| Title of Guideline | |
|---|--|
| | Good Practice Guidance for Care Homes Monthly Medication Ordering Process for Proxy Access Users (online ordering) |
| Guideline Number | |
| Version | Version 2.0 |
| Effective Date | February 2024 |
| Review Date | February 2027 |
| Original Version Published | August 2020 |
| Equality Impact Assessment | |
| Approvals: | |
| Give details of approval at | Approved at BHT pharmacy governance on |
| appropriate Governance | 25/01/24. Approved at Community & Rehabilitation |
| meeting(s) | Clinical Governance & Quality Board on 21/02/24 |
| | |
| | |
| Medicines Check (Pharmacy) | |
| Clinical Guidelines Group | |
| Original author/s | Unoma Okoli, Lead Interface Pharmacist- Older |
| | people |
| Contributing author: | Monice Hussain, Care Homes Pharmacy Technician, Buckinghamshire CCG and Kalpna Merchant, Practice Pharmacist, The Hall Practice, Buckinghamshire. |
| Revising author/s: | Monice Hussain, Care Homes Pharmacy Technician, Buckinghamshire CCG |
| SDU(s)/Department(s) responsible for updating the guideline | Division of Integrated Elderly and Community Care |
| Date uploaded | February 2024 |
| Buckinghamshire Healthcare NHS | S Trust |



Good Practice Guidance for Care Homes Monthly Medication Ordering Process for Proxy Access Users (online ordering)

For all care home and GP practice staff responsible for monthly ordering of medications in care homes

Definition

Proxy access refers to access to online services by somebody acting on behalf of the service user and with the service user's consent

Aim

To provide a framework for a safe and efficient monthly prescription ordering process using Proxy access

There are 5 key stages to the Proxy Access medication ordering process

Stage 1 – REGISTRATION (details in Appendix 1)

- 1. Care home to complete EMIS Proxy Access consent and send to GP
- 2. GP practice to register care home resident as an online user
- 3. GP practice to register an assigned care home staff as a Proxy Access user
- 4. GP practice confirms the online messaging function is enabled to the care home
- 5. The care home assigned proxy access user(s) receives their login details



Stage 2 – ORDERING

Review residents stock and reorder monthly prescriptions from GP practice



Stage 3 – CHECKING RECEIVED PRESCRIPTIONS OR TOKENS

- 1. Check prescriptions or prescription tokens received against the order
- 2. Contact GP practice with any issues
- 3. For non EPS prescriptions , photocopy prescriptions and send to pharmacy
- 4.

Stage 4- CHECKING SUPPLIED MEDICATIONS

- 1. Check medications supplied from Pharmacy with:
- Current Medication Administration Record (MAR) charts in use, prescription copy or patient prescription token or record of original orders
- New MAR chart supplied with the medications
- 2. Annotate on the new MAR supplied with the medication any medications carried forward
- 3. Arrange for any discrepancies to be corrected.

Checks should be done 3 working days before MAR charts needed to enable time for errors to be sorted out.

Stage 5- CHANGING OVER

Change over to the new medication cycle

Buckinghamshire Healthcare

Monthly Medication Ordering Process for online ordering (proxy access users) in Care Homes Standards for care homes to adopt- care homes actions are highlighted in the blue boxes

