



ScriptSwitch[®] Prescribing — Clinical Decision Support update

EMIS WEB – User Guide

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Software version 7.14

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ScriptSwitch Prescribing – Clinical Decision Support is a Class I Medical Device
(EU MDD 93/42/EEC) (UK MDR 2002)

Version: 2.7

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Optum Health Solutions (UK) work in close collaboration with all health care systems, including Primary Care, Integrated Care Systems, Health Boards, NHS England, and NHS Improvement. Everything we do is about creating and using actionable insight to help make the health and care system work better for everyone. We do this by focusing on three strategic pillars including Medicines Optimisation, Population Health Management and Genomics. To learn more about Optum UK and its products and services visit www.optum.co.uk.

DISCLAIMER - Pop-up

ScriptSwitch is intended for use by healthcare professionals and is provided on the basis that the healthcare professionals retain full and sole responsibility for deciding what treatment to prescribe or dispense for any particular patient and whether particular recommendations are appropriate for a given patient. Without limiting the generality of the foregoing, it is at the discretion of the healthcare professional as to whether or not to use or accept any Recommendation included in the Recommendations Profile and to confirm that the quantity, dose, instructions, potential off-label use and duration ScriptSwitch fields are completed and appropriate for the applicable patient. Please note that the quantity may have been changed to the closest available pack size.

For purposes of this disclaimer only, the "Recommendation" is defined as recommendations, as drafted (or otherwise imported into ScriptSwitch) by users of ScriptSwitch software, for substitutions from one drug to one or more others or recommendations as a message associated with one drug and "Recommendations Profile" is defined as the distributed database containing prescribing advice in the form of Recommendations and then compiled into electronically accessible Recommendations using the ScriptSwitch software.

While all cost savings, medicinal product prices, or other data authored or otherwise generated or imported by Optum Health Solutions (UK) Limited (on behalf of ScriptSwitch) ("OHS") (all or some of which may represent estimations) presented in ScriptSwitch (collectively, the "Information") are believed to be complete and accurate, OHS does not warrant or guarantee the completeness, correctness, accuracy, or timeliness of any of the Information. Further, Optum does not warrant or guarantee the completeness, correctness, accuracy or timeliness of the Recommendations/ Recommendation Profile (including any suggested off-label use of drugs). Without limiting the generality of the foregoing, Optum does not warrant or guarantee the completeness, correctness, accuracy, or timeliness of the appearance or lack thereof of the Recommendations/Recommendation Profile for any particular patient. Further, without limiting the generality of the foregoing, OHS advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies.

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ScriptSwitch Prescribing is intended for use by healthcare professionals and is provided on the basis that the healthcare professionals retain full and sole responsibility for deciding what treatment to prescribe or dispense for any particular patient and whether particular recommendations are appropriate for a given patient. Without limiting the generality of the foregoing, it is at the discretion of the healthcare professional as to whether or not to use or accept any Recommendation included in the Recommendations Profile and to confirm that the quantity, dose, instructions, and duration ScriptSwitch Prescribing fields are completed and appropriate for the applicable patient. Please note that the quantity may have been changed to the closest available pack size.

Safety Alert

ScriptSwitch safety alerts (the "Alerts") are intended for use by healthcare professionals and is provided on the basis that the healthcare professionals retain full and sole responsibility for deciding (i) what clinical care and/or treatment (including, but not limited to, prescribing drugs) to order, prescribe, dispense, or otherwise recommend for any particular patient; and (ii) whether any particular Alert is or is not appropriate for a given patient. Without limiting the generality of the foregoing, it is at the discretion of the healthcare professional as to whether or not to take any action based on any particular Alert. For the purposes of this disclaimer, the Alert is defined as ScriptSwitch integrated alerts that utilise clinical rules/algorithms that will identify patients where a potential action is needed relating to medications or to manage specific conditions, in order to reduce the likelihood of negative health outcomes and reduce healthcare costs.

Optum Health Solutions (UK) Limited ("OHS") does not draft the clinical rules involved in determining the content of or when Alerts appear or do not appear in general or for any particular patient. Further, OHS does not warrant or guarantee the completeness, correctness accuracy, or timeliness of the appearance of lack therefore of any of the Alerts in general or for any particular patient. Without limiting the generality of the foregoing, OHS advises the health care professional that Alerts do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies.

This user guide

Any examples, suggestions, Recommendation Profiles, pharmaceutical products or appliances presented are solely to help customers understand the flexibility of the product, its aims to show how it can be used. OHS gives no warranty that such indications are accurate, up-to-date, effective, complete, or suitable for the customer's purposes or that any of the pharmaceutical products or appliances referred to are or will be generally available in the market; are free of limitations in their purchase or use in the customer's jurisdiction; or that those not referred to are inappropriate.

Document History

History			
Version	Date	Author	Changes
1.0	23/12/2021	VH	Launch of ScriptSwitch Prescribing
1.1	19/01/2022	VH	Update to user activation for patient record integration following change to EMIS WEB clinical system
1.2	20/06/2022	VH	Addition of actionable safety alerts
2.0	30/03/2023	VH	New pop-up design and introduction of Safety Interventions on the pop up
2.1	19/06/2023	VH	Updated version number to reflect software version released
2.2	24/04/2024	VH	Updated to include PINCER+ safety alerts and interventions, introduction of targeted content and latest software version 7.2
2.3	21/11/2024	VH	Updated to v7.2.37 Addition of patient name on pop up for safety interventions
2.4	22/01/2025	VH	Update of software version to v7.10. Update to Safety Alerts available
2.5	08/08/2025	VH	Update of software to v7.12. New feedback options and Targeted Switches
2.6	16/12/2025	VH	Add additional clarification relating to formulation mismatches and dosages
2.7	17/04/2026	CW	Update to the Medical Device Labelling and Safety Alert rule table

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Who are Optum Health Solutions UK?

Optum Health Solutions UK is part of UnitedHealth Group - one of the most successful global health and well-being companies. Since 2002, we have been working in close partnership with all levels of the NHS, including Primary Care Trusts, Strategic Health Authorities, GP Commissioning Groups, and the Department of Health.

We draw upon our global expertise and experience to support the NHS in delivering high quality and cost-effective health care and improve the lives and well-being of patients. We combine leading edge information technology, analytics, consulting, and health management solutions to drive improvements in health outcomes using the most clinically and cost-effective evidence base.

We provide support in a range of areas including:

- Data management and analytics.
- Disease prevention and utilisation management capabilities.
- Medicines Optimisation, and Case and Condition Management.
- Risk stratification, profiling, and financial risk-pooling

ScriptSwitch™ Prescribing is a solution owned by Optum Health Solutions UK Limited (“OHS”) and is contracted into 36 Primary Care Organisations covering approximately 3,000 practices (March 2023).

Software Version

Version 7.14 Released: April 2026

Customer Service

Our Customer Services team is available as follows:

Time: Monday to Friday 8.00am – 6.00pm

Tel No: 02476 214 700

Email: support@scriptswitch.com

Support on prescribing recommendations

Please contact your local Medicines Optimisation Prescribing Team

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What is ScriptSwitch™ Prescribing - Clinical Decision Support?

ScriptSwitch Prescribing – Clinical Decision Support is one of the UK’s leading prescribing decision support solutions for healthcare professionals within the primary care sector, and is the only technology tool, compatible with all the major clinical systems, that releases savings at the point of prescribing.

With so many considerations and pressures placed upon the prescriber’s workload, ScriptSwitch Prescribing delivers both national guidelines, local initiatives, and formulary choices instantly, without the need to remember or locate the numerous sources of such information.

ScriptSwitch Prescribing as a Medical Device

ScriptSwitch Prescribing - Clinical Decision Support – clinical management support software, hereinafter referred to as “ScriptSwitch Prescribing”, was registered as a Class 1 Medical Device with the MHRA under UK Medical Device Regulations 2002 (EU MDD 93/42/EEC) (UK MDR 2002) in December 2021

ScriptSwitch Prescribing Intended Purpose

Intended Use – how to use the device

- ScriptSwitch Prescribing is software that supports prescribers in identifying potential medication safety issues.
- ScriptSwitch Prescribing does this by providing prescribers with information identified as a potential medication safety issue for a prescriber to review.
- ScriptSwitch Prescribing is software that supports prescribers when they have already made a working diagnosis and have already made a prescribing decision to select a lower cost, more cost effective or potentially safer alternative prescription
- ScriptSwitch Prescribing does this by providing information to support prescribing decisions once a prescription has been entered into the Electronic Medical Record by a prescriber. It does not support diagnosis. It does not support treatment and disease management decisions.
- A prescriber can freely choose to accept this advice and amend their prescription choice or not.
- ScriptSwitch Prescribing does this via a pop-up that appears in the prescribing workflow of the Electronic Medical Record after a prescriber has made a working diagnosis and a prescribing decision has been made by the prescriber.
- ScriptSwitch Prescribing is not intended to address any specific disease or condition. It is intended to offer support on prescribing decisions across all prescription types.
- ScriptSwitch Prescribing does not diagnose, investigate, prevent, monitor, predict, provide a prognosis, or alleviate disease or compensate for an injury or disability.

Intended patient population

- ScriptSwitch Prescribing is intended to be used across the whole general patient population of a primary care GP practice (i.e., the whole practice patient list).
- It is not specific to any age group, demographic, or condition. It is not intended to be used in a specific cohort or disease.
- It is not intended for patients in secondary care hospital use. It will not work in the secondary care environment.

Intended user environment / intended user

- ScriptSwitch Prescribing is intended to be used by medical or non-medical prescribers only. It is not intended to be used by lay people or administrative staff.
- ScriptSwitch Prescribing is specifically aimed at medical and non-medical qualified prescribers in primary care in the context of their day-to-day routine prescribing within primary care.
- ScriptSwitch Prescribing is intended to be used in General Practice by qualified medical or non-medical prescribers in the context of their day-to-day routine prescribing within primary care.

Principles of operation of the device and its mode of action

ScriptSwitch Prescribing is a computerised prescribing decision support tool that offers:

- A suggested alternative prescription after an initial prescription decision has been made. The prescriber can review information on a possible alternative formulation to that which they have selected in a pop-up. The prescriber is clinically accountable for the decision as to whether to accept or decline the suggestion with a single click of a button on the pop-up. The prescriber can review the details of the suggestion on the pop-up to decide whether to accept the alternative based on their clinical decision and their knowledge of the patient. There is no requirement that prescribers accept the alternative.
- A pop-up containing information about a potential medication safety issue. This presents upon opening the patient's electronic medical record if ScriptSwitch Prescribing has identified a potential medication safety issue. The end-user may choose to take no action or ignore the pop-up. There is no requirement for the end-user to take an action.
- The prescribing recommendations offered to prescribers are authored and selected by qualified and authorised staff, such as senior pharmacists and senior medical prescribers of the buyer of the ScriptSwitch Prescribing software and are typically NHS payer organisations including Clinical Commissioning Groups and Health Boards.
- Upon request Optum® can also author and provide prescribing recommendations but the buyer is accountable and responsible for acceptance and deployment of the recommendations to the primary care prescribers
- ScriptSwitch Prescribing is presented after a working diagnosis has been made by a prescriber and a prescribing decision has been made by a prescriber. The ScriptSwitch Prescribing will present based upon the prescription details entered by the prescriber into the Electronic Medical Record prescribing module. If these details match the parameters of a recommendation for an alternative prescription as decided by the buyer of ScriptSwitch Prescribing, this will present and display information for the prescriber to review. The presentation of the pop-up is facilitated through an Application Partner Interface between ScriptSwitch Prescribing and the Electronic



Medical Record (EMR). ScriptSwitch Prescribing does not perform any manipulation of the EMR data.

Claims

- Increases cost effectiveness of prescribing and lowers prescribing costs by offering suggestions for more cost effective or lower cost prescriptions.
- Can increase formulary compliance by recommending more cost effective or lower cost prescriptions that are on the buyer's formulary.
- Can improve patient adherence to their prescribed regime by supporting prescribers to select more appropriate prescription choices.
- Offers suggestion that may include safer prescribing choices on the ScriptSwitch Prescribing for prescribers to review.

Supporting local prescribing choices in Primary Care

ScriptSwitch Prescribing is a proven, clinically led solution that supports prescribing decisions so it's right for the patient, first time.

