



Serial prescribing

A Toolkit for Serial Prescriptions

Digital Workshop Two (Selecting Patients)
Tuesday 7 December 2021



#pharmaL1

Welcome



Serial prescribing



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GP



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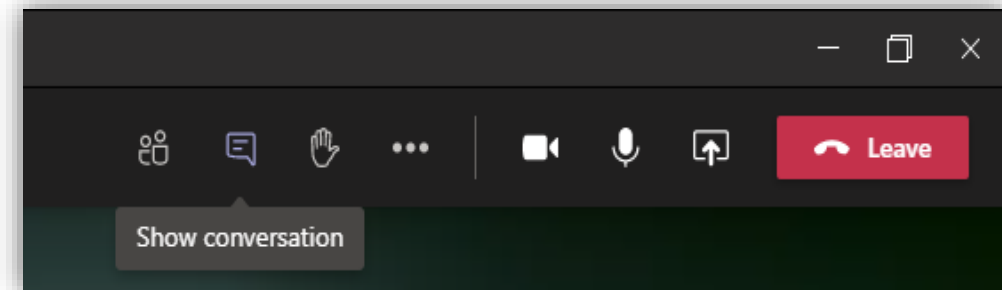
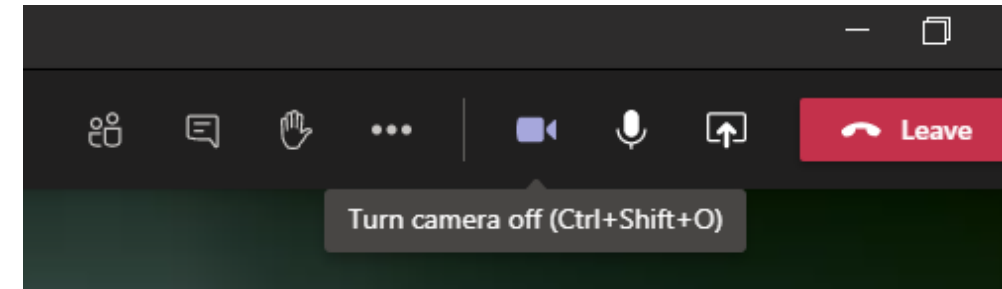
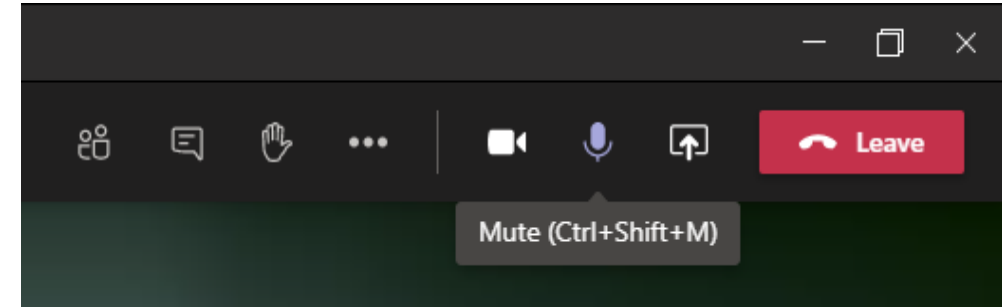
Patricia Simpson
Project Officer



Debbie Kelly
Administration Officer

Virtual Experience

- This workshop is being recorded and will be published on our website.
- Your microphone and camera has been turned off whilst everyone joins.
- You're invited to interact throughout the workshop by raising your hand and unmuting your microphone to talk.
- Feel free to use the chat function if you prefer at any time throughout the workshop.



Workshop Aims

- Demonstrate the toolkit's functionality.
- Explain how to access and apply the practical resources within the toolkit.
- Offer an opportunity to ask questions and share experiences of setting up or reviewing of serial prescription processes.



Express Check-in



CHAT BOX QUESTION

Your name?

Where are you from?

Why have you joined the session today?



Without questions,
there is no learning.

W. Edwards Deming

Serial Prescription: Operational Definition

What is a serial prescription (SRx)?