| S t g e 1 | Check residents' current medicines & MAR chart to identify if further supply needed Assigned user logs in to PATIENT ACCESS using login details provided by the GP practice via <u>https://patientaccess.com.</u> Request resident(s) medication Any request to changes in medication should be done using the messaging function e.g. 'Please supply two bottles of eye drops this month because one bottle lasts two weeks' or 'Newly started medicine'. Once the medication order has been placed via patient access, the home can print off a summary to use for checking in the new cycle Complete the care home and pharmacy copy of the MAR chart**(Appendix 5) and send Pharmacy copy via to community pharmacy |
|-----------------------|--|
| | Check the prescription token against the order, prescription and current MAR chart Becard discrementions the Medication Netification Form (MNE) and put in a request for medications |
| | Record discrepancies on the Medication Politication Politication Politication Politication are duest for medications using Patent Access using the messaging for additional comments inform the practice by email and keep copies on file |
| | |
| | |
| S | GP Practice issues prescriptions electronically within 2-5 days to community pharmacy via EPS for processing |
| t a | GP Practice prints patient prescription token*** or Community Pharmacy prints dispensing tokens*** for collection by the care home or sends via NHS Mail as a record of the prescription issued |
| 9 e | |
| 2 | Any discrepancies are documented, followed up and actioned by the GP practice as appropriate (details in Appendix 4) The GP practice notifies the care home of any action taken including any reason for prescription changes |
| | |
| | Check to ensure all requested changes are correct |
| S | \checkmark |
| t a | Community pharmacy dispenses and delivers medicines with MAR charts in line with Pharmacy delivery schedule. Care home must chase up to ensure all medications are delivered |
| g | \checkmark |
| 3 | Responsible care home staff checks in resident's medicines against a record of the Rx form, Medication Notification Form, current & new MAR charts Record any discrepancies on the Medication Notification Form and immediately telephone or email the photometry of the medication and the photometry of the medication and the medication form and the photometry of the medication form and the m |
| | Copies of any discrepancies are to be kept in the Medication Ordering Folder (MOF) |
| | |
| S t g e 4 | Responsible care home staff should: Carry forward ALL resident's old medicines in original packs as appropriate (refer to <u>Care Homes:</u> <u>Reducing medicines waste</u>) Record any quantities carried forward on the MAR chart. e.g. prn paracetamol, inhalers Replace used Multi Compartment Aid (MCA) packs with new MCA packs or Original Packs (OPs) supplied by Pharmacy, if applicable Remove and replace all the old residents MAR chart with new MAR chart and file copies of the patient Rx token behind the MAR chart in the MAR folder or designated folder |



Appendix 1

Registration process for proxy access

Care home

- Obtain EMIS Proxy Access consent form from the GP practice (Appendix 3 example of consent form)
- Return completed consent form and keep a copy in the resident's care plan
- The proxy user(s) will then receive the login details for the Patient access secure store log in details which should only be accessible by assigned Proxy User

GP practice

- On receipt of the consent form the GP practice will register the residents as an online user
- Go to <u>www.patientaccess.com</u> and start the set up with the online user account, at this point make a note of the password that you have created for the online user. Once you have created the log in for patient access, click 'skip for now' to link the practice at a later date and then start the set up on EMIS Web (see details in Appendix 2).
- Find your first patient by selecting them in the search bar and then click on proxy in the top right corner. This then shows you who is set up as an online user for the patient. Click 'add online user' then fill in the required boxes.
- To delete an account, contact support on the home page. Click on support centre, which takes you to a new screen with the contact form needing to be filled in. An email is then sent to the email address with a link for deletion.
- Confirm the GP practice has enabled the messaging function for online ordering

Screenshots of the process outlined above can be found on link

Buckinghamshire Healthcare

Appendix 2

GP Registration process for proxy access

Creating EMIS online user:

- It will take you through a four step process of details, ID verification, access and legal basis
- The ID verification can be personal vouching or the written document filled in by the care home.
- At the access section you set up the carer as the relationship to the patient
- Add the legal basis which can be verbal or written consent. If it is written then you will upload the document at this point for evidence.
- Once the 4 green ticks are shown in the top left hand corner, you are all set. Click OK and it takes you to the registration of the user. The online user now shows on the proxy access.
- Search for the next resident to add proxy access and this time the online user can be found via searching. Highlight the user and link. You have to complete the four steps again to get the 4 green ticks. Repeat until all residents have been linked and given proxy access.

Pin for online user:

• The next step is to link the online user account in EMIS to the account set up in patient access. This is where we need the linkage key and account ID. If it did not save, or ever need to find it again, you can find it in online users, find online user. Select the person and then print pin at the top of the screen.

