

Pharmacy First

Updating the GP patient record

Information for GP and Pharmacy staff

04 April 2024



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1. What information is sent as part of GP Connect: Update Record?

We are rolling out Update Record messages for three services: Blood Pressure, Oral Contraception, Pharmacy First (Minor Illness and Clinical Pathways Services)

The [Service specifications](#) include details of the data that pharmacists will record and transfer















The information shared via Update Record is the same as the information which is shared via PDF/email, but it is in a structured format which speeds up inclusion into the patient record, reduces burden and eliminates transcription errors

1. What information is sent as part of Update Record?

- The information is **structured/coded**
- The GP systems will add information directly to **patient records** which other **third parties and the patients themselves may access**
- Some practices **may auto-file** the information without reviewing, others may review before filing
- Good record keeping standards must be maintained

Information Sent

- | | |
|---|---|
|  Person demographics and GP details are obtained via PDS verification |  Clinical summary of consultation |
|  Date and time of consultation |  Observations e.g. BP, temperature |
|  Pharmacy details |  Pregnancy status |
|  Outcome of consultation |  Medication details or Reason for no supply |
|  Clinician details name, role, professional identifier |  Information and advice given to patient |
|  Presenting complaint |  Signpost/Referral information e.g. referred to, reason, urgency |

2. What do GP/Pharmacy users need to do?



Pharmacy users:

- Pharmacy business process is the same – record consultation, submit record – system will automatically attempt to send the Update Record message
- Users should refer to system user guidance on how message rejections will be handled. In these circumstances the message will need to be resent via NHSmail



GP users:

- Familiarise themselves with the new functionality
- Set up preferred process of managing the messages e.g. auto-file or manual file
- Review/accept messages as soon as possible so all details are filed to patient record – any member of practice team can do this based on practice working preferences
- Continue to monitor NHSmail inbox as communications for other pharmacy services will come by email

Any issues should be reported to supplier helpdesk in the usual way

3. Information available via Patient Facing Services

Patient Facing Services allow patients and proxy users to see their medical record via online services and Apps e.g. NHS App. Proxy users can be anyone who has been given access to view someone else's medical record, such as a parent or carer.

- Pharmacists should work on the basis that when a consultation record is submitted, the information will be available to GPs, other health and care providers and patients (and their proxy users) via Patient Facing Services.
- When delivering the Pharmacy Contraception Service, there may be a safeguarding concern or another reason why a patient may not want their consultation details visible via Patient Facing Services or Summary Care Record. For example, where a person under 16 years old is receiving contraception services and may not want others to see this information. In these cases, please capture in the consultation record that the patient does not consent to their information being shared with the GP.



Entries are visible via Patient Facing Services once message is filed by a user at the practice.

- Medication details are available immediately as this is auto-filed
- User at the practice can change the setting to hide this information if this is required



Entries by default are automatically marked as hidden from online services

- A user from the practice must review and mark the event for sharing with Patient Facing Services before this is available in online services



4. Update to Summary Care Record (SCR)

Information once filed is available via SCR in real time

Summary Care Record



Medication details are auto-filed and uploaded to Spine once an approved user is logged in at the practice using a valid smartcard.

The remaining information in the message is held in provisional state; this is uploaded to Spine once filed and a user is logged in at the practice using a valid smartcard.

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If messages have been auto-filed, SCR will update once an approved user is logged in at the practice using a valid smartcard. This will trigger upload to Spine.

If messages are manually filed, information is uploaded to Spine once a user has filed the message and is logged on using a valid smartcard.

5. Is the data auto-filed into the GP record?

Auto-filing means the data in the message will automatically enter into the patient record. All users have choices around enabling auto-filing.

A workflow task is created in both EMIS and TPP systems for every message received by the practice. This is to give the user at the practice visibility of the incoming message.



The default setting is to hold messages in a “provisional” state other than medication details which are auto-filed.

To add the provisional data items to the patient record in EMIS Web, an approved user at the practice must accept the task

VS



The default setting is to auto-file Update Record messages.

Users do have the option to choose to manually file the messages. If selected it will require a user to view and accept the message before data is added to the patient record.

6. Urgent actions and referrals

The Update Record functionality must not be used for urgent actions or referrals

Pharmacists must not rely on Update Record as the method to communicate actions for the GP.



GPs or other clinical team members may not see or review the message immediately.

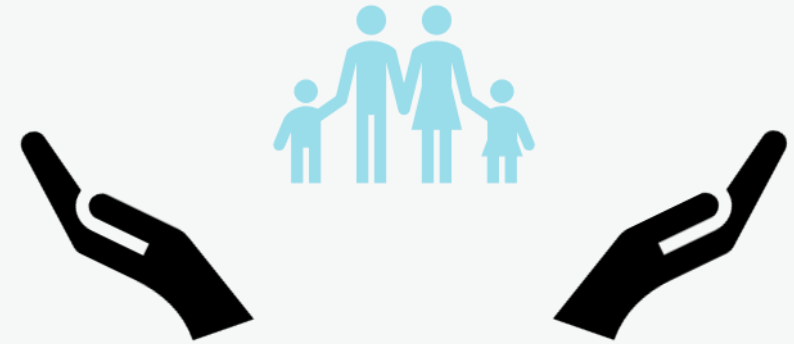


Based on the urgency of the action, pharmacies must communicate this directly using local processes e.g. email or phone. This will vary locally.

7. Safeguarding information

Pharmacists must not use Update Record to communicate safeguarding concerns to the GP

If there is a concern and/or support is required from the GP, you should follow your standard local procedure and contact the GP by phone or email where necessary.





8. Temporarily delaying go-live of the functionality

In recognition of the busy end-of-year and Easter, GP practices can choose when to enable the functionality, within a three-month window

What disabling this functionality will mean?

Disabling the functionality will mean that the structured message is rejected by the GP practice and the message must then be sent via NHS Mail, according to pharmacy supplier instructions

What does this mean for community pharmacies?

For the majority of pharmacies, their system will automatically resend rejected messages via NHSmail, but users should check their supplier guides to understand the process

How are NHSE helping to mitigate the impact?

Should a GP practice choose to temporarily disable Update Record, they will receive a message from their system supplier advising them of the exact date when the functionality will automatically be switched on



9. Managing live issues

Any issues should be reported by the user (GP or pharmacy contractor) directly to their supplier. They will either:

- Support a local resolution
- Fix the issue themselves in their back office, or
- Escalate to NHSE, using agreed and well tested protocols

ICBs and regions with their own IT support hub should follow local procedures, with escalations being to suppliers

Standard way of reporting live service issues to NHSE via suppliers that:

- Ensures fast, responsive support
- Provides regular updates for high impact issues
- Enables us to triage the issue and provide the right level of expertise
- Suppliers understand and use regularly
- Has 24/7/365 cover