THE NHS MEDICINES:
CARE AND REVIEW SERVICE
AT YOUR LOCAL PHARMACY



SUPPORT FROM
YOUR LOCAL
PHARMACY



PHARMACISTS &
GPS WORKING
TOGETHER



GET THE BEST
FROM YOUR
MEDICINES

Information for patients



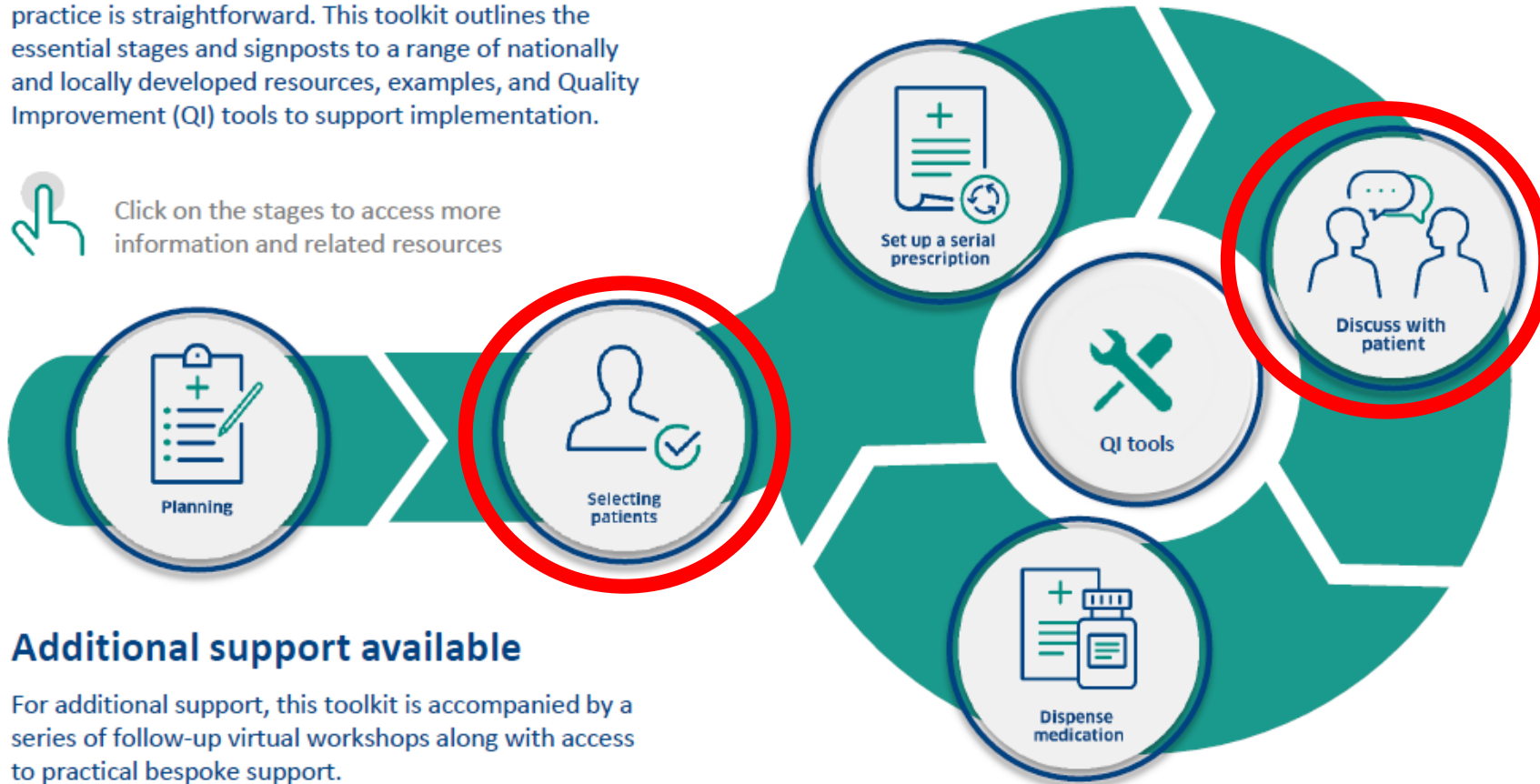
[The NHS Medicines: Care and Review service at your local pharmacy - gov.scot \(www.gov.scot\)](http://gov.scot)

How to use the toolkit

Setting up and implementing serial prescribing in your practice is straightforward. This toolkit outlines the essential stages and signposts to a range of nationally and locally developed resources, examples, and Quality Improvement (QI) tools to support implementation.



