

Tips for implementing eRD

1. Prior to implementing

Time invested up front to plan and prepare will help you ensure a successful implementation of eRD in your practice. Below are some key steps to consider before embarking on implementing eRD:

1. Staff training

- > See: Appendix 1 for links to some useful training resources.
- Ensure all practice staff are aware of what eRD is and that they understand the process involved before beginning to convert patients to eRD.
- ➤ Identify what time and resources are available in your practice for training and implementation.
- Identify who in your practice is involved in production or issuing of prescriptions as they will be key for implementing changes.
- > Develop a system that suits the practice. eRD requires a team approach so decide who within your practice will do what to drive the changes and then train appropriately.
- Allocate an eRD champion who can promote eRD within the practice and support staff with any difficulties.
- Link in with another practice near you that has successfully implemented eRD so they can help with advice and support.

2. Establish and/or improve communication with your community pharmacies

- Inform local pharmacies you are intending to implement or increase the uptake of eRD. Pharmacies can help to identify suitable patients, as well as supporting them with the eRD process.
- Establish preferred methods of communication regarding eRD processes i.e. email, by telephone etc. and identify a key contact.
- ➤ Ensure that your eRD champion has regular open communication with the community pharmacies' key contacts.
- > Ensure that local pharmacies understand what they need to do before they supply eRD medication and what to do when medications change mid batch or when giving out the last prescription of the batch.

3. Patient engagement

- Utilise the NHS Digital eRD toolkit (Appendix 1) to promote eRD to patients appropriately.
- ➤ Discuss eRD and/or obtain consent during non-urgent routine calls to and from patients where appropriate.

- Make use of SMS where appropriate to:
 - a) inform patients about eRD,
 - b) seek consent,
 - c) give details of their eRD prescriptions e.g. the dates their first eRD prescription will be ready.

If your practice uses AccuRx Chain SMS the patient record will be automatically updated.

- For patients where an SMS is not appropriate or they require further information it may still be necessary to send a letter. The NHS Digital Toolkit (see Appendix 1) contains some letter examples.
- Ensure the patient is aware that they should collect their dispensed medicines from their nominated pharmacy at regular intervals (28/56 days).
- Ensure patients are aware that they will need to reorder their prescription from their practice once their final repeat issue has been fulfilled, and that they may also need to have a medication review before re-authorisation.
- ➤ Before setting up a PRN eRD prescription, look at the patient's ordering history and discuss frequency of use with them in order to establish the appropriate repeat quantity and issue interval.

4. Ensure that medication reviews are up to date

- ➤ eRD provides an ideal focus to review a patient's medication record in line with annual or 6 monthly chronic disease clinic or clinical review. Before attempting to set up a patient on eRD ensure the following:
 - The patient's medication list is up-to-date i.e. there is a current clinical indication for each repeat medication.
 - Doses prescribed reflect those being taken.
 - Remove any items that are no longer required / not issued within last 6 months.
 - Standardise quantities where possible to provide a 28 day repeat cycle or 56 day cycle where appropriate.
 - If necessary give a single acute prescription to synchronise the patient's medication.
 When speaking with a patient check the amount they have left of each medication in order to facilitate synchronisation of the prescription.
 - Ensure that any clinical and drug monitoring is up to date where required (i.e. blood tests, blood pressure etc.).
 - Ensure that the patient has attended/received relevant clinical annual or 6 monthly reviews.

2. Setting patients up for eRD

- > Start with patients on simple and stable medication regimes, for example taking 1 or 2 oral medicines, no significant changes in the last 6 months or anticipated changes for the duration of the batch.
- As confidence with the process grows consider targeting those patients on medications for specific conditions e.g. hypertension, diabetes or thyroid disease. Patients with long-term medical conditions should be stable with no unplanned hospital admissions in last 6 months.

- > Spend the time in creating appropriate searches that will generate specific patient lists relevant to the criteria sought. Ensure appropriate exclusions are applied within the search.
- Consider setting up everyone in the same household on eRD at the same time where possible and practical. Many patients want their whole household to be on the same system especially if one person is responsible for collecting the whole family's prescriptions from the pharmacy.
- > Ensure that medication quantities and duration of each issue are aligned before issuing prescriptions as eRD, this is particularly important where clinical systems default to a different original pack size e.g. nicorandil.
- ➤ Controlled Drugs Schedule 2 and 3 controlled drugs cannot be prescribed on an eRD prescription but Schedule 4 and 5 controlled drugs can.

3. Post set-up

1. Stopping eRD medication

- > Stopping medication when using eRD provides a robust audit trail. Prescribers have the option of cancelling one item or the whole prescription.
- As with non eRD, once the prescription is dispensed, if it is cancelled the pharmacy must be contacted and advised not to issue the medicine(s) to the patient.

2. Reissuing a new batch

- When a patient has received their last prescription of the eRD batch, a further batch may only be issued after completion of any outstanding medication reviews. Once the last prescription in the batch has been issued the patient will be instructed to contact the practice to request and arrange a medication review.
- Consequently, medication reviews should be planned well in advance of the last instalment of the eRD batch prescription to avoid disruption to the patient's treatment.

3. Non-collection or prescriptions not arriving with the dispenser

- Practices must follow up on prescriptions not collected by patients. When patients fail to collect their medications or inform the pharmacy that items are no longer required, the pharmacy must return the prescription to the spine and inform the GP practice. The practice must take appropriate action to follow up and review patients if medications are not being collected or taken for any reason.
- When an EPS2 prescription does not arrive with the dispenser as expected, dispensers or practices can use the NHS Digital prescription tracker factsheet to chase it up: https://digital.nhs.uk/services/electronic-prescription-service/eps-prescription-tracker/fact-sheet-for-pharmacy-staff

Appendix 1: Useful eRD training and reference resources

The **NHS Digital toolkit** where you can find a number of resources and guides for both prescribers and dispensers: https://digital.nhs.uk/services/electronic-prescription-service/electronic-repeat-dispensing

The NECS and NHS Digital e-learning module provides a useful introduction to eRD for staff (useful for initial staff training): https://learning.necsu.nhs.uk/nhs-digital-electronic-repeat-dispensing-elearning/

NEL CSU produced a comprehensive guidance document for their GP practices which contains a lot of useful practical information that can be adapted for use elsewhere: https://www.knowledgeanglia.nhs.uk/LinkClick.aspx?fileticket=IrMh8Zujnb4%3d&tabid=896&portalid=1

Wessex AHSN developed a website that contains a wealth of information relating to eRD that is useful to all areas: https://wessexahsn.org.uk/projects/120/electronic-repeat-dispensing

eRD checklist and PDSA cycle (Wessex AHSN) https://www.yhahsn.org.uk/wp-content/uploads/2020/06/PDSA-eRD-Checklist-V1.4.pdf