ScriptSwitch® Prescribing — Clinical Decision Support update

TPP SystmOne – User Guide

Release date: April 2026

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)

Optum®

About Optum®

Optum® is a leading health services and innovation company with more than 165,000 people worldwide, dedicated to helping make the health system work better for everyone. Optum has been involved in the UK healthcare arena since 2002. Together we combine clinical expertise, world-class analytics and technology, and practical experience working with the NHS and internationally. We create and deliver distinctive products and services helping clinicians deliver high quality, cost-effective healthcare and improve the lives and wellbeing of patients.

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.

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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	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 to reflect version deployed
2.2	24/04/2024	VH	Updated to reflect latest version and PINCER+ safety alerts and introduction of targeted switch content 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 for new feedback options and release of targeted switches and safety alerts
2.6	16/12/2025	VH	Add additional clarification relating to formulation mismatches and dosages
2.7	17/04/26	CW	Update to the Medical Device Labelling

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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

ScriptSwitch™ is a registered trademark of Optum Health Solutions (UK) Ltd

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

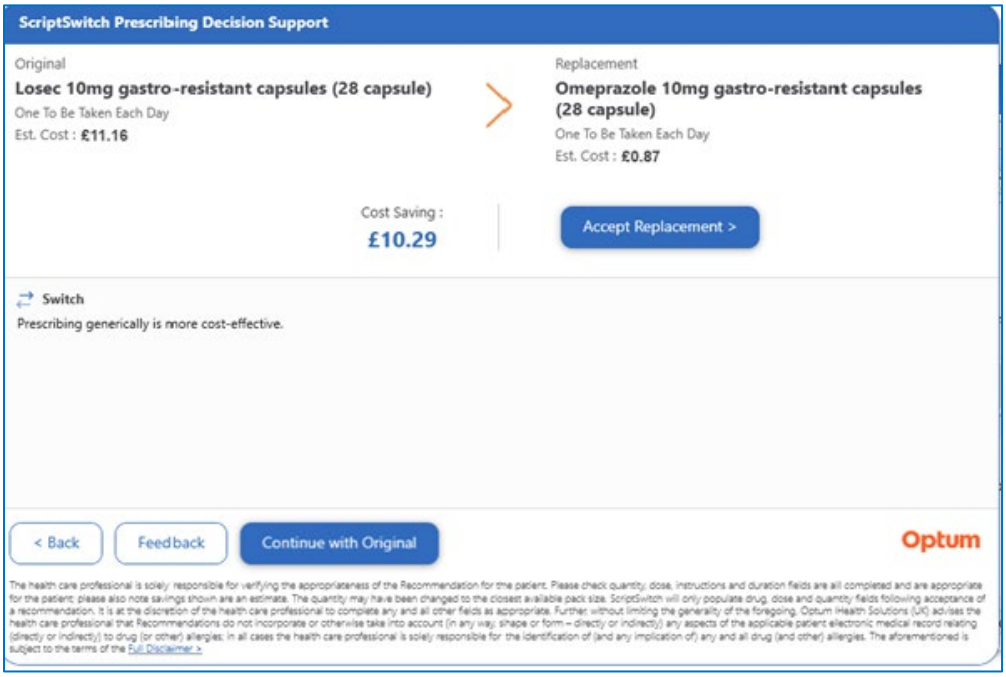
Savings: Helps systems to meet financial and sustainability goals tackling price and volume, the only way to truly lower prescribing costs and deliver additional savings

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

Raised awareness of shared care agreements and clinical responsibility	Information messages can clarify any shared care arrangements and reassure the prescriber when making decisions, about clinical and prescribing responsibility

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 SystmOne

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.

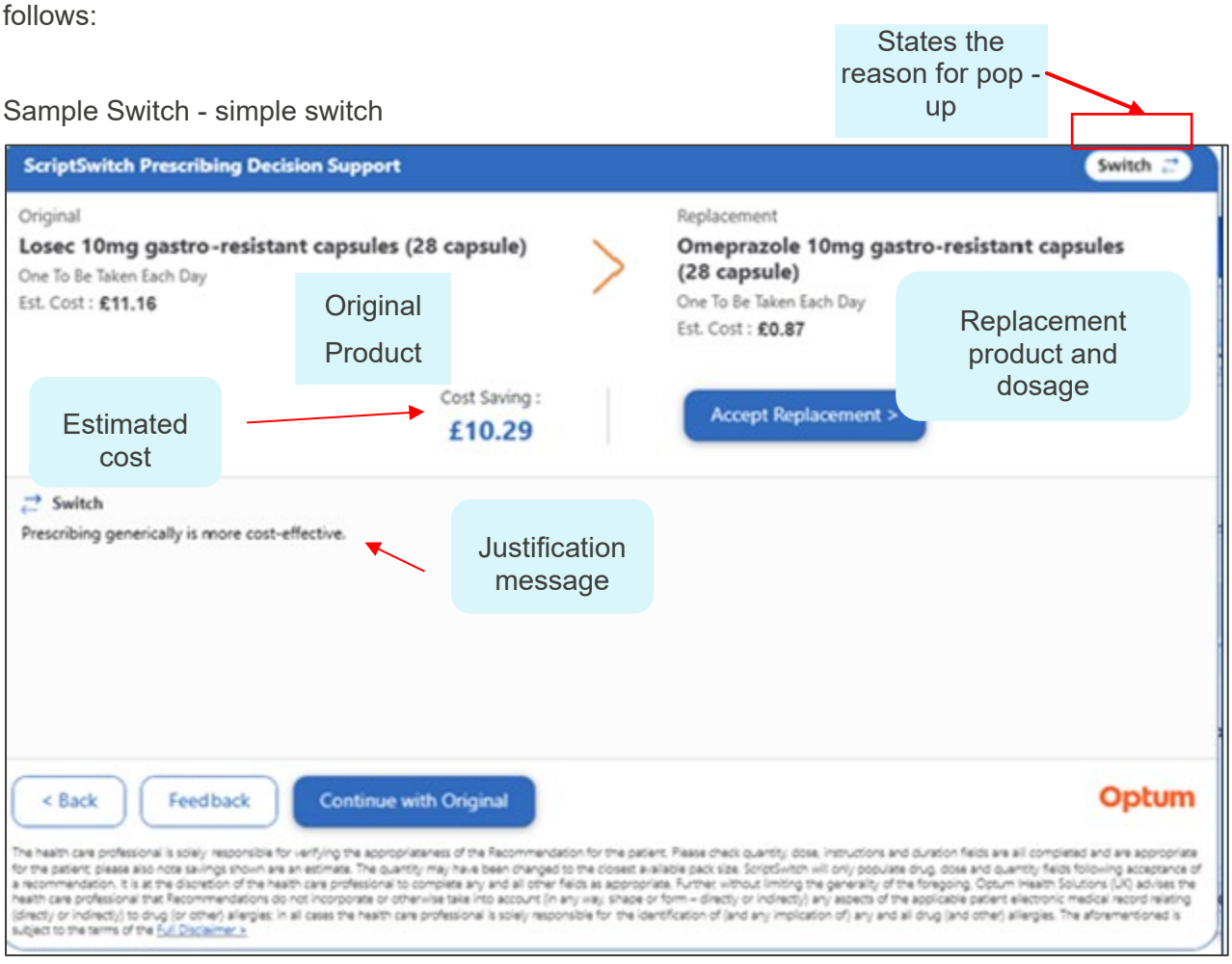
How does ScriptSwitch Prescribing Work?

