

**Memorandum of Understanding – Prescriber  
Authorisation and Responsibility for Patients  
Transferring between Cornwall Partnership NHS  
Foundation Trust and Royal Cornwall Hospitals NHS  
Trust and vice versa using the Electronic Prescribing  
System**

**V2.0**

Document reference code: MM/033/23

**Purpose:** Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals NHS Trust are adopting the same electronic prescribing and administration (ePMA) system to support safe transfer of care and improve medicines safety and optimisation. This MOU clarifies the authority and responsibility of the prescription when patients transfer between the two organisations.

**Target audience:** Prescribers and staff involved in the administration of medicines and the clinical oversight of medicines optimisation.

**Document author and role:** Iain Davidson, Chief Pharmacist for Royal Cornwall Hospital NHS Trust and Liam Bastian, Lead Pharmacist For Digital Services.

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**Document definition:** Memorandum of understanding

**Supporting committee:** Cornwall Partnership NHS Foundation Trust, medicines optimisation and safety committee and Royal Cornwall Hospitals NHS Trust – medication practice committee. Joint Quality Assurance Committee.

**Supporting chairperson:** Janine Glazier, Associate Medical Director

**Executive lead:** Chief Medical Officer

**Freedom of information:** Can be released under the Freedom of Information Act 2000

**Document section:** Clinical, medication management

**Audience:**

- Cornwall Partnership NHS Foundation Trust
- Royal Cornwall Hospitals NHS Trust

**Key words:** ePMA, electronic prescribing and medicines administration, prescriber,

## Approval process

**Approved at:** Medication Practice Committee (RCHT) and Medicines Optimisation and Safety Committee (CFT) Joint ePMA Board

**Date approved:** 05 June 2023

**Executive approval:** Chief Medical Officer

**Date approved by:** 05 June 2023

**RCHT General manager confirming approval processes:** Richard Andrzejuk.

**RCHT Governance lead confirming approval process:** Kevin Wright.

**Review date:** March 2026 (6 months prior to the expiry date)

**Expiry date:** September 2026

(normally 3 years after ratification unless there are changes in legislation, NICE guidance or national standards or the document should only be valid for a specified period)

**Publication location:**

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## Version control

Version	Date	Author and/or reviewer	Section	Changes – key points
1.0	July 2020	Iain Davidson		Initial issue
1.1	August 2020	Michael Williams	6	Added paragraph relating to incident reporting
2.0	June 2023	Adrian Flynn	5	Section 5 change the titles from medical director to Chief Medical Officer
2.0	June 2023	Adrian Flynn	6	Section 6 replace 'esoteric' with 'medications that may be uncommonly prescribed and have specific requirements in terms of monitoring and titration that the receiving prescriber may not be familiar with'. New format, Chief Medical Officer added. Approved at medicines optimisation safety committee on 23 June 2023.

**This document replaces:** MM/030/20 Memorandum of Understanding - Prescriber Authorisation and Responsibility for Patients Transferring Between CFT and RCHT and Vice Versa Using the Electronic Prescribing System V2.0

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## Data Protection Act 2018 (UK General Data Protection Regulation Legislation)

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For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679, contact the Information Governance team.

- Cornwall Partnership NHS Foundation Trust: Email [cpn-tr.infogov@nhs.net](mailto:cpn-tr.infogov@nhs.net)
- Royal Cornwall Hospitals NHS Trust: Email [rch-tr.infogov@nhs.net](mailto:rch-tr.infogov@nhs.net)

## **1. Introduction**

- 1.1. Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals Trust are moving onto the same electronic prescribing and administration (ePMA) system. This means that prescriptions written by a Royal Cornwall Hospitals Trust prescriber will persist in Cornwall Partnership NHS Foundation Trust if a patient is transferred between Trusts (and vice versa).
- 1.2. Because Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals Trust are separate legal entities, there is a need to clarify where responsibility lies for the prescription as patients transfer between organisations.
- 1.3. This version supersedes any previous versions of this document.
- 1.4. Purpose of this policy/procedure  
This MOU outlines the principles around this arrangement to ensure staff involved in the medicines process are clear where the responsibility and authority lies.

