Adding Drugs Issued Outwith the Practice to INPS Vision
NHS GG&C Good Practice Guidance

This document is intended to help users record medication in the INPS Vision system that has been issued outside the practice, for example via hospital supply, addiction services, homecare services etc. There is no recommended list of non-practice drugs that should be added and this is left at individual practice discretion. There is no contractual requirement for GPs to maintain the complete patient medication record but there are benefits to both prescribers and patients in doing so.

The benefits are
1) Increased prescriber safety – prescription record is complete allowing clinical decision support to flag drug interactions etc. Prescribers can form a more complete assessment when making prescribing decisions
2) Increased patient safety – Emergency Care Summary is complete
3) Improved medicines reconciliation at the interface due to accurate ECS

For Vision practices the new "schema" that supports upload to ECS will be enabled in a future DLM, likely to be DLM 440. For the transmission to function correctly practices must have the new DLM installed and have enabled the Key Information Summary (KIS) on their system.

To add the drug to INPS Vision:

- Open the patient's record in the Vision system and press F5 to add medication as a repeat (once Vision is updated for KIS then as long as the Repeat Master remains "Active" it will continue to inform decision support and populate the ECS upload).

- In the "Source of Drug" field select "In Hospital" from the drop down menu

- Enter the Drug name

- In the Dosage Field indicate the source such as "**HOSPITAL ISSUE ONLY – DO NOT DISPENSE**" (the dosage field should ideally identify the source of supply. If the item is inadvertently prescribed this makes it clear to the pharmacy it should not be dispensed)


- In order to save the record a value must be entered in the "Repeats" – as no issues can be created from a non-practice prescription simply give a value of "1"

- There is no need to enter a "Repeat Until Date" but you can do if you wish as this may be useful for housekeeping purposes

- The Date Prescribed does not need to correspond exactly with the date of dispensing or administration as this information may not be available. A pragmatic decision should be made.

When viewed in the Therapy Tab and the 'Repeats Filter' most users will not see the non-practice items as the default setting is to filter 'Inactive' items not to show.
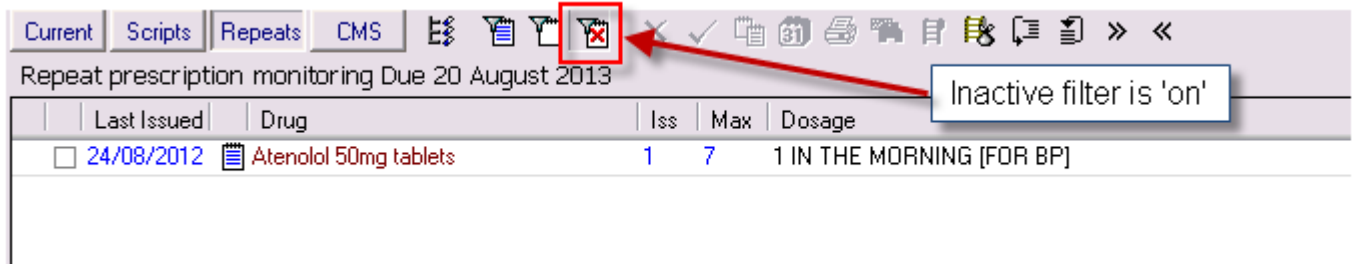
To see the non-practice items a user will need to switch this filter off, however it is not necessary to view all the items as clinical decision support will still be active:
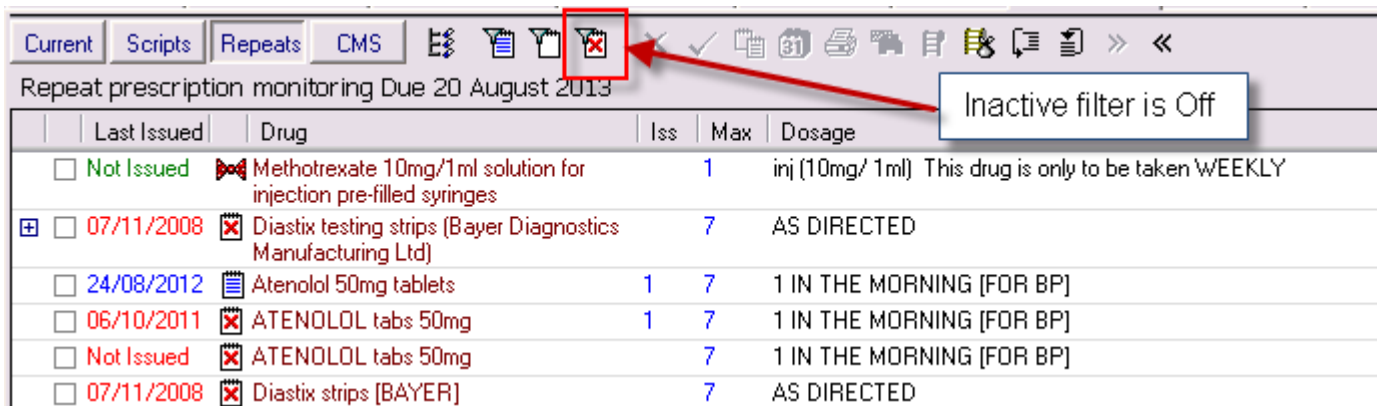
Non practice items are represented by the 'bow tie' icon. They can be sorted and grouped by clicking on the icon column header:
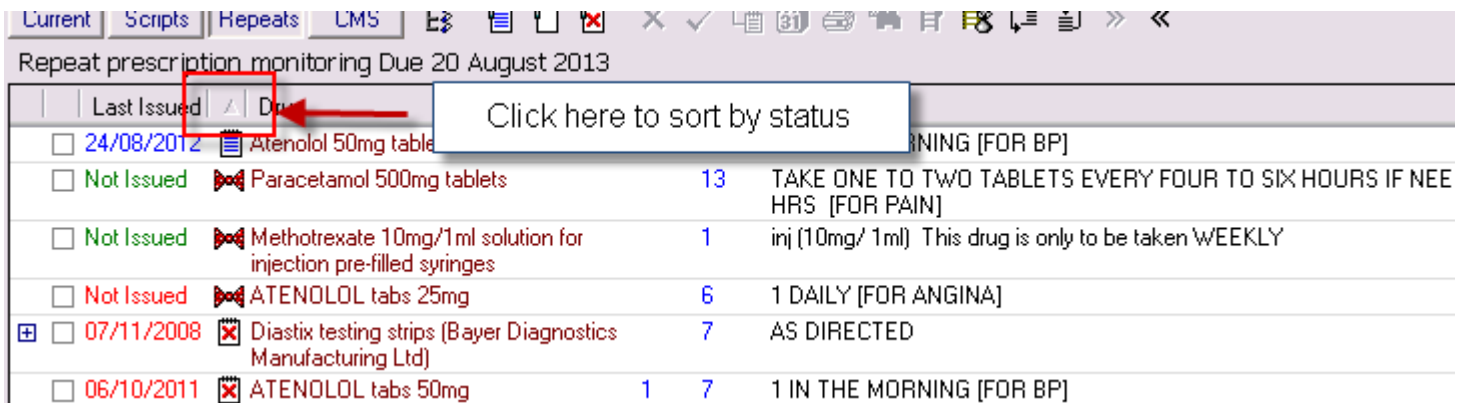
An alternative is to change a user's default view on entering 'Repeats' view to display 'All', as set up in Consultation Manager, Options, Setup.