Click on the stages to access more information and related resources



Additional support available

For additional support, this toolkit is accompanied by a series of follow-up virtual workshops along with access to practical bespoke support.

For further details about the support available email:
his.pcpteam@nhs.scot.

Why the toolkit was developed

The Serial Prescription Toolkit has been developed to support primary care services, build resilience and deliver high quality care.

Transferring suitable patients to serial prescriptions (SRx) ensures medicines-related activity is dealt with by the right member of the pharmacy team, at the right time, safely and efficiently. Effective serial prescribing can:

- improve practice resilience by reducing GP practice and pharmacy staff workload, and
- enhance patient outcomes and the overall care experience for people, families and staff.

In response to COVID-19, the Pharmacotherapy Level 1 Collaborative worked with a revised focus on serial prescribing. Between November 2020 and March 2021, collaborative teams from across 53 GP practices in Scotland developed and tested practical guidance and resources to support set-up and implementation of SRx services.

Who the toolkit is for

This toolkit brings together the key processes, resources and insights developed locally and nationally. It is designed to support multidisciplinary practice teams to either set up their SRx processes or rapidly review existing processes.

How to navigate the Toolkit



Set up a Serial Prescription

Once the screening process has identified a suitable patient, their medicines can be transferred to an SRx.



Click on the [blue text](#) to access a resource. Please note that **bold** text denotes a key document.

Purpose

Changing records


transfer medicines onto an SRx.

Printing and sharing


print and sign prescription according to the agreed practice workflow – showing the preferred community pharmacy.


National / ihub resources

 **SR03 Switching a Repeat Prescription to an SRx in EMIS**

 **SR05 Producing an SRx in Vision**

 Good Practice Guidance for Prescribing Quantities

 Cegedim training video - SRx Overview
(for Vision users only)

 Cegedim training video - SRx Dispense, TSR, Mail Manager and Re-authorisation
(for Vision users only)

Local examples


 MCR Shared Care Agreement (NHS Grampian)

 Joint Working Agreement Discussion Points (NHS Grampian)


Key

 Guidance

 Tool

 Training

Good practice

 An eight week dispensing interval on a 56 week prescription should be your preferred option for most patients.

Good practice

 Take care to Read Code accurately.

The SRx READ code is 66RE.



Selecting patients

Establish criteria

- agree which patients are and are not eligible



Guidance for Clinicians to select patients suitable for Serial Prescription

Patient inclusion criteria


- Regular ordering of repeats
- Medicines stable
- Engaging with Practice for required monitoring e.g. blood tests, annual review

Patient exclusion criteria


- Medical condition unstable
- Medication not stable or subject to frequent changes
- Poor or non-compliance
- Patients receiving daily dispensing
- Patients with only 'when required' items e.g. creams, inhalers

Medicines excluded from SRx prescribing

- Controlled drugs, in schedules 2 to 4
- Medicines that require regular monitoring/titration e.g. DMARDs, lithium, Warfarin
- Hypnotics
- Benzodiazepines
- Medicines for new diagnosis of long-term condition (last three months)
- 'When required' medicines



pause
&
ask

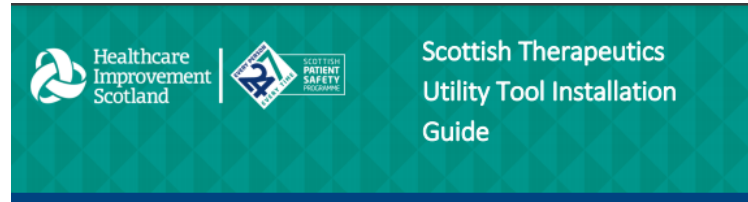
A watercolor-style circular graphic with a light blue center, a darker blue ring, and a green outer ring. The text "pause & ask" is written in a black, cursive font in the center.