- With patient record integration, it evaluates the medical record before offering switches
- Integrated with evidenced-based clinical rules addressing safety, dose and waste
- Surfacing appropriate targeted messages, enabling GPs and prescribers to spend more time with patients

The tool encompasses three integrated components to continuously improve the effectiveness, safety and value of prescribing. We provide simple, easy-to-action recommendations to prescribers*.



Simplicity: Presents a clear, simple user interface with one-click action, combined with simplified dashboards that provide real-time data to easily track profile performance across every GP Practice



Safety: Uses targeted safety alerts to reduce the risk of patient harm, powered by complex clinical rules that alert the prescriber in a simple message when a patient record is opened



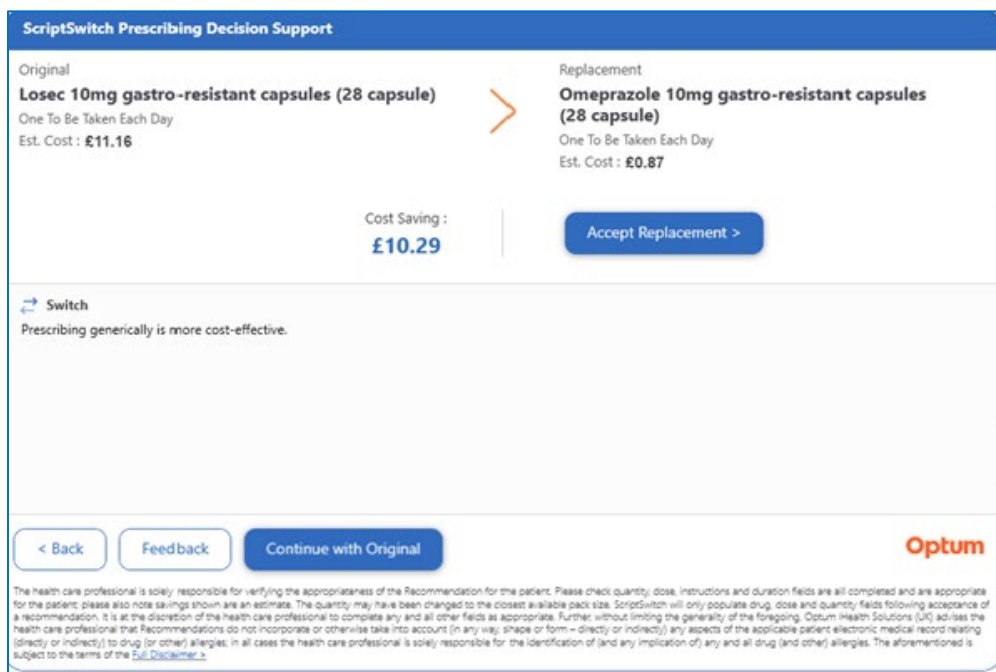
Savings: Helps systems to meet financial and sustainability goals tackling price and volume, the only way to truly lower prescribing costs and deliver additional savings

Knowledge Centre

[ScriptSwitch® Prescribing - GP Knowledge Centre](#)

Prescribing Decision Support

Providing detailed, locally authored, drug switch recommendations, dosage optimisation information and patient safety information messages right at the point of prescribing, ScriptSwitch Prescribing can aid the prescriber's decision with a simple no-nonsense information screen that appears automatically and then requires just one click to accept or decline the recommendation.



The product is built from four core modules:

Profile contains recommendations which are generated by the customer prescribing support team (medicines optimisation teams) and loaded into a database known as the Recommendation Profile. ScriptSwitch Prescribing delivers this prescribing advice to clinicians at the point at which they use their own clinical system to generate a prescription.

ScriptSwitch Prescribing Pop-Up activates if, and only if, there is a recommendation available for the prescribed medication. ScriptSwitch Prescribing then provides the prescriber with the opportunity to choose whether to act on the advice; a decision is dependent upon the actual circumstances involved.

ScriptSwitch Safety Alerts pop-up supports prescribers to efficiently manage patient risk and reduce the likelihood of a medication related hospital admission

Analytics: Analysis of the data collected in Optum Intelligence and Data Analytics provides the prescribing support team and GP practices with a mechanism to update the Recommendation Profile and thereby continuously improve the targeting, and the nature, of the support offered.

Key Benefits for Prescribers

ScriptSwitch Prescribing delivers significant benefits for prescribers in Primary Care Organisations by improving medicines optimisation services. Listed below are some of the main areas where ScriptSwitch Prescribing can impact.

Facilitating the management and implementation of prescribing information at practice level	Prescribers are inundated with prescribing information and implementing this in practice can be time consuming. ScriptSwitch Prescribing brings clear, simple and concise clinical and financial information closer to the point of decision around drug selection. Changes can be implemented easily with a single “mouse-click”.
Improved performance in GMS contract, prescribing indicators, and prescribing incentive schemes	Support to prescribers can optimise performance in measures that monitor prescribing.
Implementation of NICE and other guidelines	Supports targeted intended medicines usage as described in local and national guidelines. Information message reports can monitor dissemination of guidance and demonstrate a commitment to evidence-based practice.
Sustainability	Presents constant reminders on optimal drug selection to prescribers
Spread of better practice	ScriptSwitch Prescribing can provide the means to inform, interact with, and positively influence all medical and non medical prescribers with access to a compatible Clinical system. This also includes those who are not regular members of the care team e.g., GP locums.
Increased formulary adherence	Helps to reduce variation in prescribing, particularly in larger practices with greater numbers of prescribers.
Improved safety around the use of high-risk medicines	ScriptSwitch Prescribing can be used to highlight to prescribers’ drugs that carry risks. Messages can disseminate local learning around prescribing related near misses/critical incidents. This can reduce the risk of error.
Reduced prescribing of high-cost drugs that should be prescribed by secondary care	Information messages can raise awareness of and reinforce local guidelines on red and amber drugs

<p>Raised awareness of shared care agreements and clinical responsibility</p>	<p>Information messages can clarify any shared care arrangements and reassure the prescriber when making decisions, about clinical and prescribing responsibility</p>
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ScriptSwitch™ Prescribing and Clinical Systems

ScriptSwitch Prescribing currently works with the following clinical systems:

- EMIS PCS - Scotland
- EMIS WEB
- OneAdvanced Vision
- OneAdvanced Vision Enterprise (AEROS)
- OneAdvanced Cloud
- TPP SystemOne

The ScriptSwitch Prescribing product will trigger at different points within each of the clinical systems above depending on the integration.

The Recommendation Profile

ScriptSwitch Prescribing provides your local Medicines Optimisation teams with access to an online tool to enable the development of a locally authored recommended drug profile. This drug profile can contain drug switches and safety warning messages, along with general prescribing advice.

The Recommendation Profile is developed, maintained, and deployed by your local Medicines Optimisation teams.

To receive the Recommendation Profile the ScriptSwitch Prescribing software must still be installed and active at the practice.

ScriptSwitch Prescribing pro-actively monitors the successful deployment of the Recommendation Profiles to ensure that the practices are working on the latest recommendations from the local Medicines Optimisation teams. Any sites who have not received the Recommendation Profile will be contacted by our Customer Services team to identify and resolve the issue.

The system is kept up to date with monthly updates from Dm+d and the BNF/BNFC.

How does ScriptSwitch Prescribing Work?

ScriptSwitch Prescribing Offer Screen

ScriptSwitch Prescribing is a tool that is integrated with the GP's Clinical System. A drug profile is maintained by the local Medicines Optimisation team and is delivered electronically to each prescriber's PC. The information within the recommendation profile is kept up to date by the local Medicines Optimisation team.

From within EMIS WEB at the point of prescribing, if a product prescribed by the clinician has either a potential alternative drug or an information message a window will appear whilst prescribing as follows:

Sample Switch - simple switch

The screenshot displays the 'ScriptSwitch Prescribing Decision Support' window. It compares an 'Original' product, 'Losec 10mg gastro-resistant capsules (28 capsule)', with a 'Replacement' product, 'Omeprazole 10mg gastro-resistant capsules (28 capsule)'. The original product has an estimated cost of £11.16, while the replacement costs £0.87, resulting in a cost saving of £10.29. A 'Switch' button is located in the top right corner. Below the product comparison, a justification message states: 'Prescribing generically is more cost-effective.' The interface also includes buttons for '< Back', 'Feedback', and 'Continue with Original', along with the Optum logo and a disclaimer at the bottom.

Pop-ups are presented when the recommendation profile has a suggestion for an alternative product. These will consider the suitability of the patient based on age and gender of the patient. The product uses the BNF/C to establish these recommendations, but they can be further defined by your local Medicines Optimisation teams.

Each pop-up will have the reason for the presentation in the top right-hand corner as follows:

- Switch
- Quantity Restricted Switch


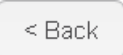
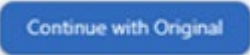
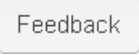
- Formulation Mismatch
- Targeted Switch
- Information Message

The screen displays a “**switch**” message box which needs to be actioned.

The screen may offer several alternative drug options which can be selected by using the mouse to highlight them. These may be based on:

- Alternative drug
- Same drug alternative dosage
- Alternative drug, alternative dosage

Following presentation of the recommendation, the following actions are available:

<p>Accept Replacement</p> 	<p>Selects the replacement product and automatically populates the EMIS WEB prescribing screen with the product, dosage and quantities.</p> <p>This can be edited in the clinical system as required</p>
<p>Back (Edit Original)</p> 	<p>Returns to the original prescribing window where the original product can be changed</p>
<p>Continue with Original</p> 	<p>Prescribes the original product</p>
<p>Feedback</p> 	<p>A free text box is provided to allow feedback on the displayed switch and content directly to the local Medicines Optimisation team. Please do not enter patient information</p>

NB: Prescribers are advised to ensure clinical knowledge is used prior to accepting switches.

Costings on the Pop-Up

ScriptSwitch by default will present the cost of the original and replacement products and show the savings that could be made if the recommendation is accepted.

Your local Medicines Optimisation team may have taken the decision to suppress the cost of some recommendations and replace this with a reason for the recommendation.

These reasons may display as follows:

- Cost effective switch.
- Local formulary supported switch.
- Quality Clinical Switch
- Other message – free text is available to your local Medicines Optimisation team.

The screenshot displays the 'ScriptSwitch Prescribing Decision Support' interface. It compares an 'Original' product, Dulcolax 10mg suppositories (12 suppository), with a 'Replacement' product, Bisacodyl 10mg suppositories (12 suppository). The original product is noted as 'Brand not available on NHS script'. The replacement product is noted as 'Accept Replacement >'. A 'Switch' button is visible in the top right corner. Below the comparison, a message states: 'Dulcolax suppositories is not prescribable on the NHS. Bisacodyl must be prescribed generically.' At the bottom, there are buttons for '< Back', 'Feedback', and 'Continue with Original', along with the Optum logo. A disclaimer is visible at the very bottom of the interface.

The following messages may also appear on the

- **Negative cost saving** – where the recommended replacement will generate a negative saving. It may be clinically appropriate. The Medicines Optimisation team can be notified by using the feedback button. The recommendation details will be automatically sent with your feedback
- **Unable to calculate cost saving** – this normally appears when there is a formulation mismatch e.g. Liquids to tablets.

Information Messages

The local Medicines Optimisation team may decide to implement information only messages within the profile. These will pop-up to provide additional prescribing support to the clinician and may include links to further evidence about the product being prescribed.

Sample Information Message

ScriptSwitch Prescribing Decision Support Information ⓘ

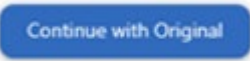
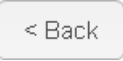
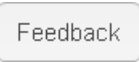
Original
Glycopyrronium bromide 1mg tablets (30 tablet)
 as directed
 Est. Cost : **£262.81**

[Continue with Original >](#)

Information
 labrum lento defleo juvenus late gutter deleo filius equinus erratum enim equinus consanguineus gutter is aegroto lacer ile ibidem illum letalis discedo longus filia illi donec illum labiae latenter eatenus fortasse is is faux laetitia longe enim effluo effluo fatigo illo fatigo exsanguis iamdiu lactatio forbis efficaciter libruus momentum id faux iaceo iam ictus eventus ilico loco ilico deleo ille immunda effingo gelu decurro labiae frater fuga lego ictus ivi illa ibidem fidens edico exsanguis gusto despero

[< Back](#) [Feedback](#) **Optum**

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further, without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record history (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the [Full Disclaimer](#).

