

Developing a SystmOne prescribing formulary to improve safety and increase patient information in GP practices

Gill Gookey, Stacey Sadler, Karen Chappell, Nayna Zuzarte and Sam Mir – Medicines Management Team

Introduction

The formulary facility within a GP clinical system is routinely used to direct prescribing to a locally preferred list. **SystmOne** is the clinical system used in 11 out of 12 of the GP practices in NHS Rushcliffe CCG. It has the ability to add a prescribing formulary that sets dosages and quantities and allows more than one dose and quantity to be offered for one medicine.

The Medicines Management Team (MMT) developed a local formulary that includes safety features and increases the information given to patients to support medicines optimisation. The formulary is updated centrally by the MMT every three months and practice staff input is regularly received and welcomed. All suggestions are peer reviewed and second checked. Practices are notified of the updates.

Aims

Improve patient and prescriber information

Improve patient safety

Reflect dosages in local guidelines

Collaborative robust and up to date formulary

Examples

- Indications added to medication e.g. **for blood pressure/to prevent wheezing**¹
- Ingredient information added where brand prescribing advised e.g. **“contains morphine” to Zomorph**[®]
- Technique prompts added to inhaler directions e.g. **“inhale quick and deep” or “inhale slow and steady”**²
- Reminder that blood tests are required regularly e.g. **on amiodarone**
- Three options available when prescribing eye drops to cover right eye, left eye and both eyes therefore **“affected eye” is not used**
- Prednisolone for exacerbation of COPD and Asthma, with different doses and quantities labelled for the indication
- Information regarding weight range added to dosage e.g. Epipen Jr[®] **so the parent and prescriber are aware when the dosage should change**
- Antimicrobial dosages that **reflect the local guidelines** with regards to course length, dosage and indication if appropriate

Feedback from users

It is like a safety net.....I feel like there is someone else checking my prescription

It makes me want to add indications to all the items on repeat

Conclusion

The **quality of the directions on prescriptions has improved** providing clearer information to patients, pharmacists, prescribers and on shared care records. This may **reduce in the chance of a patient safety incident** due to incorrect product choice or poor instructions. The **informal feedback received has been very positive** and there are plans to undertake a more formal review. The formulary is **updated to all practices centrally which minimises the time input** and provides consistent prescribing information.

References

1. General Medical Council. *Good practice in prescribing and managing medicines and devices*. 2013. www.gmc-uk.org/Prescribing_guidance.pdf_59055247.pdf (accessed 12 February 2015).
2. Murphy AC et al. *7 Steps to Success Inhaler Reminder Cards*. Simple Steps Education. www.simplestepseducation.co.uk/ (accessed 12 February 2015).