

## **EXECUTIVE NOTE**

### **The National Health Service (Pharmaceutical Services) (Scotland) Amendment Regulations 2007 SSI/2007/208**

1 The above instrument was made in exercise of the powers conferred on Scottish Ministers by sections 27(1) and 27(2), 105(7) and 108(1) of the National Health Service (Scotland) Act 1978. The instrument is subject to negative resolution procedure.

#### **Policy Objectives**

2 The purpose of these regulations is to amend the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995 (“the principal Regulations”) which regulate the provision of pharmaceutical services under the National Health Service (Scotland) Act 1978 in order to accommodate the introduction of electronic transmission of prescription forms (the ePharmacy service).

3 In addition, provisions for point of dispensing checks in respect of claims for exemption from payment of the prescription charge on age grounds are amended and these regulations also provide for community pharmacists to refuse to supply prescribed drugs to persons who commit acts of violence or threaten them with violence, or who commit or threaten to commit a criminal offence.

4 The regulations make consequential amendments because of repeal of the National Health Service (Charges for Drugs and Appliances)(Scotland) Regulations 2001 and their replacement by the National Health Service (Charges for Drugs and Appliances)(Scotland) Regulations 2007.

#### **Introduction of the ePharmacy Service**

5 The electronic transfer of prescriptions is one of a raft of measures which will lead to changes in the way community pharmacy services are provided in Scotland. ePharmacy is the electronic system which is being developed to underpin electronically new services to be introduced from 2007-2008. The changes being made to the regulations will allow for prescription data to be transferred electronically between the GP prescriber and the Community Pharmacy dispenser via a secure message store. The ePharmacy service will also support improved reimbursement arrangements for community pharmacy contractors and facilitate collation of anonymised data about prescribing and dispensing.

#### **Security of Electronically Transmitted Information**

6 Electronic data flowing between the National Services Scotland Practitioner Services Division (PSD) and GP Practice (GP) and Community Pharmacy (CP) computer systems contain confidential patient information. That information is protected from unauthorised interception and viewing by a process of authentication. That process prevents any information being transmitted unless the information source and the receiving system complete a complex sequence of identity checks. In addition, digital signing of information is used to check that information has not been altered in transit.

7 The ePharmacy security model has additional identification checks to further improve security. Use of a client certificate (issued from a source dedicated to ePharmacy) as well as a server certificate, provides a higher level of access control and security than that normally used for internet commerce.

8 Finally, all data in transit between the systems is encrypted. Information sent to PSD via the ePharmacy 'message store' either uses the same authentication and encryption standards as that used for GP and CP systems, or an encrypted information flow with system access controlled through password protection and rigorous application of firewall rules. These ensure that information can only flow between specified physical locations. GP and CP communication and access to the central systems is also restricted by 'firewalls'. These are software protection devices which ensure that any data source can be prevented from accessing the ePharmacy 'message store' if it is suspected that its identification credentials have been compromised.

### **Refusal to Supply Prescribed Medicines to Persons who Threaten or Perform Criminal Acts or Acts of Violence**

9 The Executive takes the view that community pharmacists should be able to provide a service to patients without being subject to threatening, violent or criminal behaviour from persons who present prescriptions for dispensing. The Regulations area therefore amended to provide that a pharmacist may refuse to supply prescribed drugs to persons who commit or threaten to commit violent or criminal acts at the pharmacy. These provisions will apply to a person who presents a prescription and anyone accompanying that person.

### **No Point of Dispensing Checks re Claims for Exemption from Prescription Charges on Age Grounds**

10 The principal Regulations require community pharmacists to carry out point of dispensing checks where patients or their representatives, claim exemption from prescription charges. However, proof of exempt status is not required when the pharmacist holds confirmation of exempt status as part of a person's Patient Medication Record. This amendment provides that no one need produce evidence of exemption on age grounds where the patient's date of birth is specified in an electronic prescription form, or printed by a computer on a non-electronic prescription form.

11 Patients who are exempt on age grounds will still be required to sign the patient declaration on the reverse of the prescription form. Although this will no longer be linked to a process of counter fraud checks, the signature will stand as confirmation that the medicine or appliance ordered on the prescription was dispensed at the community pharmacy identified on the front of the form.

### **Finance**

12 The financial impact of these amendments will be de minimis. The ePharmacy programme is being funded by the Executive, which is working with representative bodies of the relevant professions and IT service providers on the technical and other requirements of the system. The impact on community pharmacy systems is being addressed as part of the negotiations on new services which are to be provided by community pharmacists. The

impact on General Practice IT systems is being addressed through the Scottish Enhanced Functionality process which progresses wider IT improvement agenda for general practice.

### **Consultation**

12 The Executive has been working closely with the relevant professional representative bodies on these changes to the regulations. There has been no public consultation about these proposals.

Scottish Executive Health Department  
March 2007