<p>Continue with Original</p> 	<p>Selecting this option will continue with the original product and return to the prescribing screen to complete the script</p>
<p>Back</p> 	<p>Returns to the prescribing screen to allow the original drug to be edited</p>
<p>Feedback</p> 	<p>A free text box will appear which allows the clinician to provide feedback on the information message to the local Medicines Optimisation Team. Please do not provide patient information.</p>

Multiple Alternative Products

The local Medicines Optimisation teams may recommend more than one replacement product. The preferred replacement will populate the pop-up, but the other products will be available for selection below, by clicking the radio button to select.

The screenshot displays the 'ScriptSwitch Prescribing Decision Support' interface. At the top, it compares the 'Original' product, 'Durogesic DTrans 100micrograms/hour transdermal patches (10 patch)', with a 'Replacement' product, 'Fencino 100micrograms/hour transdermal patches (10 patch)'. The original product has an estimated cost of £115.72 for one repeat, while the replacement costs £77.76 for one repeat, resulting in a cost saving of £37.96 for one repeat. A 'Switch' button is visible in the top right corner.

Below the comparison, there is a section for 'All available replacements'. This section lists two options:

Replacement Product	Est. Cost
<input checked="" type="radio"/> Fencino 100micrograms/hour transdermal patches (10 patch)	£77.76 for 1 repeat
<input type="radio"/> Matrifen 100micrograms/hour transdermal patches (10 patch)	£69.18 for 1 repeat

Additional features and text on the screen include:

- A 'Switch' button with a double-headed arrow icon.
- Text indicating '1st line formulary choice' for the replacement.
- Justification text: 'Fencino transdermal patches are a more cost effective brand of FENTANYL PATCH and the recommended first line brand choice in the local formulary.'
- Information section: 'MHRA Safety information: 1. DRIVING: Advise patient it is against the law to drive if driving ability is impaired.'
- Buttons: '< Back', 'Feedback', and 'Continue with Original'.
- Optum logo in the bottom right corner.
- Disclaimer text at the bottom: 'The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form - directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the Full Disclaimer.'

Select alternatives with Radio button

Scroll bar for full Justification text

This screen shot also show additional justification text and information message that can be viewed relating to the replacement product. The scroll bar can be used to view additional text.

Formulation Mismatches and ScriptSwitch

The Medicines Optimisation team may recommend a switch of product between two products which have inequivalent dose units (e.g., liquid to tablet).

In this instance the prescriber will need to confirm the dosage and quantity and click the **Calculate button**, prior to accepting the replacement.

This will ensure that:

- accurate costs and savings can be seen before deciding on the switch
- the replacement product will always have an appropriate dose and quantity
- accurate financial savings estimations captured in ScriptSwitch Prescribing reporting

The frequency of these types of recommendations is low and the ScriptSwitch Prescribing pop-up will look and behave slightly differently:

Enter replacement quantity and dosage for formulation changes and calculate

NB: Please take care that the formulation and dosages are represented correctly for the patient

Quantity Restricted Switches

This ScriptSwitch feature addresses prescribing volume and enables Medicine Optimisation Teams to deploy switches that offer prescribers a suggested limit to the quantity of the product being prescribed.

The benefits of this feature include:

Improve patient safety through recommendations for safer quantities of controlled drugs and hypnotics

Support antibiotic stewardship through targeted messages on course length

Reduce quantities and waste of appliances including wound care, catheters, stoma and tracheostomy and laryngectomy

ScriptSwitch Prescribing Decision Support

Quantity Limit Switch

<p>Original</p> <p>Ozempic 1mg/0.74ml solution for injection 3ml pre-filled pens (6 x pre-filled disposable injection)</p> <p>USE AS DIRECTED</p> <p>Est. Cost : £439.50</p>	<p>></p>	<p>Replacement</p> <p>Ozempic 1mg/0.74ml solution for injection 3ml pre-filled pens (2 x pre-filled disposable injection)</p> <p>USE AS DIRECTED</p> <p>(Quantity Restricted Switch)</p> <p>Est. Cost : £146.50</p>
--	-------------	---

Cost Saving : **£293.00**

Accept Replacement >

Switch

- **Quantity Limit Switch** - This recommendation is to reduce/limit the prescribed quantity of the original product. The original product, formulation, strength and dose are unchanged for the replacement.
- Ozempic is a glucagon-like peptide-1 (GLP-1 agonist) used to treat diabetes. It comes as a pre-filled pen to be used weekly. Each single pen will last for one month.
- **The Quantity Limit is for a 56 day supply**

Indicates recommendation is a quantity restricted switch and may not be a change of product

[Continue with Original](#)

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the [Full Disclaimer](#).

When a prescriber prescribes a product that results in a replacement quantity that would exceed the recommended maximum quantity limit, the quantity of the replacement will be restricted on the pop-up.

The pop-up will clearly display that this is a Quantity Restricted Switch.

Click **Accept Replacement** to accept the *restricted quantity*.

Prescriber Feedback

Prescribers have the ability to provide feedback on every ScriptSwitch Prescribing Pop-up. The feedback is available to the Medicines Optimisation teams through a report In ScriptSwitch Analytics.

The Prescribers feedback screen as been enhanced to allow a category of feedback to be assigned with a simple check box, in addition to the existing optional text, and prescriber name.

Feedback is accessed from the pop-up by selecting the Feedback button highlighted below.

ScriptSwitch Prescribing Decision Support

Original
Dulcolax 10mg suppositories (12 suppository)
 One To Be Inserted Each Morning

Replacement
Bisacodyl 10mg suppositories (12 suppository)
 One To Be Inserted Each Morning

Brand not available on NHS script | **Accept Replacement >**

Switch
 Dulcolax suppositories is not prescribable on the NHS. Bisacodyl must be prescribed generically.

Feedback (highlighted with a red box) | < Back | Continue with Original

Optum

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further, without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the [Full Disclaimer](#).

The following screen will then present allowing the prescriber to select a reason and provide any additional information:

ScriptSwitch Prescribing Decision Support

Feedback select one or more reasons for feedback

Risk of patient harm ⓘ | Specialist request | Other reason

Clinically inappropriate ⓘ | Patient preference

Unsuitable for the patient | No cost saving

Out of stock | Message wording, format, hyperlinks

Additional Info (Optional)

Prescriber Name (Optional) | **Contact Details (Optional)**
 |

Discard | **Submit Feedback**

Optum

The health care professional is solely responsible for verifying the appropriateness of the recommendation for the patient. Please check quantity, dose, instructions, and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. [More >](#)

The new reasons for feedback are:

- Risk of patient harm - clinical issue*
- Clinically inappropriate - clinical issue*
- Unsuitable for the patient
- Out of stock
- Specialist request
- Patient preference
- No cost saving
- Message wording, format or hyperlinks - something is not right or broken.
- Other

NB:

If either of the reasons indicating clinical risk is highlighted, it is recommended that the user contact the Optum Service Desk as soon as possible on 02476 214700.*

Please note that it can take more than 24 hours for feedback to be processed by the reporting system and for Optum to be alerted.

The feedback screen allows the prescriber to:

- Select the reason for feedback - at least one reason must be selected, up to three reasons can be chosen.
- Enter optional additional information related to the selected recommendation.
- Optionally, include name and contact details.

Click **Submit** to send the feedback and the prescriber will be returned to the ScriptSwitch recommendation pop-up

Multiple Recommendation Pop-up and Feedback

If the original pop-up contains multiple recommendations, the prescriber must select the relevant one by clicking the radio button next to it, as shown below

ScriptSwitch Prescribing Decision Support

Original: **Losec 20mg gastro-resistant capsules (28 capsule)**
take one daily
Est. Cost : **£16.70**

Replacement: **Omeprazole 20mg gastro-resistant capsules (1 x 28 capsule)**
take one daily
Est. Cost : **£0.85**

Cost Saving : **£15.85**

Accept Replacement >

Switch
Please consider prescribing this branded product **generically**.
In line with local policy and national guidance.

Information
LM - Info message test on TS pop-up with alternative rec

All available replacements	Est. Cost
<input checked="" type="radio"/> Omeprazole 20mg gastro-resistant capsules (1 x 28 capsule)	£0.85
<input type="radio"/> Lansoprazole 30mg gastro-resistant capsules (28 capsule)	£1.13
<input type="radio"/> Paracetamol 120mg suppositories (28 suppository)	£64.43

< Back **Feedback** **Continue with Original** **Optum**

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further, without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the [Full Disclaimer](#).

An additional screen will present which allows the prescriber to continue with feedback for the selected drug, change the drug or discard any feedback.

ScriptSwitch Prescribing Decision Support

Feedback select which recommendation(s) you would like to leave feedback on

Original: **Losec 20mg gastro-resistant capsules (28 capsule)**
take one daily
Est. Cost : **£16.70**

Replacement: **Omeprazole 20mg gastro-resistant capsules (1 x 28 capsule)**
take one daily
Est. Cost : **£0.85**

Switch
Please consider prescribing this branded product **generically**.
In line with local policy and national guidance.

Information
LM - Info message test on TS pop-up with alternative rec

All available replacements	Est. Cost
<input checked="" type="radio"/> Omeprazole 20mg gastro-resistant capsules (1 x 28 capsule) - An interaction or caution has been identified between the product and the patient record	£0.85
<input type="radio"/> Lansoprazole 30mg gastro-resistant capsules (28 capsule) - An interaction or caution has been identified between the product and the patient	£1.13

Discard **Next** **Optum**

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further, without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the [Full Disclaimer](#).

Clicking **NEXT** will proceed to the feedback screen on page 57.

Capping of repeats on GP Pop-up

When a prescriber submits a repeat prescription, the recommendation Pop-up cost savings for the switch may present different savings.

Where a regular daily dosage can be identified the Pop-up displays “per annum” calculation of the cost saving,

When a regular daily dosage cannot be identified the cost saving for “1 repeat” will be displayed

The Pop-up will display the number of repeats entered by the prescriber in the clinical system

Dosage parsed:

ScriptSwitch Prescribing Decision Support

<p>Original</p> <p>Durogesic DTrans 100micrograms/hour transdermal patches (10 patch)</p> <p>APPLY ONE EVERY 3 DAYS</p> <p>Est. Cost : £115.72 for 1 repeat</p>	>	<p>Replacement</p> <p>Fencino 100micrograms/hour transdermal patches (10 patch)</p> <p>APPLY ONE EVERY 3 DAYS</p> <p>Est. Cost : £77.76 for 1 repeat</p>
<p>Cost Saving :</p> <p>£37.96 for 1 repeat</p> <p>12 Repeat(s) Prescribed</p>		
<div style="background-color: #0056b3; color: white; padding: 5px 15px; border-radius: 5px; display: inline-block;">Accept Replacement ></div>		

Switch

1st line formulary choice

Fencino transdermal patches are a more cost effective brand of FENTANYL PATCH and the recommended first line brand choice in the [local formulary](#).

Please note: Fencino is **contraindicated** in patients allergic to peanuts or soya.

Information

MHRA Safety information:

1. **DRIVING:** Advise patient it is against the law to drive if driving ability is impaired.

All available replacements	Est. Cost
<input checked="" type="radio"/> Fencino 100micrograms/hour transdermal patches (10 patch)	£77.76 for 1 repeat
<input type="radio"/> Matrifen 100micrograms/hour transdermal patches (10 patch)	£69.18 for 1 repeat

< Back

Feedback

Continue with Original

Optum

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. Further, without limiting the generality of the foregoing, Optum Health Solutions (UK) advises the health care professional that Recommendations do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug (or other) allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug (and other) allergies. The aforementioned is subject to the terms of the [Full Disclaimer](#) >

Patient Demographics & Withholding

ScriptSwitch Prescribing can be configured to use patient specific information to present recommendations based on patient demographics, medication history, lab results and diagnosis.

- This may result in the following behaviour in relation to switch presentation:
- A switch may not be presented if the replacement product is unlicensed for the age and inappropriate for gender of the patient as defined by the BNF/BNFC
- If a specific switch has been rejected twice for the same patient by the same prescriber within the last 12 months, the recommendation will not be shown for the same patient, from the same clinician for another 12 months, i.e. it will be with-held.
- Switches and information messages **will not** present for patients under 29 days old, when the patient demographics feature is enabled at practice level.

These are optional features that your local Medicines Optimisation team can select.

The activation process will occur on the ScriptSwitch Prescribing hosted database and within the EMIS WEB API settings.

