



Serial prescribing

A Toolkit for Serial Prescriptions

Digital Workshop four – Dispensing Medication
December 2021



#pharmaL1

Welcome



Dr Graham Gauld
GP



Mark Easton
Pharmacist



Elouise Johnstone
Senior Improvement Advisor



Adeline Tan
Improvement Advisor



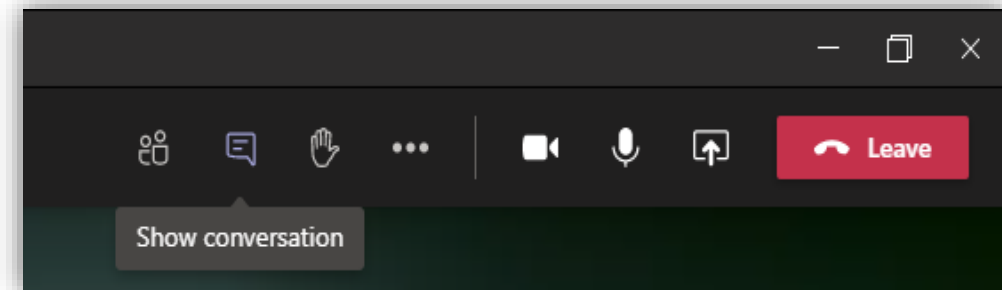
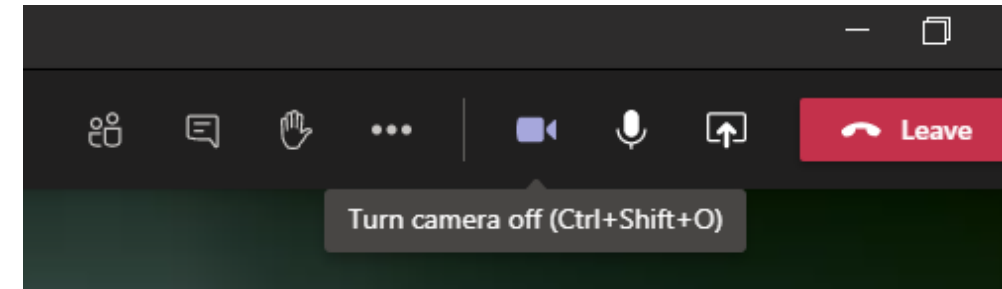
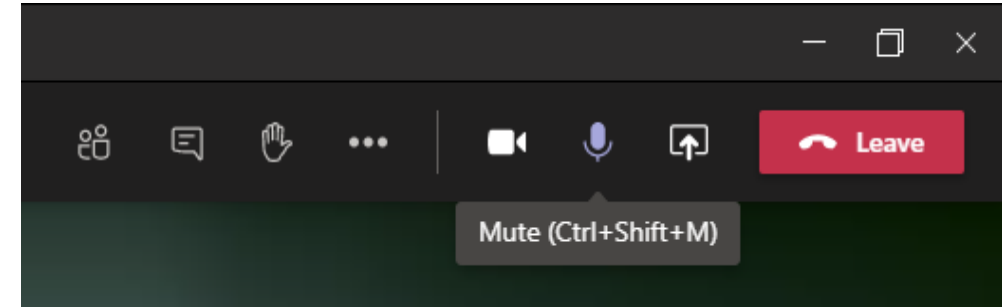
Patricia Simpson
Project Officer