Selecting patients



Identify potential patients

- identify suitable patients and run electronic practice reports

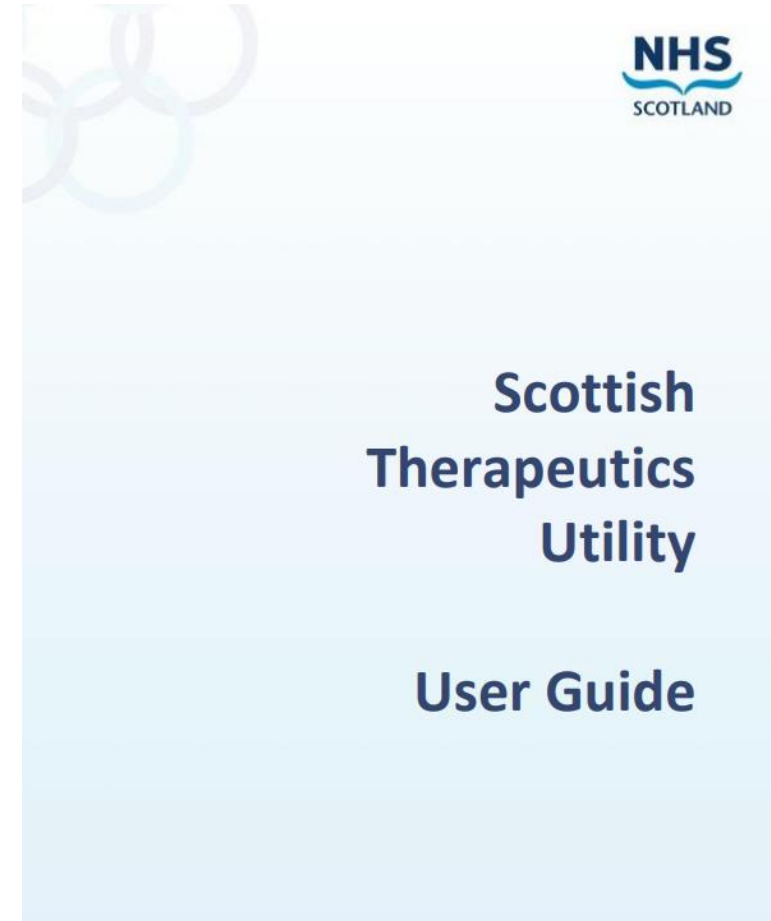


| Scottish Therapeutics Utility (STU) step by step Installation Guide | |
|---|--|
| Step 1 | In your internet browser, navigate to www.EScro.co.uk . |
| Step 2 | Click on STU Prescribing . |
| Step 3 | Click on Install |
| Step 4 | You will be presented with a Settings screen |
| Step 5 | Insert your practice code in field, for example 61111 |
| Step 6 | In reporting database, type VisionReports/EmisReports (depending which one you are using) |
| Step 7 | Click Test Database connection |
| Step 8 | You should now be presented with the home page of STU tool for that practice called the Dashboard . |

This document has been produced in partnership with NHS Fife.



STU Installation Guide



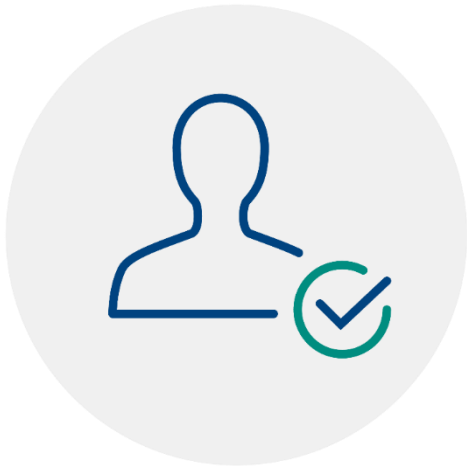
STU User Guide

Selecting patients



Identify potential patients

- identify suitable patients and run electronic practice reports



Prescribing Support Service

SR01: Running a Search for Suitable Patients in EMIS

Produced in partnership with NHS Greater Glasgow and Clyde

September 2021



SR01 Running a search for suitable patients in EMIS



Prescribing Support Service

SR04: Running a Search for Suitable Patients in Vision

Produced in partnership with NHS Fife, NHS Grampian and NHS Highland

September 2021



SR04 Running a search for suitable patients in Vision

Selecting patients



Identify potential patients

- identify suitable patients and run electronic practice reports




Prescribing Support Service

SR05: Producing a Serial Prescription in Vision


Produced in partnership with NHS Grampian and NHS Fife

September 2021





pause
&
ask

A watercolor-style circular graphic with a light blue center, a darker blue ring, and a green outer ring. The text "pause & ask" is written in a black, cursive font in the center.

