

Digital and interoperable medicines

Transforming patient care and clinical services



Briefing for implementation teams

Information about patients' medications, allergies, intolerances and prescriptions held by the NHS can be fragmented.

Data is often recorded in different formats and using different vocabulary. This makes it difficult to share medicines information within and across health and care organisations.

To address this, all medication messages used by different NHS IT systems need to be standardised. Messages need to be interoperable, meaning different IT systems can seamlessly exchange and make use of data and information across system and organisational boundaries. This change will allow information to be transferred electronically, improving safety and efficiency, releasing time for staff to focus on care and providing patients with a better experience.

Why is this important?

Immediate access to medicines information will improve patient safety by reducing errors and overprescribing:



There are currently 237 million medication errors every year in England



Around 5 deaths every day are due to medication errors



20% of hospital admissions in over 65's are due to adverse drug reactions



30 to 70% of patients have an error or unintentional change to their medicines when their care is transferred

Annually across England, a large amount of staff time is spent on medicine transcriptions and converting dosage information at the transfer of care:



Hospital transcriptions

167 million



Hospital staff time

1.2 million
hours



GP clinical /administrative time

9000
weeks

Interoperable medicines can contribute to better healthcare by:

- supporting quicker and better informed clinical decision-making by providing immediate access to accurate and timely information at the point of care
- reducing the time clinicians spend determining a patients' current medicines and allergies/intolerances (i.e., medicines reconciliation) and on associated prescription queries and issues



- removing the need for clinicians to transcribe medicines information and convert dosage instructions at transfers of care, releasing time to spend on other tasks. This will also reduce the number of omissions, duplications and errors, improving patient safety
- reducing the time taken for medicines to be dispensed as orders are transferred electronically, enabling patients to be discharged quicker
- supporting the use of systems that provide the foundations for interoperability such as the Electronic Prescription Service (EPS), Electronic Prescribing and Medicines Administration (ePMA) and Closed Loop Medicines Administration (CLMA)

How will this be achieved?

The Information Standards Notice (DAPB4013: Medicines and Allergy/Intolerance Data Transfer) puts in place the definitions and standards that are to be used when a health professional sends or receives patient medication and allergy/intolerance information, by computer systems, between care locations. The conformance date for this standard is **31 March 2023**.

How will this help the wider health and care system?

Adopting the medicines standards from DAPB4013 will:

- lay the foundation for a single consolidated patient medication record, a single source of truth of a patient's medications and allergies/intolerances
- address problems of overprescribing and support medicines optimisation
- improve data analysis to support NHS service delivery, research and patient safety

Planning for the implementation of interoperable medicines

A multidisciplinary team needs to be established with committed representatives from pharmacy informatics, IT, finance and procurement teams, plus senior executives and clinical leaders.

The standards provide an opportunity to explore changes to improve working practices, so the input of clinical and technical colleagues is vital. The team will need to determine how to roll-out new systems across the organisation and support staff once they are in use.

How the team will support the move to interoperable medicines

Important issues the team need to address are:

- effectively communicating the vision and benefits of interoperable medicines to build support
- securing wider stakeholder commitment, including senior management and clinical leaders
- working with system suppliers to understand what is required to implement the standards
- upgrading or procuring a new system to ensure the standards are met by 31 March 2023
- exploring how changes to working processes can transform and improve the delivery of care
- providing training and share support resources
- managing the safe roll-out of systems across the organisation
- designing robust back-up and recovery procedures, to limit the impact on any live systems and working practices
- using data to improve medicines optimisation, patient safety and clinical outcomes
- sharing experiences with other organisations implementing the standards to benefit the wider system

Further Information

Direct any comments or queries about the briefing sheets to: interopmeds@nhs.net

DAPB4013 requirement specification: **DAPB4013: Medicine and Allergy/Intolerance Data Transfer** - NHS Digital

Access further information, including briefing sheets aimed at other staff groups, case studies, animations and technical guides: **Digital and Interoperable Medicines Programme** - NHS Digital

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