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



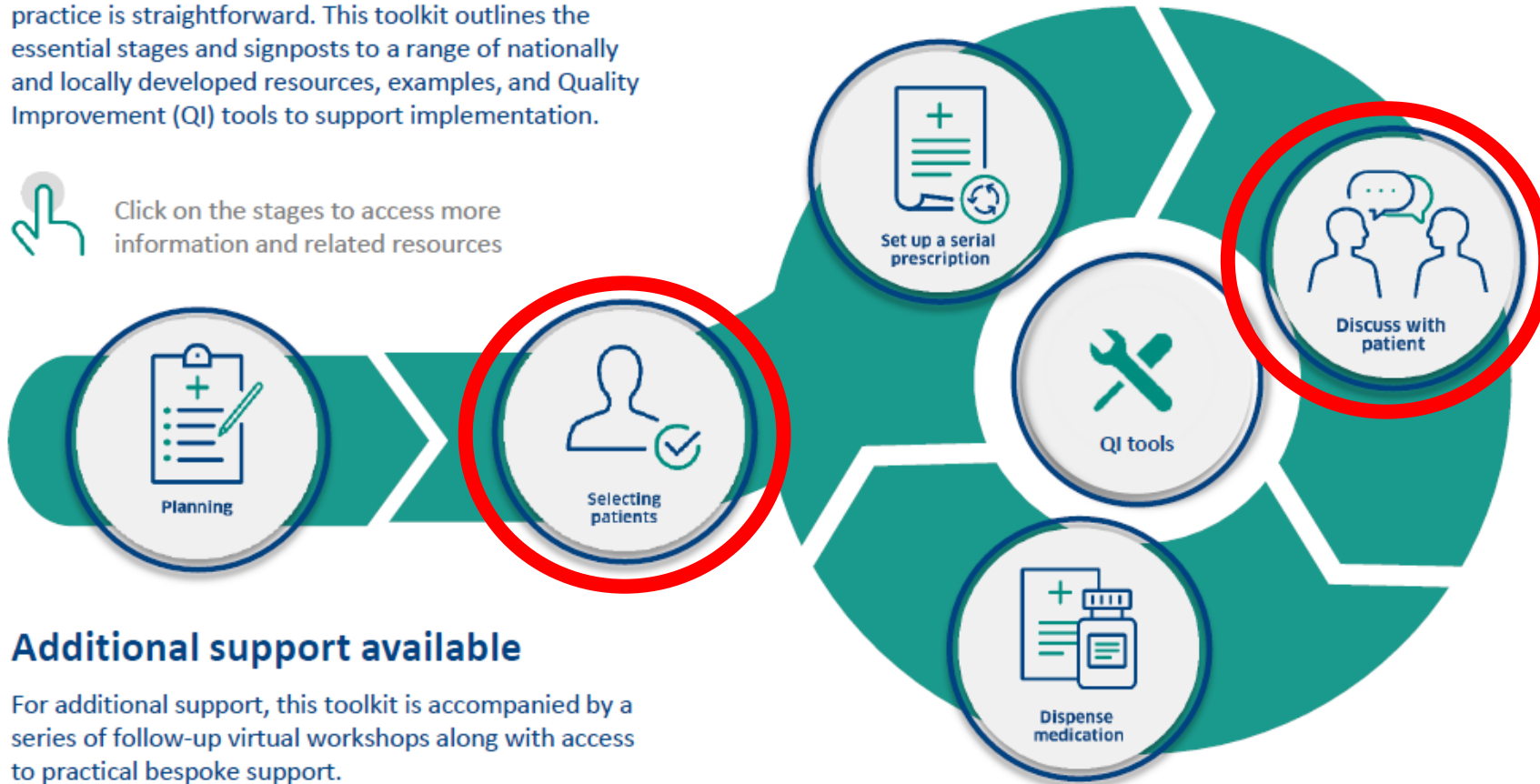
[The NHS Medicines: Care and Review service at your local pharmacy - gov.scot \(www.gov.scot\)](http://gov.scot)

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.



Planning



Awareness

- promote the benefits



Journey of a serial prescription



Produced in partnership with NHS
Greater Glasgow and Clyde

Raise awareness / training of practice staff

Identify potential patients

Discuss with patient & provide information

PC Pharmacy

GP

CP

Screening / Clinical review for patient

Identify which pharmacy will receive prescription

Change record (GP system) and produce prescription

Print prescription

Sign prescription

Could be signed by
PC Pharmacy

Could be signed
by GP

Send prescription to community pharmacy

Receive serial prescription

Prepare: work out due date and file

Due now: dispense / prepare serial prescription

Patients arrived at CP: handover prepared medicines and claim

Re-order serial prescription

KEYNOTE:

Primary Care
(PC) Pharmacy

GP

Community
Pharmacy (CP)

Journey of a Serial Prescription

- GP practice receive an electronic notification every time a claim for dispensing is made



Initial Set Up

A: MCR evolved from a review of the CMS service. It now focuses on three key elements:

- Another fundamental change between the two models is that a patient does not require to be registered for MCR before a Serial Prescription can be generated by the GP practice team.

A: Training should be provided by the Health Board. It is likely to be provided by ePharmacy Facilitators or GP IT facilitators. To complement the Board-led training, eLearning modules and associated resources are also available from NHS Education for Scotland (NES) on Turas Learn.

A: The Shared Care Agreement is a document that should ideally be used before a practice begins to implement serial prescribing. It is designed to allow a two-way discussion between the GP practice team (including the practice based pharmacy team) and Community Pharmacy team and agree on certain aspects of the service as a partnership. This will include how to manage medication changes, any drugs/ patient groups who could be excluded from serial prescribing and management of the Treatment Summary Reports/next prescription request.

