

SMR Live

User Guide

Fully Integrated with:

**Advice &
Guidance**

NHS Digital Assured

SMR Live Objectives

Supporting Primary Care to deliver the SMR Requirements

SMR Live is designed to support Practices, PCNs and CCGs in providing efficient and clinically focused SMR capacity management. It enables risk prioritisation and ease of insight gathering and action planning in order to optimise Primary Care SMR activity.

This clinical support tool is fully integrated with the Advice and Guidance (Eclipse Live) service and when utilised in conjunction with the core clinical systems empowers appropriate healthcare professionals to operate in a highly effective and efficient manner.

SMR Live enables:

- 1: Identification of the SMR Case Load.
- 2: Prioritisation and capacity management.
- 3: Ease of required SMR insight gathering.
- 4: Ability to gain direct patient feedback.
- 5: Standardised SMR action plan creation.
- 6: Interoperability across the Eclipse Live platform.
- 7: Optimisation of wider SMR activity.

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SMR Live Background

SMR Live is fully integrated with the centrally assured national Advice and Guidance (Eclipse Live) Service and is designed to support the efficient delivery of Structured Medication Reviews and Medicines Optimisation activity as set out in the Network Contract Directed Enhanced Service documentation published in September 2020. This web based Clinical Support Module enables the efficient delivery of SMRs at Practice, PCN or Regional level through the application of standardised risk stratification and SMR prioritisation.

SMR Live delivers:

1. Identification

Instant patient identification based on the nationally defined SMR criteria

2. Prioritisation

Standardised population prioritisation enabling SMR delivery aligned to potential impact

3. Insight

Standardised and comprehensive review portal to enable rapid medicines review and informative action planning

4. Action Planning

Automated action plan generation and follow up reminders

5. Patient Engagement

Patient specific SMR questionnaires and support available through linked web based portal

6. Validation

SMR patient cohorts can be tracked longitudinally to validate clinical outcomes

SMR Live provides an additional and essential SMR delivery tool that will empower regions, PCNs and Practices to optimise their delivery of quality SMRs whilst enabling the scale of reviews required in the current NHS environment.





Network Contract Directed Enhanced Service Structured medication reviews and medicines optimisation: guidance 17 September 2020

“SMRs are a National Institute for Health and Care Excellence (NICE) approved clinical intervention that help people who have complex or problematic polypharmacy. SMRs are designed to be a comprehensive and clinical review of a patient’s medicines and detailed aspects of their health. They are delivered by facilitating shared decision-making conversations with patients aimed at ensuring that their medication is working well for them.

Evidence shows that people with long-term conditions and using multiple medicines have better clinical and personal outcomes following an SMR. Timely application of SMRs to individuals most at risk from problematic polypharmacy will support a reduction in hospital admissions arising from medicines-related harm in primary care. It is estimated that £400 million is spent annually in unnecessary medicines-related harm admissions to hospital.

Undertaking SMRs in primary care will reduce the number of people who are overprescribed medication, reducing the risk of an adverse drug reaction, hospitalisation or addiction to prescription medicines. Further information on the rationale behind SMRs can be found on the Royal Pharmaceutical Society web page.

Most prescribing takes place in primary care. Through the increased collaboration with the establishment of PCNs, there is a significant opportunity to support the meeting of international commitments on antimicrobial prescribing. Improved medicines use will also improve patient outcomes, ensure better value for money for the NHS (e.g. by reducing inappropriate prescribing of low priority medicines), and reduce waste and improve its environmental sustainability (e.g. by supporting patients to choose lower carbon inhalers where clinically appropriate and following a full medications review and shared decision-making process).”

Step 1:

System Access

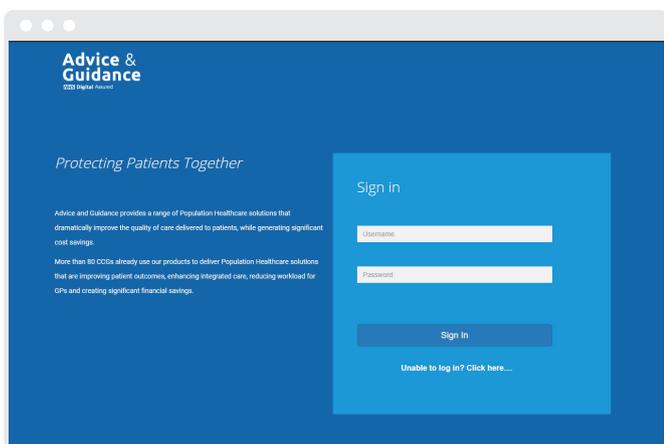
SMR Live Guide

SMR Live offers key steps to identify and review your priority patients in need of SMRs:

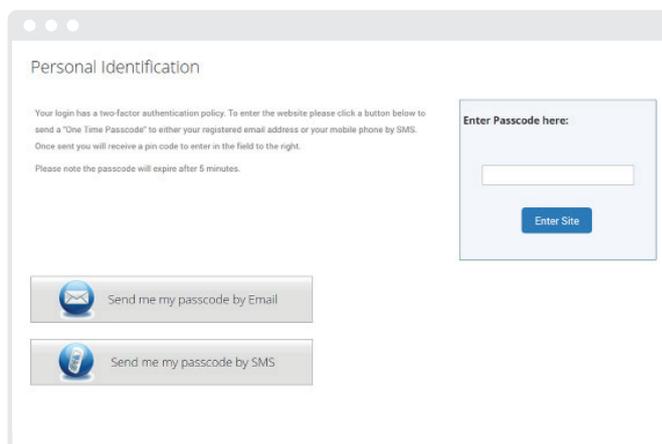
- Access the SMR Live system
- Identify your patients in need of an SMR
- Prioritise patients
- Gather required SMR insight
- Create action plans

How to access the SMR Live system

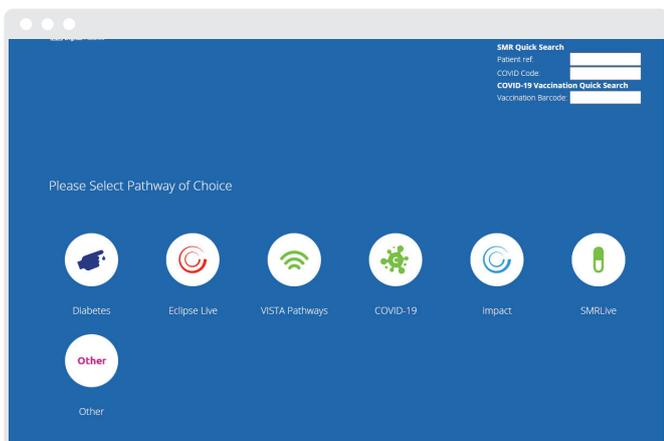
Your Eclipse Live interface can be accessed via www.nhspathways.org or <https://secure.nhspathways.org> if using the N3/HSCN and require patient identifiable data.



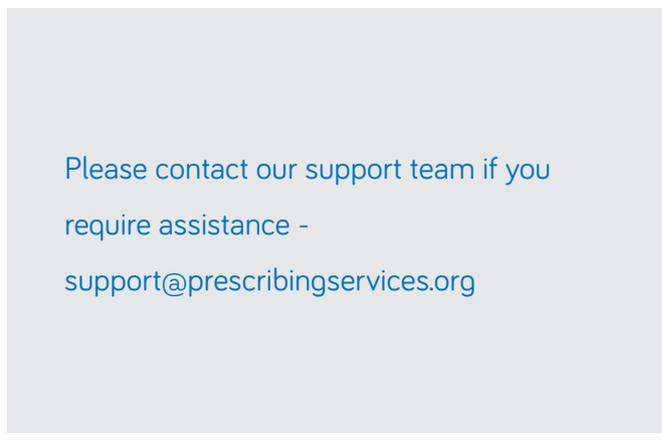
A. Log in with your username and password.



B. Two-factor authentication is required to log in. This requires entering an access code that is sent by SMS to your mobile or emailed to your NHS email address.



C. Select the SMR Live icon to access the interface.



Note - If you are logging in as a PCN user, your home screen may look different, but you will see the SMR Live module icon.

Step 2:

Identification and Prioritisation

Home Page

On the SMR Live Home Page there are a number of different icons. The numbered icons relate to **The Structured medication reviews specification guidance 2020-21 document**, enabling ease of identification of patients within any of those risk categories.

Clicking on these icons displays a relevant list of pathways. Patients within the pathway can be accessed by clicking 'View'.

Additionally Data Quality Status and help guides can be found at the top of the screen.

Prescribing Pathway	Prevalence	Alerts	Patient Engagement	SMR Insight Completed	Rating
Warfarin	98 2.7%	0 / 0 0 / 0	1.0% 1 / 98	9.2% 9 / 98	- View

SMR Quick Search function can be used to navigate to the SMR SMURF for a particular patient.

COVID Code: Eclipse Live derived code used to support patient derived feedback and integrated care services.

Patient Ref: If logged in as a surgery you can enter the patient's reference number.

Emis, Vision and Microtest - This is the same patient reference as found in the clinical system.

SystemOne - This is an encrypted system created number that cross references to the NHS number (found on your Patlist)