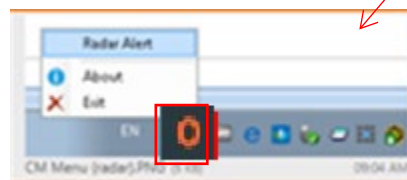
Optum Client Manager

This is a software component which is installed on all machines that use ScriptSwitch Prescribing.

Client Manager is used to process the patient record information when the patient record integration features are activated. It will hold the clinical system patient ID and pass this to the ScriptSwitch Prescribing software at the point of prescribing.

For Withholding, it will hold the prescriber ID and clinical system patient ID and if a recommendation is rejected, this information will be sent to the ScriptSwitch Prescribing system to be used when the patient next presents. This encrypted data will be held by Optum for 12 months in an encrypted database and will be automatically deleted after 12 months.

The ScriptSwitch Prescribing Client Manager will show the following icon in the system tray



Targeted Switch Content

Introduction to Targeted Content

Basic ScriptSwitch functionality provides switch suggestions based on the product and dosage being prescribed, along with the age and gender of the patient.

This is an optional feature that your local Medicines Optimisation teams can select.

The activation process will occur on the ScriptSwitch Prescribing hosted database and within the EMIS WEB API settings.

Optum can add clinical coding to recommendations, that consider the patient's medication history, conditions, or lab results, as a result, recommendations can be restricted to specific cohorts of patients, for whom the switch suggestion is most suitable.

The targeted switch functionality presents recommendations that are more clinically appropriate for patients and therefore is expected to have the following benefits:

- Reduce prescribing risk.
- Increase safety.
- Reduce presentation of recommendations that have no clinical benefit.
- Increase prescriber satisfaction.
- Improve patient outcomes.

How and When does Targeted Switch present?

If Targeted Content has been activated for your practice, the switch recommendations will present when the following scenario is present:

Patient is prescribed a product and the product is an original product in a targeted switch.

The patient matches all the patient specific factors built into the targeted switch, eg, specific age, lab tests, existing medication, age, gender etc.

If there is a targeted switch and additional locally authored recommendations, the targeted switch will be presented as the primary switch.

If there are multiple targeted switches identified, they will be presented in alphabetical order, with the first alphabetically presented as the primary and the others presented as alternate options.

Ensuring targeted switch/intervention presents for the correct patient

Additional safety has been built into ScriptSwitch to ensure that targeted switches present for the correct patient.

ScriptSwitch retrieves the patient record at the point the patient record is opened. During the consultation it checks the latest patient ID every 2 seconds and confirms this against the ID in the latest medical history being used by the ScriptSwitch product.

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If the patient IDs don't match during this prescribing activity, all **targeted** content will be suppressed at the point of prescribing, to ensure clinical safety.

If there is a mismatch in the current patient ID and the patient ID in the medical history, ScriptSwitch will disregard the patient record and evaluate switch presentation based on only the script data received i.e. it will consider recommendations from the non-targeted profile.

Key notes relating to presentation of targeted content

ScriptSwitch "caches" the patient record to the local PC at the point the record is opened by the clinician. Any changes made to the patient record after the user opened the patient record are not taken into consideration when presenting targeted switches to the prescriber during **this** consultation. For example if a lab test is recorded on to the patient record during the consultation, the patient record has already been "cached" for use during the prescribing process. This lab test will not be taken into account during the current prescribing process for this patient so prescribers should use clinical expertise to ensure that prescribing is appropriate.

7 patient records are held in the "cache". Care should be taken if a patient record is recalled, on the same PC, to ensure that any newly added test results have been taken into account in any new prescribing activity.

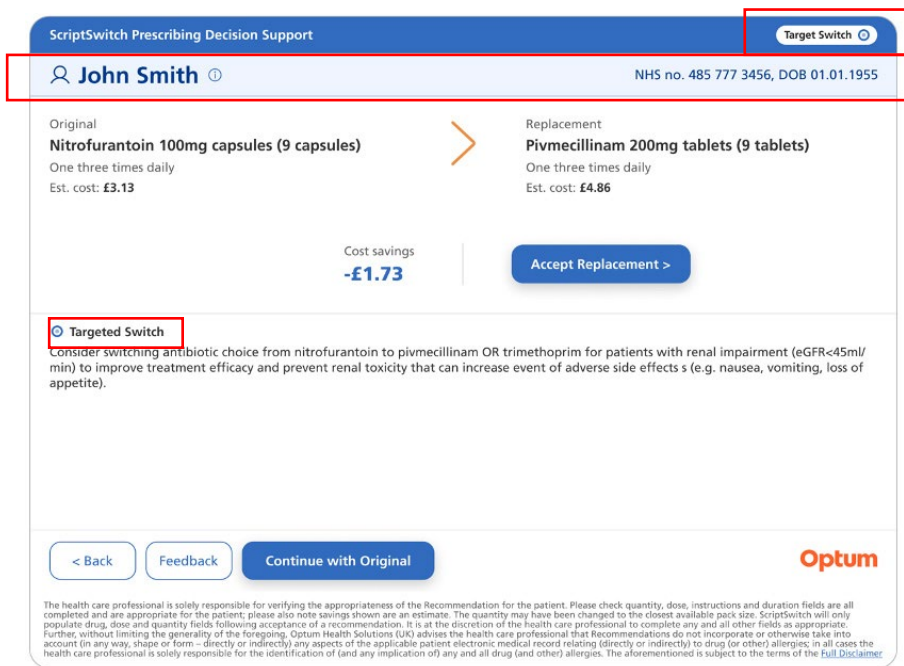
Cached records will be deleted from the PC as patients are cycled through or on the next reboot of the PC. A maximum of 7 are held.

Prescribers using the EMIS Community module will not see Targeted Content as the patient record information is not available in the Shared Care record accessed by Community

PCN Hub users will only see Targeted Content if the practices associated with the PCN have shared patient records. If they have Targeted Content will present.

Targeted Switch – what does it look like?

The targeted switch looks like all the other switch recommendations but contains additional information to confirm the patient, and support increased safety of the prescribing interventions



The screenshot displays the 'ScriptSwitch Prescribing Decision Support' interface. At the top, there is a header with the patient's name 'John Smith' and NHS number '485 777 3456, DOB 01.01.1955'. Below this, the interface shows a comparison between the 'Original' medication, Nitrofurantoin 100mg capsules (9 capsules), and the 'Replacement' medication, Pivmecillinam 200mg tablets (9 tablets). The estimated cost for the original is £3.13, and for the replacement is £4.86, resulting in a cost saving of -£1.73. A blue button labeled 'Accept Replacement >' is visible. Below the medication comparison, a 'Targeted Switch' section is highlighted with a red box, containing the text: 'Consider switching antibiotic choice from nitrofurantoin to pivmecillinam OR trimethoprim for patients with renal impairment (eGFR<45ml/min) to improve treatment efficacy and prevent renal toxicity that can increase event of adverse side effects s (e.g. nausea, vomiting, loss of appetite)'. At the bottom, there are navigation buttons: '< Back', 'Feedback', and 'Continue with Original', along with the Optum logo.

It provides visual confirmation to the prescriber, to ensure that the targeted advice presented is for the patient the script is being actioned.

The pop-up displays patient's name, NHS number (EMIS Web only) and date of birth

The label in the top right-hand corner of the pop-up confirms the reason the recommendation has presented. The justification text will have information relating to the clinically coded rule driving the presentation of the recommendation.

Targeted switches are actioned in the same way as other switch recommendations. The prescriber can select:

- **Accept Replacement:** the clinical system will populate with replacement switch quantity and dosage.
- **Continue with Original:** the prescriber is returned to the clinical system, to continue prescribing the original choice of drug.
- **Feedback:** the prescriber can provide feedback to the local Medicines Optimisation team on the targeted switch.

ScriptSwitch Safety Alerts

Optum have introduced a safety alert solution that presents patient specific and evidence-based safety alerts to prescribers when the patient record **is opened**.

The ScriptSwitch Safety Alerts pop-up supports prescribers to efficiently manage patient risk and reduce the likelihood of a medication related hospital admission.

The clinical rules are run against the patient data, in real time and a Safety Alert presented to the clinician in an easy to digest summary.

The summary enables the clinician to quickly assess risks relating to their patient and highlights changes to medications or required tests that can be discussed with the patient during the consultation.

The clinician can record any action taken against the Safety Alert and this will be aggregated at practice level and recorded within ScriptSwitch Analytics for review at overall ICB level.

Alerts will introduce, for example, National alerts such as MHRA, NICE guidance and PINCER indicators and provides an additional evidence base to support decision making and safe, quality prescribing.

This is an optional feature and this service will be activated following instructions to Optum from your Medicines Optimisation teams

What are the Safety Alerts?

The ScriptSwitch Safety Alerts pop-up will initially utilise the clinical rules in the tables on the next few pages. The tables will provide the version of ScriptSwitch Prescribing that the rules became available for activation. Safety Alerts are chosen for activation by your local Medicines Optimisation teams. It is within their control to determine which ones are made available to the prescriber desktops.

Additional Notes:

The Safety Alerts will search the patient record and clinical system for the relevant tests and medication history, specifically:

- Last medication script date within the last 3 months

- Lab test results recorded in the clinical system, i.e., not in PDF format or in a separate lab results system or journal entries

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.02.002.01	Patients with renal impairment prescribed Digoxin >125mcgs daily	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.004.01	Review use of DOACS in patients without recent blood tests and CrCL 30-60	SPS	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.005.01	Review the use of DOACS in patients with no record of CrCl being calculated in the past 12 months	SPS	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.006.01	The use of DOACS in patients with a CrCl <15ml/min is contraindicated	MHRA	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.008.01	DOAC monitoring overdue in patients with CrCl 15-30ml/min	SPS	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.011.01	Review the use of DOACS in patients with no record of weight in the past 12 months	SPS	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.020.01	Established on warfarin with no recent INR	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.021.01	H/O peptic ulcer, on OAC without gastroprotection	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.022.01	Prescription of warfarin or DOAC in combination with an oral NSAID	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.023.01	On DOAC and antiplatelet without gastroprotection	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.02.024.01	On aspirin and antiplatelet without gastroprotection	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.025.01	Age 75+, on ACEI or loop, no renal function/electrolytes test	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.026.01	On amiodarone without recent TFT	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.03.001.01	Patients with Asthma prescribed LABA without ICS	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.03.004.01	eGFR <45 and oral NSAID	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.009.01	On lithium without recent lithium test	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.05.001.01	Latest eGFR <60 and prescribed Nitrofurantoin (and no recent eGFR)	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.05.002.01	Patients with eGFR <30 prescribed Nitrofurantoin	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.05.003.01	Patients with eGFR 30-44 prescribed Nitrofurantoin	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.05.008.01	Clindamycin is only recommended first-line for a limited range of conditions, due to risk of C. difficile infection and antimicrobial resistance	NICE	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.06.001.01	Patients with heart failure prescribed a glitazone	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)

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RuleId	RuleTitle	Category	Introduction Version	Type
AOI.06.002.01	Patients with eGFR <30 ml/min prescribed Metformin	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.06.003.01	Patients with eGFR 30-44 ml/min prescribed Metformin	Pincer Plus	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.08.003.01	On methotrexate without recent FBC	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.001.01	Age 65+, on oral NSAID without gastroprotection	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.002.01	H/O peptic ulcer, on oral NSAID without gastroprotection	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.003.01	Asthma and non-selective BB	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.004.01	HF and oral NSAID	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)
A.02.001.01	Lipid target not met despite maximum statin intensity	NICE	7.12	Safety Alert Only
AI.02.018.01	Review lipid therapy as rosuvastatin is contraindicated if eGFR less than 30ml/min, due to increased risk of adverse effects	NICE	7.12	Safety Alert AND Targeted Safety Intervention
AI.02.019.01	Agree the use of statins at higher doses with a renal specialist if eGFR is less than 30 ml per minute per 1.73 m ²	NICE	7.12	Safety Alert AND Targeted Safety Intervention
AI.02.020.01	Do not initiate statins or stop existing statins if ALT or AST are greater than 3 times the upper limit of normal	NICE	7.12	Safety Alert AND Targeted Safety Intervention