Linking to patient access:

- Now log back into patient access with your email address and password. On the left hand of the screen is the option to 'link your GP practice'
- Search for your GP practice and select from the list. Select 'yes' that you have received a registration letter
- Link to practice copying and pasting the linkage key and account ID from the registration letter you saved
- Enter all your details and then enter your password again to link

Linking to multiple surgeries:

- It is possible to add more than one GP surgery to your patient access account. (If they are all EMIS)
- Just click again on the 'Link to practice' on the how screen and add another linkage key and account ID code from a 2nd or 3rd practice, as we have already done on the Emis registration

For more information see - https://support.patientaccess.com/proxy/what-is-proxy-access

Additional notes: This document should be used together with the flow chart for the various stages of the medication ordering process



Appendix 3

Proxy access refers to access to online services by somebody acting on behalf of the service user and with their consent.

Consent to proxy access to GP online services (for named care home personnel)

If the patient does not have capacity to consent to grant proxy access and proxy access is considered by the practice to be in the patient's best interest, section 1 of this form may be omitted and section 2 to be completed .

Section 1 (Where patient has consent)

I,..... (name of patient)

Give permission to their GP practice to give the following person(s) proxy access;

| Name: | | | |
|-------------------|----------------|------------|--|
| Date of birth | | | |
| Address: | | | |
| Postcode: | | | |
| Email address: | | Usual GP: | |
| Telephone no: | | Mobile no: | |
| Job Title: | | | |
| Signature: | | Date: | |
| Requesting repeat | prescriptions: | | |

I reserve the right to reverse any decision I make in granting proxy access at any time. I understand the risks of allowing someone else to have access to my health records. I have read and understand the information leaflet provided by the practice

Signature of patient

.....

V2.0 February 2024



Date

Section 2 (To be completed by patient representative if the patient does not have capacity to give consent)

Proxy access should only be given to named individuals who have a legitimate reason to have **access** to the online services on behalf of the service user that they are caring for.

The practice may give formal proxy access to a representative or representatives of a patient who is not competent.

The doctor should carefully weigh the balance of benefits to the patient against the risks described in this guidance of proxy access for a patient who lacks capacity.

Only then should proxy access be granted; after discussion with the patient's family or person(s) named in a power of attorney or a Court Appointed Deputy, and if, after the discussion, the doctor believes it to be in the patient's best interests.

| Capacity assessed by | |
|----------------------|--|
| Date | |
| Signature | |

Consent for proxy access

I ------ (name of patients representative)

| Name | |
|-------------------------|---------------|
| Relationship to patient | |
| Address | |
| Postcode | |
| Email address | |
| Telephone number | Mobile number |

Give permission for -----

(Nominated care home personnel) to have online proxy access to _____(name of patients) medication list .

The Proxy User (From care home)

The following person(s)

A GP Surgery can consider creating a patient e.g Mr Care Home for the purposes of online ordering of a care home resident's medication.



The following online service:

| 1.Requesting repeat prescriptions | |
|-----------------------------------|--|
|-----------------------------------|--|

| Care home staff | |
|-----------------|------|
| name | |
| Job title | |
| Date of birth | |
| Email address | |
| Signature | Date |

I understand my responsibility for safeguarding sensitive medical information.

I understand and agree with the following statements:

| I agree that I will treat the patient information as confidential | |
|--|--|
| | |
| I will be responsible for the security of the information that I see downloaded | |
| I will contact the practice as soon as possible if I suspect that the account has been accessed | |
| by someone without agreement of the patient | |
| If I see information in the record that is about the patient, or is inaccurate, I will contact the | |
| practice as soon as possible. I will treat any information which is not about the patient as being | |
| strictly confidential | |

For practice use only

| Patient's NHS number | | Patient's Emis Number | |
|---|--|--------------------------|------|
| Identity verified through (tick all that apply) | Vouching U Vouching with information in record D Photo ID D Proof of residence D | Name of verifier | Date |
| Proxy access authorised by | | Date | |
| Date account created | | | |
| Date passphrase sent | | | |
| Notes / comments on proxy access | | | |

• Consent form adopted with permission from Millbarn Medical Centre - 34 London End, Beaconsfield, HP9 2JH

If you are unsure who to contact in your local CCG or regional proxy team, please email england.carehomegpproxy@nhs.net who will be able to advise further.