SMURFs - Structured Medicines Use Review and Follow up

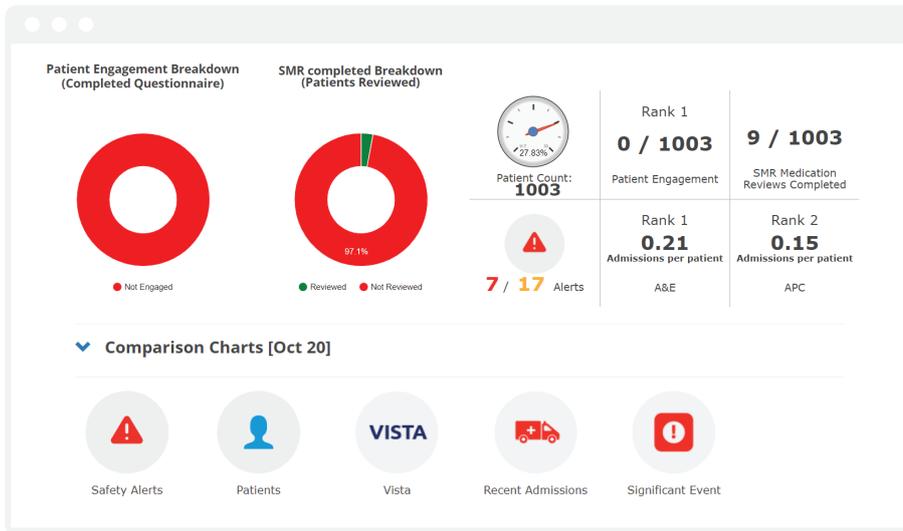
The Patient Engagement - Patients that have completed a feedback questionnaire

View - To access pathway



Case Load

Overview of all patients meeting one or more SMR criteria. You will see a very large number of reviews needed to comply with national requirements. Around 20% of patients are in need of a structured medication review creating a large workload to optimise these groups. SMR Live is designed to provide capacity management and prioritisation.



Safety Alerts: View safety alerts relating to these patients

Patients: View list of all SMR patients

Patient Engagement: Patients that have a completed SMR questionnaire

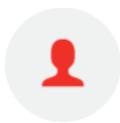
SMR Medication Reviews Completed: Count of SMR action plans marked as completed



RADAR Alerts

RADAR Risk Stratification Alerts utilise established national best practice guidance; UKMi Primary Care Drug Monitoring Guidelines and relevant NICE Recommendations.

Level	Type	Search	Total Patients	Reviewed
Red	Admissions Avoidance (Radar 500)	<p>Angiotensin: Caution: ACE or ARB detected with hyperkalaemia (Potassium >6.5 mmol/L), not on Potassium Sparing Diuretic</p> <p>Patient appears to have hyperkalaemia, is not on a potassium sparing diuretic and is on an ACE or ARB which can exacerbate hyperkalaemia. 1. Please validate that the patient's latest blood screen shows hyperkalaemia and that they are still taking their ACE or ARB (Azilsartan, Candesartan, Irbesartan, Losartan, Valsartan, Olmesartan, Captopril, Perindopril, Ramipril, Lisinopril, Enalapril, Trandolapril). 2. Please look to see if the patient has had a clinical review and been assessed for their elevated potassium. 3. Please ensure that the patient has a follow up to have their potassium blood tests retested (U&Es). https://www.sps.nhs.uk/wp-content/uploads/2017/12/Drug-monitoring_October-2017.pdf</p> <p>Feedback No feedback added.</p>	1	0
Type	Reference	Last Extract	Search Run	Status
Age 50 (F)	53247790	Fri 06/11/20 12:27	Sun 08/11/20 08:32	✘
Review Address A&G				
Admissions	Angiotensin: Caution: ACE or ARB detected, heart failure and hyperkalaemia (Potassium			



Priority SMRs

Priority SMRs will automatically risk stratify your patients, using different parameters that constitute the need for a structured medication review. Each parameter is weighted to produce an overall SMR Risk Score.

Patients with SMR Risk Score > 10
Please be aware this page may take a long time to load.

Care home Patients:

Mental Health Patients:

Export Selected Rows to XLS | Export All Rows to XLS

SMUR Review	Ref	Age	Sex	Drugs	SMUR Medication Power Complete	SMUR Insight Complete	SMUR Action Plan	Red Alerts (pts)	Amber Alerts (pts)	Polypharmacy (pts)	ACB (pts)	High Risk Drugs (pts)	Deprescribing (pts)	Dependency (pts)	Severe Frailty (pts)	Moderate Frailty (pts)	Learning Disability (pts)	Priority Groups (pts)	Emergency Admissions (pts)	SMR Total Points	SMR Pathway Count	Last Patient Questionnaire	Deprivation Decile	Last Flu Vaccination
	6742	81	F					20	0	5	3	2	0	0	0	0	0	0	0	35	3		5	
	2815	92	M					0	0	10	5	2	0	6	5	0	0	4	0	32	9		6	
	52475	61	F					0	0	10	4	2	0	4	0	0	0	4	5	29	8		5	
	54476	60	F					0	0	7	8	0	0	4	0	0	10	0	0	20	7		5	
	78	16	M					10	0	10	1	2	0	2	0	2	0	0	0	27	4		5	
	6825	77	M					0	0	7	1	2	0	0	0	2	0	0	15	27	4		5	
	19411	79	M					0	0	10	3	2	0	6	5	0	0	0	0	26	6		6	
	50445	70	M					10	5	2	2	2	0	2	0	0	0	2	0	25	4		3	

Click **SMURF Review Icon** to view detailed patient information and begin an SMR

Click **the Information Icons** within the system to view a patients NHS Number if logged in and accessing identifiable information