RuleId	RuleTitle	Category	Introduction Version	Type
AI.06.001.01	Progestogens are not recommended in women following a total hysterectomy or in the absence of a uterus	NICE	7.12	Safety Alert AND Targeted Safety Intervention
AI.06.004.01	No evidence of vitamin B12 levels in the past 5 years for patients taking long-term metformin	MHRA	7.12	Safety Alert AND Targeted Safety Intervention
AOI.02.030.01	DOAC use is not advised due to the presence of high-risk contraindications	NICE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.031.01	Statins are contraindicated in pregnancy because of the risk to the unborn child of exposure to statins	NICE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.032.01	Missing lipid readings: consider arranging a blood test	NICE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.034.01	Caution: Increased INR and bleeding risk when warfarin and tramadol co-prescribed	MHRA	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.001.01	Antipsychotics are not routinely recommended for patients with learning disability	NICE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.012.01	Review the use of SSRIs and SNRIs in pregnancy	MHRA	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.015.01	Consider prescribing tramadol and paracetamol separately to improve flexibility and cost-effectiveness	NHSE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.06.005.01	Review liothyronine prescribing: ensure this is recommended by an endocrinologist	NHSE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.09.003.01	Review folic acid prescription	SPC	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.10.013.01	NSAIDs are not recommended for the symptomatic treatment of chickenpox	NICE	7.12	Safety Alert OR Targeted Safety Intervention (When either is true)
I.04.001.01	Sertraline is recommended first-line for the drug treatment of generalized anxiety disorder (GAD)	NICE	7.12	Safety Intervention Only
I.05.001.01	Doxycycline or ofloxacin (chlamydia or non-gonococcal), or ofloxacin or levofloxacin (enteric organism) are recommended as first-line treatment for epididymo-orchitis	NICE	7.12	Safety Intervention Only
I.05.003.01	Chloramphenicol or fusidic acid eye preparations are recommended first-line drug treatment for conjunctivitis	NICE	7.12	Safety Intervention Only
AI.06.002.01	Increased risk of vitamin B12 deficiency in patients taking Metformin with risk factors present	MHRA	7.13	Safety Alert AND Targeted Safety Intervention
AI.06.005.01	Potential risk of vitamin B12 deficiency in patients taking Metformin with risk factors present	MHRA	7.13	Safety Alert AND Targeted Safety Intervention
AOI.02.035.01	Review aliskiren prescribing for hypertension: consider switching to an alternative antihypertensive	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.036.01	Review omega-3 fatty acid prescribing: not recommended for initiation and deprescribing is encouraged	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.03.007.01	Record updated body weight to ensure appropriate EpiPen prescription in children aged 5 years or older	SPC	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.03.008.01	Record updated body weight to ensure appropriate Jext prescription in children aged 6 years or older	SPC	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.03.009.01	Missing body weight reading in last 12 months for patient on EpiPen Jr (0.15mg) - Previous weight 22-25kg	SPC	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)

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RuleId	RuleTitle	Category	Introduction Version	Type
AOI.03.010.01	Missing body weight reading in last 12 months for patient on Jext (0.15mg) - Previous weight 27-30kg	SPC	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.014.01	Consider reviewing oxycodone/naloxone combination product prescribing: ensure cost-effective treatments have been considered	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.017.01	Review dosulepin prescribing in adults with depression: ensure safer antidepressants have been considered	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.06.006.01	5% weight loss target not achieved after 6 months of Tirzepatide	NICE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.06.008.01	Review tirzepatide use in pregnancy and women of childbearing potential	NICE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.09.004.01	Supplements for age-related macular degeneration (AMD): not recommended for initiation and deprescribing is encouraged	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.015.01	Review rubefacient prescribing for musculoskeletal pain: consider evidence-based alternatives	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.13.001.01	Consider avoiding emollient bath additives: not clinically or cost-effective	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)
I.02.004.01	Woman of childbearing age: consider reminding the patient that statins should be stopped 3 months before attempting to conceive, due to risk to the child of exposure to statins	NICE	7.13	Safety Intervention Only
I.06.008.01	Review bromocriptine prescribing for lactation suppression: consider switching to cabergoline due to safety concerns	MHRA	7.13	Safety Intervention Only

RuleId	RuleTitle	Category	Introduction Version	Type
I.06.010.01	NHSE cohort 1 - Tirzepatide initiation criteria not met as BMI <= 37.5	NICE	7.13	Safety Intervention Only
I.06.011.01	NHSE cohort 1 - Tirzepatide initiation criteria not met as BMI <40	NICE	7.13	Safety Intervention Only
I.06.012.01	NHSE cohort 1 - Tirzepatide initiation criteria not met as 4 or more qualifying comorbidities not found despite BMI >=37.5	NICE	7.13	Safety Intervention Only
I.06.013.01	NHSE cohort 1 - Tirzepatide initiation criteria not met as 4 or more qualifying comorbidities not found despite BMI >=40	NICE	7.13	Safety Intervention Only
I.10.001.01	Review colchicine prescribing: please switch to alternative first-line treatment for gout flare management	NICE	7.13	Safety Intervention Only
I.10.002.01	Methotrexate and penicillin - drug interaction	SPS	7.13	Safety Intervention Only
I.10.003.01	Methotrexate and co-trimoxazole - significant interaction	SPS	7.13	Safety Intervention Only
I.10.004.01	Methotrexate and tetracycline - drug interaction	SPS	7.13	Safety Intervention Only
I.10.005.01	Methotrexate and quinolone - drug interaction	SPS	7.13	Safety Intervention Only
AOI.02.016.02	Beta-blocker initiated in asthma patient without cardiac comorbidities	BNF	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.017.02	Avoid fibrates for cardiovascular disease prevention in adults	NICE	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.018.02	Do not routinely offer aspirin for primary prevention of cardiovascular disease	NICE	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.02.066.01	Edoxaban prescribed in patients with CrCL >100 mL/min	BNF	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.02.070.01	Dabigatran contraindicated in patients with a CrCl <30ml/min	SPC	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.03.006.02	Consider using licensed asthma treatments instead of high-dose tiotropium preparations	BNF	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.004.02	AKI risk with concurrent NSAIDS and diuretics/RAS drugs	NICE	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.04.013.02	No evidence of palliative care: immediate release fentanyl is usually recommended for patients on palliative care	NHSE	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.016.01	Reduced white cell count detected (<3.5 x 10 ⁹ /L) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.017.01	Azathioprine monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.018.01	Ciclosporin monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.019.01	Mycophenolate mofetil monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.020.01	Tacrolimus monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.021.01	Sulfasalazine monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.10.022.01	Penicillamine monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.023.01	Leflunomide monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.024.01	Patient on leflunomide alongside methotrexate with monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.025.01	Methotrexate monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.027.01	Hydroxychloroquine annual monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.028.01	Reduced neutrophil count detected ($1.6 \times 10^9/L$) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.029.01	Raised eosinophilia count detected (>math>0.5 \times 10^9/L</math>) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.030.01	Reduced platelet count detected ($140 \times 10^9/L$) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.031.01	Reduced albumin level detected ($30g/L$) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.032.01	Raised ALT and/or AST levels detected (>math>100U/L</math>) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.033.01	Raised blood pressure detected (>math>140/90mmHg</math>) in patient on ciclosporin	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.10.034.01	Raised blood pressure detected (>140/90mmHg) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.035.01	Raised MCV detected (>105fL) in patient on DMARD therapy with no follow up blood tests	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.036.01	Raised MCV detected (>105fL) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.037.01	Raised MCV detected (>105fL) in patient on DMARD therapy with one or more abnormal results in B12, folate, or TSH levels	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.038.01	Hydroxychloroquine eye assessment overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.039.01	Review systemic NSAID use after 20 weeks of pregnancy	MHRA	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
I.02.001.02	Non-recommended antihypertensive selected for patient under 55 who are not of black African or Caribbean origin	NICE	7.14	Safety Intervention Only
I.02.012.01	ACE inhibitors or ARBs are recommended first-line for hypertension in adults with diabetes	NICE	7.14	Safety Intervention Only
I.03.001.01	Review tiotropium treatment in patients at risk of cardiovascular events	MHRA	7.14	Safety Intervention Only
I.03.002.01	Antihistamines in paediatric eczema - review use	NICE	7.14	Safety Intervention Only
I.04.002.01	Do not offer an antipsychotic for the treatment of GAD and panic disorder in primary care	NICE	7.14	Safety Intervention Only

RuleId	RuleTitle	Category	Introduction Version	Type
I.04.004.01	Patients aged 65 years and over with dementia prescribed antipsychotics for >6 weeks	Pincer Plus	7.14	Safety Intervention Only
I.05.004.02	Non first-line treatment option prescribed for simple acute bacterial otitis externa	BNF	7.14	Safety Intervention Only
I.05.006.01	Cephalosporins are only recommended first-line for a limited number of infections due to risk of antimicrobial resistance	NICE	7.14	Safety Intervention Only
I.05.009.01	Only use fluoroquinolones when first-line antibiotics are unsuitable	MHRA	7.14	Safety Intervention Only

How ScriptSwitch Safety Alerts work

When a patient record is opened the Safety Alert software will process the patient record – on the desktop – and run the clinical rules above.

If a rule generates a Safety Alert for a patient, a pop-up will be presented to the prescriber as follows:

Level	Type	Alert Title	Review Status	Review Reason
RED	Patient Safety	The use of DOACs in patients with a CrCl <15ml/min is contraindicated	!	-Review Action- [Hide Alert]
Alert Details MHRA (Jun 2020) states that DOAC use with severe renal impairment increases the risk of bleeding and can cause serious, potentially fatal, bleeds.				
AMBER	Monitoring	Review the use of DOACs in patients with no record of weight in the past 12 months	!	-Review Action- [Hide Alert]
Alert Details A up to date weight reading within 12 months is required to accurately calculate creatinine clearance.				

The health care professional is solely responsible for verifying the appropriateness of the Recommendation for the patient. Please check quantity, dose, instructions and duration fields are all completed and are appropriate for the patient; please also note savings shown are an estimate. The quantity may have been changed to the closest available pack size. ScriptSwitch will only populate drug, dose and quantity fields following acceptance of a Recommendation. It is at the discretion of the health care professional to complete any and all other fields as appropriate. The aforementioned is subject to the terms of the Full Disclaimer
 In respect of the ScriptSwitch Safety Alerts (the "Alerts"), the health care professional is solely responsible for verifying the appropriateness of the Alert for the patient. Optum Health Solutions (UK) Limited ("OHS") does not draft the clinical rules involved in determining the content of or when Alerts appear or do not appear, in general or for any particular patient. Further, OHS does not warrant or guarantee the clinical appropriateness or safety, completeness, correctness, accuracy, or timeliness of the appearance or lack therefore of any of the Alerts in general or for any particular patient. Without limiting the generality of the foregoing, OHS advises the health care professional that Alerts do not incorporate or otherwise take into account (in any way, shape or form – directly or indirectly) any aspects of the applicable patient electronic medical record relating (directly or indirectly) to drug allergies; in all cases the health care professional is solely responsible for the identification of (and any implication of) any and all drug allergies. The aforementioned is subject to the terms of the Full Disclaimer

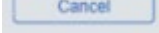
The Safety Alert pop-up shows the following information

- **Patient Details** – processed on the desktop only
- **Safety Alert Level and Type** – Red: Patient Safety, Amber: Monitoring
- **Details of the Alert** – explanation of the alert – see appendix A
- **Review Status:**
 - requires action
 - review action completed
- **Review Reason:** dropdown list of potential actions to be taken by user
- **Action buttons:** Hide Alert, Cancel, Hide and Close, Save and Close

Actioning a Safety Alert

The new Safety Alert allows the practice users to take relevant actions to address the Safety Alert as follows:

- Close the Alert
- Update the Review Reason and Save the Alerts for future action and reviews
- Update the Review Reason and Hide the Alert for 12 months
- Close the Alert

To ignore the Alert, select the  button or click the **X** in the top right-hand corner of the pop-up. This will clear the alert for the current session. The alert will be presented again the next time the patient record is accessed. Cancelling will not save any recorded alert reasons.


Update Review Reasons and Save & Close Alerts

Each alert can be reviewed individually, the review reason selected and then the pop-up saved for future consultations.

To update the Review Reason click the dropdown and select the most appropriate action from the available list.