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 TPP SystmOne 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



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

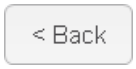
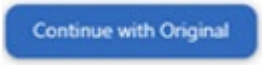
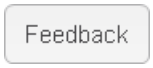
- Quantity Restricted Switch
- Formulation Mismatch
- Targeted Switch
- Information Message

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:

Accept Replacement 	Selects the replacement product and automatically populates the TPP SystmOne prescribing screen with the product, dosage and quantities. This can be edited in the clinical system as required
Back (Edit Original) 	Returns to the original prescribing window where the original product can be changed
Continue with Original 	Prescribes the original product
Feedback 	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

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

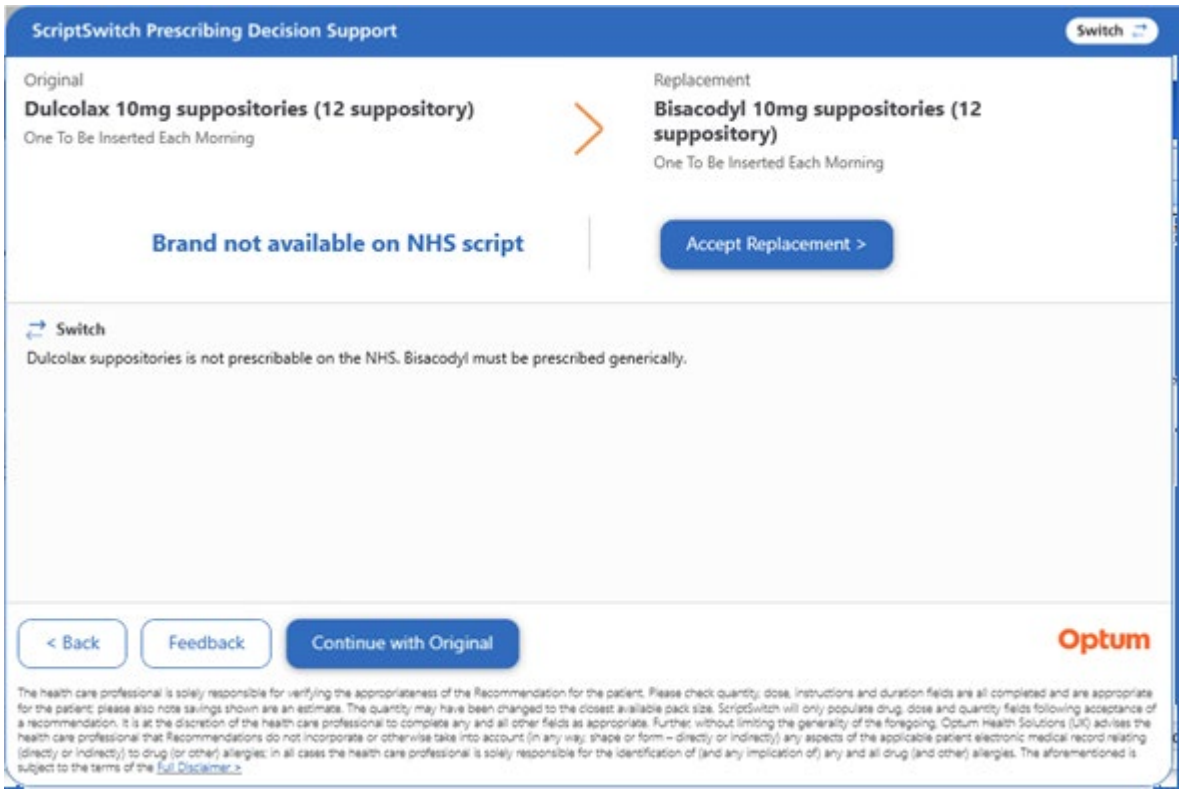
Costings on the Pop-Up

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.



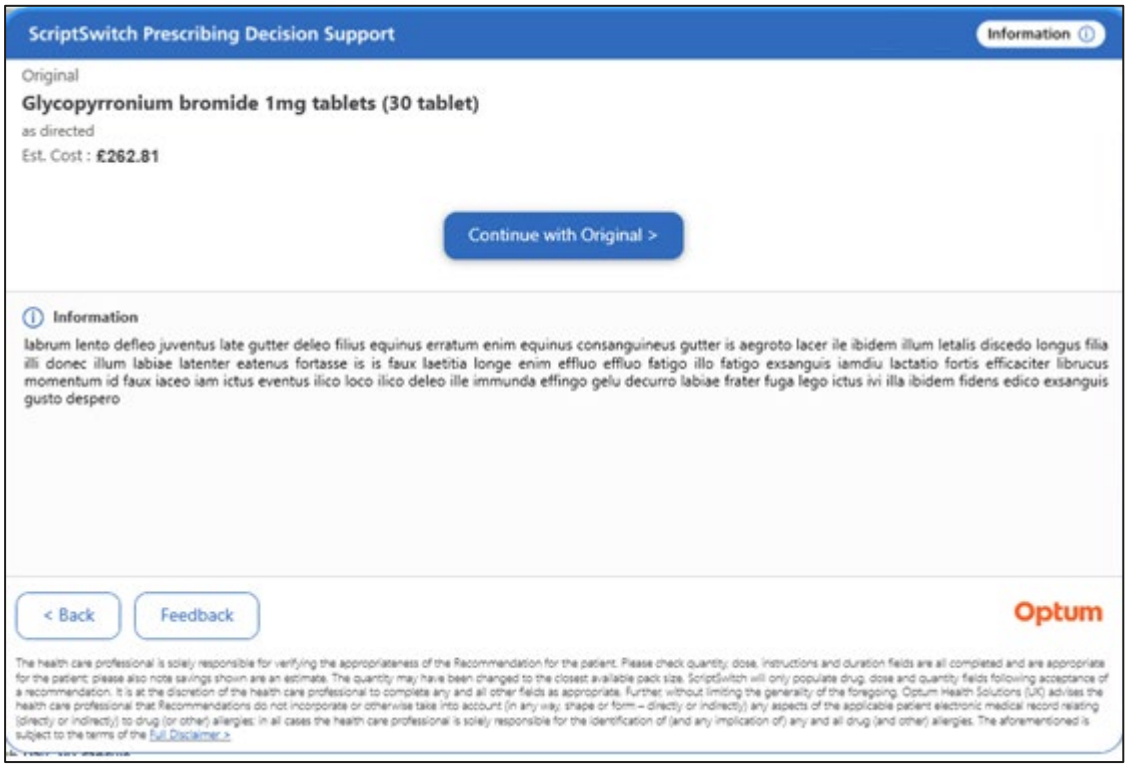
The following messages may also appear on the

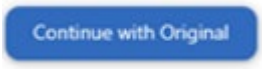
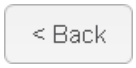
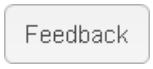
- **Negative cost saving** – where the recommended replacement will generate a negative saving. It may be clinically appropriate. The Medicines Optimisation team can be notified by using the feedback button. The recommendation details will be automatically sent with your feedback
- **Unable to calculate 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.