In urban settings, it could be more practical to have one shared care agreement between a GP practice Team and cluster of Community Pharmacy teams.

A: Anyone registered with a GP practice in Scotland and receiving regular medication for a long term condition - but is not a temporary resident - may be suitable for a Serial

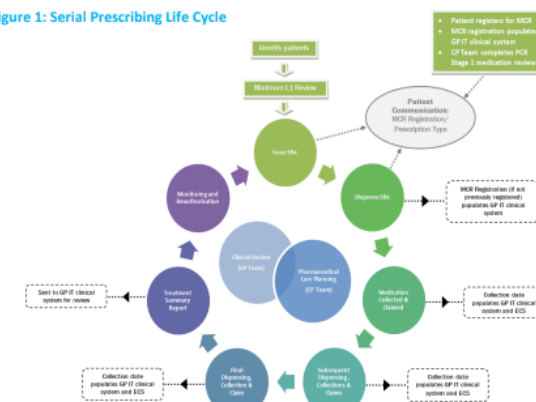
Medicines: Care and Review (MCR) is an updated and refreshed service for community pharmacy contractors. It has three key elements and patients are entitled to any depending on their individual need(s):

- Medication review: all patients are entitled to receive a medication review. This will help identify any potential care issues but also aid suitability and selection for a serial prescription.
- Pharmaceutical care: Care issues and care plans are recorded on the secure web based application, Pharmacy Care Record (PCR).
- Serial prescribing: Patients who are stabilised on their medication can have their items prescribed on a prescription that will be valid for 24, 48 or 56 weeks without having to return to their GP practice for repeats.

A Shared Care Agreement is available to help community pharmacies and GP practices discuss and agree implementation of serial prescribing.

Serial prescribing does not rely on patient registration though this is still used as an enabler to support the electronic message flow between the community pharmacy, GP practice and ePharmacy Message Store (ePMS).

Figure 1: Serial Prescribing Life Cycle



Dispense SRx



Dispense a SRx

- GP practice receive a Treatment Summary Report when the SRx is complete



Treatment Summary Reports

The Treatment Summary Report (TSR) is a communication tool with three functions:

1. To request the next serial prescription (SRx). The timing of the TSR will give the GP practice team time to undertake any reviews or monitoring before authorising the next SRx, as agreed in the Shared Care Agreement.
2. To summarise the collection dates and quantities for each item.
3. To provide the GP practice team with additional feedback from the community pharmacy team in relation to care issues, collection dates, requested changes and synchronisation requests.

GP practice teams should have a process in place to manage TSRs. This process should involve reviewing the TSR, monitoring the patient, and reauthorising the issue of the next SRx.

Information Point: Community pharmacy

Community pharmacy teams are advised to send the TSR no later than 4 weeks before a new prescription is required. The timing for the submission of the TSR should be defined within the Shared Care Agreement. The community pharmacy team must ensure that all claims for dispensed items have been sent successfully before sending the TSR.

TSR Housekeeping

It is possible that a patient's SRx may get reauthorised early by the GP practice team, resulting in a new SRx being generated before the previous one is completed at the community pharmacy. For example, the GP completed an unplanned medication review whilst the patient was attending an appointment.

The community pharmacy may only have dispensed 5 of 7 supplies on the previous SRx, for example, when they receive a new set of SRx for the same patient as part of the reauthorisation/medication review. As part of the reauthorisation process on the GP IT clinical system, the previous SRx must be cancelled so that the community pharmacy will be unable to dispense from it again.

When the community pharmacy team receive a new SRx before the previous SRx was completed, they should send a TSR from the PMR system, marking each item as 'no repeat required'. In most PMR systems, this process inactivates the incomplete items and keeps the PMR system accurate.

Processing Treatment Summary Reports

Dispense SRx

Dispense a SRx

- MCR registration requirement



Serial Prescribing Quick Reference Guide for Community Pharmacy



Identifying patients

This is one of the main differences in MCR. Patients do not require to be registered for MCR to receive a SRx from their GP/prescriber, but registration at a community pharmacy must take place before the item(s) can be dispensed. There are a number of clinical and non-clinical factors that should be considered as they may affect the patient's suitability for a SRx. Patients may be identified from within the GP practice, as part of a structured screening process using the Scottish Therapeutics Utility (STU) tool, during medication review or by the community pharmacy team.

Medication review

Once potential patients have been identified as suitable, it is advisable to undertake a medication review to clinically assess for suitability. It may not be possible or practical to undertake a full medication review at this moment, so a level 1 review should be completed initially. A more comprehensive review can then take place by the appropriate person at some point during the lifetime of the SRx.

