

# STANDARD OPERATING PROCEDURE

## S60 – Electronic Transfer of Prescriptions to Trials Pharmacy

Version	3
Effective Date	27/07/2022
Review Date	26/07/2025
Author & Position	Sam Keenan, Lead Research Nurse
Signature	
Date	2.8.2022
Approver & Position	Helen Quinn, R&D Director
Signature	
Date	11/08/2022

### Controlled document

This document has been created following the Royal Devon University Healthcare NHS Foundation Trust Policy for the Development, Ratification & Management of Procedural Documents. It should not be altered in any way without the express permission of the author or their representative.

It is the responsibility of all users of this SOP to ensure that the correct version is being used. If you are reading this in a paper format please go [on-line](#) to confirm you have the latest version.

### DISCLAIMER

This generic R&D Standard Operating Procedure (SOP) must be followed unless a study specific SOP exists.

**Once printed this is an uncontrolled document**

Full History			
Version	Date	Author	Reason
1.0	28 July 2014	Gayle Githens-Mazer, Clinical Research Nurse Manager	
2.0	DD MM 2019	Samantha Keenan, Senior Research Practitioner	<i>Minor changes to contact details and transfer to new template.</i>
3	09 June 2022	Samantha Keenan, Lead Research Nurse	3 yearly review, updated into new template.

<b>Associated Trust Policies/ Procedural documents:</b>	
<b>Key Words:</b>	<i>SOP Trials Pharmacy Prescription</i>
<b>In consultation with:</b>	
<p>Quality Assurance Group (June 2019)          Directorate Governance Group          Quality Assurance Group (June 2022)          Governance Oversight Group (June 2022)</p>	

## Contents

<b>1 INTRODUCTION</b>	<b>4</b>
<b>2. PURPOSE</b>	<b>4</b>
<b>3. SCOPE</b>	<b>4</b>
<b>4. DEFINITIONS &amp; ABBREVIATIONS</b>	<b>4</b>
<b>5. DUTIES AND RESPONSIBILITIES OF STAFF</b>	<b>5</b>
<b>6. PROCEDURES</b>	<b>5</b>
<b>7. DISSEMINATION AND TRAINING</b>	<b>5</b>
<b>8. MONITORING COMPLIANCE AND EFFECTIVENESS OF THIS SOP</b>	<b>6</b>
<b>9. ARCHIVING ARRANGEMENTS</b>	<b>6</b>
<b>10. REFERENCES</b>	<b>6</b>

## Research and Development

### 1 INTRODUCTION

Within the Royal Devon and Exeter Hospital (RD&E), research participant visits are conducted in a number of locations. Many are located on the main Wonford site in satellite buildings e.g. the Child Health Building (CHB), Macleod Diabetes & Endocrine Centre (MDEC), Mireille Gillings Neuroimaging Centre (MGNC), Heavitree Hospital and the Research Innovation Learning and Development (RILD) building. Due to this geography and to be more efficient there needs to be a system to allow prescriptions to be sent electronically enabling the Clinical Trials Pharmacy (CTP) to start the process of dispensing, prior to the staff member collecting the medication. This system of electronically transferring clinical trial prescriptions is necessary to avoid multiple attendances at the CTP which can be time consuming and the double checking of electronic against original prescriptions ensures patient safety.

### 2. PURPOSE

The purpose of this SOP is to outline the safe electronic transfer of clinical trial prescriptions to the Clinical Trials Pharmacy (CTP) to initiate dispensing prior to presenting the original prescription to the CTP team.

### 3. SCOPE

The SOP should be referred to whenever electronic transfer of a prescription is required.

Electronic transfers of prescriptions cannot be used for control drugs.

### 4. DEFINITIONS & ABBREVIATIONS

CI	Chief Investigator
CIMD	Clinical Investigation of a Medical Device
CTIMP	Clinical Trial of an Investigational Medicinal Product
CTP	Clinical Trials Pharmacy
CTU	Clinical Trials Unit
GCP	Good Clinical Practice
GOG	R&D Governance Oversight Group
HRA	Health Research Authority
IMP	Investigational Medicinal Product
IRAS	Integrated Research Application System
MHRA	Medicines and Healthcare products Regulatory Agency
R&D	Research & Development
REC	Research Ethics Committee
Royal Devon	Royal Devon University Healthcare NHS Foundation Trust
SOP	Standard Operating Procedure
Sponsor	An individual, company, institution or organisation which takes responsibility for the initiation, management and financing of a clinical trial. Sponsorship activities may be delegated to the Investigator, CTU and/ or other organisations as appropriate
TMF	Trial Master File

## 5. DUTIES AND RESPONSIBILITIES OF STAFF

**Research Teams** shall follow this protocol when electronically transferring prescriptions.

The person collecting the trial medication has the responsibility to provide the original prescription to the pharmacy team when collecting study drugs.

Only Royal Devon encrypted devices must be used for electronic transfer of prescriptions; personal smart phones or devices are not be used.

It is the responsibility of the **Research Team** to ensure that no alterations to the prescriptions are made post electronic transfer to Clinical Trials Pharmacy (CTP), as this will invalidate the sent prescription.

The **Pharmacist or Pharmacy Technician** has the responsibility to validate the electronically transferred prescription against the original before releasing the completed prescription.

## 6. PROCEDURES

Ensure the prescription is valid. Ensure this is signed by a prescriber who is on the delegation log.

Transfer prescription securely e.g. email scan of prescription. Using email [rde-tr.pharmacyTrials@nhs.net](mailto:rde-tr.pharmacyTrials@nhs.net)

Call CTP to inform them of how you have electronically transferred a prescription and confirm receipt.

Take original prescription to CTP when ready for collection. If prescription differs from electronically transferred prescription or has been altered in any way from original it will not be accepted by CTP.

Delete any copies of photos/scans from electronic devices (e.g. Sent box of your e-mail) after collection of the study medication.

## 7. DISSEMINATION AND TRAINING

7.1 This SOP and associated templates and forms will be uploaded to the [Royal Devon website](#) shortly after having been released.

7.2 All staff whose activities are subject to this SOP should ensure that they take time to read and understand the content of this SOP.

## Research and Development

- 7.3 *If applicable, a training log within the Investigator Site File/Trial Master File should be completed to document that members of staff have read and understood the contents of this SOP.*

### 8. MONITORING COMPLIANCE AND EFFECTIVENESS OF THIS SOP

- 8.1 In order to monitor compliance with this SOP, the auditable standards will be monitored as follows:

No	Minimum Requirements	Evidenced by
1.	The prescription is valid and signed by a prescriber on the delegation log.	Checking prescriptions against named personnel, and their training, on a study delegation log.
2.	CTP accepts original prescriptions only, and checks them against the electronically transferred copy.	Evidenced by auditing the original prescriptions held by CTP.

- 8.2 Outcomes from audit will be presented to the R&D Governance Oversight Group (GOG) which will monitor any resulting action plans until all issues have been addressed to satisfaction.

- 8.3 Issues identified via the audit process which require escalation will be referred to GOG.

### 9. ARCHIVING ARRANGEMENTS

- 9.1 The original of this document will remain with the R&D Quality Assurance Coordinator. An electronic copy will be maintained on the R&D section of the Q-Pulse document management system and a pdf copy on the [Royal Devon website](#).

- 9.2 Archive copies must be maintained for any documents which have been superseded. Archive copies in electronic format should be retained indefinitely.

### 10. REFERENCES