## **2. Scope**

For patients transferring between Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals Trust and vice versa.

## **3. Definitions/glossary**

ePMA – electronic prescribing and administration system.

## **4. Ownership and responsibilities**

### **4.1. Role of the managers**

It is the responsibility of the chief pharmacists and chief medical officer of Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals Trust to ensure this memorandum of understanding reflects practice and is effectively communicated out to the organisation.

It is the responsibility of managers of clinical areas to ensure their staff are following the principles set out in this memorandum of understanding to support safe patient transfer and medicines optimisation.

#### 4.2. **Role of the medicines practice and medicines optimisation and safety committees**

The medicines practice committee (Royal Cornwall Hospitals Trust) and medicines optimisation and safety committee (Cornwall Partnership NHS Foundation Trust) will oversee the implementation and review of this memorandum of understanding to ensure it is followed in practice.

#### 4.3. **Role of individual staff**

It is the responsibility of prescribers to follow the principles set out in this Memorandum of Understanding when transferring patients between Trusts.

It is the responsibility of staff involved in the administration of medicines and clinical oversight to be aware of these arrangements so they understand where responsibility lies when querying a prescription.

### **5. Standards and practice**

5.1. The following four principles apply when patients transfer between Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals Trust;

- 5.1.1. A prescription/ patient specific direction written by a Cornwall Partnership NHS Foundation Trust or Royal Cornwall Hospitals Trust employed prescriber or those contracted to support Cornwall Partnership NHS Foundation Trust/Royal Cornwall Hospitals Trust services (such as Out Of Hours clinicians) is valid in both Trusts and gives the authority for appropriately trained members of staff to administer medicines against the direction.

- 5.1.2. The responsibility for the initial clinical decision to prescribe the drug rests with the original prescriber, however, the ongoing clinical review and associated monitoring to ensure safe and effective care rests with the Trust caring for the patient. This responsibility transfers at the time that the patient is admitted to the organisation.
- 5.1.3. All medicines usually prescribed for a patient must be prescribed on the ePMA system before a patient is transferred. The reasons for intentional changes to the usually prescribed medicines should be clearly documented in the patient notes.
- 5.1.4. When transferring a patient to Cornwall Partnership NHS Foundation Trust the Royal Cornwall Hospitals Trust prescriber needs to give consideration to when the patient may next be reviewed by a prescribing clinician and ensure the prescription at the point of transfer contains sufficient information to cover that period e.g., over bank holiday weekends it might be 4-5 days before the next formal review.
- 5.1.5. When transferring a patient between trusts the prescriber needs to provide a sufficient handover to the accepting prescriber with due regard to medications that may be uncommonly prescribed and have specific requirements in terms of monitoring and titration that the receiving prescriber may not be familiar with including medication that has specific monitoring requirements or where review of treatment efficacy or duration (for example, antibiotics) is required. This is preferably done via telephone close to the point of transfer but where this is not possible it is acceptable to document the relevant information in the patient's written notes or on ePMA.

5.2. All incidents or near misses should be reported in line with incident reporting policies and considered for learning. The primary incident report should be into the system where the patient is located at the time the incident is noticed.

5.3. If harm occurs in one setting but is relevant to actions or omissions in the previous transferring care setting, then information needs to be shared between Medicines Safety Officers so that learning occurs across the care interface. As in all incident management, this should focus on what happened and why, rather than attempting to apportion blame to organisations or individuals.

## 6. Related legislation, national and local guidance

### 6.1. External Standards

- GMC Good practice in prescribing and managing medicines and devices.
- The Medicines Act and related legislation.

### 6.2. Local Guidance

- Medicines Policy of each Trust

## 7. Training requirements

No.