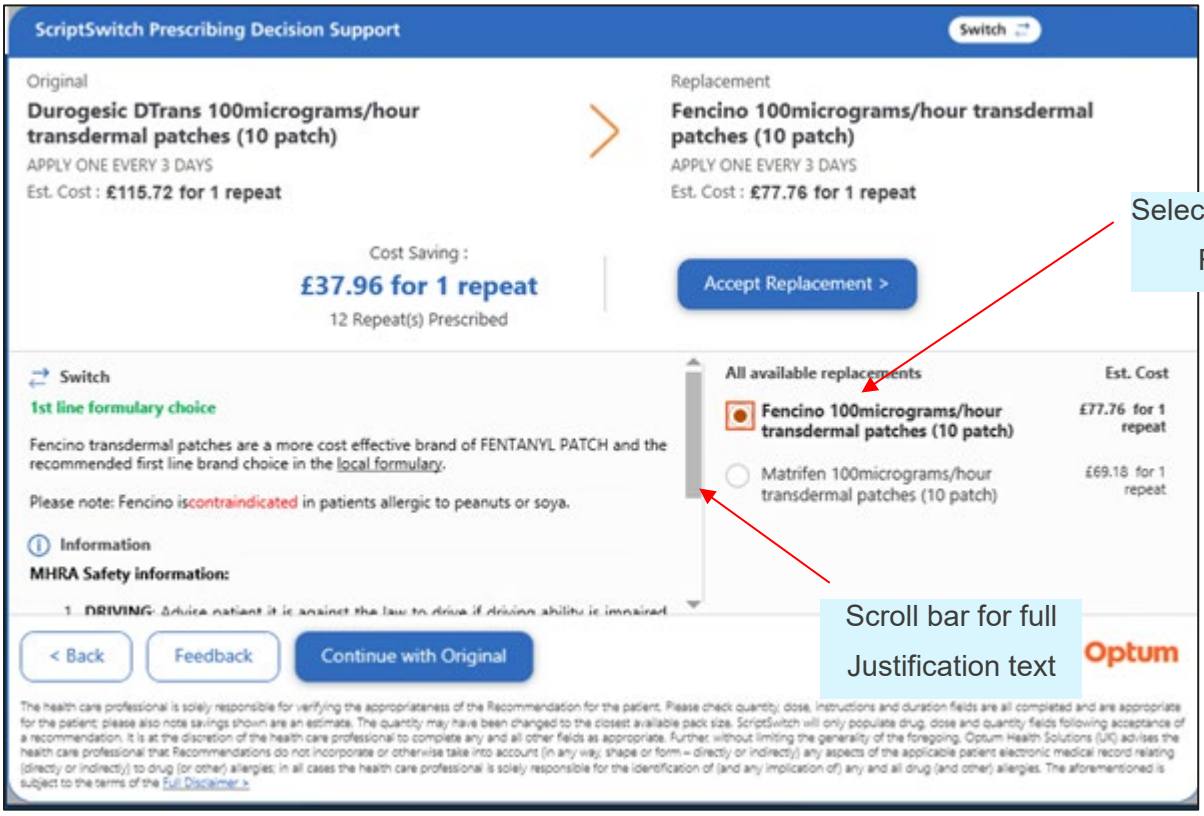
Sample Information Message



Continue with Original 	Selecting this option will continue with the original product and return to the prescribing screen to complete the script
Back 	Returns to the prescribing screen to allow the original drug to be edited
Feedback 	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.

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.



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

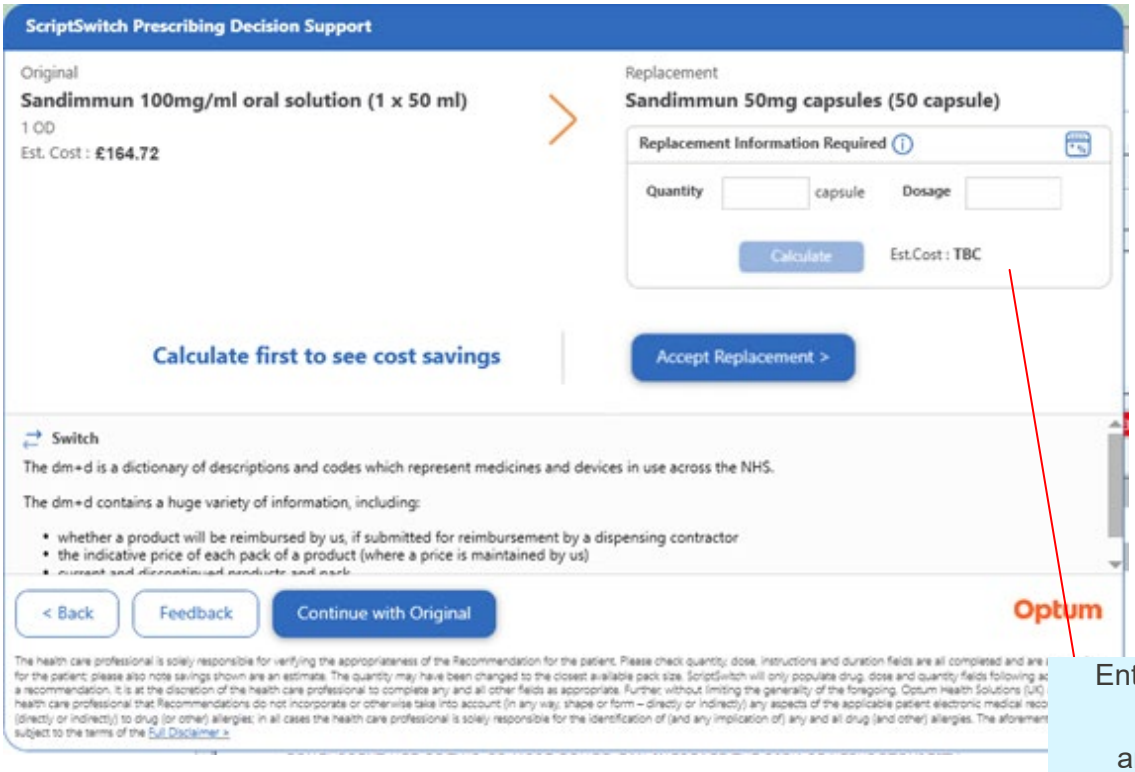
The Medicines Optimisation team may recommend a switch of product between two products which have inequivalent dose units (e.g., liquid to tablet).

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

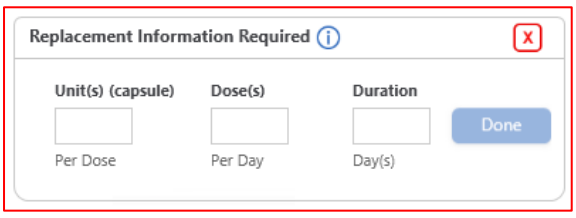
The frequency of these types of recommendations is low and the ScriptSwitch Prescribing pop-up will look and behave slightly differently:



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

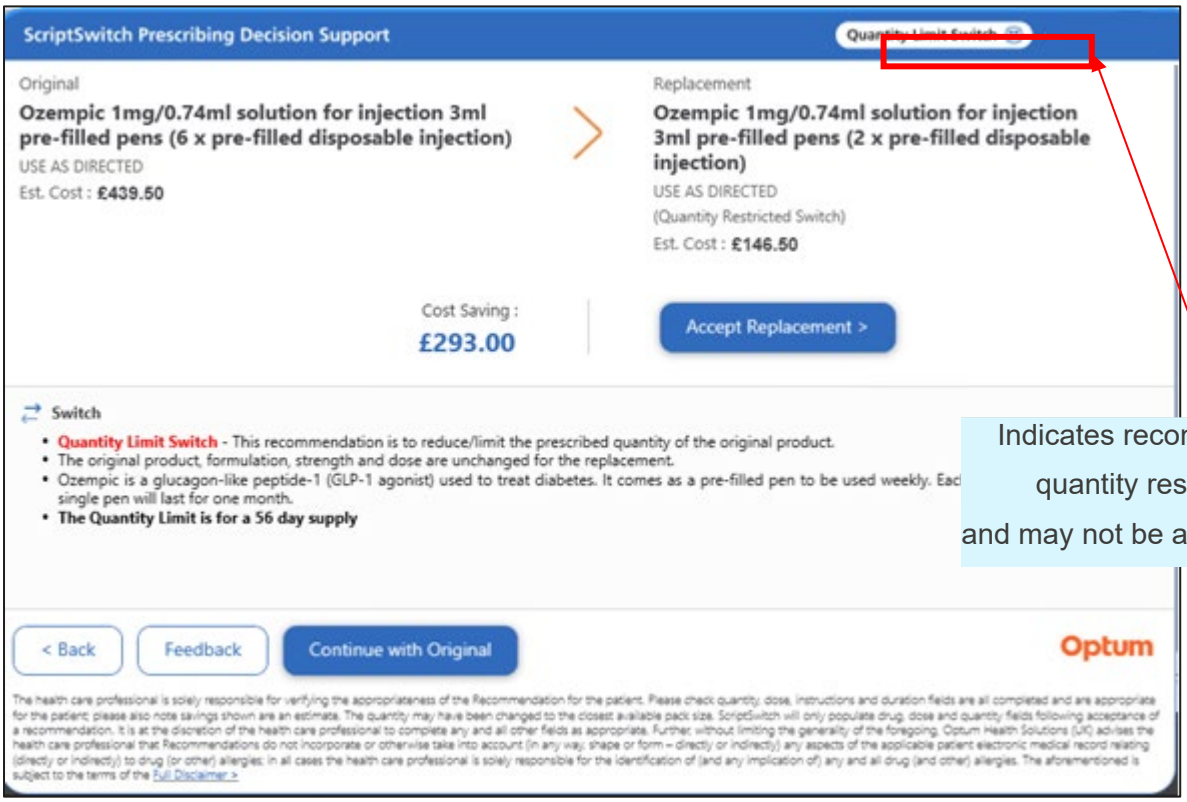
This ScriptSwitch feature addresses prescribing volume and enables Medicine Optimisation Teams to deploy switches that offer prescribers a suggested limit to the quantity of the product being prescribed.