Level	Type	Details	Review Status	Review Reason	
AMBER	Monitoring	On methotrexate without recent FBC Patients receiving methotrexate for at least three months who have not had a recorded full blood count (FBC) or liver function test (LFT) within the previous three months	!	-Review Action- -Review Action- Alert guidance Schedule consultation Book a test Call patient Refer patient Action not required -Review Action-	Hide Alert
AMBER	Monitoring	On lithium without recent lithium test Patients receiving lithium for at least three months who have not had a recorded check of their lithium concentrations in the previous three months	!		Hide Alert
AMBER	Monitoring	On amiodarone without recent TFT Patients receiving amiodarone for at least six months who have not had a thyroid function test (TFT) within the previous six months	!		Hide Alert

Once a **review action** is selected the review status is marked with a **tick** indicating the alert review is completed.

Review Status	Review Reason
	Schedule consultation

When the alert reasons have been recorded click Update Review Reasons and Hide & Close Alerts

Each alert can be reviewed individually, the review reason selected and then the alert hidden for 12 months.

To update the **Review Reason**, click the dropdown and select the most appropriate action from the available list. When all alerts have reasons set, click **Hide All and Close** button.

The screenshot shows an alert card with the following details:

- Category:** Admissions Avoidance (marked with a red 'RED' tag)
- Title:** Age 65+, on oral NSAID without gastroprotection
- Description:** Prescription of an oral NSAID, without co-prescription of an ulcer healing drug, to a patient aged ≥65 years
- Status:** A green checkmark icon indicates the alert is active.
- Action:** A dropdown menu is set to 'Schedule consultation'.
- Buttons:** 'Cancel', 'Hide All and Close' (highlighted with a red border), and 'Save and Close'.

The following warning message will display:

The warning message box has a blue header and contains the following text:

ScriptSwitch Prescribing Safety Alerts

Hiding an alert will remove the alert from the ScriptSwitch Safety Alerts pop up for the next 12 months.

Buttons: 'Back', 'Continue'

The user can choose to go **Back** and make changes or click **Continue** to confirm the action. If **Continue** is selected, the Safety Alert will no longer be displayed.

If **Hide All and Close** is selected and one or more of the alerts on the pop-up **does not** have a **review action**, a warning message is presented advising selection of a review reason for any alerts that do not have one.

The warning message box has a blue header and contains the following text:

ScriptSwitch Prescribing Safety Alerts

One or more of the alerts you are trying to hide does not have a review reason, please go 'back' and select a review reason before hiding the alert.

Button: 'Back'

Note:

If **Hide All and Close** is selected the review action will be saved for inclusion in the review action reports, but the alert **will not** be presented when the patient record is opened again for all prescribers.

Hiding a Single Alert

A single Safety Alert can be hidden by clicking the **Hide Alert** button next to the review reason option. This will hide this alert from future reviews for 12 months. This can only be achieved once the review reason is completed.

Review Status	Review Reason
	<div style="display: flex; align-items: center;"> <div style="border: 1px solid #ccc; padding: 2px; margin-right: 10px;">Schedule consultation ▾</div> <div style="border: 2px solid red; padding: 2px 10px; color: white; background-color: #0056b3;">Hide Alert</div> </div>

NB: Hide Alert with review action selected: a warning message advising that the alert will be removed for the next 12 months for ALL prescribers.

ScriptSwitch Prescribing Safety Alerts

Hiding an alert will remove the alert from the ScriptSwitch Safety Alerts pop up for the next 12 months.

Back

Continue

Back takes the user back and won't hide the alert

Continue confirms the Hide Alert action.

If there is only a single alert displayed for a patient, and **Continue** is selected, the safety alert will be hidden immediately, and the window closed with no further action to be taken.

If there are multiple alerts on the pop-up, the user can continue with the review actions for other alerts or Save and Close, to close the pop-up window.

Targeted Safety Alerts on the Prescribing Pop Up

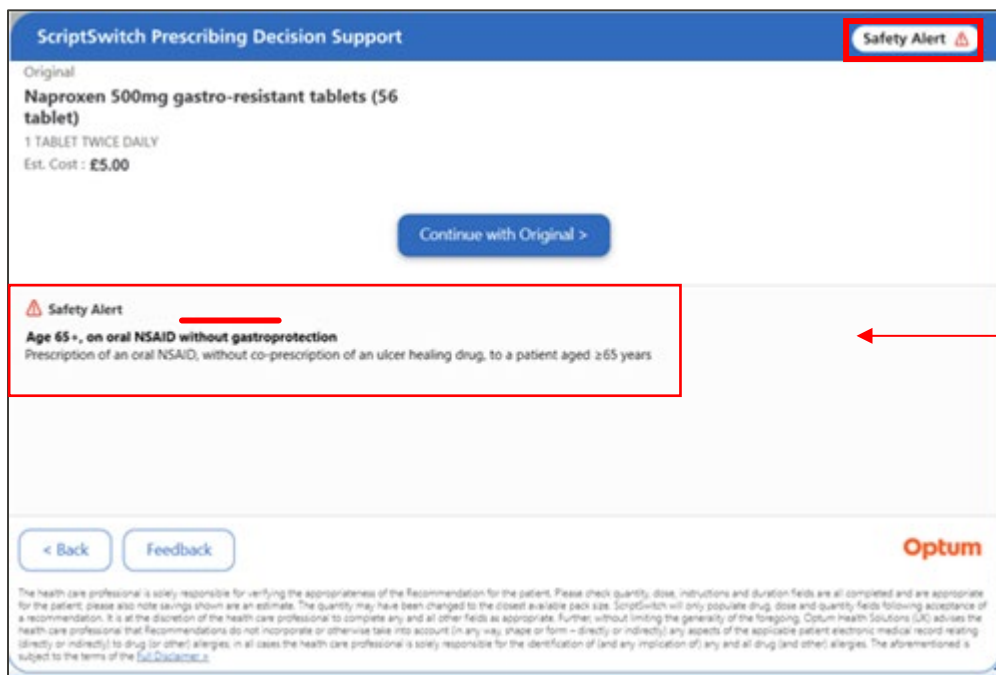
In version 7.0 of ScriptSwitch® Prescribing, patient specific safety information will now prevent risk at the **point of prescribing** by supporting the prescribing workflow, to identify patients who, through the addition of a new medication will ‘trigger’ a clinical rule using PINCER and NHS Medicines Safety Indicators. This new and important addition to ScriptSwitch® Prescribing supports **Getting it Right First Time**, the national programme designed to improve the treatment and care of patients.

The new Targeted Safety Alert on the prescribing pop-up will prevent risk at the point of prescribing by interacting with the prescribing workflow to identify patients who through the addition of a new medication will ‘trigger’ a clinical rule, using PINCER Indicators and information from the patient record.

For example:

If the patient is over 65 and isn’t receiving an NSAID or an ulcer healing drug, when the patient record is opened a Safety Alert will **not** present.

But, if this patient is then prescribed an NSAID, the prescriber will be presented with a **Safety Alert** identifying the risk and prompting the prescriber to take preventative action. In this instance, the PINCER rule A - ‘Age 65+, on oral NSAID without gastroprotection’ – would be presented.



Safety related message on the pop-up based on current prescribing

Note: This optional service will be activated alongside the Safety Alert feature, following instructions to Optum from your Medicines Optimisation teams

Prescriber Experience

The patient record is checked at the point of opening to identify any existing patient risks, the information from that patient file is then stored in encrypted format whilst the patient record is opened. When a product is then prescribed, the details of that product are then considered against the patient details that were obtained when the patient record was opened to see if this newly triggers a risk.

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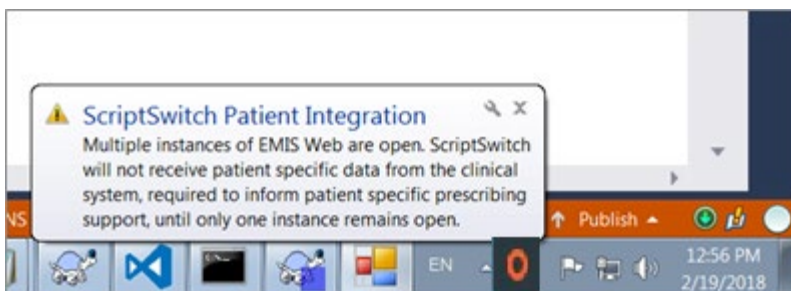
Any information, other than the product being prescribed will not be considered within the risk analysis until the patient record is opened again.

Multiple Instance Optimisation

If two instances of the EMIS Web clinical system are open, EMIS is not able to guarantee that the patient that the API is providing data for, is the patient being viewed.

As a result, when two instances of the clinical system are open, the API connection is **disabled**, and the software will no longer be accessing patient data.

When the API is disabled, the user will receive a warning notification that will self-dismiss after 60 seconds but will have the option for the user to manually dismiss prior to the elapse of the 60 seconds.



The impact of this is the following:

- Switch recommendations will not be able to access the patient demographic information, so recommendations will present regardless of the patient age or gender
- Safety Alerts will be disabled
- Safety Alerts on the ScriptSwitch Prescribing pop-up will be disabled

Data Processing

When the patient record is opened, Optum will retrieve the patient record via the Clinical System's standard APIs (Application Programming Interfaces).

Dependent on the patient's data sharing permissions, the clinical systems make data about the patient, and their medical record available via the APIs.

Using the Optum Client Manager application, installed on the prescriber machine, the ScriptSwitch Prescribing software will process the data available in the standard APIs and use information relating to the patient age, medication history, observations, and test results, for analysis within the above rules.

ScriptSwitch Prescribing software will use the patient's name, date of birth, NHS number and clinical system patient ID, available from the standard APIs, for the purpose of presenting this on the Safety Alert to ensure the alerts presented relate to the patient being viewed

The patient's data **does not** leave the prescribers machine, and is held in an encrypted format, on the prescriber's machine, **only** for the period that the patient record is open.

Optum employees have no access to the patient data.

Prior to activating this module Optum will have supported your Medicines Optimisation team in producing data privacy impact assessments and the contract contains a detailed data processing agreement, clearly defining the data processing responsibilities. For any further queries relating to data governance, please contact our customer services team in the first instance.

EMIS WEB & ScriptSwitch Prescribing

Trigger Points

ScriptSwitch Prescribing will trigger for **approved** users at the following points if a recommendation is available in the profile:

- New Acute from the Add Drug screen
- New Repeat Scripts from the Add Drug screen
- Restarting a Past Medication from the Past View Medication panel
- Medication Review
- Medication Review Manual and Automatic Repeat Re-Authorisation
- Edit a drug action on Update
- Trigger ScriptSwitch Prescribing when Generic/Trade Switch is made
- Issuing or editing an existing medication from the acutes list
- Issuing a repeat from the repeats list which requires re-authorisation
- Adding items using the Bulk Issue function
- Workflow – launching with EMIS WEB

ScriptSwitch Prescribing Installation

To activate the site for ScriptSwitch Prescribing the following steps take place:

- Preparation of the EMIS Web database by EMIS
- Installation and activation of the ScriptSwitch Prescribing software on required PCs. This can be all machines if required not just clinical machines, which allows the clinicians to prescribe from any machine
- Deactivation of non-clinical users

User Activation

ScriptSwitch Prescribing will be available for activation for all users in the clinical system who have the following RBAC roles / EMIS WEB roles:

- Independent Prescriber
- Perform Prescription Preparation (RBAC B0278)

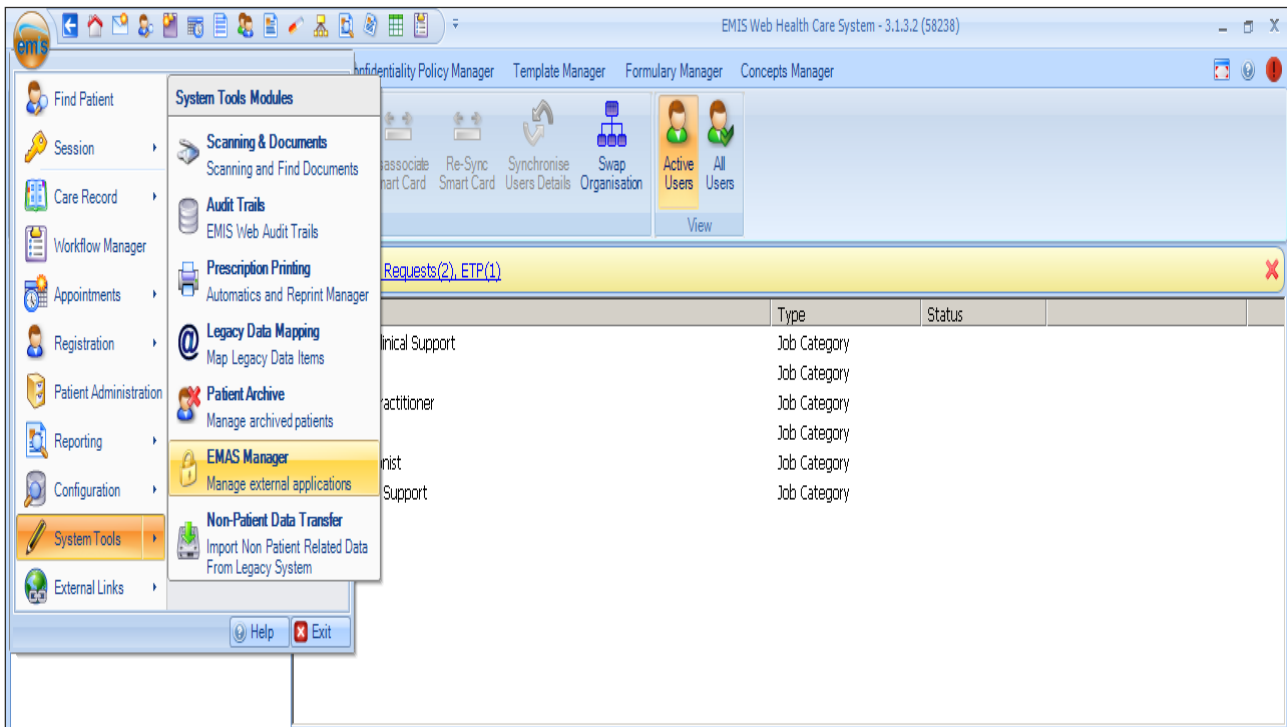
Both the Smart Card and the EMIS WEB system should have these roles activated for the user before ScriptSwitch Prescribing can be activated.