Note that although users need to de-select the 'Inactive' filter to view non-practice items, the non-practice items are not flagged as 'Inactive' in Vision and will be reported on in searches looking for Repeat Masters where 'Inactive' equals 'No'.

- Note that Repeat Masters that have a non-practice source cannot be used to generate prescriptions, thus no "issues" can ever be generated

- Non-practice drugs do not appear on the right hand repeat prescription list

- Date last issued for non-practice drugs added will be incorrect for actual supply or administration but relates to the date added to the Repeat Masters

Once a patient is no longer taking this medication the repeat master should be "inactivated". Practices should run housekeeping searches on non-practice repeat masters to review and inactivate those that no longer apply. Further information on recommended housekeeping can be found at www.http://www.scimp.scot.nhs.uk/guidance and select "Out of Practice Medicines".

There is the option to add a non-practice medicine as an acute item when the item has been provided as a one off. Items added in acute will only continue to inform decision support for the period selected in the date offset in Consultation Manager, Options, Drug check
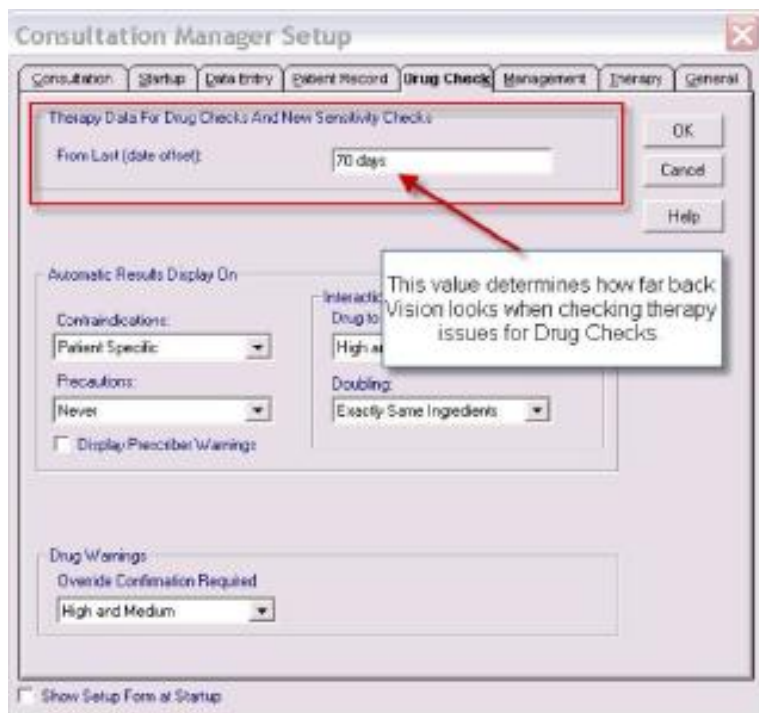
Some examples of prescribed "Outside" drugs:

Methadone
Clozapine
Antipsychotic depot injections
Anti-TNF (e.g adalimumab, etanercept)
HIV drugs
Zoledronic acid
Chemotherapy
Disulfiram
Homecare drugs (darbopoetin, Immunoglobulins)

Acknowledgment to SCIMP Working Group

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