



Community Pharmacy Roadmap Program Development Template

Program/Service	Electronic prescriptions (ePrescriptions)
Quadrant	A – Prescribed Medicines – Services and Programs
1. Program/Service Description	
a) Background	<p>Electronic prescriptions (ePrescriptions) are a fundamental step to improving patient care by contributing to the safe and effective prescribing and dispensing of medicines. Electronic prescribing reduces errors during the dispensing process by circumventing the need to transcribe from a hard copy prescription into the dispensing program. The prescription is transcribed accurately in an electronic format. This process also aims to integrate into the electronic patient health record management as it develops.</p> <p>The Fifth Community Pharmacy Agreement includes a fee per electronic prescription dispensed by community pharmacies. The ePrescriptions system endorsed by the Guild is known as <i>eRx Script Exchange</i> and was introduced in April 2009.</p>
b) Brief Description	The Guild's preferred model for ePrescriptions, is for the prescription to be encrypted and sent to a secure gateway, where it can be easily retrieved at the patient's pharmacy of choice. On presentation of a hard-copy original or repeat prescription, scanning of the barcode on the prescription retrieves patient and prescription details, facilitating more efficient dispensing.
c) Alignment with Government Policy	Community pharmacy's utilisation of a practical ePrescriptions system, such as <i>eRx Script Exchange</i> , is consistent with the objectives of the Government's National E-Health Strategy (December 2008) ¹ , National Health and Hospital Reform Commission's Final Report ² , and the National eHealth Transition Authority's (NEHTA) Strategic Plan (2009–2012) ³ .
d) Expected Outcomes for Government and Community Pharmacy	<p>From a Government perspective, the ePrescription process will result in a more efficient and cost-effective use of the health system by minimising prescribing and dispensing errors and providing higher quality data to enable better policy development and efficient allocation of financial resources. ePrescriptions will enable the availability of additional data showing the number of prescriptions written but not dispensed. This will inform future health research and planning especially in the area of medication adherence. ePrescriptions will also form an important part of the Person Controlled Electronic Health record. This will facilitate better communications between health professionals.</p> <p>From a pharmacy perspective, ePrescriptions provide a more efficient process for dispensing prescriptions, improving dispensing accuracy and reducing transcription errors. An ePrescriptions system enables the:</p> <ul style="list-style-type: none"> • rapid retrieval of original and repeat prescriptions; • rapid retrieval of external repeats (repeats from other pharmacies) within a few seconds of scanning the barcode; and • automatic pre-filling of patient and prescriber details that are new to your pharmacy.
e) Consumer Benefits	Consumers will benefit from a safety and efficiency perspective and will continue to have access to their choice of pharmacy. As the individual electronic health record agenda progresses, ePrescriptions will facilitate more efficient electronic patient health management information, providing consumers and health care providers with access to timely, accurate and reliable health information. Consumers will benefit from more effective shared care especially for chronic diseases and complex health problems. ePrescriptions will form part of the Person Controlled Health record and assist in improving health literacy.
f) Who Performs the Service?	Pharmacists Dispensary pharmacy assistants Prescribers
g) Collaboration with Other Health Care Professionals	<p><i>Is the service likely to require any formal collaboration with other health care professionals?</i></p> <p>Yes – Community Pharmacy will collaborate with those prescribers generating ePrescriptions.</p>
2. Implementation and Enablers	

¹ <http://www.health.gov.au/internet/main/publishing.nsf/Content/National+Ehealth+Strategy>

² NHHRC: A Healthier Future for all Australians – Final report June 2009;
<http://www.health.gov.au/internet/nhhrc/publishing.nsf/Content/nhhrc-report>

³ <http://www.nehta.gov.au/about-us/strategy>

a) Stakeholder Consultation	<p><i>Representative bodies from the following areas will need to be consulted in order to fully develop and implement the program:</i></p> <ul style="list-style-type: none"> • Consumer organisations • Pharmacy organisations • GP organisations • Disease management organisations • Government bodies • Funders • National Pharmacy Board • Pharmacy and Doctor software vendors • Professional insurers • Other allied health professional bodies
b) IT Requirements	<p><i>Is pharmacy software required to deliver this program?</i> Yes</p>
c) Infrastructure and Staffing	<p><i>Is a private consultation area required to deliver this program?</i> No</p> <p><i>Is the program within the pharmacist's/pharmacy assistant's normal scope of practice?</i> Yes</p> <p><i>Will an additional pharmacist likely to be needed?</i> No</p>
d) Training	<p><i>What additional <u>formal</u> training is likely?</i> Nil</p> <p><i>Does any suitable training exist?</i> Yes - Training on eRx is provided when the service is installed.</p>
e) Supporting Standards, Procedures and Templates/ Checklists	<p><i>Will a QCPP standard be required?</i> An update to existing QCPP standards may be required to accommodate aspects of this program.</p> <p><i>Will professional guidelines and/or standards be required?</i> An update to existing standards and guidelines may be required to accommodate aspects of this program.</p> <p><i>Are there any national guidelines which need to be taken into account in developing the program to ensure consistency with best practice?</i> The National eHealth Transition Authority (NEHTA) has released the Electronic Transfer of Prescription Draft Release 1.0, incorporating five key documents: a Concept of Operations, a Business Process and Requirements Specification, a Technical Requirements Specification, a Technical Architecture, and a Logical Information Model. This draft is the first step towards defining a standards driven approach for ePrescriptions in Australia to which ePrescription providers will likely be bound ://www.nehta.gov.au/e-communications-in-practice/emedication-</p>
f) Legislation/ Regulation Implications	<p>Legislative change is not required for electronic prescriptions systems as they currently operate. However, if the goal is paperless prescribing then legislative change to recognise the status of ePrescriptions will be required.</p> <p>As the e-Health agenda progresses, legislative reform will be required throughout Australia and this procedure is being driven via the Council of Australian Governments (COAG) process. There will be a wide-ranging 'waterfall' of enabling legislation beginning with the Healthcare Identifiers Bill which is currently in the Senate at the time of writing.</p>
3. Funding	
Funding Options	<p><i>Possible funding options include:</i> Community Pharmacy Agreement Alternative Commonwealth Program State/Territory Government</p> <p><i>Has any funding for this program been secured?</i> Yes - 15¢ per ePrescription has been allocated under the Fifth Community Pharmacy Agreement.</p>
4. Timelines	
Timelines	<p>eRx Script Exchange was launched in April 2009 and continues to be implemented throughout the community pharmacy network, GPs and specialists across Australia. It is anticipated that the vast majority of Pharmacies and GP and specialist practices will be utilising eRx by the end of 2010.</p>