ScriptSwitch Prescribing is not automatically activated for EMIS WEB Users. It can be controlled on a user-by-user basis.

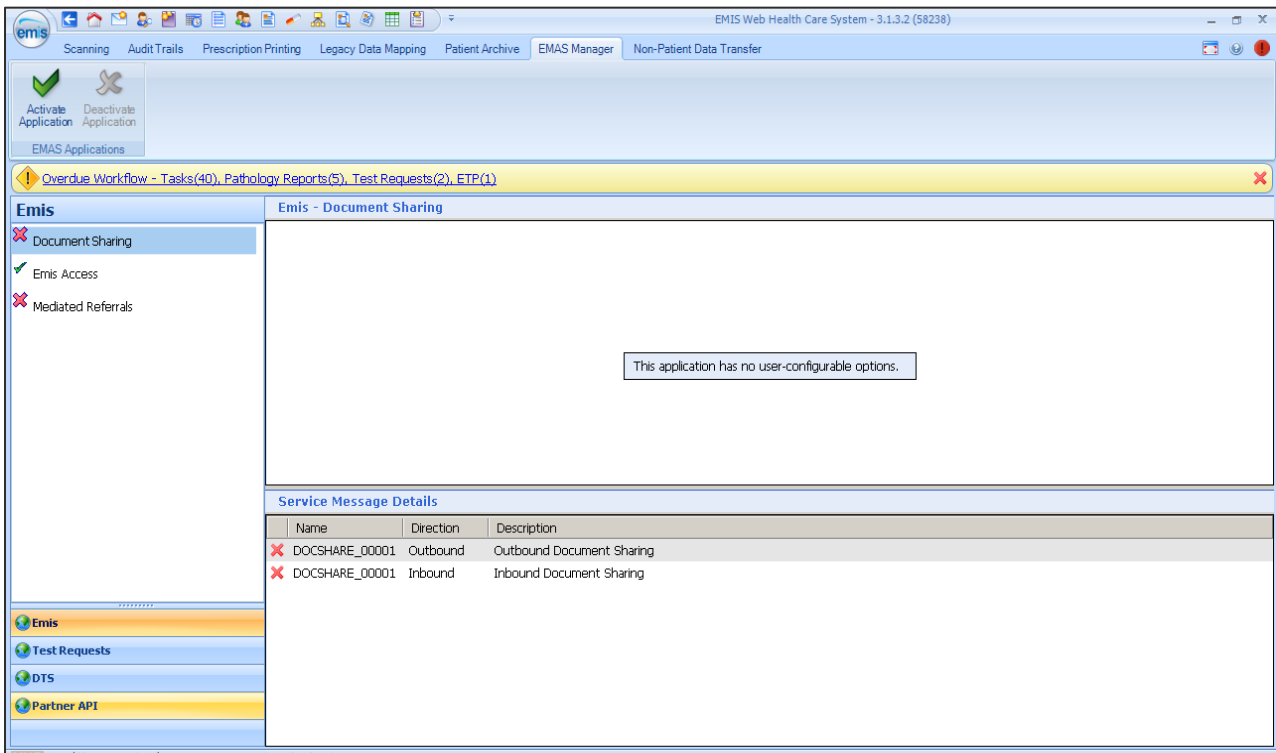
To activate ScriptSwitch Prescribing for a user take the following steps:

- Log into **EMIS WEB**
- From the main EMIS WEB screen click **EMIS** in the top left
- Select System Tools
- Select EMAS manager

NB: All new users need to be set up. Remember to activate Locum GPs



From this screen select **Partner API**:

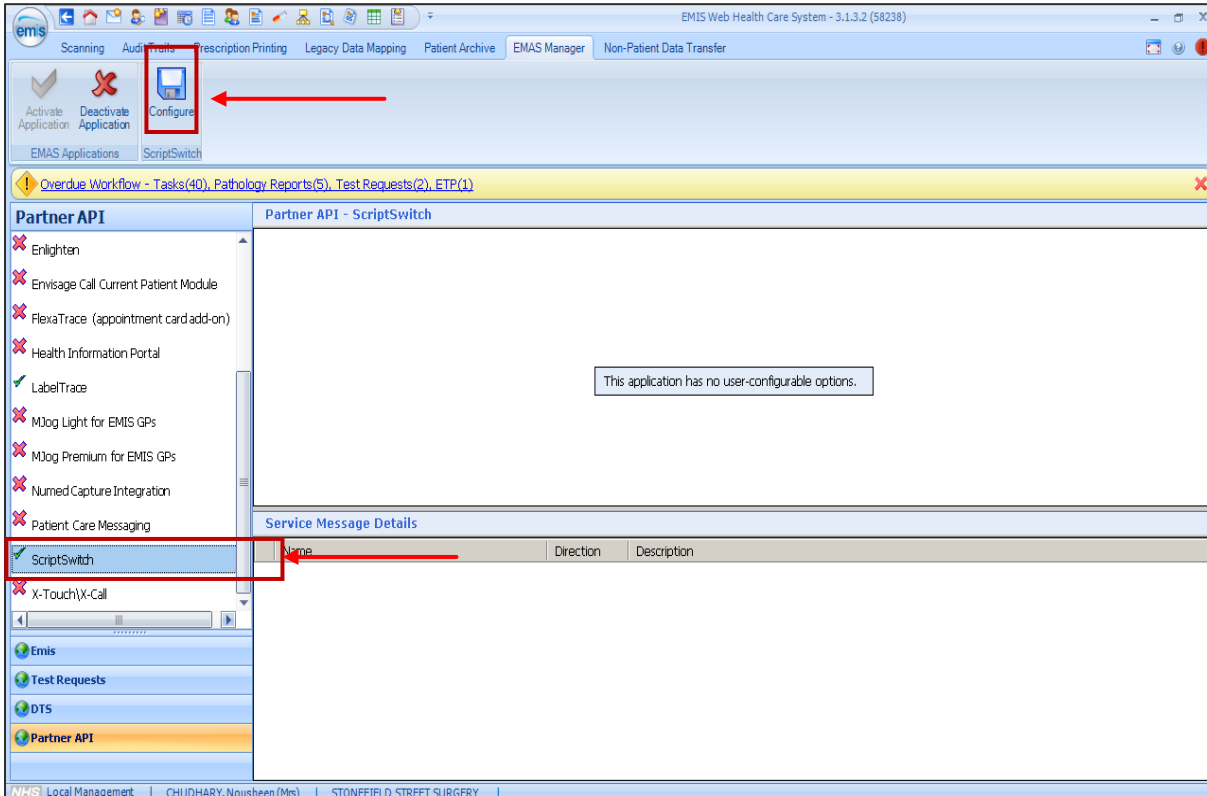


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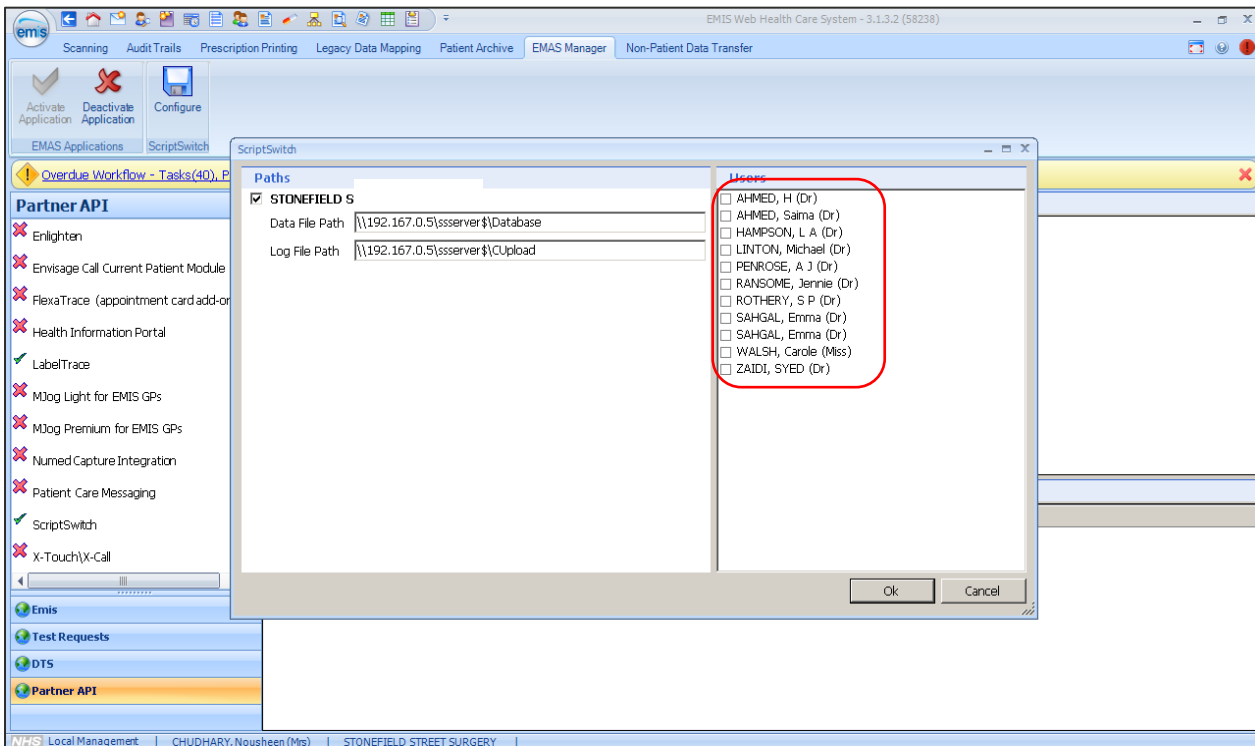
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Select **ScriptSwitch** from the list and then from the top click **Configure**.



You will now see on the right of the screen a list of all the Prescribing staff. To enable ScriptSwitch Prescribing functionality simply click on the user and this will enable the user.



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The logo for Optum, featuring the word "Optum" in a bold, orange, sans-serif font.The logo for EMIS, featuring the letters "EMIS" in a bold, blue, sans-serif font.

If the user is currently logged into EMIS WEB, changes to ScriptSwitch Prescribing will take effect next time the user logs in.

NB: Optum recommends that ScriptSwitch Prescribing is used by prescribing clinicians. All new users should be checked to ensure only clinical users have ScriptSwitch Prescribing rights and non-clinicians are de-activated.

What is Patient Record Integration (PRI)?

ScriptSwitch Prescribing™ integrates with EMIS WEB to obtain patient demographic information.

ScriptSwitch Prescribing compares patient demographic data with newly available drug age and gender prescribing information, with the aim of reducing fatigue by suppressing inappropriate recommendations. Fewer switch recommendations and minimal workflow disruption will allow the clinician to focus on the consultation.