Issuing a SRx

It is advisable to engage with patients prior to issuing a SRx. This may not always be possible, but GP practice and community pharmacy teams should endeavour to seek patient consent before the patient presents at the community pharmacy for their prescription. Informing the patient may take place by way of an opt out approach in advance of moving to a SRx. A patient who declines to register for the service and have a SRx can have the first episode dispensed before contacting the practice to return to a 'normal' repeat.

Patient Registration

Registration is still required before a SRx can be dispensed. The registration process includes explicit consent for the data sharing. At registration, and again during dispensing if required, the community pharmacy team should provide patient education about the service and/or address any care issues.

Patients should be encouraged to maintain the same community pharmacy, at least for the duration of a SRx. However, if they choose to go elsewhere, registration can be transferred but the patient will require a new SRx.

Dispensing a SRx

Community pharmacy teams should be aware of the process to assemble and dispense a SRx, management of PRN medications, synchronisation of quantities and what to do if a patient decides against using a SRx. Training resources are available to support this from Health Board ePharmacy facilitators and on NES Turas Learn.

Community Pharmacy Quick Guide

Dispense SRx

Dispense a SRx

- SRx tracker example




Serial Prescription Community Pharmacy Tracker




Comments/Notes:				Bag Label
Disp. Event	Predicted Due Date	Actual Dispense Date	Actual Collection Date	Notes
1.				
2.				
3.				
4.				
5.				
6.				
7.				
TSR Send Date		New Rx Start Date		

Comments/Notes:				Bag Label
Disp. Event	Predicted Due Date	Actual Dispense Date	Actual Collection Date	Notes
1.				
2.				
3.				
4.				
5.				
6.				
7.				
TSR Send Date		New Rx Start Date		

Community Pharmacy Serial Prescribing Tracker (NHS Highland)



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.

Dispense SRx

Ongoing management

- GP practice receive a Treatment Summary Report on completion, requesting a new prescription



Medication Care and Review (MCR)



Treatment Summary Reports

Treatment Summary Reports (TSRs) are sent electronically from the pharmacy towards the end of the course of a serial prescription (normally at 20 weeks for a 24 week script, 44 weeks for a 48 week script and 52 weeks for a 56 week script). These TSRs usually contain a repeat request and the practice needs to determine how they are going to manage these.

This guidance outlines the steps which are necessary to ensure the TSRs are dealt with appropriately. However, staff must adhere to local practice protocols where applicable.

Locating Incoming TSRs	2
Pharmacy and Prescribing Mail Category	2
GP's Mailbox.....	2
Viewing TSRs	3
TSR Summary	3
Full TSR Document	3
In Patient Record.....	4
TSR Unfiled.....	4
TSR Filed	5
Actioning the TSR	5
GP Only	5
GP and Admin	5
Admin Only	6
Reauthorizing Serial Scripts	6
No Changes Required	6
Change to Term/Dosage	7

Dispense SRx

Ongoing management

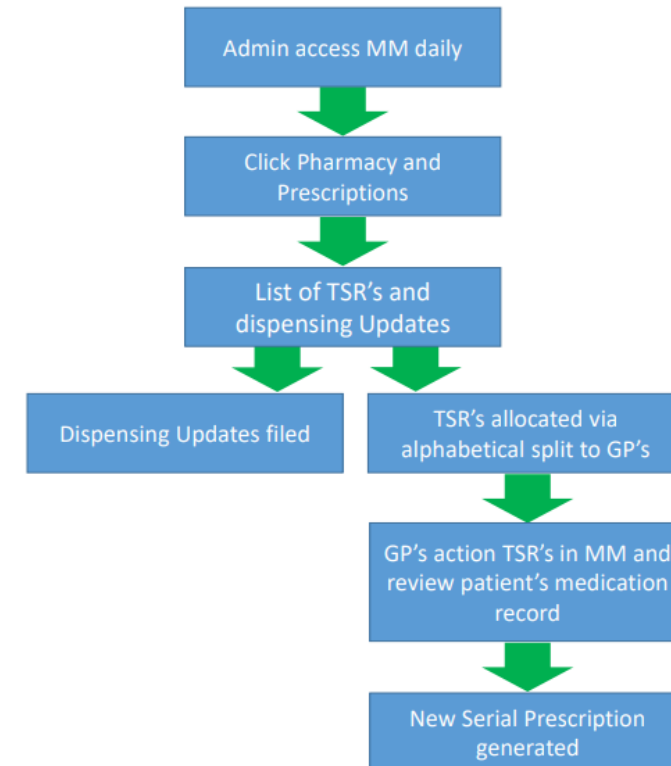
- GP practice receive a Treatment Summary Report on completion, requesting a new prescription




Mail Manager(MM) Process for Treatment Summary Reports and dispensing updates for Serial Prescribing




Whinhill Medical Practice





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.