For more useful information please see NHS England Link

Appendix 4: MEDICATION NOTIFICATION FORM for CARE HOMES

Name of Care Home & Contact Details

- When requesting any medicine clearly indicate (by ticking the appropriate box) the reason for request and whether it is an **URGENT ITEM** (i.e. needed processing within 24hours) or a **NON URGENT NEW ITEM / INTERIM REQUEST** (i.e. needed within 2-3 days) or if it is required as part of the next routine **MONTHLY PRESCRIPTION ORDER**.
- For Non urgent prescription requests fax form to the GP practice. Non urgent request will usually be processed within 48 hours (72 hours if over weekend or bank holiday) and delivered to the care home by pharmacy within 3-5 days of prescription request.
- For all new medicines requests, state number of days treatment if medicine is ACUTE only or if it is a repeat medicine the number of days required to synchronise supply with the next medicine cycle
- For Urgent prescription requests- fax form to <u>BOTH</u> the GP practice to the designated Pharmacy. Urgent prescriptions will be issued by the practice & forwarded directly to the pharmacy indicated below for urgent delivery. Urgent prescription request should be followed with a telephone call

| DRUG DETAILS (for each drug entry state name strength applicable and dose) | | Reason for Request (tick all that apply below) | | | | | Prescription type (tick below) | | | | IS DRUG REQUEST URGENT? State Yes or No for each drug entry made) |
|--|------------------------------|---|-------------|------------------|-----------------------------------|------------------------------------|---------------------------------------|----------|----------------|--------------------|---|
| Drug and Dose | Quantity required in days | New drug started | Dose change | Direction change | Formulation change of existing | Medicine query* (state details | Acute | New item | Interim repeat | Monthly order item | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

Comments /Response to Medicine Query* (include additional Monitoring Information if required)

Form Completed by: - Staff Name Signature...... Signature......



Appendix 5

Explanation of notes from the main document

*Any discrepancies (e.g. missing medications, wrong dose etc.) identified as part of the ordering process should be recorded as near miss in line with care home medication policy, the possible causes reviewed and learning shared. Any changes made to improve practice due to this review can be used as evidence of an improvement in safety and reduction in risk of errors.

** Care home staff **must** indicate on the care home and pharmacy copy of the current MAR chart one of the following against every item.

- o Drug ordered and item listed to be kept on MAR
- o Drug not ordered but item listed to be continued on MAR
- o Drug discontinued and item to be deleted from MAR
- o Drug continued & dose/directions change required –amend MAR
- Drug requested ordered and requested in days

In all cases the Care home & Pharmacy copy of the annotated MAR charts must be an accurate reflection of what the care home has ordered

The selection of what is indicated in the care home and pharmacy copy of the MAR chart may vary depending on the community pharmacy that supplies medication to care homes.

***Patient Prescription tokens can either be generated by GP practice or Community Pharmacy. It should be agreed who has the responsibility to provide the care home with prescription tokens.

Example of Pharmacy copy of the MAR Chart – this provides an illustration of information that should be captured at the time of medication reordering

| | - HAHMACY | | PHARMACY COPY | | | | | | | | |
|---|--------------------------------------|------------|--------------------|------|----------|------------|---------|-----------|------------|-----|--|
| | NAME | | D.O.B. | | ALLERGIE | IS | | | | | |
| | (Room Number, Care Home) | | | | | | | | | | |
| | DOCTOR | START DATE | | END | DATE | | START I | DAY | | | |
| | WE HAVE REQUESTED THE FOLLOWING FROM | THE SURGER | Y | | | | 1 | | | | |
| | MEDICATION PROFILE | TIME:DOSE | REQUEST IN DAYS | CONT | NUE ON I | MARR SHEET | DIRE | CTIONS TO | DOCTOR'S S | ATE | |
| | | | | | | | | | | | |
| 8 | | | | | | | | | | | |
| | | | | | | | | | | | |
| 1 | | | | | 1000 | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| _ | | | | | | | - | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | 1 | | |
| | | | | | | | 1 | | 1 | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | 1 | | | | |
| | | | | | | | | | | | |
| | | | | | | | - | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | 1 | | | |
| | | | | | | | | | | -1 | |