Selecting patients



Screen or clinically review patients

- screen patients for clinical review and creation of a SRx





Prescribing Support Service

SR02: Screening a Database Search in EMIS

Produced in partnership with NHS Greater Glasgow and Clyde

September 2021





pause
&
ask

Discuss with patient

Good practice 



Communication

- Discuss and inform your patients of these changes

Discuss with patient

Person-centred discussion

- discuss benefits of transferring medicines onto an SRx with the patient



Questions to Prompt a Person-centred Discussion

The questions below have been developed in collaboration with a public partner within Healthcare Improvement Scotland. They have been collated in this tool and may be useful prompts to facilitate person-centred discussions with your supporting teams or local patient engagement group.

A person can be first introduced to a serial prescription in three different ways:

- | | | |
|--|---|--|
| 1 Selected as suitable by their GP | 2 Recommended by their Community Pharmacist | 3 Indirectly (via a leaflet, publicity, or discussion with a friend) |
|--|---|--|

In **each** case, we must ensure that the person / patient receives the right amount of information **at the right time**.

Considerations for planning discussions:

- What is the ideal standard process?
- Who makes the initial contact with the patient? Will this stay the same?
- How can we ensure the patient understands what a serial prescription is?
(The process of selection, the differences and similarities to the service they have received before, what information will be communicated between their practice and community pharmacy.)
- How will people know who to contact in different scenarios?
For example, ordering medication, medication enquiries, medication reviews. Who will contact them to follow up?
- How will people know what timescales are involved? Who should communicate these to the person / patient?
- How and who will communicate any changes to the person?
For example, can patients that may be affected be informed in advance? What happens if there is a change to dose or medication? Who is responsible for communicating this? Please note, people should be included and empowered to make decisions about their own care.
- When undertaking a large-scale move to serial prescriptions, practices should consider at an early stage how to discuss with and inform their patients of these changes.

Discuss with patient



Person-centred discussion

- discuss benefits of transferring medicines onto an SRx with the patient





Person-centred Discussion Checklist

It may be useful to have a checklist (like the one below) to make sure that the person speaking with the individual / patient covers certain points as standard.

| Has the person / patient been informed: | Y / N |
|--|-------|
| How long the serial prescription will last. (For example, 24 or 56 weeks, with medication typically dispensed every 8 weeks.) | |
| That, from time to time, they may be able to vary their serial prescription supply for example, to cover holiday periods. | |
| Which medication(s) are covered on the serial prescription (which are not) and when it needs to be renewed. N.B. - Please note a notification / paper reference for the person / carer may be useful. Medication reviews may not always align with the end of a serial prescription, but will be completed as per practice processes. | |
| That they need to select a single pharmacy to supply the serial prescription and that, it is their choice of pharmacy. | |
| That they can change pharmacy as time goes on if a different location is more convenient for them (but they cannot just collect from / move to a different location each time more medication is required from a single serial prescription). | |
| That for good, safe medication management, the community pharmacist will require to discuss their medications with them and their GP periodically. Existing GP medication review processes will continue as normal. | |
| That the majority of queries regarding their medications (including those on serial prescriptions) should be directed to the community pharmacist and not the GP in the first instance. | |

You may also wish to direct the patient to [this video](#) (before they receive their first serial prescription) and then use 'teach back' to re-enforce key messaging.





pause
&
ask

Discuss with patient

Written communication

- provide a letter or leaflet to the patient informing them of the change



Serial Prescription Information Sheet

The practice has issued you with a serial prescription. A serial prescription is a prescription for medicine(s) you need to treat a long-term condition. It looks like a normal prescription but lasts for 6 or 12 months.

Serial prescription(s) are kept in the community pharmacy and your GP decides how often they should be collected, e.g. every four weeks. Let your pharmacist know if you will need to collect your prescription earlier than normal or if you will need more than usual if, for example, you are going on holiday. Each time a prescription is collected, the pharmacist tells the doctor.

You will need to register for the service before the pharmacist can give you the medicines. Registration is simple and easy to do and your community pharmacist will help you.

The serial prescription can only be dispensed at the pharmacy where the registration has taken place.