PRI introduces four distinct differences in the way ScriptSwitch Prescribing will be displayed to the clinician.

Age and Gender: the suppression of recommendations based on demographic information and the information available from the BNF and BNFC

Withholding: the suppression of recommendations that have been rejected twice for the same patient, by the same clinician in a 12-month period. The recommendation will be withheld for a further 12 months following the second rejection.

Targeted Content: presentation of switch recommendations that are appropriate to the patient based on the patient medical record and the switch clinically coded rules.

Safety Alerts: The ScriptSwitch Safety Alerts pop-up supports prescribers to efficiently manage patient risk and reduce the likelihood of a medication related hospital admission.

How to activate PRI within EMIS WEB?

Optum will have activated your sites on our database to receive the latest software.

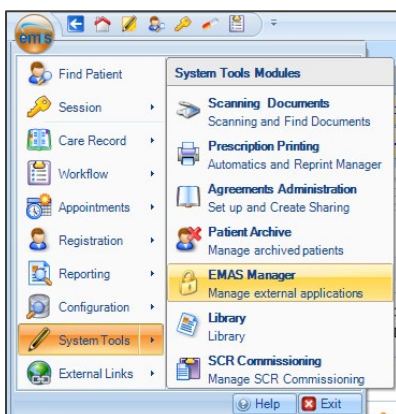
EMIS WEB will also require some set up:

The following steps will take you through the process, however, if you would like some help, please contact our customer services team on 02476 214700 and we will be happy to take you through the process.

Steps to Activation:

Login to EMIS WEB with high-level access rights to the system e.g., practice manager or admin.

Navigate to the **EMAS Manager**.

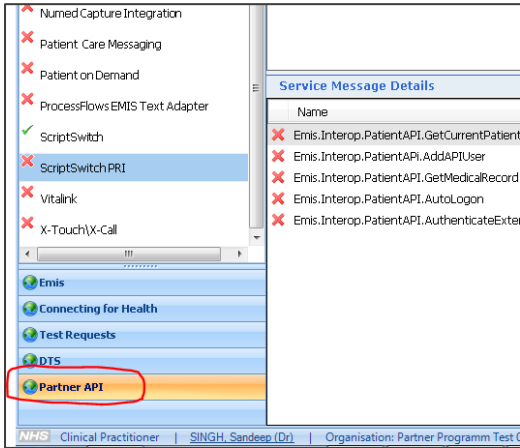


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From **EMAS Manager** select Partner API



Select **ScriptSwitch PRI** and click on it to highlight and select.

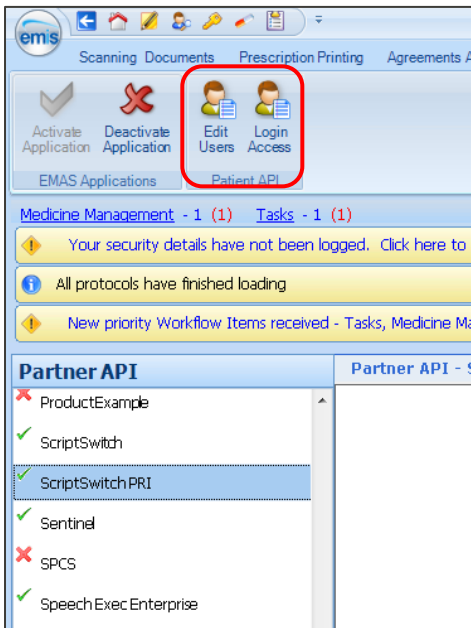
Please ensure you select **ScriptSwitch PRI** and not **ScriptSwitch** these are separate products with different integration options.

From the **ScriptSwitch PRI** option activate the application by clicking on the **Activate Application** icon.



NOTE: Please note users will not be able to complete this process until the **ScriptSwitch PRI** activation is complete and they have been checked for **Allow Login** in the Login Access menu i.e., step 6 onwards.

From the **Emas Manager** screen you can then set the users access to the product:



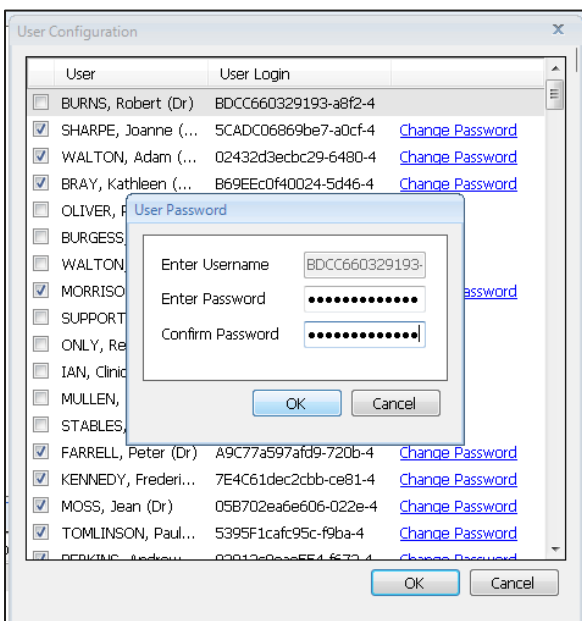
Edit Users: This section will display all EMIS WEB users and provide access to any 3rd party applications.

Please check this screen to ensure that your ScriptSwitch Prescribing users have a tick in the box.

All clinicians i.e., GPs, prescribing nurses, visiting pharmacists, should be ticked.

Simply check the box next to the appropriate user and then set a password. This password will not be required under normal circumstances, only if there is a technical issue with 3rd party API integration

NOTE: Un-ticking users in this menu will remove their access to **ALL** 3rd party applications including ScriptSwitch Prescribing, Docman, GP2GP, etc. This is standard EMIS API functionality.



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To configure user's access to the product, from the top of the screen select **Login Access** No users will be able to complete their activation process or have access to the ScriptSwitch Prescribing PRI module unless they are configured in this menu.

Tick the check box against each user for **Auto Login** and **Allow Login**.


User	UserLogin	Auto Login	Allow Login
BURNS, Robert (Dr)	B0CC660329193-a8f2-4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SHARPE, Joanne (Mrs)	5CADCC06869be7-a0cf-4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
WALTON, Adam (Dr)	02432d3ecbc29-6480-4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
BRAY, Kathleen (Mrs)	B69EEc0f40024-5d46-4	<input type="checkbox"/>	<input type="checkbox"/>
OLIVER, Philp (Mr)	30760e91ecff8-e5ab-4	<input type="checkbox"/>	<input type="checkbox"/>
BURGESS, Florence (DR)	4A87F30eb2313-f7cf-4	<input type="checkbox"/>	<input type="checkbox"/>
WALTON, Eileen (Mrs)	B19EAd336e067-9bf8-4	<input type="checkbox"/>	<input type="checkbox"/>
MORRISON, Kenneth ()	E147C75bccccf-d66c-4	<input type="checkbox"/>	<input type="checkbox"/>
SUPPORT, Emis (Dr)	emissupport118023ee5	<input type="checkbox"/>	<input type="checkbox"/>
ONLY, Reg (Mr)	RegOnly	<input type="checkbox"/>	<input type="checkbox"/>

Allow login, enables the user to complete the activation process

Auto Login allows authenticated EMIS WEB users to connect to the ScriptSwitch Prescribing product without having to re-enter their credentials each time. If Auto Login is not enabled at this point the user will have the option to do this when activating the product on their PC

Common Issues

Multiple EMIS sessions

If the user has multiple EMIS WEB sessions open, they will need to close all existing sessions and open one single session. It may also be possible that previous sessions have not closed properly and are running in the background but not visible. In this case a restart of the PC should resolve the problem. You may see this  in tray on the bottom of the screen

If this doesn't resolve the problem please contact the Optum Customer Services team to check that the ScriptSwitch Prescribing software and the correct version is installed on the PC

New Prescribers or PCs?

When new clinicians join the practice, they will need to be activated for ScriptSwitch Prescribing. This will involve activation of the product within EMIS Web of the following:

- ScriptSwitch
- ScriptSwitch PRI

Any new computers at the practice which are installed with ScriptSwitch Prescribing will need to go through the partner product activation process. Activating PRI will also enable Safety alerts for the user if these are received by the practice.

NB: If you encounter any problems with this process or have any questions regarding the activation, please contact Optum Customer Services on 02476 214700 or support@scriptswitch.com
We are available Monday to Friday 8am – 6pm

Frequently Asked Questions

When does the advice present itself on the screen?

Only when a prescription has been entered or re-authorised on a compatible clinical system and where a match exists with the underlying Recommendation Profile (the locally configured database of advice). The match is dependent upon the following criteria: drug name, drug strength, drug formulation, dosage, and prescription type (new acute, new repeat, repeat re-authorisation). Recommendations will also be limited by patient age and gender if PRI has been activated.

How often might a prescribing recommendation appear?

There is a direct correlation between the contents of the local Recommendation Profile (number of items), the drugs prescribed in the locality, and the frequency with which prescribing recommendations might appear. Based on data from existing ScriptSwitch Prescribing users, prescribers can expect to see a recommendation for between 5% and 10% of prescriptions entered or re-authorised.

How often are recommendations accepted?

On average, from analysis of existing ScriptSwitch Prescribing users, between 30% to 40% of recommendations are accepted when initially offered. However, for some categories of user (e.g., locums) acceptances run at up to 70%. The acceptance rates correlate with the quality of reason associated with each recommendation (inc. evidence source quoted), but also with the frequency of practice contact and reviews undertaken by the local prescribing support team.

How much time does ScriptSwitch Prescribing add to the consultation process?

ScriptSwitch Prescribing has been designed from its inception to be quick and simple to use. Just ONE* click is needed to either accept, decline, or acknowledge the presented advice from a single window interface.

What happens after the advice is either ACCEPTED or DECLINED?

If the advice is **declined**, the advice-box instantly disappears, and the host clinical system will continue with whatever it was “expecting” to do at the point that ScriptSwitch Prescribing interacted. If the advice is **accepted**, the advice-box instantly disappears, and the drug details entered moments earlier are automatically replaced with the advised suggestion. The host software will then behave as if these were the original drug details entered. Whatever the choice is made, a log is automatically recorded of the “offer of the advice” and the decision made. This offers an automated feedback mechanism to allow an assessment of the effectiveness and relevance of the advice and enabling the local prescribing support team to refine the Recommendation Profile.

What’s in the Recommendation Profile?

Drug-specific advice, either an alternative suggestion or an “information-only” message chosen initially by the **local prescribing** support team and then refined in the light of feedback.

The advice is configured by drug name, drug strength, drug formulation, dosage, patient demographic data, and prescription type.

*This may vary if the prescriber decides to write feedback from the ScriptSwitch Prescribing.

On-going Support

How to contact Customer Services:

Telephone: 024 7621 4700

Email: support@scriptswitch.com

Hours: Monday – Friday 8am – 6pm

Technical Issues

The ScriptSwitch Prescribing product has been available for several years and is a stable product. Our Customer Services team regularly monitors the activity from each site. Specifically, we are monitoring:

That the site is connecting to our server daily

That the script data is being sent to our servers daily

That the average number of prescriptions per day remains within 80% of the calculated average for the period of use of ScriptSwitch Prescribing.

That software updates when available have been applied via our remote patching system

Most of the support issues experienced come about because of the following situations.

New PCs – The ScriptSwitch Prescribing software is held on the PCs within the practice. If PCs are replaced, the ScriptSwitch Prescribing software will have to be re-installed. This can be achieved easily from a call to our customer services team

User Activation - With EMIS WEB users can be activated and deactivated from the Partner API Screen, selecting ScriptSwitch and then configure. Prescribers can be switched on and off. It is the practice's responsibility to ensure that only appropriate trained staff have access to ScriptSwitch Prescribing.

Clinical System Migration – call the team so we can reactivate on your new clinical system

Merged Practices - call the team so we can reactivate on your new clinical system

Software Updates

From time to time, we will notify you of a software update.

These are applied by a remote software update process which is monitored by our customer services team.

Updates will be collected by each PC and will be installed to the PC during the next reboot (i.e., when the machine is logged off and then back on next morning)

On the rare occasions that the update fails we will contact you to arrange for rectification.

We always provide release notes, and these should be circulated to your prescribers.

On occasions new features and functionality will be installed and additional training webinars will be available for practice users.