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



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.

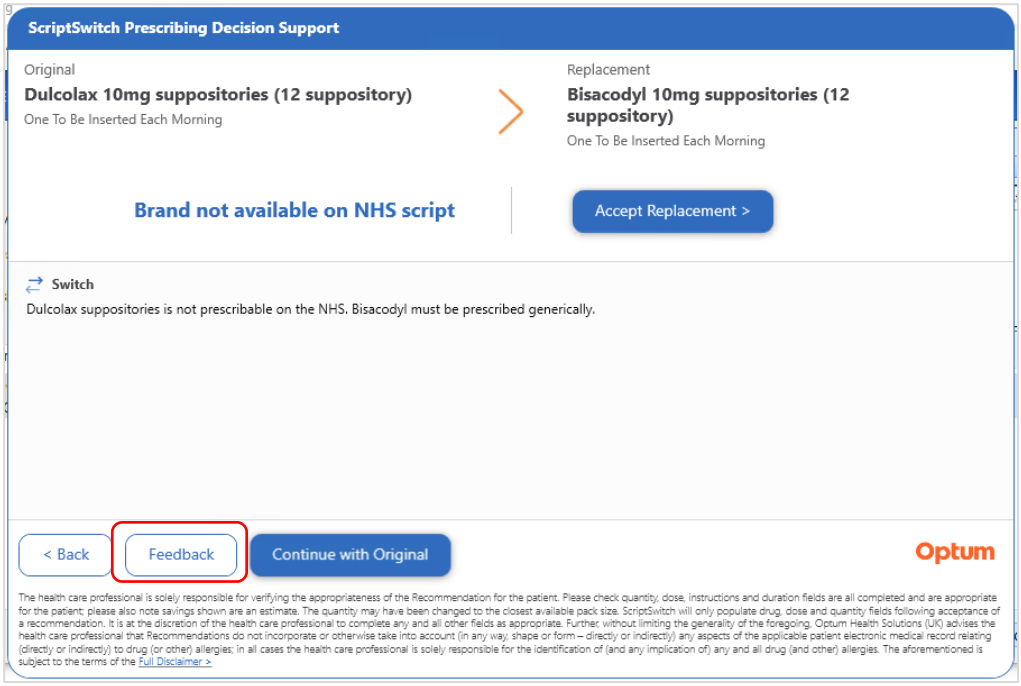
Click **Accept Replacement** to accept the *restricted quantity*.

Prescriber Feedback

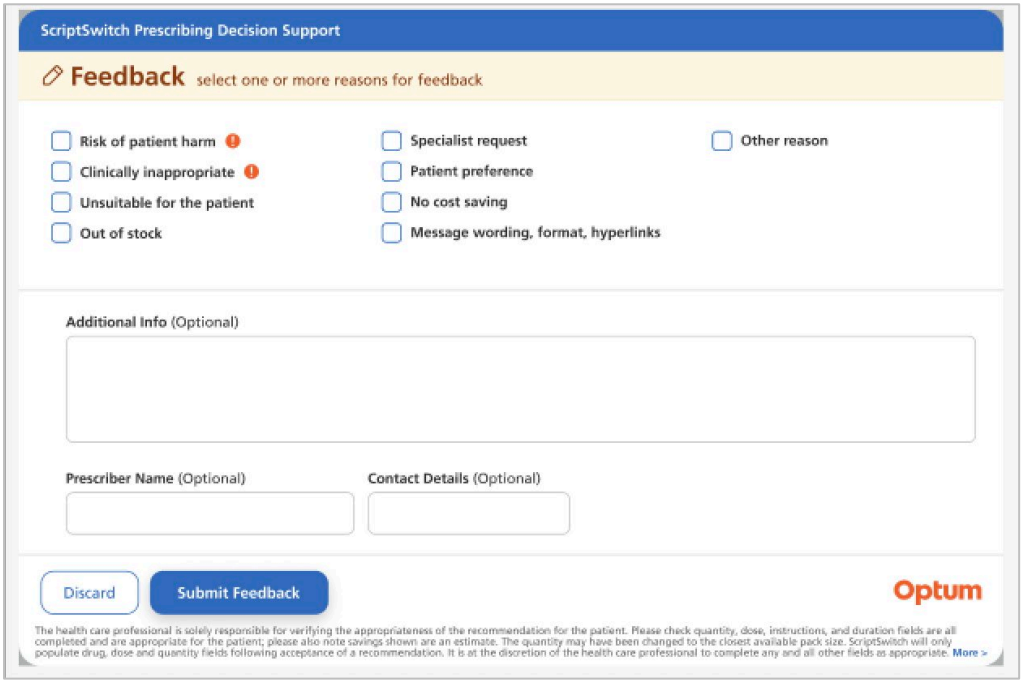
Prescribers have the ability to provide feedback on every ScriptSwitch Prescribing Pop-up. The feedback is available to the Medicines Optimisation teams through a report In ScriptSwitch Analytics.

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.



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



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.

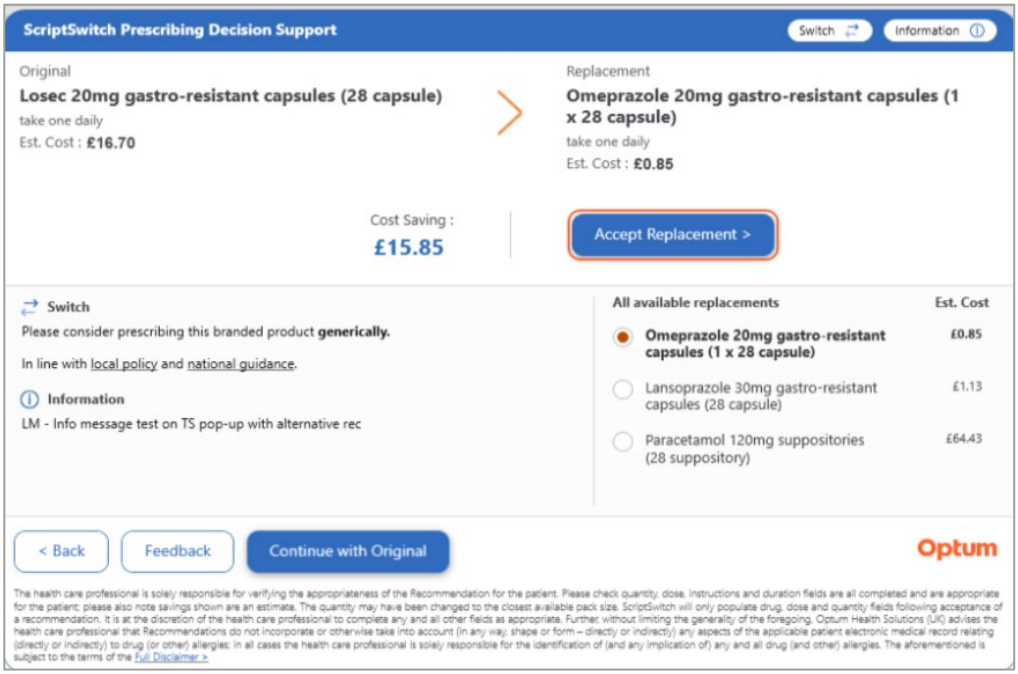
The feedback screen allows the prescriber to:

- 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.

