



The Pharmacist and the EPS (Electronic Prescription Service)

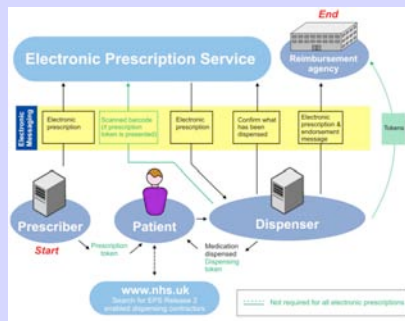
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Introduction to EPS

- Electronic prescriptions are out all over Europe and North America
- In use in hospitals for many years
- Complicated by the NHS in the UK
- Part of the NPfIT in the UK
- Lesser known than the electronic records

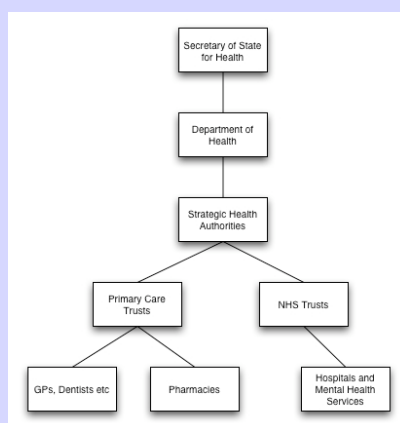


Benefits of EPS



- Convenience for patients
- Improved accuracy
- Increased speed and reduced waiting times
- Reduce workload
- Improved reimbursement process

The role of pharmacies in the NHS



- Pharmacies are independent businesses
- Linked to PCT's by contracts to dispense NHS prescriptions.
- A new contract was signed in 2005 including EPS
- PCTs also offer other incentives to pharmacies to provide extra services

Pharmacies and EPS

- Computer systems used in pharmacies are independently chosen
- PCTs are responsible for the implementation of EPS
- Vendors are responsible for integrating EPS
- Pharmacies get a monthly incentive for being EPS 'ready'



Qualitative Methods



- Questionnaires
- Interviews
- Micro Ethnography
- Heuristic Evaluations

Grounded Theory

- Method of analysing qualitative results

Three stages

- Open coding
- Axial coding
- Selective coding



Open Coding

- First step
- Identify concepts in all the data
- Create a table of comments that identify concepts
- Create a diagram of concepts

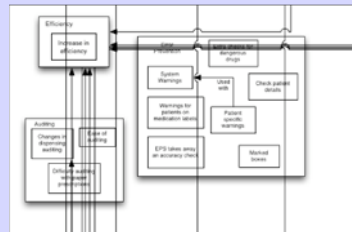
Interviewee Name / Data ID	Comment	Concept
Ian	...it's another step another change for the doctors...	Lots of changes recently for GPs
Ian	...I think its something that going to come...	EPS is the future of prescriptions
Ian	...more and more I think [it's necessary], due to patient's demands on the service.	Higher patient demands
Ian	I think it probably is [necessary].	EPS is necessary for current prescription services
Ian	If the system is set up correctly from the start, that's a big issue...	Initial set up must be done correctly



Axial Coding

- Identify relationships between concepts
- Find comments that show relationships between two concepts
- Create a table of relationships and use these to create a diagram

Data ID	Comment	Category/ Subcategory	Relationship	Category/ Subcategory
Hazel	If the trials are done right it should be [more accurate]	System trials	Increases	Accuracy
Sarah	No [I don't think it'll be more efficient] things go wrong	Lack of trust in IT systems	Decreases	Efficiency
Sally	[I think it'll be more efficient] until the computer goes wrong	Lack of trust in IT systems	Decreases	Efficiency
Debi	Problems from the community pharmacy side is the time it takes to actually download scripts.	Speed of the downloading prescriptions	Decreases	Speed of service



Selective Coding

- Clean up the diagram
- Remove categories without relationships
- Make the diagram clearer and easier to understand



Results - Training



- Lack of training
- No training provided by PCT's
- Patchy training provided by vendors
- Causing:
- Lack of use
- Fears of security
- Fears of implementation

Accuracy



- Reduces checking stages
- Removes stages where errors can occur
- Only time will tell

Speed

- Slow download speeds
- N3 network
- Speed of system interfaces



Authentication



- Smart cards given only to pharmacists
- Logs required to record who uses
- Extra paperwork

Independent vs Large Chains Pharmacies

Independent pharmacies	Large chain pharmacies
Spend time researching computer systems	Told which computer system to use
Where EPS is installed it is more likely to be used	EPS is often installed but not used
Training is fought for	'Just in time' training provided for PCT visits
PCT incentives are a minimal compared to the cost of the system and the time spent implementing it	PCT incentives add up over many stores

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Summary

- Necessary for the future of the prescription services
- Increased worries due to lack of knowledge and training
- Lack of usability in large chain systems
- EPS installed for the money and not actually used