

## Enabling Electronic Prescription Service (EPS)

16<sup>th</sup> April 2020

Dear Colleague

We are writing to you to ask you to take the required steps to enable Electronic Prescription Service (EPS) **with immediate effect.**

Use of EPS was mandated in a [letter sent by NHS England to Primary Care on 19<sup>th</sup> March 2020](#)

*'Practices must use the Electronic Prescription Service (EPS) and should aim to move patients to electronic repeat dispensing unless there is a clinical reason not to do so. There should be no move to increase the duration of prescriptions.'*

EPS has many advantages during 'peace-time', for both prescribers and dispensers, but is extremely important, both for GP Practices, Community Pharmacies and patients, during the Covid-19 pandemic.

EPS4 allows for >95% of items to be sent electronically, including controlled drugs. The few items that may remain unsuitable for EPS are those not in the dictionary of medicines and devices.

### **Benefits of EPS for Prescribers**

#### **Prescriptions are processed more efficiently**

- sign individual or multiple prescriptions electronically, there is no need to sign by hand
- during face-to-face, telephone or video consultations, prescriptions can be sent to the patient's nominated pharmacy, reducing footfall in the practice as patients collect their prescription from the pharmacy instead
- no need to post prescriptions, saving time and removing the risk of prescriptions getting lost in the post
- replacement prescriptions no longer need to be faxed

#### **Spend less time dealing with prescriptions**

- standardised prescription information reduces the number of queries from dispensers
- improved prescription accuracy reduces the chances of patients receiving the wrong medication
- electronic prescriptions can't be lost, reducing the risk of duplicate prescriptions being created
- no need to prepare and sort prescriptions ready for pharmacies to collect
- less chance of prescriptions going to the wrong dispenser

- suitable patients can be moved on to electronic repeat dispensing, reducing time spent issuing and re-authorising prescriptions

### **Have greater control over prescriptions**

- prescriptions can be cancelled at any time until they have been dispensed, and replacements can be sent electronically

For more information about EPS please visit [NHS Digital](#)

### **Electronic Repeat Dispensing**

Primary Care has also been asked to implement electronic repeat dispensing (eRD) during the Covid-19 pandemic. This will also contribute to the management of workload for both GP Practices and Community Pharmacies.

GP Practices cannot implement eRD until they implemented EPS.

### **Dispensing Doctors**

We are aware that a small number of GP Practices may not have implemented EPS for fear of losing income from dispensing patients to online pharmacies, for example, Pharmacy2U. However, currently, there isn't a complete digital solution to allow EPS or eRD for dispensing patients, dispensing patients that chose to have the practice dispense their items would be exempt from EPS. There is a SNOMED code that can be used for dispensing patients who are exempt from EPS.

If the dispensing staff all end up in isolation at the same time EPS offers business continuity to these practices and their patients.

### **Support for EPS – NHS Digital and CCG Support.**

NHS Digital have worked assiduously to enable EPS at speed for a wide variety of other healthcare providers during the Covid-19 pandemic, e.g. community services, out of hours, mental health providers, primary care hubs etc. which are above and beyond the usual use of EPS. This rapid enabling is to support the reduction of paper prescriptions and reduce the need for patient attendance at healthcare provider sites during the Covid-19 pandemic.

NHS Digital is working with those GP Practices who have enabled EPS to move easily from version EPS2 to EPS4 – offering greater functionality, allowing >95% items to be sent electronically, including controlled drugs.

NHS Digital is also supporting the more rapid implementation of EPS, in conjunction with the CCG, for the few remaining GP Practices who have not yet enabled EPS. All new GP Practices will move directly to EPS4.

The activities required for General Practice to go-live with EPS is easier and can be switched sooner than the process required pre-Covid-19.

Further information on the activities and guidance to go EPS live can be found: <https://digital.nhs.uk/services/electronic-prescription-service/switching-on-eps>

The CCG and NHS Digital also are offering further support for go-live:

NHS Digital - Faheem Ismail - [faheemismail@nhs.net](mailto:faheemismail@nhs.net)

NHS Vale of York CCG – Cari Jones - [cari.jones@nhs.net](mailto:cari.jones@nhs.net)

NHS North Yorkshire CCG – Debbie Westmoreland - [dwestmoreland@nhs.net](mailto:dwestmoreland@nhs.net)

Each CCG will be contacting you to arrange with you a 'go-live' date for EPS, in line with the mandate from NHS England on 19<sup>th</sup> March 2020.

If you have continuing concerns regarding implementing EPS we can put you in touch with local GP Practices who do use EPS and/or we are happy to discuss any concerns/issues you may have.

Many thanks for your continued support, cooperation and collaboration regarding these matters.

Sally Tyrer - Chair NY Branch of YORLMC

Ian Dean (CEO) and Jack Davies (Chairperson) - CPHY LPC

Laura Angus – Head of Prescribing, NHS Vale of York CCG

Rachel Ainger – Strategic Lead Pharmacist, NHS North Yorkshire CCG