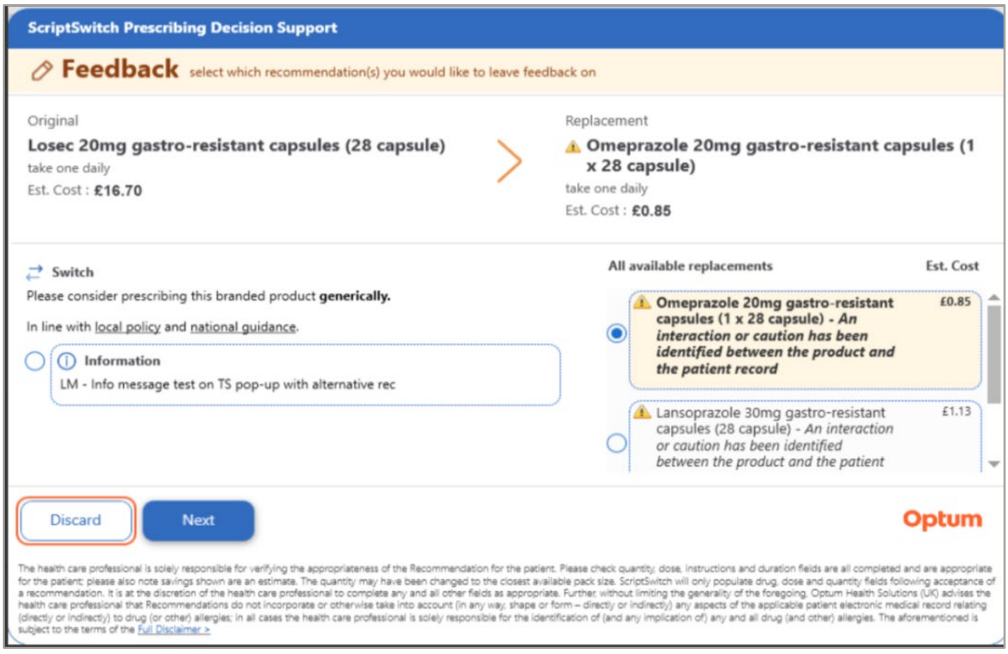
Click **Submit** to send the feedback and the prescriber will be returned to the ScriptSwitch recommendation pop-up

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



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



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

Capping of repeats on GP Pop-up

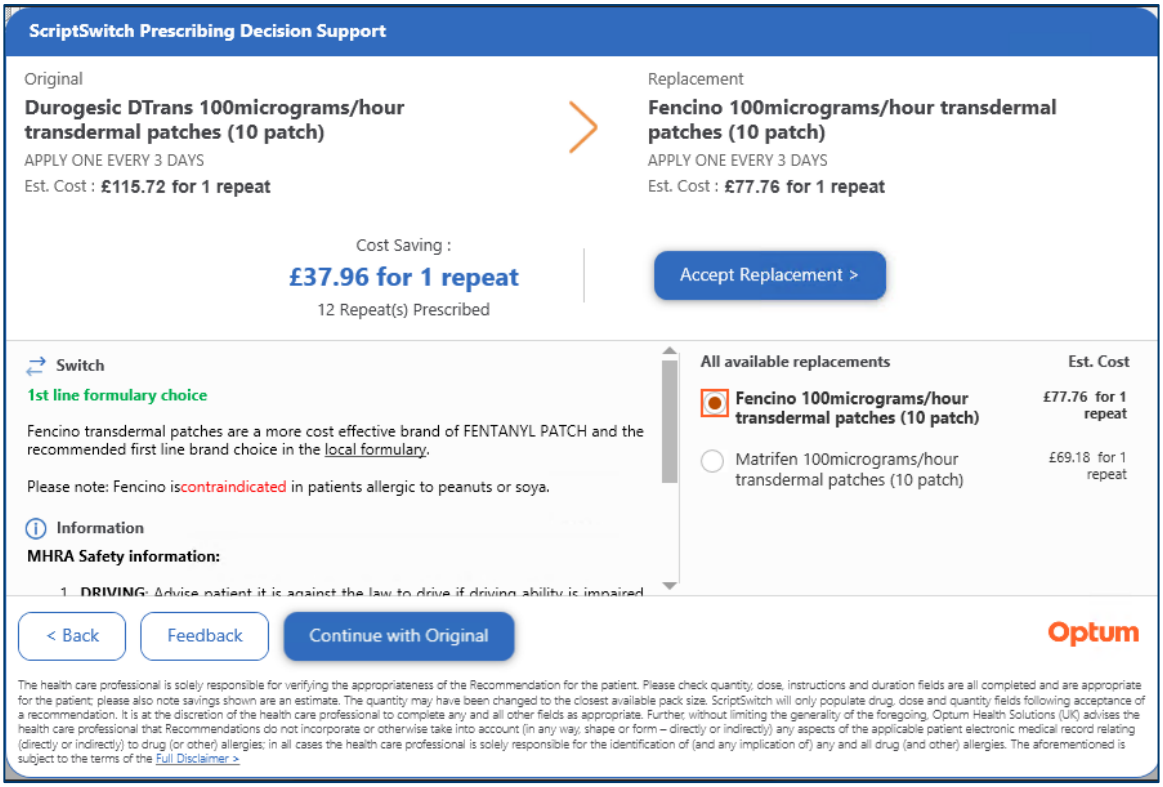
When a prescriber submits a repeat prescription, the recommendation Pop-up cost savings for the switch may present different savings.

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:



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.

These features will be activated on completion of the appropriate data sharing agreements by your local Medicines Optimisation team. The activation process will occur on the ScriptSwitch Prescribing hosted database and within the TPP SystmOne API settings.

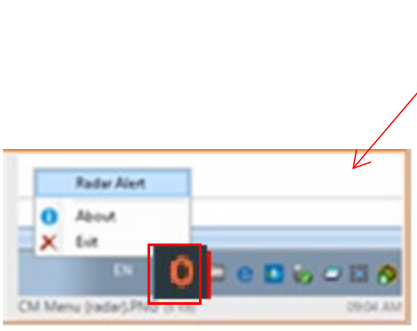
Optum Client Manager

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 TPP SystmOne 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.

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.