At the end of the 6 or 12 month prescription, the pharmacist will ask you to sign the serial prescription form. At this point, the pharmacist can also request a new serial prescription from your GP. The doctor may prepare a new serial prescription without getting in touch but you may be invited into the practice for a review before getting your next serial prescription.

Even though a patient has a serial prescription, they can still make an appointment to see the doctor whenever they need to. However, please note that items prescribed to you which are not on serial prescriptions will still need to be ordered via your doctor.

The pharmacist may also tell you if you need to see the doctor if e.g. your condition starts to get worse.

Your doctor can stop medicines on your serial prescription if they need to. If this happens they will tell you and your pharmacist.

If you move to another doctor's surgery, you should let the old surgery know so they can cancel your serial prescription.

Discuss with patient

Written communication

- provide a letter or leaflet to the patient informing them of the change



SERIAL PRESCRIBING PATIENT LETTER: EXAMPLE 1 Kirriemuir Medical Practice



The practice has issued you with a serial prescription. A serial prescription is a prescription for medicine(s) you need to treat a long-term condition. It looks like a normal prescription but typically allows you to get your medicine for 56 weeks without the need for a further paper prescription during that time. However, you will still get your medicine supply every 8 weeks usually.

You can let your pharmacist know if you will need to collect your prescription earlier than normal or you will need more than the usual if, for example, you are going on holiday. Each time a prescription is collected, the pharmacy staff will check if you need all your medicines. On the practice record we can see you have collected your medicine.

The serial prescriptions can then only be dispensed at the pharmacy where you handed in your prescription. When you first hand in the prescription to the pharmacy, they will register you and check you are happy with your current medicines.

Please note that items prescribed to you which are not on serial prescriptions will still need to be ordered from the GP practice via your usual medication ordering procedures such as creams, medicines you don't use regularly or controlled drugs which cannot be on serial prescribing.

The pharmacist may also tell patients that they need to see the doctor if, e.g. your condition starts to get worse.

Your doctor can stop medicines on your serial prescription if they need to. If this happens they will tell your pharmacist.

Dr

Serial prescribing letter to patients

Discuss with patient

Written communication

- provide a letter or leaflet to the patient informing them of the change



SRx Patient Leaflet Information for Patients Suitable for Serial Prescriptions

1. What is a serial prescription?

A serial prescription looks like your normal prescription but is issued by your GP for 24, 48 or 56 weeks. It will be issued in intervals, (usually 4 or 8 weeks) by the pharmacy. This will be dispensed by the pharmacy when it is due so it will be ready for you to collect before you run out of medication. This makes collecting prescriptions much easier for you and saves time at the GP Practice. You will not need to reorder the items on your serial prescription from the surgery or pharmacy.

2. Why have my repeat medications been selected for serial prescribing?

You have been identified as having a long term condition which requires medication. As your medication(s) is/are quite stable and you regularly attend reviews it has been decided by your GP that it is appropriate for you to have a long term prescription for these items.

3. Can I use any pharmacy?



You can use any pharmacy for the duration of your serial prescription. Your first serial prescription will be sent to the pharmacy that is recorded by your GP as being your 'preferred pharmacy'. If you wish to use an alternative pharmacy, contact your GP who will cancel the first prescription and re-issue it to the pharmacy of your choice. When you collect your first serial prescription, the pharmacy will ask you to register with them and sign a form. They will then ask some questions about your medication and general health. You will need to collect your serial prescription items from the pharmacy you are registered with. You can attend any pharmacy for any other prescriptions or to buy medicine or seek advice. If you wish to change the pharmacy you get your serial prescription from please inform both the pharmacy and your GP Practice.

4. Is anything not covered by my serial prescription?

Items that you only use occasionally such as creams will not be included on a serial prescription. These should be ordered by you in accordance with your usual surgery and pharmacy arrangements. Please ask your community pharmacist any questions you have about what is not covered by your serial prescription.

5. What do I do if my medicines change?

If your medicines change the GP and Pharmacy will coordinate to ensure that any changes are made to your serial prescription. It is good practice to check your medicines before you



pause
&
ask

Business sustainability

How will this help?

Focus on the processes – what needs to happen, by when, and who will be doing it?

