

Supporting Care Homes

MEDICATION ORDERING PROCESS

Ordering Prescriptions

The care home is responsible for requesting the repeat prescriptions from the GP practice and should not delegate this to the supplying pharmacy; a record should be kept of the medicines ordered.

Prescriptions issued by the GP should be checked against this record before being sent to the pharmacy for dispensing to ensure that all medicines ordered are correct. (If the prescription has been generated via the Electronic Prescription Service (EPS) the GP practice should print off the prescription tokens to enable this check and then the pharmacy should be informed that the EPS prescriptions are correct before they dispense).

All MAR charts should be referenced back to the original prescription and not the previous MAR chart. The care home should photocopy all prescriptions before being sent to the pharmacy (for EPS the prescription token can be kept) this means the care home can check what has actually been prescribed, and that all the doses are correct. Any discrepancies should be reported to the GP practice.

Check the amount of medicines the person has, especially those taken on a 'when required' basis. If there is enough of the medicine to last until the next time you request then do not order. When required medicines can be carried over onto the next month, make a record of the amount being carried over on the new month's MAR chart.

Acute (one off) prescription e.g.an antibiotic

An 'acute' supply is for a medicine that the person has not received before or does not take regularly and will not be listed on the repeat prescription.

Acute prescriptions are supplied when a resident has a new health problem that requires treatment e.g. an antibiotic. The new treatment should be started as soon as possible, within 24 hours at the latest and it is usually for a limited time period such as five or seven days. These medicines will be handwritten on to the MAR chart and needs to be double-signed for accuracy.

Check with the suppling pharmacy if they are able to supply these one off medications quickly or if a local pharmacy to the care home would be better placed to process an urgent prescription.

Interim prescription/ mid-cycle changes

Mid-cycle requests are to ensure there is enough medication to complete the current cycle and synchronise to the 28 day cycle.

Mid-cycle requests for unusual quantities may be requested to complete the current cycle for the following reasons:

- o To synchronise medicines
- o For a new resident
- When a new medication is prescribed for the first time
- o For medicines which have been dropped, spilled or refused by the resident
- Where additional quantities are required due to increased usage (e.g. analgesics) or dose increased.

Care Home staff may request quantities of medication to complete the cycle as well as a further 28 days' supply. This will allow a supply for the next medication cycle to be assembled at the dispensing community pharmacy.

Receiving the prescriptions or the EPS tokens from the GP Surgery

When prescriptions or EPS tokens are received from the GP surgery, check them against the request list, then inform the pharmacy they are correct or inform them of any changes or items not required. Submit the prescriptions to the pharmacy for dispensing. Make a photocopy of original paper prescriptions as a record.

Receipt of medicines

All medicine received into the home must be checked and recorded by a responsible member of staff.

Check all medicines delivered are correct against the record of the order, If the medication you receive is different, check this with the supplying pharmacy.

Count the stock received and keep a record of the stock level on the MAR chart, If the pharmacy supplies a printed MAR chart, sign and date to record the correct medication and quantity has been received. Handwritten entries on a MAR chart need to be counter signed to check for errors.

Request monthly medication flow chart

Week 1, Day 1, start of the new cycle.

Check all stock that can be carried forward are physically counted and recorded on to the new MAR chart.

Week 2 Day 8

Check medication and if still required or if there are any changes. Order the next cycle using the repeat slip or the EPS tokens, or if patients are set up for EMIS or SystmOne PROXY, resident's medication can be ordered using Patient Access.; photocopy the slips or tokens as a record. Take to the surgery for processing.

Week 2 Day 12

Collect paper prescription or EPS tokens from the GP practice. Or check that ordered medicines have been sent via EPS using Patient Access. The surgery requires 48hrs to process the prescriptions.

Week 2, Day 13

Home to check paper prescription or EPS token against the photocopy record, any discrepancies or missing items need to be raised with the GP practice.

Week 3, Day 15

Inform pharmacy that order has been checked and correct or if any item is no longer required.

