# Electronic Prescription Service (EPS) in secondary care

What do you need to know...?

Dawn Friend, EPS Product Specialist, Live Services

Will Gallear, Implementation Manager
Product Implementation and Relationship Management

**NHS** Digital

### Who uses EPS already?

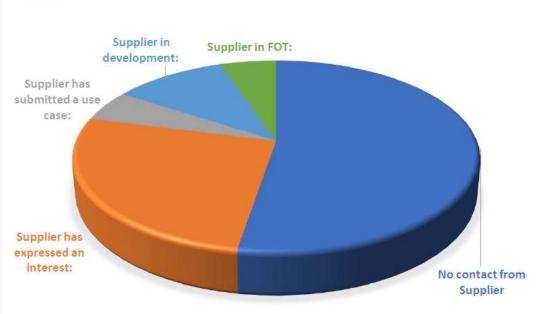
- GP Practices (including dispensing practices)
- Urgent Care prescribers
- Medical and non-medical prescribers
- Community pharmacies
- Dispensing Appliance Contractors (DACs)
- Patients!

### Since 2020 (COVID-19 response)

- More primary / community services, extended access
- Additional features, non-nomination, one-off nomination
- Support for remote prescribing
- Secondary care pilots (using primary care system)

### What about secondary care?





Some secondary care system suppliers are engaging with us to develop EPS...

Is yours?

# EPS – so what do you need to know?

How does EPS work?

What's involved?

What can you do to prepare?

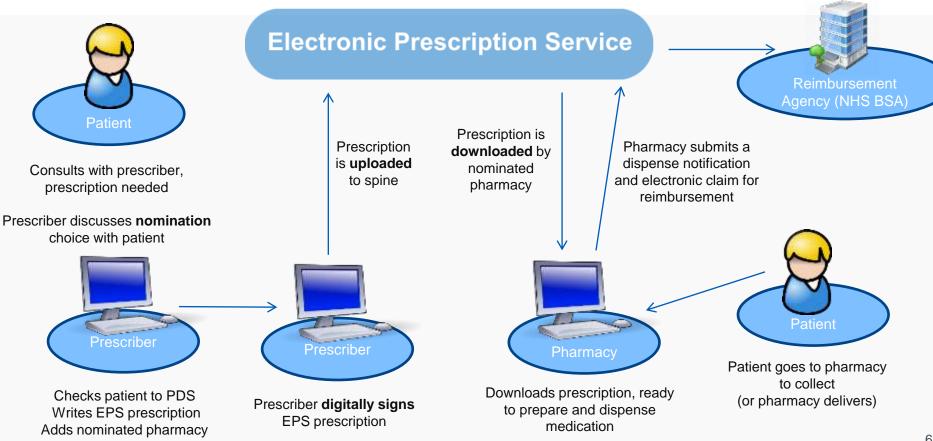
# EPS is not 'plug & play'

EPS is a well-established service, bringing many benefits for patients, prescribers, dispensers, and the NHS

But good preparation and business change will be key for secondary care, trusts and services who want to realise those benefits

Getting from your paper FP10s to EPS...

### A typical nominated EPS prescription journey





### **Nomination**

- Patient choice
- Any community pharmacy in England
- Nearly 70% of patients already have a regular nomination
- One-off nomination can also be used

### **Smartcards**

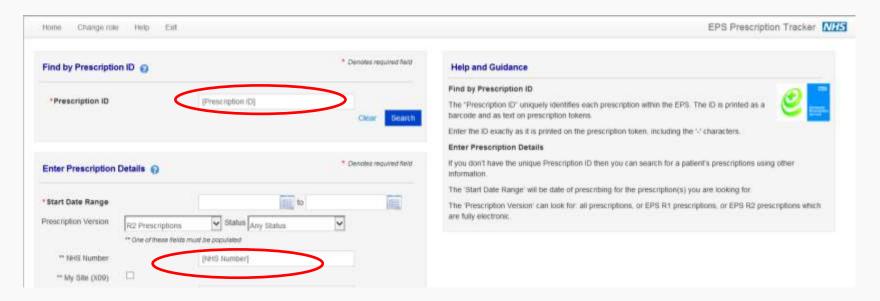
- Smartcards are needed to:
  - Match patient to PDS
  - Generate EPS prescriptions
  - Access and apply nominations
  - Digitally sign EPS prescriptions
  - Cancel prescriptions
  - Use the EPS Tracker
- All staff involved in EPS need a smartcard (clinical and admin)