SMR Risk Score

- Red Alerts:** 10 points per alert
- Amber Alerts:** 5 points per alert
- Blue Alerts:** 3 points per alert
- Polypharmacy: >= 15 :** 10 points
- between 12 and 14 :** 7 points
- between 10 and 11 :** 5 points
- ACB Score: 1 point for each ACB score**
- High Risk Drugs:**
 - On a DOAC 3 points
 - On NSAIDs 3 points
 - On Warfarin 3 points
 - On Antiplatelets 3 points
 - On Neuroleptics 3 points
 - On DMARDs 3 points
 - On Immunosuppressant drug 3 points
 - On Lithium 3 points
 - On Carbimazole 3 points
 - On Aminosalicilate 3 points
 - On Loop diuretic 3 points
 - On Antidepressant 3 points
- Deprescribing:** 1 Point each (to Deprescribe as Not Cost-effective)
- Dependency:**
 - Pregabalin 3 points
 - Opiates 3 points
 - Current Smoker 3 points
 - High Alcohol Intake 3 points
 - Z-drug 3 points
 - Benzodiazepine 3 points
- Severe Frailty:** 5 points
- Moderate Frailty:** 2 points
- Learning Disability:** 10 points
- Poor drug compliance:** 5 points
- Priority Groups:**
- Medication Related Indicators**
 - GIB01 3 points
 - GIB02 3 points
 - GIB03 3 points
 - GIBCI 3 points
 - PAIN01 3 points
 - PAIN02 3 points
 - PAIN03 3 points
 - FRAC01b 3 points
 - FRAC02b 3 points
 - FRAC03b 3 points
- Emergency Admissions**:**
- APC Emergency Admission** 5 points per admission
- A&E Admission** 5 points per admission

- Deprivation Decile*:**
- Deprivation decile 1-2: 4 points
- Deprivation decile 3-4: 3 points
- Deprivation decile 5-6: 2 points
- Deprivation decile 7-8: 1 point

The SMR Risk Score has been developed to prioritise SMR activity based on given clinical and outcome markers. This will be subject to ongoing review and all feedback is welcome. The National Medicines Optimisation Group (NMOG) will also be invited to review the risk score criteria.

*https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/835115/loD2019_Statistical_Release.pdf
** With VISTA activated within your CCG

SMR Live Pathways

-  3.1a Care Homes
-  3.1c High Risk Drugs
-  3.1d Frailty
-  3.2 Covid 19
-  3.6a Recent Admissions
-  3.6c SMR Requests
-  3.22b Dependency
-  3.22d Deprescribing
-  3.23 New Medicine Service
-  3.1b Polypharmacy
-  3.1c Medication Related Indicators
-  3.1e Addiction
-  3.5 Pincer
-  3.6b Patient Requests
-  3.22a Antimicrobials
-  3.22c Higher-Carbon Inhalers
-  3.22e STOMP
-  Investment and Impact Fund

Selecting Your SMR Pathway

In addition to using the Priority Patient functionality to start your SMR insight work you can access the individual SMR Live Pathways. The following pages show how to move through a selected pathway to the pathway specific SMURF and then on to the patient's SMR SMURF.

If starting from your Priority SMRs patient list you can click on the magnifying glass icon against each patient to access their SMURF. Go to page 14 of guide, Insight gathering.

Prescribing Pathway	Prevalence	Alerts	Patient Engagement	SMR Insight Completed	Rating
Polypharmacy (>10 Meds)	171 4.7%	1 / 1 4 / 3	0.0% 0 / 171 1 / 21	7.6% 13 / 171 1 / 21	-

1. Click the Pathway Icon

2. Click View to go into pathway

Pathway Summary

View all patients in the pathway or the priority patients aligned to national guidance

Patient Engagement Breakdown (Completed Questionnaire)

SMR completed Breakdown (Patients Reviewed)

Patient Count: **1003**

Rank 1 **0 / 1003** Patient Engagement

Rank 1 **0.21** Admissions per patient A&E

Rank 2 **0.15** Admissions per patient APC

9 / 1003 SMR Medication Reviews Completed

7 / 17 Alerts

97.1% Reviewed, 0.1% Not Reviewed

Comparison Charts [Oct 20]

Safety Alerts, Patients, VISTA, **Priority Patients**, Recent Admissions

Priority Patient View

Polypharmacy (>10 Meds)

	Total Patients (Polypharmacy >10 Meds)	Total Patients in cohort	% Patients in cohort	SMR Insight Completed	
Current Smokers	164	20	12.2%	1	View
Moderate / Severe Frailty	164	54	32.93%	5	View
Patients with morbid obesity (BMI>=40 or diabetes and BMI>=35)	164	32	19.51%	3	View
Patients with High Alcohol intake	164	1	0.61%	0	View
Haemoglobin < 11	164	6	3.66%	0	View
Hyponatremia (<131)	164	1	0.61%	0	View
Patients with SMR Risk Score between 10 and 25	164	129	78.66%	5	View
Patients with SMR Risk Score > 25	164	6	3.66%	2	View
SMR: Patients with an Anticholinergic Score >= 4	164	39	23.78%	2	View
Patient in 3 SMR pathways	164	61	37.2%	5	View
Patient in 4 SMR pathways	164	17	10.37%	0	View
Patient in 5 or more SMR pathways	164	10	6.1%	1	View

1. Click View to go into the priority patient cohort

Priority Patient Cohort

View a list of patients and key measures for this cohort.