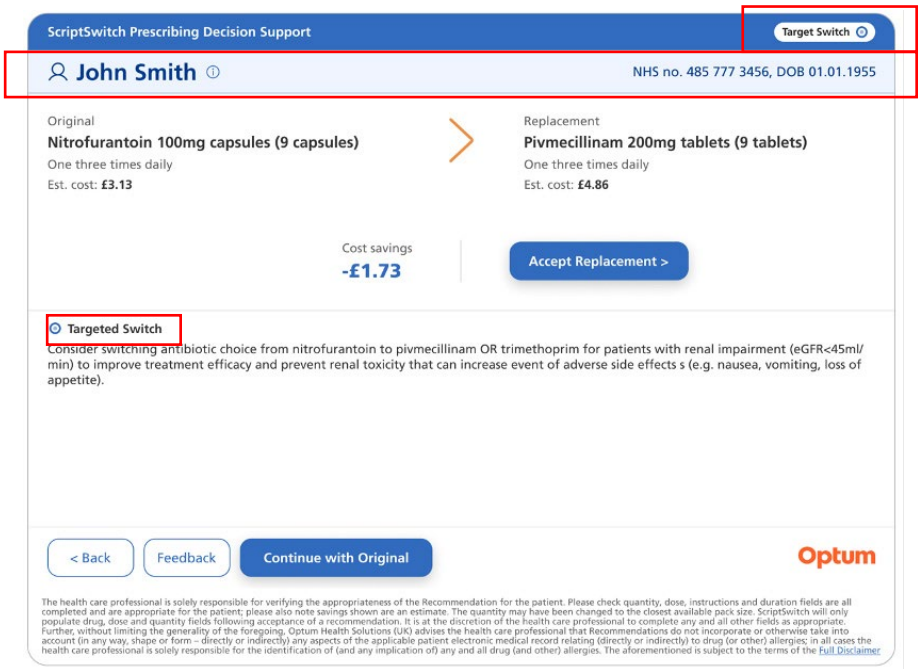
7 patient records are held in the “cache”. Care should be taken if a patient record is recalled, on the same PC, to ensure that any newly added test results have been taken into account in any new prescribing activity.

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

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



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 mediation 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)
AOI.02.024.01	On aspirin and antiplatelet without gastroprotection	Pincer	7.1	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
AOI.02.025.01	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)
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)

RuleId	RuleTitle	Category	Introduction Version	Type
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 m2	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
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

RuleId	RuleTitle	Category	Introduction Version	Type
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)
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

RuleId	RuleTitle	Category	Introduction Version	Type
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)
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-	NHSE	7.13	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
	effective treatments have been considered			
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
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

RuleId	RuleTitle	Category	Introduction Version	Type
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)
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)

RuleId	RuleTitle	Category	Introduction Version	Type
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)
AOI.10.022.01	Penicillamine monitoring overdue	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)

RuleId	RuleTitle	Category	Introduction Version	Type
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 x 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 (>0.5 x 10^9/L) in patient on DMARD therapy	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.030.01	Reduced platelet count detected (<140 x 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 (>100U/L) 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 (>140/90mmHg) in patient on ciclosporin	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
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)

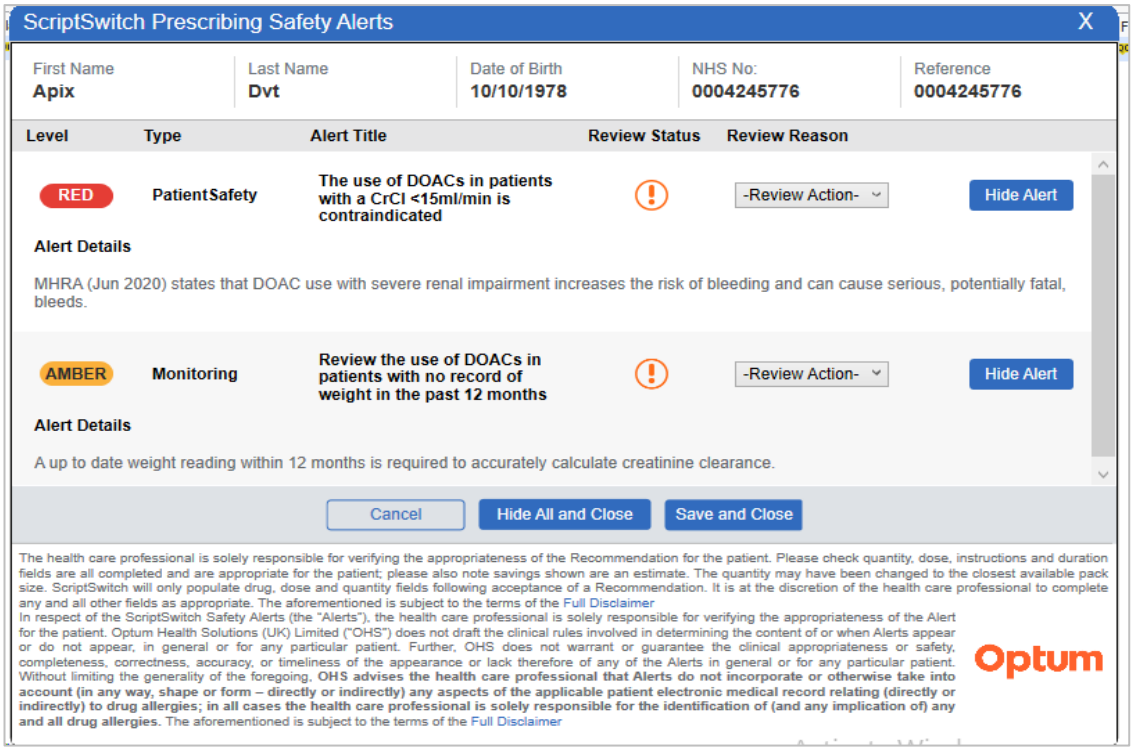
RuleId	RuleTitle	Category	Introduction Version	Type
AOI.10.035.01	Raised MCV detected (>105fL) in patient on DMARD therapy with no follow up blood tests	BSR	7.14	Safety Alert OR Targeted Safety Intervention (When either is true)
AOI.10.036.01	Raised MCV detected (>105fL) in patient on DMARD therapy	BSR	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
I.04.004.01	Patients aged 65 years and over with dementia prescribed antipsychotics for >6 weeks	Pincer Plus	7.14	Safety Intervention Only

RuleId	RuleTitle	Category	Introduction Version	Type
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:



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

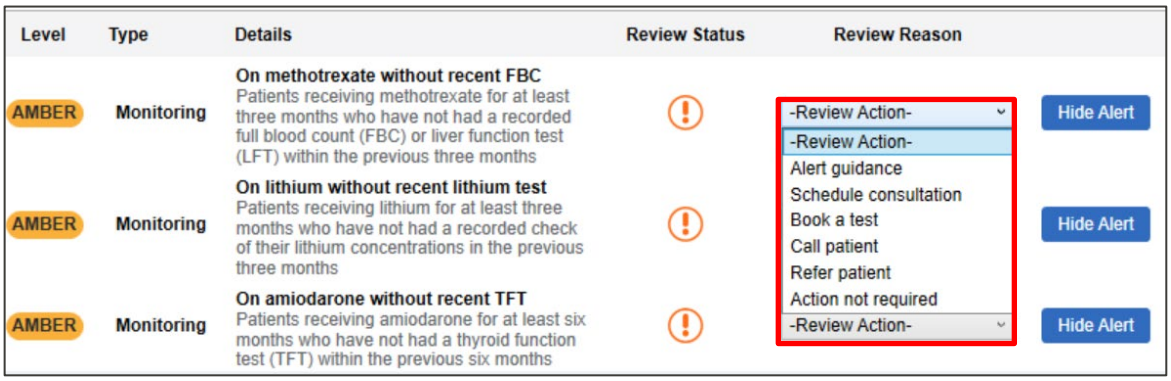
To ignore the Alert, select the 

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.

