



Response from the Irish Platform for Patient Organisations, Science and Industry to the Irish Pharmacy Union Public Consultation on E-Prescribing User Requirement Specifications for Primary Care

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- We welcome the decision to pursue a central hub model, namely a Secure Clinical Data Repository (SCDR), which is publicly controlled. Patient information is sensitive personal data which must be safely stored and appropriately managed. A public body is best placed to undertake this role as patients need to have confidence in the data manager credentials. The repository needs to ensure that public interest informs decisions about what information is shared with whom, when and for how long. The repository needs to include the option to share information for defined periods of time or with defined levels of access.
- We urge the repository to adopt appropriate and meaningful consent protocols to ensure that the patient is asked to formally give consent to authorise the sharing of information with various health partners. We believe that this process will alert the patient to any third parties who will legitimately need to be provided with access to patient health information as well as protect against patient information being sold or used for marketing or other commercial purposes.
- We ask the repository be designed in a way to provide patients with access to their summary medical record. Patients who are able to view their prescribing history will be able to better manage their care themselves or with the help of family members or carers. Patients will be able to use the record to learn about the medicines they have been prescribed now and in the past, including the product names, the dosage and the administration details. Access to the record will also reduce the administrative burdens associated with illness and facilitate the completion of medical tax forms, as patients will be able to quickly print off the details of their various prescription receipts with the click of a button.
- We welcome the decision to include a patient on the Primary Care e-Prescribing Steering Group (PCeSG). Patients can provide a unique insight to those involved in planning and implementing health services. We encourage the Group to seek expressions of interest from patients which can be evaluated against a pre-agreed criteria to increase the transparency of appointments. We ask that an alternate also be appointed as patients may be unable to attend all Group meetings in person due to illness. We urge that patient representatives be provided with the necessary education, training and support needed to complete the role. We ask that patient representatives be reimbursed for expenses and for their contribution, as appropriate.
- We have some concerns that while the proposed model moves much of the work of prescribing online for general practitioners and for pharmacists, it does not do the same for patients. In the storyboard, the patient has to “call the ‘prescription line’” and “collect the (paper!?) prescriptions”. We propose that patient directed e-prescribing be explored.
- We ask that the patient be placed at the centre of all decisions around e-prescribing. Changes to health services should ensure that the patient’s life is made easier. For example, it should take into account that patients may wish to only fill half a prescription, or they may wish to switch pharmacies on a repeat prescription.
- We believe that e-prescribing should be supported by a wider e-health system. For example, patients should be able to view product leaflets online, as well as high quality evidence-based information about various treatment options. E-prescribing should also include systems which alert general practitioners to prescribe available generics or biosimilars, where clinically appropriate. The IPU should work closely with the e-health Ireland primary care division to ensure strategic and policy coherence.