



FOR SPECIALIST PRACTICES

Electronic Prescriptions

WHAT ARE ELECTRONIC PRESCRIPTIONS?

Electronic prescriptions are an alternative to a paper prescription. An authorised prescriber generates the electronic prescription which is transmitted to a Prescription Delivery Service (PDS) which securely moves and stores prescription information electronically. The electronic prescription is then available for dispensing and supply at any pharmacy who has dispensing software that has conformant electronic prescription capability. Electronic prescriptions meet the relevant Commonwealth and State and Territory legislation. Electronic prescriptions are not mandatory, with patients and prescribers able to choose their preference for either a paper prescription or an electronic prescription.¹

ELECTRONIC PRESCRIPTIONS VS PAPER PRESCRIPTIONS

Previously, only a paper prescription signed by a prescriber has been the legal form by which medicines can be supplied. While paper prescriptions are not being replaced, electronic prescriptions provide the opportunity to simplify the prescription process, reduce the risk of losing prescriptions and improve transparency of active prescriptions across service providers. Electronic prescriptions form part of the broader digital health and medicines safety framework and enable the prescribing, dispensing and claiming (where applicable) of medicines through a fully electronic workflow.

MANAGING ELECTRONIC PRESCRIPTIONS

Patients can choose two ways to manage their electronic prescriptions. They can receive prescription tokens (available now), or their electronic prescription can be added to their Active Script List (ASL). This additional functionality is being rolled out across the country.

Token: a unique QR code known as a 'token' is generated by a prescriber and sent via SMS or email to the patient. The patient can either take it to their chosen pharmacy or send the message with the token to their chosen pharmacy for dispensing. The token is used by the pharmacy to retrieve the electronic prescription from the PDS and dispense the prescribed medicine.

ASL: The ASL is a token management solution which displays a list of a patient's active prescriptions available to be dispensed, removing the need for a patient to manage individual tokens. A patient will present at their chosen pharmacy, and upon confirming their identity, the pharmacy can dispense the patient's medicine. A patient chooses which prescribers and pharmacists can view their ASL.

HOW DOES THE TOKEN MODEL OF ELECTRONIC PRESCRIBING WORK?

1. Electronic prescriptions are generated by an authorised prescriber using a conformant clinical information system (CIS).
2. The electronic prescription is sent from the CIS to a PDS in an encrypted format.
3. The electronic prescription resides in the PDS and contains all the same information as a paper prescription – except now it is held in a secure, encrypted, electronic format.
4. The patient will receive an SMS or email with a token (that can also be printed on paper) which is scanned at a pharmacy to retrieve the electronic prescription from the PDS.

Currently, two Australian PDS providers exist: [eRx Script Exchange](#) and [MediSecure](#).



WHY SHOULD I IMPLEMENT ELECTRONIC PRESCRIPTIONS IN MY PRACTICE? ^{2 3 4}



Patients

may benefit through:

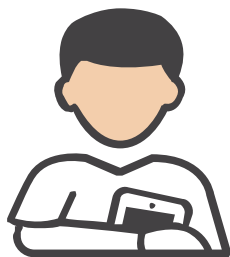
- Improved safety by reducing the risk of transcription errors,
- Greater patient choice to have either a paper or electronic prescription,
- Reduced risk of losing prescriptions, particularly for those with multiple scripts,
- Reduced complexity in medication management for multiple scripts, and
- Greater convenience and flexibility through new options for medicines supply, such as increased capability for telemedicine or mobile consultations and making prescriptions more accessible for patients living in regional and remote communities.



Specialists

may benefit through:

- Improved patient outcomes by reduced risk of medication errors,
- Improved efficiencies in workflow through less paperwork,
- Reduced patient misuse of prescriptions,
- Reduced duplication in prescriptions,
- Improved patient medications compliance,
- A form of prescription that complements telehealth consultations, and
- More complete information available on the patient's My Health Record



Practice Managers

may benefit through:

- Simplified workflows due to reduced paperwork,
- More support with moving towards a paperless practice,
- Improved efficiencies for practice staff and patients as prescription refills can be sent electronically direct to the patient, and
- Reduced administrative burden through more efficient management of prescription refill requests.

THE BENEFITS OF USING ELECTRONIC PRESCRIPTIONS

Electronic prescriptions have been shown to:

- reduce medication errors by nearly sevenfold,⁵
- significantly reduce the risk of adverse drug events,⁶
- increase patient safety,
- to support telehealth consultations, and
- improve physician, nurse and staff efficiencies and reduce running costs through less time spent on activities such as prescription refills.⁷

Healthcare providers, such as pharmacists, have also been shown to prefer electronic prescriptions over paper prescriptions, based on criteria such as patient safety, effectiveness of care and efficiency of care.⁸

NEXT STEPS

- [Learning module](#): Electronic prescription models, benefits, legislative frameworks and roles and responsibilities.
- [Implementation guide](#): Instruction on how to set up electronic prescription capability.
- [User guide](#): Information on the electronic prescribing process, the patient journey and supporting patients.

-
- ¹ ADHA, '[Electronic Prescriptions Fact Sheet](#)', n.d., accessed 10 September 2020.
- ² Kaushal, R., Kern, L. M., Barrón, Y., Quaresimo, J., & Abramson, E. L., (2010), 'Electronic prescribing improves medication safety in community-based office practices', *Journal of general internal medicine*, 25(6), 530-536.
- ³ Ammenwerth, E., Schnell-Inderst, P., Machan, C., & Siebert, U., (2008), 'The effect of electronic prescribing on medication errors and adverse drug events: a systematic review', *Journal of the American Medical Informatics Association*, 15(5), 585-600.
- ⁴ Corley, S. T., (2003), 'Electronic Prescribing', *Topics in Health Information Management*.
- ⁵ Kaushal, R., Kern, L. M., Barrón, Y., Quaresimo, J., & Abramson, E. L., (2010), Electronic prescribing improves medication safety in community-based office practices, *Journal of General Internal Medicine*, 25(6), 530-536.
- ⁶ Ammenwerth, E., Schnell-Inderst, P., Machan, C., & Siebert, U., (2008), The effect of electronic prescribing on medication errors and adverse drug events: a systematic review, *Journal of the American Medical Informatics Association*, 15(5), 585-600.
- ⁷ Corley, S. T., (2003), 'Electronic Prescribing', *Topics in Health Information Management*.
- ⁸ Rupp, M. T., & Warholak, T. L., (2008), 'Evaluation of e-prescribing in chain community pharmacy: best-practice recommendations', *Journal of the American Pharmacists Association*, 48(3), 364-391.