

## Benefits to Proxy Access

Using online health services has become more and more popular over the last few years, making communication between patients, carers and healthcare professionals easier, faster and more convenient. Proxy access was developed to allow someone other than the patient to access and manage parts of their GP online services account. The proxy is given their own online access account (rather than using the patient's login details). Proxy ordering access enables care homes to order medication monthly and also interim/acute prescriptions via the practice's online portal. Using this portal provides care homes with an electronic audit trail of what medicines have been ordered. This removes the need to make copies of repeat slips prior to submission to the GP practice. Online ordering of medication should be less time consuming for care home staff.

## Evaluation and benefits

There are benefits of care homes ordering medication online for residents, GP practices and care homes, which grow as time goes on.

The [benefits calculator](#) estimates the potential time and cost savings for a GP practice, care home and pharmacy from the implementation of proxy access for online ordering of medication for care home residents.

Other benefits found by care homes, GP practices and pharmacies during the pilots were:

- Allows the care home to do anything a patient can do with regards requesting medications (repeat and acute medications)
- Fewer risks and issues associated with ordering, issuing, collecting, and dispensing repeat medications
- Fewer errors and queries (e.g. missing items, what has been ordered/collected from pharmacy)
- Improved clinical safety
- Easier and faster access, as care home staff can order at any time of the day or night
- An improved, easy to access audit trail
- Improved data security due to care home staff have their own username and password, which also saves time
- Better communications and working relationships between all
- Improved governance regulations
- Saves staff a lot of time, with fewer phone calls and pieces of paper to process due to secure email communications improving patient care
- Before online proxy ordering was in place, on average, Care home and GP staff would spend 3 days each month ordering medications for residents / patients (can vary depending on number of residents/patients)
- Since having online proxy ordering, on average, it now takes staff approx. 1 hour and 4 minutes to order / process medication orders (can vary depending on number of residents/patients)
- This equates to an average cost savings for each care home / GP surgery of around £432.49 per month (£5,189.88 per annum) (can vary depending on number of residents/patients)
- Working on the above averages, this releases around 3 days per month for staff to care for residents / patients and allows staff to concentrate on other patient care (can vary depending on number of residents/patients)
- Completion of the DSPT (Data Security Protection Toolkit) to enable the Proxy Access lends itself towards the CQC Assessment Framework: Well Led 6.7 'Are



*there robust arrangements (including appropriate internal and external validation) to ensure the availability, integrity and confidentiality of identifiable data, records and data management systems, in line with data security standards? Are lessons learned when there are data security breaches?*

Further information on Proxy Access can be found [here](#).



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## Testimonials for using Proxy Access for ordering medication in Care settings

South East Region



### Care Homes

*"We are all finding it a much easier way of ordering our monthly requirements and having the facility to add a note to an individual's order saves a lot of wasted time on the phone. It has also reduced the amount of medications not being received in a time honoured fashion."*

*"I have successfully registered on patient care with my home's doctors surgery and now can access and order medications for my residents which I have found quite straight forward and easy to do. Just follow the guidance and steps to register, you will then receive an email from your nominated surgery to say you have been successfully set up. When you click NEW under your name your residents/ patients names should come up click on the name you want and follow the process it's easier than it sounds, it really is. Good luck I hope you find it as easy as I have."*

*"I have found the online ordering, so timesaving and easy to implement, it was quick and simple to use. It has saved a lot of staff and management time, ordering and receiving, no following up with the surgery or Pharmacy, It is quick and simple to use, and has saved so much in wasted medication when not required, so much more efficient than the old way. The data is secure and between the home and the GP which again saves time and costs and I feel confident that I can communicate people's needs clearly and safely. We have seen a reduction in medication errors as we only have exactly what we need, and staff find the process is safer and easier for all - Such an easy system, which I am so glad to be using and saving on time and resources."*

### GP Practices

*"Implementation was very straight forward, we would just advise to make sure you have all documents before you start setting up. We are currently saving 1 -2 hours a week, as well as not having to deal with queries from the homes on prescriptions, so we save additional time on the phone calls and paper work and scripts no longer coming into the surgery. I think we have had 3 medication errors since our 20 bed care home went live in January. I am hearing from homes that they are finding it easy to use and they can order immediately, going direct to GP and cuts out further admin (reception as the middle man)."*

*"The easiest part of implementing Proxy Access is manually adding proxy users on the GP clinical system for each resident. Adding proxy users does not manually need to be done by a clinician, but instead could be done by anyone who has an NHS Smartcard and who have been adequately trained. The system cuts out any repeat prescription requests going to the wrong person within the practice as the request goes directly from the Care Home to the patient's GP. This reduces unnecessary contact between the care home and the GP practice so all contact that does come into the GP Practice from the care home is relevant/necessary- i.e. about acute care for the care home resident. If implemented effectively (i.e. with the relevant meetings before officially giving the Care Home Proxy Access), there will be very few requests asking for 'additional tablets/capsules to complete the cycle' from the Care Home. The system also ensures that GP's skills are being used appropriately when doing a Care Home ward round and to attend to the patient's acute care, rather than have to go through all the patient's medication with the nursing team."*

### Pharmacists

*"We have seen/found ; A reduction in medicines waste from avoiding duplication of orders, a reduction of prescription errors due to illegible writing and hand written prescription request notes. Potential to reduce anxiety for both practice and care home staff in handling paper work due to possible Covid 19 paper contamination with repeat medication paper slips and notes. The system is easy to navigate once set up. Potential to utilise other functions within the clinical system to further improve patient care e.g. INR results, blood test"*

*"The system is easy to implement and manually entering a new proxy user on the GP Clinical system doesn't require a great deal of skill or supervision so can be done by any one that has training and a smartcard. We have seen a reduction in polypharmacy and therefore a reduction in prescribing costs. I also used this as an opportunity to see whether or not the Homely Remedies policy was being utilised properly by the Care Home. Large organisations with multiple sites usually have a medicines management policy embedded, however, care homes were not utilising the policy as frequently as they could have been. Implementing proxy access highlighted the over-prescribing of paracetamol which could have previously been obtained by the Care Home from the Homely Remedies policy. The same was true for prescription quantities of emollients. Also, barrier creams and dressings were removed from repeat prescriptions completely (if nursing home patients only) as these should be obtained by the Care Home through a different channel."*

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