Mental Health Patients:

[Export Selected Rows to XLS](#) [Export All Rows to XLS](#)

Smart Review	Ref	Age	Drugs	Sex	Red Alerts	Amber Alerts	SMR Insight Complete	SMR Action Plan	SMR Total Points	Pathway Review	Pathway Action Plan	Last Smart Questionnaire	Depression Decline	BP Sys	BP Dia	HbA1c	Hb (g/L)	ALT	Cholesterol	Neutrophil	HbA1c	TSH	Potassium	Sodium	Weight (kg)
	1206	86	18	F	0	0	22/10/2020	37	5	150	80	23	10.8	13.0	3.5	6.44	40	1.55	4.8	131	81.8				
	794	84	15	F	0	0	22/10/2020	22	5	100	60	51	10.0	13.0	3.5	7.80	40	1.77	4.8	143	75.0				
	1547	91	18	M	0	0		19	5	124	70	70	10.8	16.0	2.0	4.41	42	0.96	4.8	160	92.8				
	1452	90	11	M	1	0		17	5	135	71	67	9.8	13.0	3.7	3.61	43	2.25	5.1	130	69.8				
	12725	81	15	F	0	0		14	6	139	74	53	10.8	15.0	4.5	5.32	45	1.49	4.2	142	81.6				
	501673	35	15	M	0	0		13		180	100	14	10.4	16.0	4.7	2.28	58	0.80	4.5	136	91.4				
	1126	90	11	F	0	0		12	3	130	70	53	10.0	5.0	3.8	5.27	48	0.53	4.2	140	59.2				

2. Click the magnifying glass icon to go into the SMURF for the patient review

Please note: Patient list details can be exported using the Excel function. If logged in and accessing identifiable information this will be reflected.

Step 3:

Insight Gathering

SMURF - Structured Medicines Use Review & Follow Up

Depending on the pathway and the patient cohort you are working with you will see the appropriate SMURF i.e. Warfarin Review, Medication Review, Frailty Review or another. You will see all relevant SMURF Reviews for the patient you are viewing. This can be used for your wider patient review.

Medication Review
Patient Ref: 1206

Monitoring up to date

Medication Review (09/04/20)	Last Polypharmacy Review	ACB Score 3.0	GI Bleed Index 3.0	Haemoglobin 10.8g/dl (12/10/20)	eGFR 23 (03/06/20)
ALT 13U/L (03/06/20)	Flu Jab (31/10/19)	Covid Review	DOAC Review	Pregabalin Review	Structured Medication Review

Overview

Analysis

- Patient appropriately monitored ✓
- Patient has not completed a questionnaire !

Actions

- Patient appears to have anaemia, please contact GP/pharmacy as patient needs to be reviewed
- Patient would benefit from a Flu Jab
- Complete Medication Questionnaire
- Create new pathway action plan
- Other Actions

1. Click **Structured Medication Review** box to access the patient's specific SMR overview page

Please Note: If you are accessing directly from the Priority SMR list you will go straight to the patient's SMR SMURF.

The **Structured Medication Review** gives an overview of the key SMR insights available to assist in SMR insight gathering and action planning.

Structured Medication Review
Patient Ref: 1206

Monitoring up to date

SMR Risk Score 37	Haemoglobin 10.8g/dl (12/10/20)	eGFR 23 (03/06/20)	ALT 13 (03/06/20)	Blood Pressure 150/80mmHg (05/10/20)	ACB Score 3.0
Weight 81kg (31/12/18)	GI Bleed Index 3.0	Non Smoker (21/01/19)	Serum Sodium 131mmol/L (03/06/20)	Medication Review (09/04/20)	Flu Jab (31/10/19)
eFI Score 0.19	Red Alerts 0	Amber Alerts 0	Deprivation 5/10	Covid Review	DOAC Review

Pregabalin Review

Overview

SMR Risk Score: 37

	Count	Score	
Polypharmacy	18	10	✓
ACB Score	3.0	3	✓
High Risk Drugs	1	2	✓
Dependency	1	2	✓
No. of Emergency Admissions	4	20	✓

Analysis

- Patient appropriately monitored ✓
- Patient has not completed a questionnaire !

Actions

- Patient appears to have anaemia, please contact GP/pharmacy as patient needs to be reviewed
- Patient would benefit from a Flu Jab
- Complete Structured Medication Review Qu
- Open SMR action plan not flagged as Completed !

