



Prescribing Optimisation Form

This month's edition of the Chair's Bulletin is dedicated to the new outpatient Prescribing Optimisation Feedback Form.

Colleagues may recall that earlier this year, Sefton LMC wrote to all local NHS providers to advise that from 2nd August 2023, we would be asking Sefton GP practices to reject all unsatisfactory prescribing requests using a dedicated form, sent to a dedicated email address at each provider.

This created quite a furore, particularly our stipulation that a 14-day supply of any new medication should be prescribed by the outpatient service itself.

Following a discussion at the North Mersey Primary-Secondary Care Interface Group, Sefton LMC agreed to pause the initiative to allow time for outpatient providers to introduce the necessary governance, for further debate about the duration of outpatient prescriptions, & to work with the ICB/ our neighbouring LMCs to adopt one pushback process across the North Mersey footprint.

Sefton LMC is delighted that this has resulted in an ICB-approved outpatient Prescribing Optimisation Feedback Form - this should have been uploaded to your EMIS systems & be ready for use (if not, we have attached it to this email) - of note, we have agreed to pause the 14-day supply stipulation for the time-being to focus on the safety & quality of outpatient prescribing.

The central communications about this form have been limited so we would like to take this opportunity to share a simple guide to using the form, & to ask that all Sefton GP Practices start doing so as a matter of routine from **Monday 4th December 2023** - thank you in anticipation of your support.

Step 1 - When to use the form

As you will see when you open the form, there are 12 reasons why you might wish to send the form - you can select 1 or more reasons for each medication. We would like to draw you attention to the following:

No. (7) This item is a short-term prescription (28 days or less) so it should be prescribed by the service recommending it.

This means the majority of acute prescription requests can be rejected.

No. (8) This item requires monitoring or titration within the first 14 days & the service recommending it has not arranged these.

e.g. The initiation or uptitration of an ACE inhibitor/ ARB medication.

No. (9) We require clarification that the recommendation to prescribe this item has been discussed with the responsible clinician.

Please select this for requests by advanced practitioners or junior doctors where it is not clear that the consultant has supervised the request.

No. (10) We have not received a timely outpatient letter detailing what the patient has been told about the following:

- ***Indications/intended benefits***
- ***Common & serious potential side effects***
- ***Monitoring & follow up required.***

So we should not be accepting anything less than “I have advised this patient to commence amlodipine to improve their blood pressure; I have advised them of the common & serious potential side effects, in particular... and I have advised them to contact their GP practice to arrange a repeat blood pressure check in 1 month; please add this to their repeat prescription list.”

No. (11) We have been asked to select an item from a list of options but we feel the service recommending this is better placed to do so.

A common example is when a neurologist asks us to initiate one of a selection of medications for migraine prophylaxis.

The form is only to be used for outpatient prescription requests - it has been approved by all local NHS trusts but you are at liberty to use it for requests made by others, e.g. non-NHS provider outpatient departments if you wish.

Step 2 - How to use the form

Import the form into EMIS Resource Publisher if it is not there already. We recommend calling it 'Outpatient Prescribing Optimisation Feedback Form'.

Please use “**Prescription event monitoring**” (SNOMED concept ID 185925007) as the default document type, to enable future auditing of these forms.

Within an open consultation, click 'Document', then 'Create Letter' & search for the name of the form in the window that appears.

The form should self-populate with the patient & GP details - you just need to complete the specialist details & the details of the prescription request(s).

Then click the 'File' icon under the words 'Mail merge fields' at the top left hand corner, then click 'Save & close' & save your consultation note.

Step 3 - Sending the form

The easiest way to do this is by an email to the specialist using the Accumail facility in Accurx, to an NHS.net or a secure NHS.uk email address.

Saving the form in the notes (as above) & sending it using Accumail as an attachment allows you to fully document what you have done & why.

We would recommend importing the following template message into Accurx:

Please find attached a Cheshire & Merseyside ICB Prescribing Optimisation Feedback Form for the above patient. To avoid patient impact, please reply or resolve the issue(s) within the next 5 days. Thank you.

Southport & Ormskirk Hospitals usually include an email address on their outpatient letters, with the domain *@merseywestlancls.nhs.uk*; failing that, you may choose to use *soh-tr.gp@merseywestlancls.nhs.uk*.

If you cannot identify an appropriate email address at Liverpool University Hospitals NHSFT, you may choose to use *riskdept@liverpoolft.nhs.uk*.

We would recommend importing these addresses into Accumail for future use.

If you cannot identify an appropriate email address, please contact the LMC as we may be able to suggest one for you - in time, we would like there to be one email address at each provider where practices can report interface issues.

Step 4 - Informing the commissioners (optional but important)

The ICB are keen to obtain data on the use of the form; not just the number of times it is sent but also the providers, departments & individual specialists it is sent to, & how frequently each the 12 reasons listed on the form are cited.

Whilst this is an additional inconvenience for practices, Sefton LMC is keen to support this step because it may help find ways of stopping practices receiving unsatisfactory prescribing requests in the future.

It is crucial to redact patient details before sending the form to the ICB.

With the patient selected in EMIS, select the 'Documents' tab at the top of the page, right click the previously saved form & click 'Edit'.

Delete the patient's name, date of birth & NHS number.

Then click the 'File' icon under the words 'Mail merge fields' at the top left hand corner, then click 'Save As' - NOT 'Save' or 'Save and close' - please change the document name so it is clear this is the redacted one, then click ok.

Finally, email the **redacted** form using Accumail to:

gifedback@cheshireandmerseyside.nhs.uk

Step 5 - Informing the patient (optional)

You may wish to advise the patient of the situation, using the following Accurx message or similar (you could add this as another template):

We've received a request from [speciality] to prescribe a new treatment for you. We're unable to do so & we've advised the specialist why. If you don't hear back within the next week, please contact the specialist for advice.

Dr David Smith, Chair, Sefton LMC, seftonlmc@seftonlmc.co.uk

This bulletin is circulated monthly to GP Principals & Practice Managers (or equivalents) at all constituent practices of Sefton Local Medical Committee.

Please feel free to forward it to other members of your team, & help us to keep our mailing list up to date by informing us if there are any changes.

If you have any questions about the content of this bulletin or if you have any feedback that would help to improve it, please email the address above.