

# GP Practice Quick Guide – Serial Prescriptions

## Background

Patients who are registered with a GP practice in Scotland, not temporary residents and not residing in a care home are eligible to register for Medicines: Care and Review (MCR) at a community pharmacy of their choice for the provision of pharmaceutical care and support for their long term condition(s).

*MCR was previously known as the Chronic Medication Service (CMS) and may still be referred to as CMS in some IT systems.*

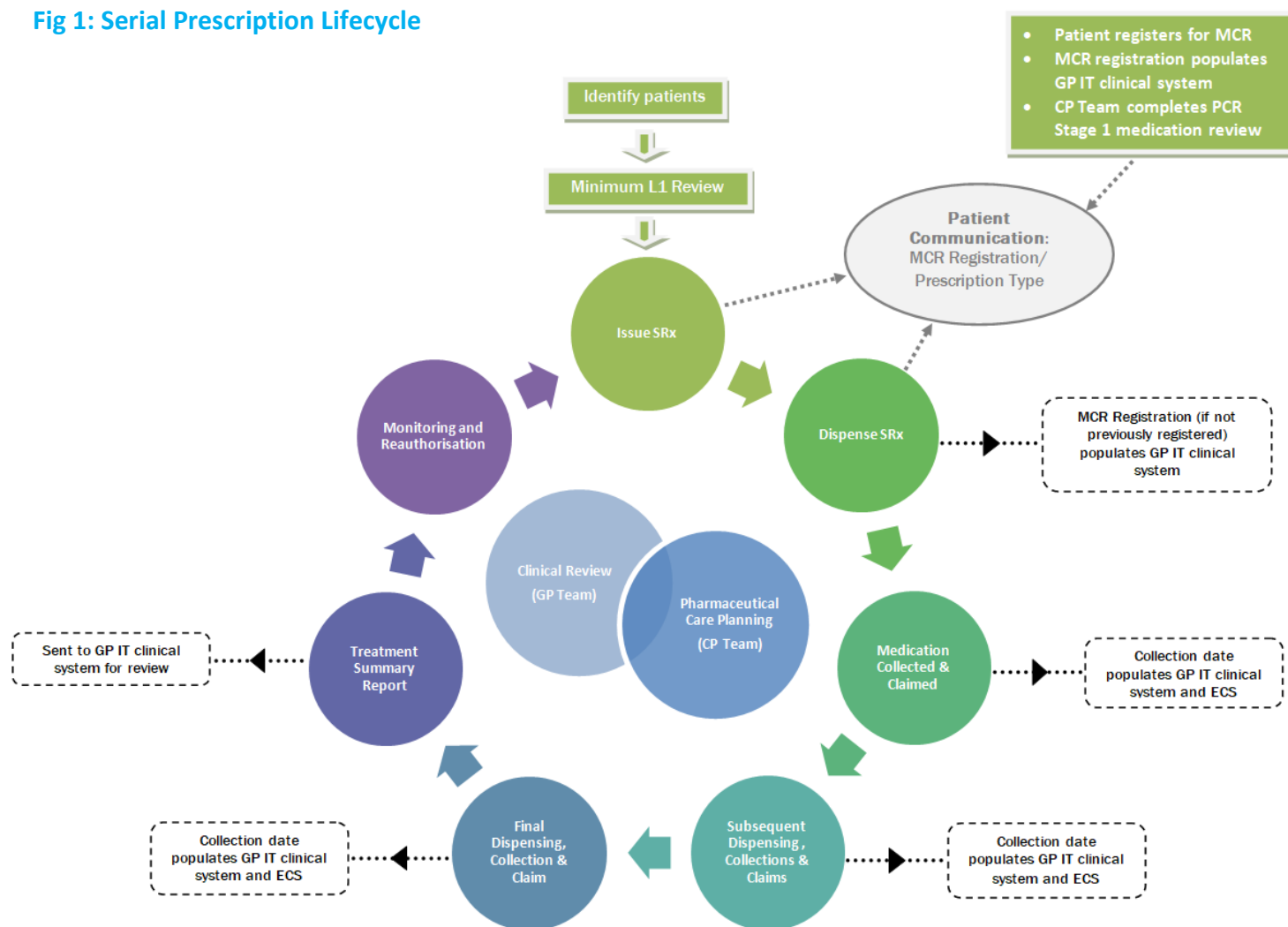
As part of MCR, a serial prescription (SRx) can be issued to suitable patients. A SRx is an electronic prescription, valid for up to 56 weeks and supplied to patients who have a long term condition(s). Registration for MCR is an enabler for serial dispensing to support the electronic message flow.

*Serial prescriptions can be issued **before** a patient registers for MCR.*

## Serial Prescription Journey

Serial prescribing requires engagement with all three stakeholders – patients, GP practice teams and community pharmacy teams. A process should be established by the GP practice team for identifying suitable repeat prescription patients and local criteria should be agreed.