## 8. Implementation

8.1. The Memorandum of understanding will be available on the documents library of Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals Trust.

8.2. The Memorandum of understanding will be implemented in line with Cornwall Partnership NHS Foundation Trust's adoption of ePMA.

## 9. Monitoring compliance and effectiveness

Information category	Detail of process and methodology for monitoring compliance
Element to be monitored	Medication incidents
Lead	The Medicines Safety Officers for each Trust

Information category	Detail of process and methodology for monitoring compliance
Tool	The incident reporting system for each Trust and thematic review of these incidents.
Frequency	Ongoing
Reporting arrangements	<p>Incidents will be reported to the joint ePMA board and the respective medication safety forums in each Trust (RCHT- medicines safety grp, CFT- Medicines Optimisation and Safety Committee).</p> <p>Learning will be escalated to the joint Quality Assurance Group as necessary.</p>
Acting on recommendations and lead(s)	<p>The joint ePMA board will act upon recommendations related to the ePMA system.</p> <p>The medication practice committee (Royal Cornwall Hospitals NHS Trust) and medicines optimisation and safety committee (Cornwall Partnership NHS Foundation Trust) will act on practice/ workforce training recommendations.</p>
Change in practice and lessons to be shared	<p>Changes in practice will be reflected in amended medicines and ePMA policies and procedures and within the accompanying training.</p> <p>Lessons will be shared at formal teaching sessions, safety huddles and through safety bulletins in each Trust.</p>

Will the monitoring arrangements result in a clinical audit: No

## 10. Updating and review

10.1. This Memorandum of understanding will be reviewed every 3 years or sooner if required.

10.2. It will be reviewed by chief pharmacists of each Trust in collaboration with the Medical Directors.

10.3. Any update will be ratified at the joint medicines policy group once it has been approved by each organisation (Medication practice committee and medicines optimisation safety committee).

## **11. Equality and Diversity**

11.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the ['Equality, Inclusion & Human Rights Policy'](#) or the [Equality and Diversity website](#).

11.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

## 12. Appendix 1: Equality Impact assessment Form

**Title of policy or document for assessment:** Memorandum of Understanding - Prescriber Authorisation and Responsibility for Patients Transferring Between CFT and RCHT and Vice Versa Using the Electronic Prescribing System V2.0

**Document library section:** Pharmacy

**Is this a new or existing document?** Existing

**Date of assessment:** 5 June 2023

**Person responsible for the assessment:** Helen Woods, Chief Pharmacist

### What is the main purpose of the document?

Cornwall Partnership NHS Foundation Trust and Royal Cornwall Hospitals NHS Trust are adopting the same electronic prescribing and administration (ePMA) system to support safe transfer of care and improve medicines safety and optimisation. This MOU clarifies the authority and responsibility of the prescription when patients transfer between the two organisations.

### Who is affected by the document?

Staff     Patients     Visitors     Carers     Other     All

The document aims to improve access, experience and outcomes for all groups protected by the Equality Act 2010.

### Concerns

**Are there concerns that the procedural document could have a differential impact on the following areas?**

If a negative impact has been identified, please complete a full EIA by contacting the Equality, Diversity, and Inclusion Team. For RCHT please contact [rcht.inclusion@nhs.net](mailto:rcht.inclusion@nhs.net) and for CFT please contact [cft.inclusion@nhs.net](mailto:cft.inclusion@nhs.net)

Concern area	Response	If yes, what existing evidence (either presumed or otherwise) do you have for this?
Age	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Disability	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Sex	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Gender reassignment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Pregnancy and maternity	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Race	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Religion and belief	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Sexual orientation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Marriage and civil partnership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Groups at risk of stigma or social exclusion such as offenders or homeless people	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Human rights	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

**Are there any associated objectives of the document? If yes, what existing evidence (either presumed or otherwise) do you have for this?**

No

**Signature of person completing the equality impact assessment:**

**Name:** Helen Woods, Chief Pharmacist

**Date:** 5 June 2023