

## Electronic Repeat Dispensing – eRD

### Example of local process to implement at pace

#### Dorset CCG Medicines Management Team

This process is currently being used within five PCNs in Dorset. It demonstrates a multi-agency approach combining knowledge from; community pharmacy, community and mental health trusts, CCG and NHS BSA – using the pharmacy network to its full advantage.

Local intelligence of capacity was mapped and shared and eRD uptake to date was reviewed. This enabled prioritisation of areas and this will be repeated as we look to spread the model.

Constant evaluation is in place by frequent cross-sector meetings and zoom conferences planned to allow for feedback and further spread.

Please refer to Dorset Formulary for more information, accessible via;  
<http://www.dorsetformulary.nhs.uk/chaptersSubDetails.asp?FormularySectionID=24&SubSectionRef=24.04&SubSectionID=A100>)

#### **Practices:**

1. Each practice has communicated their consent to be involved in the CCG eRD programme
2. Individual practices have agreed clinical parameters for patients included in the list from the BSA
3. Practices and the representative PCN Clinical Pharmacy Team have agreed responsibility for ensuring their reception and/or prescription clerk teams are fully aware of the implementation.
4. Clinical Pharmacists have then gone through list and screened patients, noting those that are appropriate for eRD
5. These patients are added to a spreadsheet
6. Spreadsheet sent to CCG medicines team for review (GDPR and confidentiality issues have been mutually agreed and information is handled within all appropriate guidance. Dorset are currently sharing live documents via secure Teams, to ensure version control and limit access).
7. Practices are advised to batch authorise to reflect prescription cycle that patients are currently in.

## Patients:

1. CCG Medicines Management team make a telephone call to patients included in the spreadsheet
2. Call is worded in a way to explain to patient that they have been selected due to the type of prescription they have and then goes on to;
  - a. gain patient consent for switch to eRD
  - b. capture nomination of community pharmacy
  - c. capture current method of prescription order
  - d. make clear that patients must still contact their GP / pharmacy for any other information needed and this call is about repeat medication only.
  - e. request that patients 'please make a note of the words 'electronic repeat dispensing' when speaking to pharmacy about repeat medication, to ensure that pharmacy
  - f. explain that they will be asked a series of qu's by their pharmacists when collecting medication
  - g. explain how and when to contact that particular pharmacy
3. Consent is noted as 'Yes' in field in spreadsheet along with nominated pharmacy. This is then returned to practice via NHS.net (password protected – IG sign-off obtained).
4. N.b. at the request of the LPC no paper communications currently sent to patient as follow-up, to reduce workload.

## Pharmacies:

1. All pharmacies within PCN have been contacted (aim is to contact all PCNs that come forward for help). It is IMPERATIVE that contact is made with community pharmacy for eRD process to work and for benefits to be realised. If unable to get through by phone an email is/will be sent containing all salient information.
2. All phone calls and attempted call are logged. Outcome of call is noted.
3. Pharmacies are asked how they would like patients to communicate with them e.g. by phone? Or would they prefer outbound contact e.g. via text (process to collect patient consent for mobile contact needs to be in place).
4. Screened patient list can be shared with community pharmacy via NHS.net email (in line with GDPR and confidentiality guidelines).
5. Aiming to add note to 'token' part of physical prescription 'this is a newly set-up eRD'

## Thanks to.

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