary (FP10DT) are known as 'dispensing tokens'. These prescription tokens feature a barcode and are not an active prescription. If any amendments need to be made then the original electronic prescription must be cancelled (where possible) and a new prescription issued, the token must NOT be altered manually.

Options*

1. Continue with the current recommended procedure by which the practice produces paper FP10 prescriptions as per the care home requests. These are then checked by the care home, any discrepancies rectified by the surgery prior to sending to pharmacy.
2. The practice generates electronic prescriptions for the ordered items and prints off 'prescriber tokens' for use in checking processes by the care home. Any omissions or discrepancies in the prescribed item must be reported to the surgery to be corrected. Once these discrepancies have been rectified the care home (or the surgery) should advise the pharmacy that the EPS prescription can now be downloaded and dispensed.
3. The practice generates electronic prescriptions for the items ordered by the care home which are downloaded by the pharmacy but NOT dispensed. 'Dispensing tokens' are then printed off by the pharmacy and sent to the care home for checking. All discrepancies must be rectified by the practice prior to dispensing by the pharmacy. Once any discrepancies have been rectified the care home (or the surgery) should advise the pharmacy that the EPS prescription can now and dispensed.

*The chosen option will be dependent on the current arrangements that exist between the pharmacy, the care home and the surgery and will require the complete agreement of all stakeholders to make EPS manageable for all involved.

Bulk prescribing and EPS

As the prescription generated for EPS has to be from an 'active' patient, a bulk prescription cannot be generated electronically. It must, therefore, be printed on a green FP10.

Prepared By: Medicines Management Team (March 2018)

Contact: Joy Smith Medicines Standards Officer (Care Homes) joy.smith4@nhs.net

Approved by: Area Prescribing Group

Date Approved: May 2018

Review date: April 2021