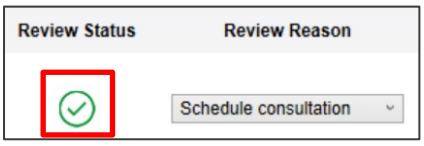
Update Review Reasons and Save & Close Alerts

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.



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

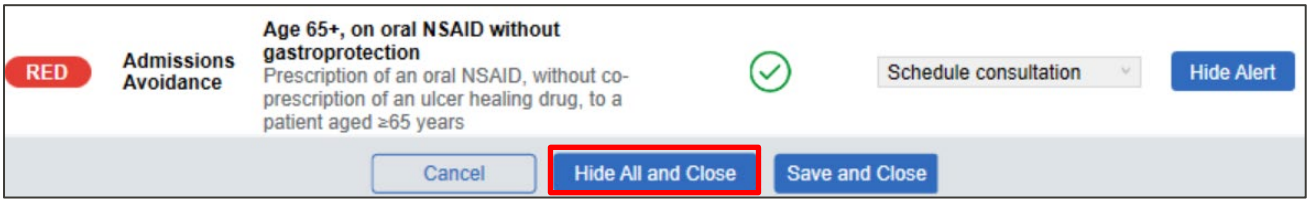


When the alert reasons have been recorded click 

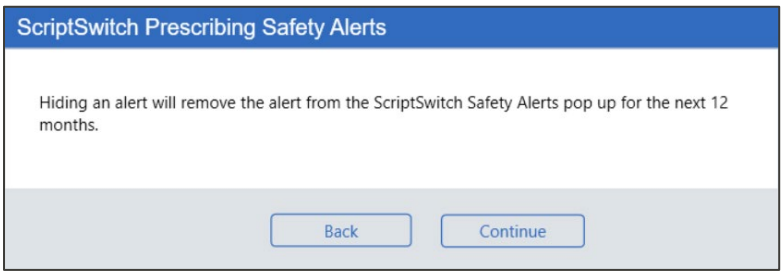
Update Review Reasons and Hide & Close Alerts

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.

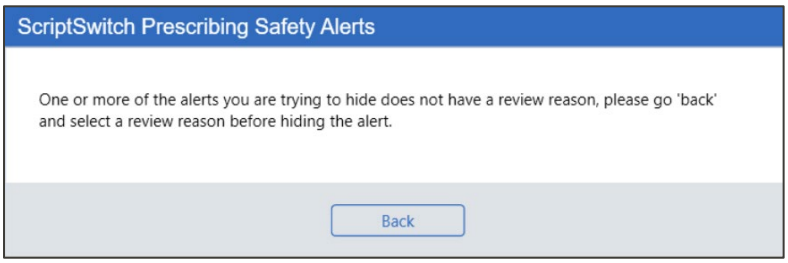


The following warning message will display:



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.

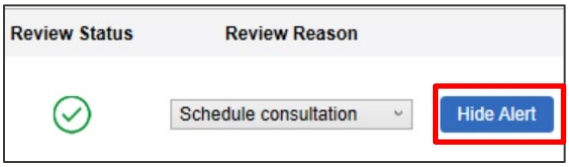


Note:

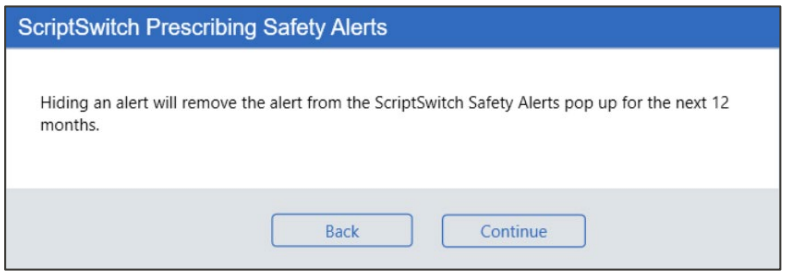
If **Hide All and Close** is selected the review action will be saved for inclusion in the review action reports, but the alert **will not** be presented when the patient record is opened again for all prescribers.

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.



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.



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

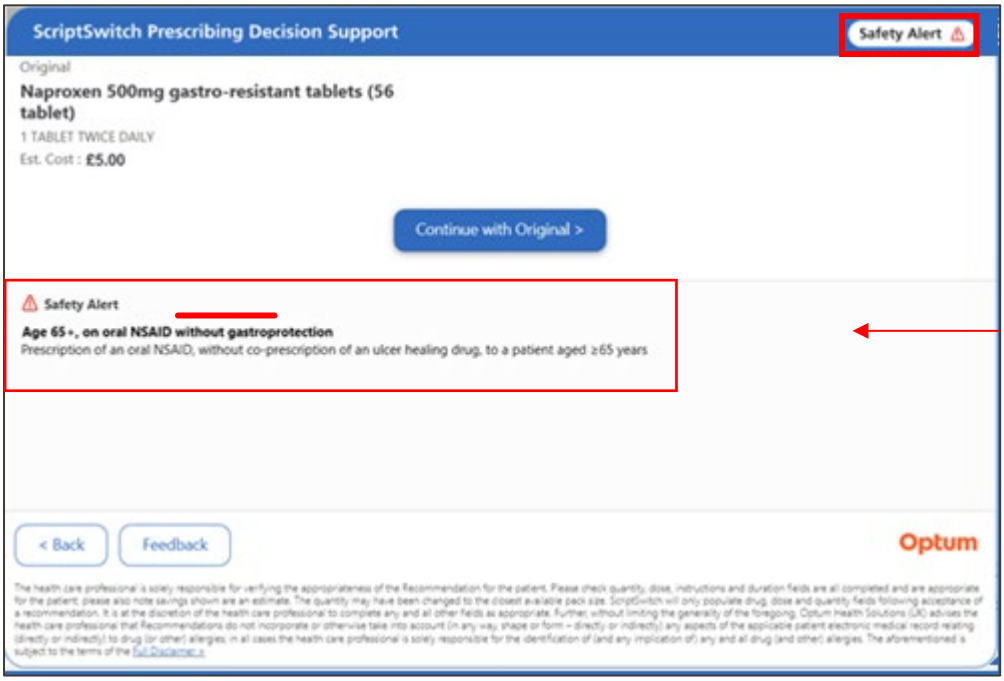
In version 7.0 of ScriptSwitch® Prescribing, patient specific safety information will now prevent risk at the **point of prescribing** by supporting the prescribing workflow, to identify patients who, through the addition of a new medication will 'trigger' a clinical rule using PINCER and NHS Medicines 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.

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

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.

TPP SystmOne and ScriptSwitch Prescribing

Trigger Points

ScriptSwitch Prescribing will trigger at the following points within the TPP product for those users who have been activated for ScriptSwitch Prescribing use:

- New Acute Issues
- New Repeat Templates
- Instalment Dispensed Issues
- Re-starting/Re-authorising Repeat Templates
- Re-prescribing Acute Issues
- Prescribing from the Formulary
- Issuing drugs from Auto-Consultations

ScriptSwitch Prescribing Installation

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

- Preparation of the TPP database by SystmOne
- 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
- Activation of the site with TPP

User Activation

ScriptSwitch Prescribing will be automatically activated for all users. ScriptSwitch Prescribing will only appear at the identified trigger points if the machine has been installed for ScriptSwitch Prescribing.

Following installation, the practice must carefully manage the activation and deactivation of users. ScriptSwitch Prescribing strongly recommend that only **clinical** staff should have access to ScriptSwitch Prescribing,

I.e., those with the relevant level of authority to make decisions on patient's drugs.

To Activate / Deactivate a User

There are 2 parts to user activation. Activate the basic ScriptSwitch product and activate the patient record integration features (see next page)
To activate a user for ScriptSwitch Prescribing the user's smart card will be required. All settings will be saved to the smart card, when the TPP system is exited correctly.