2. Scroll down to review available information.

Completing an SMR Overview

Long Term Conditions Overview (data up to 11/11/2020)

Hypertension Chronic Kidney Disease Peripheral Vascular Disease

Medication History Overview (data up to 11/11/2020) Medication from last 90 days

Antibiotic	21-Aug-20	Trimethoprim	200 mg tab	Continue Review Increase Decrease Stop
Anti-Depressants	01-Oct-20	Venlafaxine XL (Eflexor XL)	75 mg XL cap	Continue Review Increase Decrease Stop
Antihistamine	01-Oct-20	Cetirizine	10 mg tab (30)	Continue Review Increase Decrease Stop
Anti-Neuropathics	01-Oct-20	Pregabalin	50 mg cap	Continue Review Increase Decrease Stop
Blood Pressure Control	01-Oct-20	Bisoprolol	5 mg Tab	Continue Review Increase Decrease Stop
	01-Oct-20	Bisoprolol	2.5 mg Tab	Continue Review Increase Decrease Stop
	26-Aug-20	Candesartan	16 mg tab (28)	Continue Review Increase Decrease Stop
	01-Oct-20	Doxazosin	2 mg tab	Continue Review Increase Decrease Stop
	26-Aug-20	Indapamide (Slow release) (Natrlix SR)	1.5 mg SR tab (30)	Continue Review Increase Decrease Stop
Blood Thinning	01-Oct-20	Edoxaban (Lixiana)	30 mg tablets	Continue Review Increase Decrease Stop
Bone Loss Control	01-Oct-20	Calcium Carbonate / Vit D (Adcal-D3)	1.5 g / 400iu Tab (Chewable)	Continue Review Increase Decrease Stop
	01-Oct-20	Risedronate	35 mg tab (Once Weekly)	Continue Review Increase Decrease Stop
Cholesterol Control	01-Oct-20	Atorvastatin	10 mg tab	Continue Review Increase Decrease Stop
Gastro Protection	01-Oct-20	Lansoprazole Capsules	15 mg caps (56)	Continue Review Increase Decrease Stop
Heart Rate Control	01-Oct-20	Digoxin	62.5 mcg tab	Continue Review Increase Decrease Stop
Nutritional Supplements	01-Oct-20	Folic acid	5 mg tab	Continue Review Increase Decrease Stop
	01-Oct-20	Vitamin Capsules	1 caps	Continue Review Increase Decrease Stop
Opioid Analgesics	01-Oct-20	Buprenorphine Patch (BuTrans)	5 mcg/hr transdermal	Continue Review Increase Decrease Stop
Other Drugs	26-Aug-20	Sodium Bicarbonate Capsules	500 mg cap	Continue Review Increase Decrease Stop

Save & View Action Plan Clear previous drug actions Start new drug: + Add

1. To view details of each medication click the arrow on the right.

2. Actions can then be issued against each medication by clicking one of the following:

Continue - Continue with the current strength and dose

Review - Add notes and mark the medication for review

Increase - Increase from the current strength and/or dose

Decrease - Decrease from the current strength and/or dose

Stop - Stop the medication entirely

When you review each medication and select an action, a Medication Comments box will pop up enabling you to add text and capture patient adherence, understanding and shared decision status aligned to that

3. Once you are finished reviewing and applying comments and actions - click the **Save & View Action Plan** button.

This will automatically place the plan in the patient's SMURF.

Please Note: you may need to refresh the SMURF page.

Medication Comments

Bendroflumethiazide (Bendrofluazide) 2.5 mg tab (28)

Adherence

Understanding

Shared Decision

Please confirm you wish to mark this drug as Continue

Yes No

Step 4:

Action Plan Creation

Action Plan

Once you have clicked the Save and View Plan button the following screen will open.

The saved Action Plan enables you to see all added actions and gives an outline for requirements within the subsequent structured medication review.

The screenshot shows a web interface for reviewing a patient's medication. At the top, it says "Review for Patient 3796" and "Action Plan created by". Below this, the "Case ID: 01179" and "Status: Opened" are displayed. There are sections for "Summary" and "Review Notes".

On the left, there is a "Suggested Actions" menu with options like "DECREASE DOSE", "STOP DRUG", "CONTINUE DRUG", "START A NEW DRUG", "INCREASE DOSE", "MEDICATION REVIEW NEEDED", "LIFESTYLE INTERVENTION", "SUGGESTED ADDITIONAL TESTS", "ADD RESULTS", "SOCIAL PRESCRIBING", "GENERAL NOTES", and "FOLLOW-UP:". The "MEDICATION REVIEW NEEDED" option is selected.

The main area is titled "Actions Added:" and contains a table with columns "Readcode", "Description", and "Delete". Below this, there is a section for "Action Plan" which is a "Structured Medication Review".

