**Electronic Repeat Dispensing (ERD) Implementation during COVID 19 Pandemic**

ERD is a process of setting up a number of electronic repeat prescriptions, which are held on the NHS spine, available to be pulled down for dispensing by the Pharmacy.

National advice has been received advising GP practices to increase the use of electronic repeat dispensing (ERD) with the aim of reducing GP practice patient footfall and pressure on primary care staff involved in ordering and processing these requests.

**Careful consideration needs to be given to the selection of patients suitable for ERD, staff training (GP and Pharmacy); ensuring robust ERD processes are in place and the volume (see Point 1 below) of patients being set up.** If such consideration is not given then ERD could result in significant unintended consequences – increased footfall, increased workload for GP and Pharmacy staff and patients medicine supplies being compromised.

We do feel ERD is a useful tool but it is not suitable for all patients and should be implemented carefully. For more information on these issues please discuss / liaise with your clinical pharmacist/pharmacy technician, or the core Medicines Management Team, who will be able to advise and support its safe implementation.

Lists are being received from NHS Business Services Authority which identify patients who MAY be suitable for setting up on ERD. We do not know what criteria NHSBSA use to pull together these lists and it’s unclear if they access clinical monitoring information. We therefore advise practices to undertake an individual review of each patient as to their suitability.

**For a small group of carefully managed and reviewed patients ERD may be useful.**

**We advise practices NOT to set up patients on ERD unless:-**

**ALL staff involved in setting up, issuing and cancelling ERD prescriptions are suitably and sufficiently trained in ERD.**

AND

**ALL practice staff understand the processes in place within Pharmacies for receiving and dispensing prescriptions and have assurances that Pharmacy staff are suitably and sufficiently trained, have processes in place which most importantly do NOT pull down prescriptions for patients early (prior to their due date) without good reason (see below Point 2), or in the case of “when required” items ONLY when they are requested by the patient.**

**ERD is not suitable for patients:-**

* **whose prescription medication has changed in the last 12 months, OR is likely to change in the next 6-12 months.**
* **have recent or frequent hospital admissions.**
* **where ALL monitoring is not up to date and stable**
* **are being prescribed a Controlled Drugs (including Schedule 3 items such as gabapentin and tramadol) – see Point 3 below.**
* **are being prescribed items which have been recently or are liable to be “Out of Stock”, as these may require prescription changes – see Point 4 below.**

*1. ERD has not been used largely in Barnsley and introducing or expanding a relatively new; un-trialled system which places extra work and responsibility on Community Pharmacies at this unprecedented time when they are already stretched to capacity has the potential to pose safety risks and place community pharmacies under even greater pressures. ERD transfers responsibility and work to the community pharmacy, who is then responsible for the duration of the ERD prescription batch to check for any changes to the patient since they last had their prescription issued. However pharmacies do not ave access to clinical systems to enable them to do this safely. If these vital checks are missed due to the current workload pressures then patients could continue having medicines supplied after they have been stopped within GP systems.*

*2. Patients can request ERD prescriptions early at the pharmacists’ discretion. This could lead to stockpiling and further supply issues*

*Once ERD prescriptions are downloaded from the spine to a community pharmacy they cannot be retrieved unless returned by the Pharmacy. (There is a concern that in the current situation some community pharmacies may need to close and/or consolidate branches due to reduction in staff from sickness and isolating. This could cause a significant problem for eRD prescriptions which could not be retrieved and may need to be reissued to another pharmacy).*

*3. Controlled Dugs are currently not able to be issued using ERD and would need to be issued on separate prescription(s) , which may cause confusion when some items are issued one way and others another , creating extra workload for the practice and pharmacy and extra trips to the Pharmacy for the patient.*

 *4. Out of Stocks ; up to 50% of medicines may be unavailable at any one time across the healthcare system at present. Changes to medicines issued via ERD are more complex for the practice to process, and present the risk of two similar items being issued to the patient*