



COVID-19 Update

Monday 27th April 2020

This daily update contains important information for community pharmacy teams about the ongoing response to the COVID-19 pandemic.

In today's update: staff testing update; SCR additional information becomes default; prescriber guidance on using EPS remotely

Update on Staff Testing for COVID-19

A new portal for booking COVID-19 tests for key workers, including community pharmacy team members, is now available for use by team members and employers:

[Essential workers: apply for a coronavirus test \(GOV.UK\)](#)

[Coronavirus \(COVID-19\): getting tested – information for employees and employers \(GOV.UK\)](#)

This portal replaces the previous temporary system made available for use by pharmacy team members by the Care Quality Commission (CQC).

Testing will allow those currently unable to return to work because they or a member of their family or household have symptoms of coronavirus to know whether they do have the virus.

Employers can also register via the following page, so they can then submit the contact information of employees who would benefit from being tested. Once submitted, the employees will be sent a message providing details on how they can book a test.

[Coronavirus \(COVID-19\): getting tested – information for employees and employers \(GOV.UK\)](#)

Additional Information Included Within SCR by Default

NHS Digital has announced that Additional Information has been added to most patients' NHS Summary Care Records (SCR). SCR with Additional Information includes: details of the management of long-term conditions; medications; immunisations; care plan information; and significant medical history, past and present.

For the duration of the pandemic, patients will not need to ask their GP practice to activate Additional Information. This action is being taken in response to the **Notice** issued on 20th March 2020 under Regulation 3(4) of the Health Service Control of Patient Information

Regulations 2002, requiring confidential patient information to be shared in the circumstances set out in the Notice.

[Learn more here](#)

Guidance for Prescribers using EPS Remotely

Many GPs and other prescribers in general practices are now using EPS during remote consultations with patients as a result of the pandemic. NHS Digital has therefore updated its [guidance for use of EPS within remote consultations](#).

The guidance is for EPS prescribers and pharmacy teams. The guidance notes that:

- Nominations should still continue to be used wherever possible.
- Phase 4 (non-nominated) prescriptions should only be used if other options are not suitable.

One-off nomination is an additional alternative to use instead of Phase 4, where available. It is currently only available within the TPP SystemOne GP system, but EMIS plans to add this functionality to their EPS prescribing systems in the future.

For [EPS Phase 4](#) prescribing, if the patient cannot be given the printed Phase 4 token, other information should be provided to them instead. Ideally the Prescription ID should be provided where possible. Some GP practices can copy this and send it by email or text message to the patient using their clinical system.

If pharmacy teams receive the ID from the patient, it can be used to pull down the prescription onto the pharmacy PMR system.

As a last resort, the [EPS Tracker may be used to locate an EPS prescription](#) (e.g. via use of the NHS number).

Have you seen our latest FAQs?

PSNC's COVID-19 hub has an [FAQs page](#) with a large number of answers to queries posed by pharmacy contractors, their teams and LPCs; these are being updated on an almost daily basis. Recent additions include:

Q. When will the MYS portal go live to claim for the Pandemic Delivery Service?

NHSBSA has confirmed that the link on the MYS portal for the Pandemic Delivery Service will go live on the 1st of May 2020. The MYS portal is currently displaying a link for the service which will indicate that the submission period is currently closed, but it will be active from 1st May.

Q. Is it safe to handle paper FP10 prescriptions issued by GPs, dentists, hospital outpatient clinics etc.? Is there a risk of catching COVID-19 from "infected" forms?
PHE has provided the following advice on the risk of COVID-19 infection by handling paper:

It is theoretically possible that a person can transmit and/or contract COVID-19 by touching a surface and/or object, (i.e. medication boxes and/or prescription tokens) that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. However, in general, because of poor survivability of coronaviruses on surfaces, it is considered a very low risk that severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) can be spread from packaging including prescription

tokens and medication containers. We recommend frequent hand washing to minimise any potential risk.

While paper prescriptions are becoming less common as most prescribing in primary care is undertaken using the Electronic Prescription Service (EPS), pharmacy contractors are reminded that they must dispense legally valid paper prescriptions presented for dispensing, including those from healthcare providers who do not have access to EPS, such as dental practices and hospitals.

[Find answers to more of your questions here](#)

Keep up-to-date with our hub page: psnc.org.uk/coronavirus

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