The "Actions" section is titled "Medication Change" and lists several items:

- 1. **Current drug:** Candesartan 2 mg tab
Comments: Needs repeat Blood pressure please
To be completed 60 Days from 04/10/2020
- 2. **Current drug:** Clopidogrel tablet 75 mg tab
Comments: Needs repeat FBC with Iron levels please
To be completed 60 Days from 04/10/2020
- 3. **Continue Drug**
Current drug: Metformin SR 500 mg SR Tab
To be completed 1 Year from 04/10/2020
- 4. **Stop a drug**
Current drug: Betahistine 8 mg tab
Comments: Consider stopping as dizziness may have been related to low blood pressure
To be completed 60 Days from 04/10/2020
- 5. **Stop a drug**
Current drug: Loperamide 2 mg caps
Comments: Consider stopping as diarrhoea may be related to metformin or ferrous sulphate
To be completed 60 Days from 04/10/2020
- 6. **Continue Drug**
Current drug: Lansoprazole Capsules 15 mg caps
To be completed 60 Days from 04/10/2020
- 7. **Continue Drug**
Current drug: Rosuvastatin 5 mg tab
To be completed 60 Days from 04/10/2020

There is also a "General Notes" section with one note: "1. **Comments:** Please ensure patient has completed questionnaire".

At the bottom of the screen, there is a navigation bar with buttons for "Upload Attachments" and "Complete Review". The "Complete Review" button is highlighted with a red box. Below the navigation bar are three icons: "Refer Patient", "Library", and "Guidelines".

1. Click **Action Plan PDF** to generate a PDF version of the action plan, which can then be uploaded to the GP system as you would any other document.

2. Please ensure you click the **Complete Review button** to log the review within the system.

This PDF will automatically be placed within the patient's SMUR SMURF.

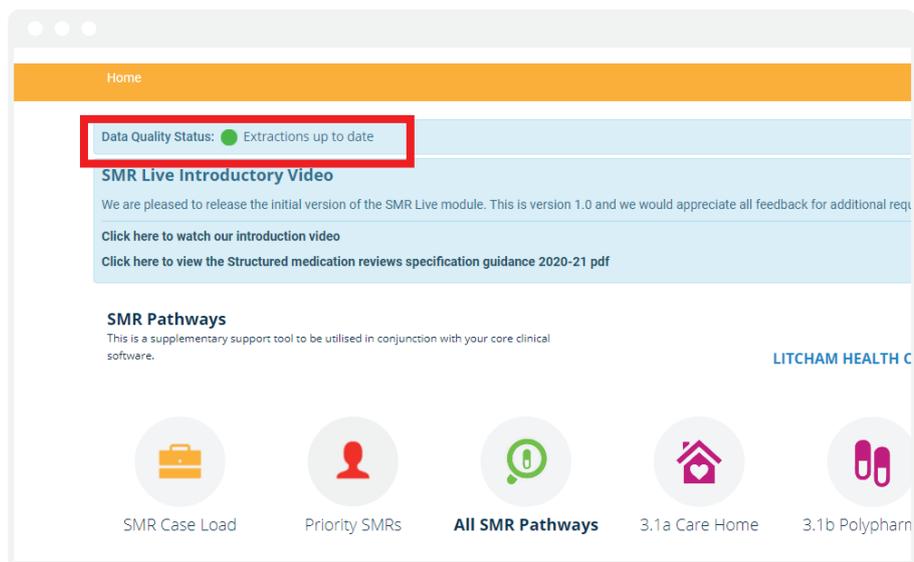
Please Note: You may need to refresh the SMURF screen to see the latest Action Plan.

Data Quality Assurance

Data Quality Assurance

Please note that the data within your SMR Live system is only as accurate as the latest import.

Latest import information is clearly identified on the SMR Live Home page.



-  Last data extraction greater than 14 days ago
-  Last extraction greater than 7 days ago
-  Last extraction in the last week

We are looking to create complete interoperability with the Principal Clinical Systems but until then, the Principal Clinical Systems should be used in tandem with SMR Live for your final action plan.

SMR Live has been created as part of our response to COVID-19 to enable effective remote patient assessments without the patients needing to be seen. Please do feed back any system features that you feel would further enhance the ability for you to undertake an effective medication review.

SMR Live Interface

Implementation & Support

NHS PATHWAYS SUPPORT

We have a range of support services and training programmes available to help you make the most of your NHS Pathways System. Please call 01553 615555 or email support@prescribingservices.org to find out more about our:

[User guides – SystemOne and EMIS Web](#)

[Telephone helpline service](#)

[Online demos](#)

www.nhspathways.org

HOW TO SET UP USERS FOR NHS PATHWAYS

CCG level log in requests have to be authorised by the Head of Medicines Management and should be sent to support@prescribingservices.org

Practice level log in requests have to be authorised by either the Practice Manager / Lead GP or Primary Contact listed on the original sign up form and should be sent to support@prescribingservices.org for Information Governance purposes.

All log in requests require the following:

- Name
- Job Role
- NHS Email
- Mobile Number (optional)
- CCG
- Practice National Code
- Practice Name

Once received these requests will be actioned, details sent to users directly and you will be updated.

