**Welcome to the 8th edition of the New Community Pharmacy Contract. In this issue, we provide you with a reminder of the timeline of CPP Phase 2 and 3 payments and also focus on ePharmacy roll out, AMS and a visit from the ePharmacy Delivery Team to Fife.**

**A reminder of CPP Phase 2 and Phase 3 payments**

(use in conjunction with circular PCA(P)(2007)31, PCA(P)(2007)35 and PCA(P)(2008)2)

**End of Jan 2008:** Community Pharmacists to work through IT Toolkit

e AMS Implementation resource pack available

To be eligible for a CPP Phase 3A or 3B payment a contractor must be on the list and completed all elements outlined above

**By 15 March 2008:** Contractors wishing to claim a CPP Phase 2 payment - complete form in Annex A and return to Moira Hanley.

**End of Mar 2008:** Eligible contractors wishing to claim a CPP Phase 3A payment should complete the form in Annex A along with a copy of the Premises Guidance and Assessment Tool where the NHS Board has added its endorsement at Part 4A.

Community Pharmacists to put in place a local IT training programme

Worked through and completed two clinical training packs on COPD and Rheumatoid Arthritis.

**End of June 2008:** Eligible contractors wishing to claim a CPP Phase 3B payment should complete the form in Annex B and return to Moira Hanley.

Worked through and completed the requirements of the eAMS Implementation Resource Pack provided by NES Pharmacy.

All of the above elements must have been completed.

**EHealth Strategy**

ePharmacy uses the Community Health Index (CHI) number as the key Patient identifier. The Patient Registration System (PRS) links to the CHI system in order to add the CHI number whenever a patient registers for an applicable service at their chosen pharmacy (e.g. registering for MAS or CMS). The CHI number is also passed from a GP system to a pharmacy system, via the ePharmacy Message Store (ePMS) whenever a GP10 prescription is initiated at a GP site.

ePharmacy prescription data (which includes both prescribing and dispensing data) is passed to PSD for remuneration and reimbursement purposes and to ISD for management information purposes.

ePharmacy is therefore a user of (e.g. CHI) and a provider of (e.g. payment and ISD data feeds) data which is stored and accessed by NHSS strategic systems.

ePharmacy, however, does not act as a patient data store and also does not provide patient data look-up abilities.

ePharmacy is a national programme which is working with:

- All GP systems,
- All CP systems,
- PSD DCV process
- ISD prescribing and dispensing data warehouses.

**ETP – Electronic Transfer of Prescriptions Leaflet**

A new patient information leaflet is available from the Scottish Government on the Electronic Transfer of Prescriptions, explaining what information is held on these prescriptions, what happens when the barcode is scanned, and answers questions about signing the prescription, and who can collect it. ETP does not change the flow of information between GPs and community pharmacists; the information contained in the electronic message is exactly the same as what is printed on the paper form. However, both groups of health professionals expressed a desire to have a leaflet available to explain the slight change in the appearance of the prescription form/s, namely that there would be a bar code printed down the left hand side, and that there would also be an electronic message sent. An image of the leaflet is below, and these leaflets have been sent out to each community pharmacy across Scotland.

**ePharmacy and ETP Benefits**

One of the major benefits of ETP is that for new patients, once the barcode has been scanned on a prescription, the patients name and address details are automatically saved, saving the pharmacist time as there is no need to retype these details. It also reduces any potential errors, as the details on the prescription are automatically copied onto the prescription so there are no possibilities of mistyping or misspelling the patients’ name or address.

Other benefits of ETP include giving pharmacists more control over their workload, make label production faster and more accurate, and streamline the reimbursement process. It could also make patient registration possible in pharmacies, as well as in GP surgeries.
AMS Visit to NHS Fife

On 22 January 2008, the ePharmacy Delivery Team visited Fife to give a presentation and demonstration of both GP and Community Pharmacy systems, for the roll out of AMS. This meeting was attended by Community Pharmacists, Primary Care Development Pharmacists, Pharmacy Champions and Dawn Balfour, the Community Pharmacy IM & T Facilitator.

During the meeting, a demonstration was given for both GP and Community Pharmacy IT systems, including a live demonstration of Pharmacy Manager and Nexphase.

Derek McAllister of the ePharmacy Delivery Team explained, as at January 2008, all GP system suppliers have passed their Fit for Purpose tests, with more than a quarter of GP surgeries having the software available, and Fife is the furthest ahead in the roll out of ePharmacy systems in Scotland.

With community Pharmacies, there are over 7 system suppliers, including many versions for each supplier due to the larger chains having their own versions of the software, and these systems all have to be checked for readiness, before the rollout of ETP.

At the visit, a live demonstration of Pharmacy Manager and Nexphase was shown, including all stages from scanning the barcoded prescription, to viewing patient details and medication history, as well as the process involved in endorsing and claiming the payment for using AMS.

During the presentation, it was shown that any pharmacist is able to overrule any pre-determined selections on the system, for drug name, quantity and directions for taking medicine.

It included the exemption status of the patient which needs to be on the system, and the team highlighted that it was important to maintain the patients’ exemption status, in order to claim correctly.

The ePharmacy team have also tested their IT systems on over 2000 users in Fife (including all GP surgeries and community pharmacies using the system at the same time), and systems were still working quickly and accurately, however there can be no guarantees when the system goes live for what the actual system times will be. The ePharmacy team also gave reassurance that IT support will be available throughout the entire roll out of ETP and AMS, and there are three IT specialists on hand throughout Fife who will be able to answer and help with any queries which may arise. Please note the system supplier should be the first port of call with any issues, and Dawn Balfour is available for local support.

### ePharmacy Programme Update

Details of the phase of implementation for ETP are as follows:

- **Stage 1**: GP practices produce bar coded GP10 prescriptions with associated electronic messages (known as eAMS) for the vast majority of GP prescribing events;

- **Stage 2**: CP systems scan the bar coded prescriptions, retrieve and utilise the electronic messages via the ePharmacy message store for dispensing purposes. In addition the system produces an electronic dispensed (or claim) message; and

- **Stage 3**: PSD start to use the electronic prescribing and dispensed messages for the remuneration and reimbursement of CPs (known as ePay) as well as providing ISD with electronic data for information purposes.

As at December 2007, all five GP system suppliers have completed Scottish Enhanced Functionality (SEF) 2 testing as part of the national accreditation programme for GP IT systems. A number of GP system suppliers are currently rolling out the functionality for ETP (eAMS) to GP practices whilst the other suppliers are completing beta testing of their software. This means that GP system eAMS functionality will be largely in place for the end of February 2008. This timescale fits in with the beginning of the prevalence period when GP practices commence collecting data for the Quality Outcome Framework.

The CP system suppliers are all at varying levels of eAMS functionality progress. Two system suppliers are currently beta testing eAMS and the others are either about to enter Fit for Purpose (FfP) testing or are still at the software development stage.

As a result eAMS functionality will start rolling out to CP systems from December 2007 and is due to complete by the end of September 2008 at the latest.

With regards eCMS the dates for testing and deployment of the GP functionality will be driven by SEF 4 testing which starts in November 2007, with roll out to GP practices completing by the end of August 2008. The CP functionality is due to begin FfP and beta testing from July 2008 with implementation due to complete by the end of February 2009.

Community Pharmacies should ensure that they have the appropriate upgraded software with eAMS functionality supplied by their Pharmacy system supplier at the earliest possible stage and by no later than 30 September 2008.