It usually helps to start small, and try to avoid giving your team a headache in 12 months' time



QI tools to support implementation



Pharmacotherapy Level 1 Collaborative

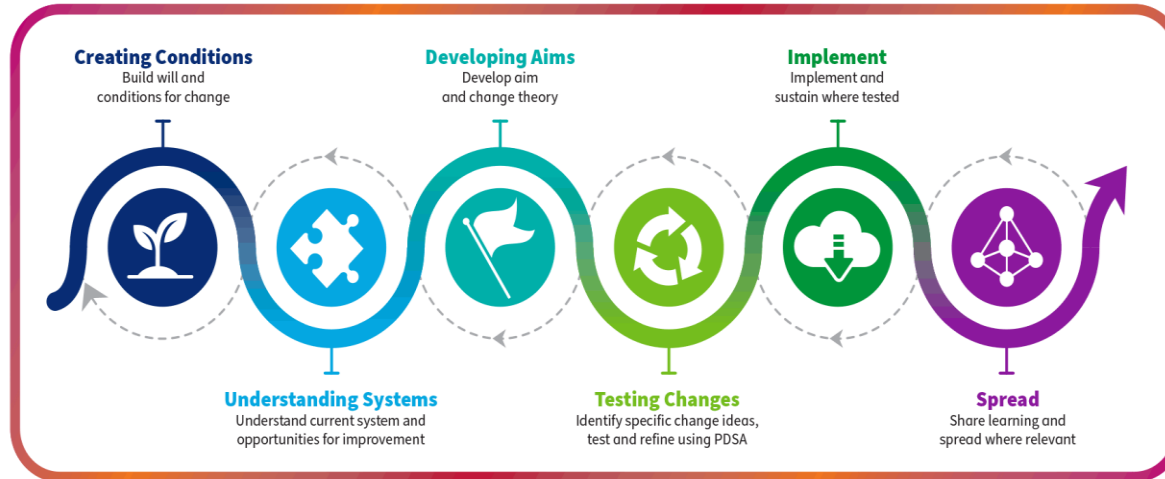
| Serial Prescribing | | | |
|--|---|--|--|
| Aim | Primary Driver | Secondary Driver | Changes |
| 10% of patients on repeat prescribing within the practice will be on serial prescribing by March 2021. | Development of staff and roles | Ensure appropriate skill mix Access to available training Promote team/Audit/Disiplinary Team (MDT) working Develop learning and feedback loop | <ul style="list-style-type: none"> Evaluation of current skill mix/needs Access to appropriate virtual training including HBS Primary Care Learning Systems, Pharmacotherapy Microsoft (MS) Teams and NES courses Establish practice MDT huddles and local/cluster champions to share ideas and progress Develop a guide to monitor appropriate levels of supervision for pharmacy technicians/support staff carrying out Level 3 Services (you may wish to refer to the Scottish Pharmacy Practice and Prescribing Advisers Association document, National Pharmatherapy Service Specification) Use process mapping to understand current/desired state for serial prescribing Review and develop prescribing protocol Develop process for patient medication reviews Develop criteria for converting to serial prescribing Utilise existing guidance documents, such as the Serial Prescription Shared Care Agreement |
| | Safe, effective and reliable systems for serial prescribing | Develop standardised, safe and effective processes for serial prescribing | <ul style="list-style-type: none"> Embed process for shared decision making with patient/carer in relation to medicines Develop processes for contacting patients regarding changes to prescribed medicines Utilise existing guidance documents, such as the Serial Prescription Shared Care Agreement Use process mapping to understand current/desired state for serial prescribing Review and develop prescribing protocol Develop process for patient medication reviews Develop criteria for converting to serial prescribing Utilise existing guidance documents, such as the Serial Prescription Shared Care Agreement |
| | Patients/carers supported in taking medications | GP practice has a clear process for communicating, informing and involving patients of medicines changes Systems in place to ensure patients and carers are supported in taking and understanding medicines | <ul style="list-style-type: none"> Embed process for shared decision making with patient/carer in relation to medicines Develop processes for contacting patients regarding changes to prescribed medicines Utilise existing guidance documents, such as the Serial Prescription Shared Care Agreement Use process mapping to understand current/desired state for serial prescribing Review and develop prescribing protocol Develop process for patient medication reviews Develop criteria for converting to serial prescribing Utilise existing guidance documents, such as the Serial Prescription Shared Care Agreement |