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

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

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

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

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.



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.

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

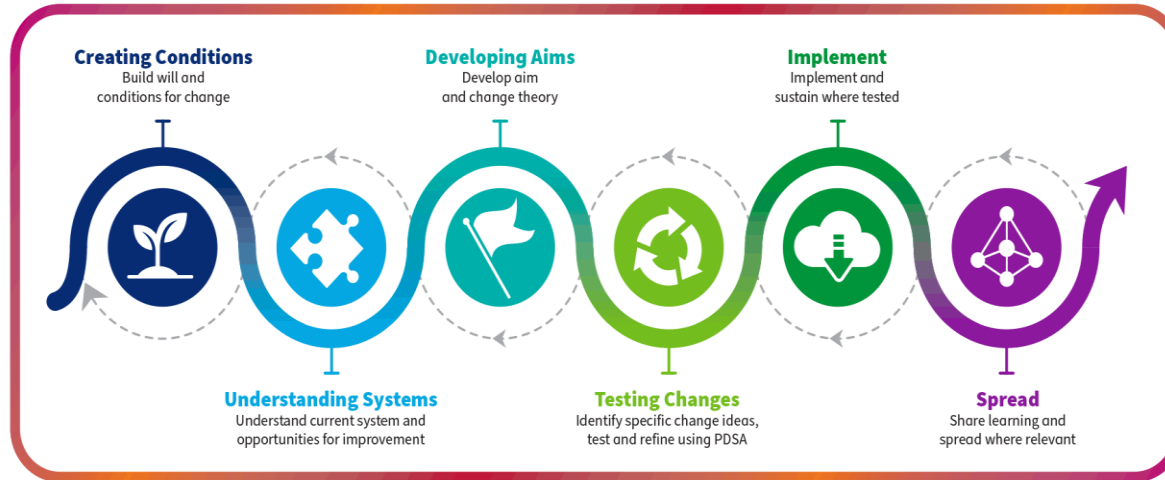
Serial Prescribing			
Aim	Primary Driver	Secondary Driver	Changes
10% of patients on repeat prescribing within the practice will be on serial prescribing by March 2021.	Development of staff and roles	Ensure appropriate skill mix Access to available training Promote team/Audit/Disiplinary Team (MDT) working 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 Intern	Pharmacy Trainee	Pharmacy Apprentice	Pharmacy Graduate	Pharmacy Professional	Pharmacy Manager	Pharmacy Director	Pharmacy Executive	Pharmacy Board	Pharmacy Committee	Pharmacy Council	Pharmacy Association	Pharmacy Society	Pharmacy Union	Pharmacy Federation	Pharmacy Confederation	Pharmacy Alliance	Pharmacy Consortium	Pharmacy Network	Pharmacy Group	Pharmacy Cluster	Pharmacy Region	Pharmacy Nation	Pharmacy World
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	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	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	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	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	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	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	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	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	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	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	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	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	1	1	1	1

SRx Data Collection Template

Quality Improvement Journey



Leadership and Teams



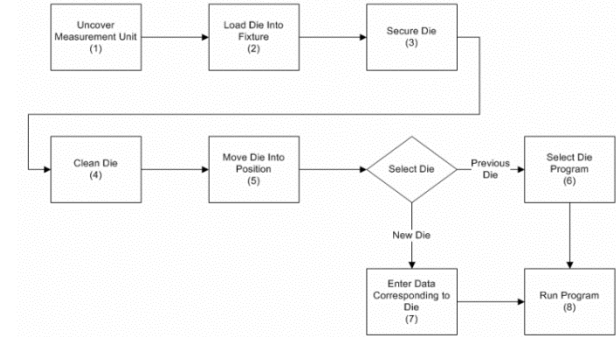
Project Management and Communication



Measurement

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)?	

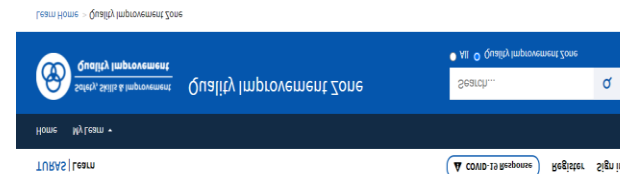
Measurement plan



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



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