- Login to SystmOne by user.
- From the top of the screen, select the ***User Menu***
- Select ***User Preferences***
- Select ***Prescribing***
- Select ***ScriptSwitch Prescribing***
- ScriptSwitch Prescribing is enabled by ticking the ***ScriptSwitch*** box
- Click ***OK*** to activate

NB: To disable a user, remove the tick from the ScriptSwitch box.

What is Patient Record Integration (PRI)?

ScriptSwitch Prescribing™ integrates with TPP SystmOne 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.

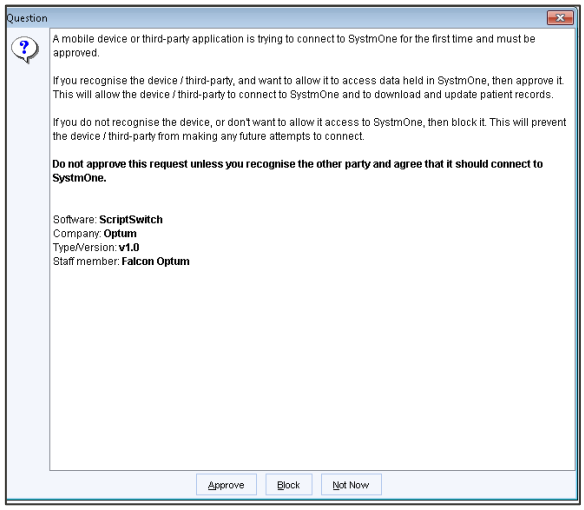
How to activate PRI within SystmOne?

Activation of the PRI features is in 3 parts.

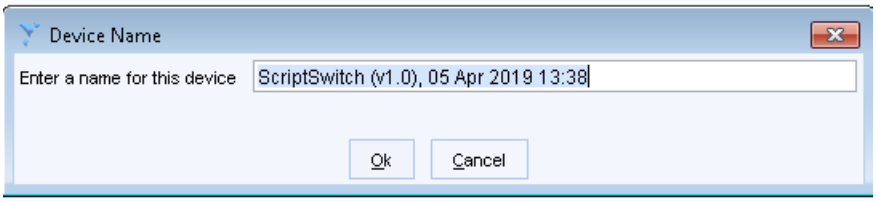
1. Optum activate your licence to use the PRI features above. This is a default on implementation.
2. Practice Managers activate the users for ScriptSwitch – page 47
3. Each user will need to allow ScriptSwitch access to the information as follows

Steps to Activation:

1. Login to TPP SystmOne on a PC with ScriptSwitch Prescribing installed and the following will appear to allow ScriptSwitch Prescribing to integrate with the TPP API



2. The User needs to click **Approve**. This will generate a device ID to establish the link.
3. The Device Name window will appear, simply click OK to confirm the activation

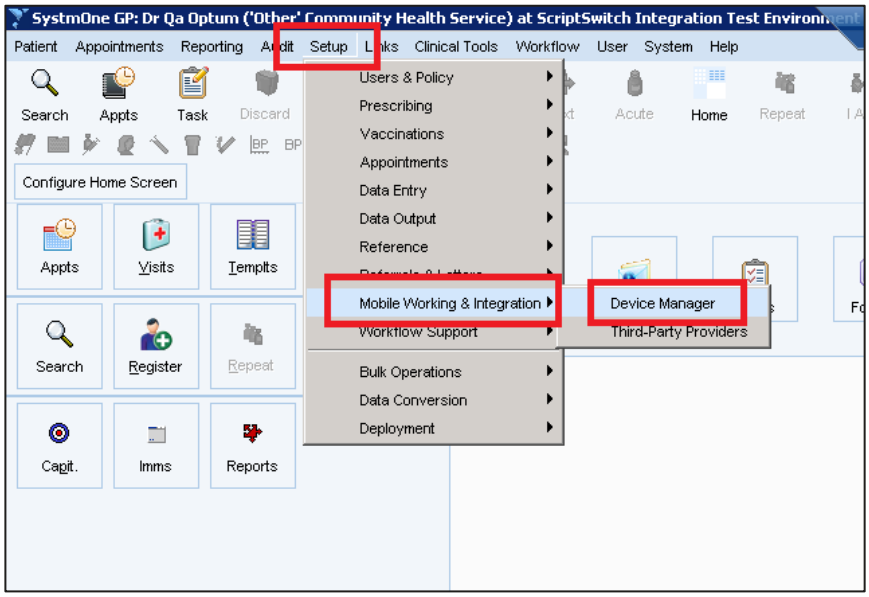


The process will need to be repeated for each user on the PC

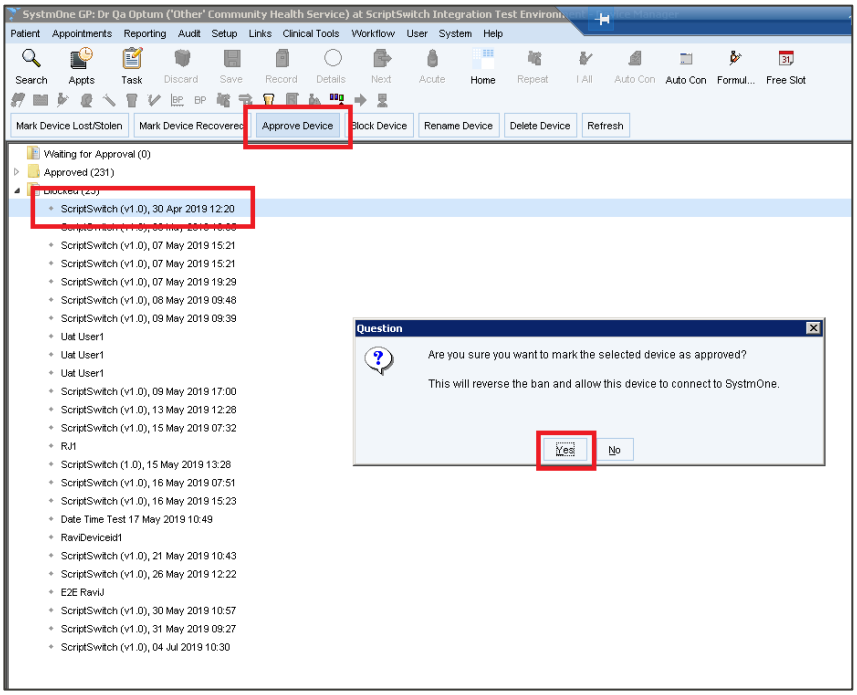
Correcting a User API Activation

If a user has **rejected** the option to let ScriptSwitch interact with the TPP API, this can be corrected by a user with system admin level access on TPP. Once correct, ScriptSwitch Patient Record Integration features will be enabled.

- Log into TPP SystmOne
- Navigate to **Setup** > **Mobile Working & Integration** > **Device Manager**
-



The following screen will then display, select **Approve Device**



- In the left-hand pane options for “Waiting for Approval”, “Approved” & “Blocked” will be displayed
- Expand the **Blocked folder** and you will see a list of devices which have been blocked from access to TPP
- Any requests for ScriptSwitch PRI will be called ScriptSwitch (V1.0) with the date and time they were actioned.
- Select the instance to approve and then click the **Approve** button in the ribbon above then **OK** on the confirmation message to approve the device.

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. You can tell if the software is on the PC by checking the icons on the toolbar at the bottom of the screen. If you have  on the task bar of the PC the software is installed and the user may not be active.
- **User Activation -** With TPP SystmOne users can be activated and deactivated from User Preferences options within SystmOne. It is the practice's responsibility to ensure that only appropriate trained staff have access to ScriptSwitch Prescribing. The additional patient record integration features will need to be activated by the user when the tick box presents on their PC
- **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.