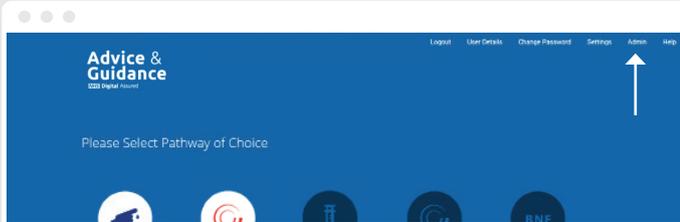
**[SMR Live PCN User log in requests are available from support@prescribingservices.org](mailto:support@prescribingservices.org)
This will require an authorised PCN representative to complete the request form in full with all intended users listed.**



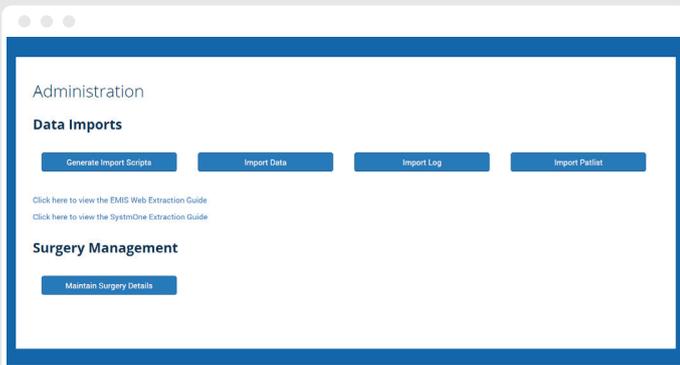
Little Gem User Guide

Simple extension of existing data extraction to automate PATLIST processing in GP Practices.

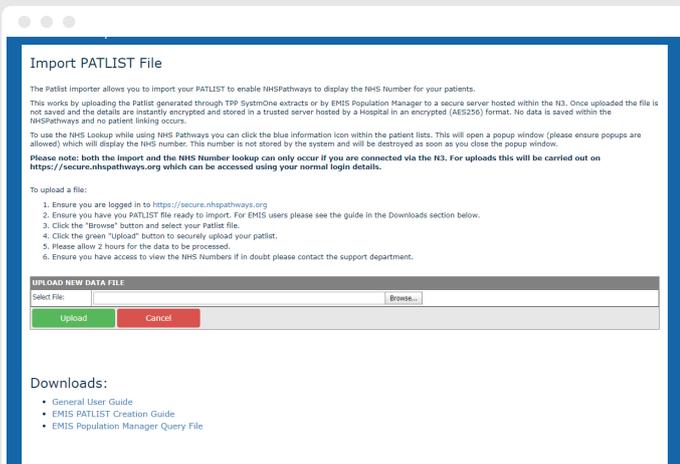
Please note: You must use the N3 version of NHS Pathways to upload your PATLIST. This is available only on the N3 at <https://secure.nhspathways.org> and can be accessed using your normal login details.



1. Once logged in the home page will be shown. Click **Admin** at the top.

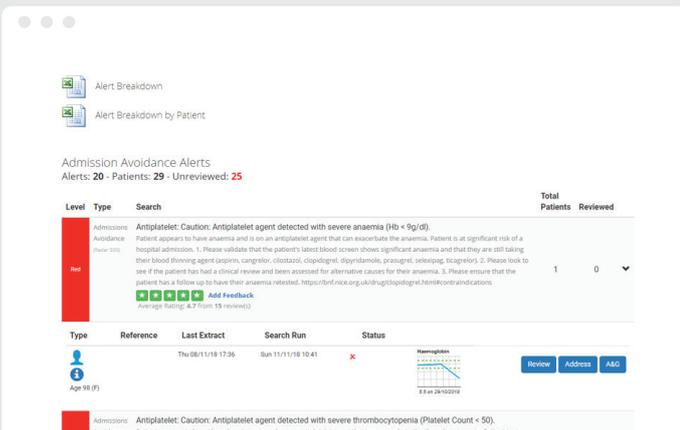


2. On the **Administration** page click **Import Patlist**.



3. Follow the **To upload a file** instructions.

4. Upload complete (This process is recommended to be completed every month).



View the patient information by clicking the blue  on the interface.

QUICKER IDENTIFICATION OF YOUR PATIENTS

SystemOne practices only

SystemOne use the NHS number as the patient identifier. This number is not extracted, instead a reference number is generated and held within an Excel sheet called a PATLIST. The Practice Managers/Primary Contacts are aware and shown this as part of the extraction process. There is also a macro quick finder that can be downloaded as detailed below.

How to download a macro for quicker identification of your patients

Please enter the below link into the address bar in your web browser:
www.nhspathways.org/downloads/patlistsearch.zip

1. A zipped folder will be downloaded, unzip and save 'Eclipse Patient List Search.exe' file (keep for future use).
2. Double click and run the file.
3. Click 'Choose File', then navigate to where the PATLIST is saved.
4. Enter patient reference 'Ref' number in 'Reference Number' field and click 'Search'.
5. The 'NHS Number' field will then be populated.

We recommend minimising the program so as not to repeat step 3 each time.

For any further guidance please contact support@prescribingservices.org

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NHS Digital Assurance with FRA certification
NHS England Section 251 Accredited

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SMR Live