SRx Driver Diagram

| Month | GP | Pharmacist | Pharmacy Technician | Pharmacy Assistant | Pharmacy Support Worker | Pharmacy Student | Pharmacy Volunteer | Pharmacy Other | Pharmacy Total | GP Total | Pharmacist Total | Pharmacy Technician Total | Pharmacy Assistant Total | Pharmacy Support Worker Total | Pharmacy Student Total | Pharmacy Volunteer Total | Pharmacy Other Total | Pharmacy Grand Total | GP % | Pharmacist % | Pharmacy Technician % | Pharmacy Assistant % | Pharmacy Support Worker % | Pharmacy Student % | Pharmacy Volunteer % | Pharmacy Other % | Pharmacy % |
|--------|----|------------|---------------------|--------------------|-------------------------|------------------|--------------------|----------------|----------------|----------|------------------|---------------------------|--------------------------|-------------------------------|------------------------|--------------------------|----------------------|----------------------|------|--------------|-----------------------|----------------------|---------------------------|--------------------|----------------------|------------------|------------|
| Jan 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Feb 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Mar 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Apr 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| May 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Jun 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Jul 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Aug 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Sep 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Oct 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Nov 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Dec 20 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Jan 21 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

SRx Data Collection Template

Quality Improvement Journey



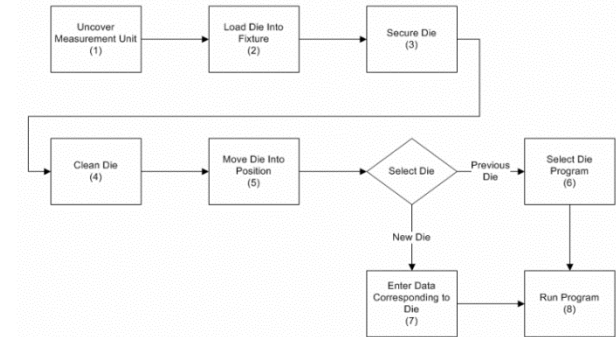
Leadership and Teams



Project Management and Communication



Measurement



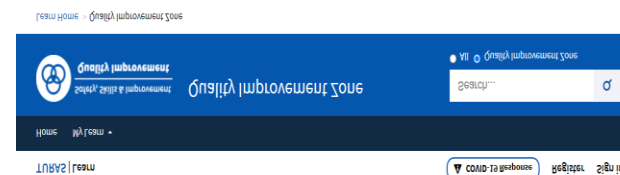
Process map

| Plan Do Study Act (PDSA) Template | | | |
|--|---|--|------------------|
| Aim (overall goal for this project) | | | |
| Change idea | | | |
| PDSA objective: Describe the objective for this PDSA cycle | Cycle No | What questions do you want answered for this test of change? | |
| Predict what will happen when the test is carried out | | Measures to determine if prediction succeeds | |
| Plan | | | |
| List the tasks needed to set up this test of change | Person responsible | When to be done | Where to be done |
| Do | Describe what happened when you ran the test | | |
| Study | Describe the measured results and how they compared to the predictions | | |
| Act | Describe what modifications in the plan will be made for the next cycle from what you learned | | |

PDSA template

| Name of measure | Concept being measured and why it's important to look at this | Operational definition | Data collection | What type of chart will you use to show the data? |
|---|---|---|--|---|
| Specify type of measure (e.g. percentage / count / rate (e.g. time, volume) / days or cases between) and what are you measuring | What is the purpose of this measure? i.e. what questions do you want answered in relation to improvement? | Clear, precise definition of the measure and how it is calculated. Include numerator and denominator if it's a % or rate. | Who is collecting it? How often and when? Where is data coming from? What's the sampling method and sample size (if used)? | |
| | | | | |
| | | | | |

Measurement plan



NES QI Zone e Learning

Next steps

Get in touch if you:

- Have a question
- Want to connect and learn from others
- Want to share your success
- Learn more about the Acute Prescription Learning Network work that is launching in January 2022



Email: his.pcpteam@nhs.scot

Visit us: ihub.scot/primary-care

How did we do and thank you



Serial prescribing

**Before you go, please
answer 4 questions.**

**Thank you for your time
and good luck!**

THANK YOU