**Fig 1: Serial Prescription Lifecycle**



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- When a patient registers for MCR, an electronic message is sent from the community pharmacy to the GP practice. This populates the GP IT clinical system with the patient's registration details, including the pharmacy name.
- If a SRx is issued for a non MCR registered patient the community pharmacy team must process the registration before the first dispensing.
- Each time the patient collects their SRx medication, the community pharmacy sends an electronic claim for payment to Practitioner Services Division (PSD). Simultaneously, the collection date populates the GP IT clinical system and the Emergency Care Summary (ECS).
- When a new SRx is required, the reorder request from the community pharmacy is included within an electronic Treatment Summary Report (TSR).

### Responsibilities

Best practice is to use a Shared Care Agreement to record the criteria, responsibilities and communication in relation to serial prescriptions within a specified area or GP Practice and Community Pharmacy partnership. It facilitates discussions between GP practice and community pharmacy teams on implementation and local processes. A Shared Care Agreement template is available from your Health Board IT Facilitator.

### Patient Suitability

- Patients should be on regular repeat medication for a long term condition.
- Patients' medication should be stable, i.e. low risk of change or titration.
- Patients with newly diagnosed conditions (within previous 12 months) should not be converted to a SRx - these patients should be reviewed at a later date.
- Patients on 'weekly dispense' and/or compliance aids are not suitable for a SRx.
- For legal and clinical reasons, specific groups of medicines cannot be prescribed on a SRx, i.e. Schedule 2, 3 and 4 Controlled Drugs, Cytotoxic drugs.

### Procedure

#### 1. Getting Ready

Things to consider in conjunction with the Shared Care Agreement:

- Does the patient meet the suitability criteria?
- What method or tool will you use for identifying patients, e.g. Scottish Therapeutics Utility (STU)?
- When will the first SRx be issued, e.g. at annual medication review or when the patient next requests their repeat prescription?
- How will you record patient suitability? *Recording suitability facilitates the use of searches and reports to track progress, prevents duplication of effort and informs future reviews.*
- How will Treatment Summary Reports be processed? *It is important to decide **who** will review the Treatment Summary Reports, **how** they will be reviewed and how they will be incorporated in to the **GP Practice workflow**.*

#### 2. Convert and Issue SRx

- Following medication reviews, suitable patients' prescription type will be changed to a SRx with appropriate quantities for the duration of the SRx.

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*The total quantity of any medication prescribed on a SRx must be divisible by the number of dispensing episodes. For example, a 56 week SRx dispensed every 8 weeks generates 7 dispensing episodes. The NHS Scotland - Good Practice Guidance for Prescribing Quantities contains additional information on prescribing quantities.*

- To maximise searching and reporting functionality, following the issue of a SRx, add a Read code and/or suitability note to the patient's record.
- It is good practice to communicate any changes to medication directly to the community pharmacy team to prevent the patient receiving cancelled medication. The electronic cancellation message should not be the only tool for communication.

*SRx items cannot be amended, they can only be cancelled and, if appropriate, a new SRx issued. There is no need to cancel all items on the SRx; only cancel the item(s) that need changed.*

- New SRx medication should be issued for the full duration; the community pharmacy team will align and synchronise as required.
- If a patient becomes unsuitable for a SRx, the prescription type can be reverted to a standard repeat – this automatically cancels the SRx. The change should be communicated to the community pharmacy team.

## 3. Treatment Summary Reports

A Treatment Summary Report (TSR) is a summary of prescribing, dispensing and collection information sent electronically by the community pharmacy team to the GP IT clinical system. It can contain a reorder request, a synchronisation instruction, an indication that items are not currently required and community pharmacy notes relevant to the patient's pharmaceutical care. The community pharmacy team can also use a TSR to advise the GP practice team that a patient is no longer suitable for a SRx.

*TSRs should arrive at least 4 weeks before the patient is next due their medication to allow time for monitoring (e.g. blood pressure check, asthma review, blood results for levothyroxine), medication or annual review, if appropriate, reauthorisation and issue of the next SRx.*

## 4. Communication

Effective communication between the community pharmacy team, the GP practice team and the patient is integral to the success of serial prescribing. The Shared Care Agreement outlines the expected communications around the following considerations:

- Patient notification of change to prescription type (letter/discussion)
- Community pharmacy SRx process explained to patient
- Patient Information Leaflet
- Process to be followed if a patient repeatedly declines a medicine at the community pharmacy
- Process to be followed if a patient doesn't collect their medicine(s) within the expected time frame
- TSR responsibilities
- Medication changes
- Patient suitability changes

*Serial prescriptions are a core element of the integrated Pharmacotherapy service as detailed in the General Medical Services 2018 contract. The pharmacists and pharmacy technicians working within your practice to deliver the Pharmacotherapy service will be a key resource in the implementation and management of serial prescriptions.*