# Advanced electronic signatures

- Advanced electronic signatures are unique to individual users and are applied using their smartcard and passcode
- It is the application of the advanced electronic signature to the electronic message that turns it into an electronic prescription
- User's smartcard profile and their prescribing codes form the electronic signature

# **Prescription Tracking**

- Can track the status of an EPS prescription, at any point after signature
- Can be used by prescribing and dispensing staff



# **EPS Prescription Tracker**

Prescription Type

#### Prescription and Dispensing Details (2)

**Prescription ID** 

ED9B09-C83059-9835C5

**Prescription Treatment Type** 

Repeat Prescribing (0002)

**Prescription Type** 

General Practitioner Prescribing - GP (0101)

Date/Time Signed

22-Jun-2015 12:42:44

**Prescriber Organisation** 

GREYFRIARS SURGERY (C83059)

**Prescriber Contact** 

01205 311133

Nominated Dispenser

BOOTS UK LIMITED (FYJ76)

Dispenser Organisation

BOOTS UK LIMITED (FYJ76)

**Dispenser Contact** 

01205 362138

Patient NHS ID

476 923 9955

**Prescription Status** 

With dispenser

**Applied Cancellations** 

None

**Pending Cancellations** 

None

#### Prescription Event History (2)



Close

Show Barcode

### **Cancellation**

- Prescribers (or other authorised staff) can request to cancel EPS prescriptions, at any point until they are dispensed to the patient
- Prescriptions (or individual items) can be cancelled from the prescribing system
- Cancellation will be successful when prescription is on the NHS Spine
- Response messages are returned by NHS Spine to prescriber to confirm status of cancellation request and any action required
- Prescriptions already downloaded by pharmacy need to be 'returned to spine' for cancellation to take effect



### **Business change for EPS**

- Understand EPS service concepts
- IT networks, kit, NHS spine connectivity, remote access?
- Smartcards Registration Authority, readers, user configuration
- Prescribing policies, contracts and formularies what goes where now? (FP10, homecare, hospital pharmacy)
- Cost centres and reporting how do you manage this with your FP10s – will it be different with EPS?
- EPS requires product-based prescribing, using dm+d how will your supplier manage this?

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**Urgent prescriptions** 

Pharmacy stock

EPS troubleshooting

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Cancellation

### **Preparing for EPS**

Before EPS is enabled in your trust, please make sure your team has read and understood the guidance and information about using EPS on this page, which can help with development of local business processes. Your EPS system supplier will provide information specific to the system.

#### Things to consider

- all users to have smartcards with roles and access rights required for EPS
- ✓ service and user details must be correctly configured within EPS system.
- business processes for using EPS alongside other patient record systems and prescribing purposes
- ✓ using dm+d and product-based prescribing
- patient details must be matched to Personal Demographics Service (PDS), NHS Number found
- discussing pharmacy choice with patient

#### Cost centres for EPS

Before you start, all service level cost centres will need to be agreed and configured.

Cost centres used for EPS may be either:

- . a 5-digit 'trust site code' or 'EPACT code', for example RAT01, or
- a 6-digit 'prescribing cost centre' code, for example Y12345.

Tips to establish your EPS cost centre codes:

- what prescribing codes does your service currently use for paper FP10 prescriptions? (printed or pads)
- would you want to use the same for EPS, or take a different approach?

### **Practicalities for prescribers**

- Are all your patient records regularly synced to PDS?
  - Who will deal with any mismatches?
- How will your prescribers know what to send where? work with your system supplier on formularies and configuration
- At what point will they discuss pharmacy choice with patients?
- What support or training might your prescribers need with product-based prescribing?
- Will you use admin support for tracking, cancellation etc?

Leadership, and clinical champions will be key

# Thank you

https://digital.nhs.uk/services/electronic-prescriptionservice/eps-for-secondary-care