Prescriptions can now be dispensed by the pharmacy or are ready for collection.

Week 4 Day 24

- Medicines received at least 3 working days before the next cycle.
- Home to check the medication against the photocopy of the tokens or repeat slip.
- Stock to be physically counted or recorded on the new MAR chart by 2 members of staff.

Appendix 1

Medication ordering and Receipt using EMIS PROXY and SystmOne Proxy Access

Care home staff are able to request proxy access to online services for their residents from the GP practices where their residents are registered.

Consent for Online Access (Care Home)

Before setting up online services consent must be gained from the resident wherever possible. Consent can be verbal or written, the Proxy Access consent form should be completed for each resident and a copy kept in their care record (Example in Appendix 2)

Where the resident does not have capacity, online access may be allowed where it is felt to be in the resident's best interests. Decisions of family members, those with lasting powers of attorney or court appointed deputies should also be respected.

GP Access Registration

- The GP practice will be responsible for registering the resident for EMIS Access.
- A generic password will be issued for the care home, this should be changed at agreed intervals by the GP practice.

Ordering Repeat Medication

- Prescription requests should be generated by designated care home staff on the allocated day for the unit.
- The MAR chart should be used as a cross reference when ordering the residents repeat medication.
- Prior to ordering the prescription, stock levels of all medication must be checked, especially 'PRNs' such as analgesics, inhalers, test strips, creams.
- Any medication which runs out at different times should be synchronised and appropriate quantities ordered to align the prescription for the next cycle.
- All repeat prescriptions should be ordered using the online system.
- Log on to the online system at https://patient.emisaccess.co.uk/.

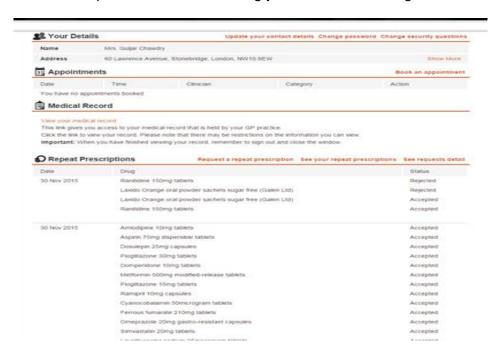
Please use the link for further information regarding patient access:

https://supportpro.patientaccess.com/getting-started/proxy-access

• The following screen will appear.



Enter the user e-mail and password which will bring you on to the following screen.



- Click on 'request prescription' and tick the medication which is required, check the quantity
 to be ordered. Any items which require synchronisation to the next cycle should be manually
 amended using the comments box under the medication.
- In the comment box enter your name, unit, date and time of ordering and submit.
- The order should be printed out and filed in the respective residents file.
- The status will change to 'accepted' when the request has been approved by the GP
 practice and electronically transmitted to the community pharmacy for dispensing.
- The community pharmacy will dispense the medication and arrange for collection/delivery to the care home on the designated day.

Appendix 2:

Consent form for EMIS Proxy or Proxy access

GP				
Practice:				
Care Hom	e:			
Resident				
Name:				
DOB:				
of patient), give form proxy acc to reverse any	e permission to my G cess to the online ser decision I make in g	P practice to give the ca vices for online prescript		is
Signature of resident				
Signature	of resident		Date	
Section 2 – Re	esident does not have	capacity. If the resident e gained from the reside	t does have capacity to consent to	
Section 2 – Regrant proxy ac	esident does not have		t does have capacity to consent to	
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Section 2 – Regrant proxy ac	esident does not have cess, consent must b assessed by:		t does have capacity to consent to	
Section 2 – Regrant proxy ac Capacity a Date: Signature:	esident does not have cess, consent must b assessed by:		t does have capacity to consent to	

Please visit our website for more information: https://www.westhampshireccg.nhs.uk/medicines-in-care-homes

With special thanks to NHS Northern, Eastern and Western Devon Clinical Commissioning Group NHS South Devon and Torbay Clinical Commissioning Group for sharing this resource



