

EMIS practices : Prescriber guide on the process of electronic Direction to Administer forms.

In Nottingham, Nottinghamshire and Bassetlaw, every medication that needs to be administered by a community nurse (e.g. insulin, Vitamin B12, palliative care medication, suppositories) requires a direction to administer. This is a written instruction from a prescriber that enables the administration of a patient's prescribed medication by a healthcare professional.

The governance frameworks for our community nursing providers require one to be in place to authorise their staff to administer all types of medication. The nurses must be assured that the Direction to Administer has come from the prescriber, which will be verified against the smartcard details recorded on EMIS. There is a requirement to fill in your registration number on the form.

Please see the Direction to Administer guidance hosted on Nottinghamshire APC for more information which includes the validity of the forms.

There are four forms for use in Nottingham and Nottinghamshire:

- Direction to administer form (DA form) for all injectables, suppositories, enemas (Replaces DNS1/ASS1/T34/DN14)
- Direction to administer Vitamin B12 form
- Direction to administer Anticipatory Medication form (Replaces DNS1/ASS1/T34/DN14AP)
- Direction to administer Syringe Driver form (Replaces DNS1/ASS1/T34/DN14SP)

The key changes for primary care are:

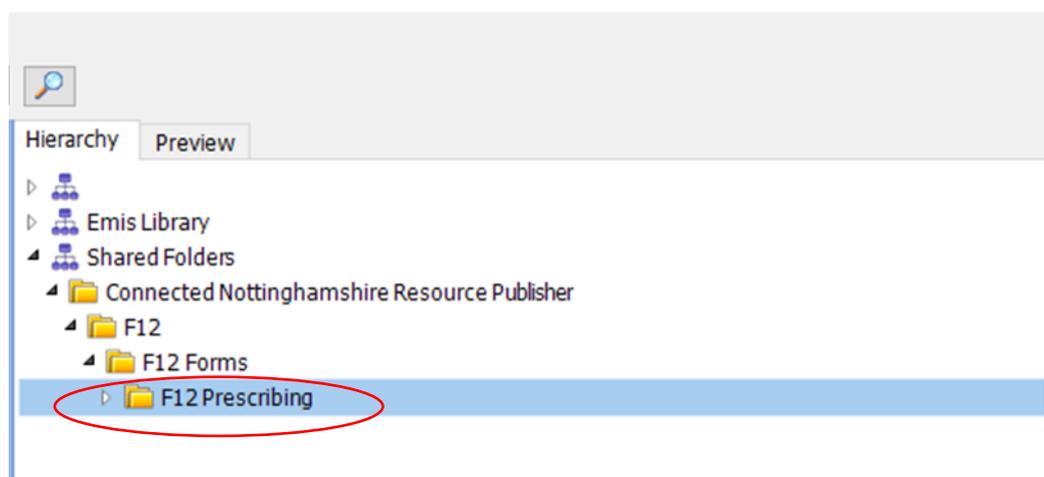
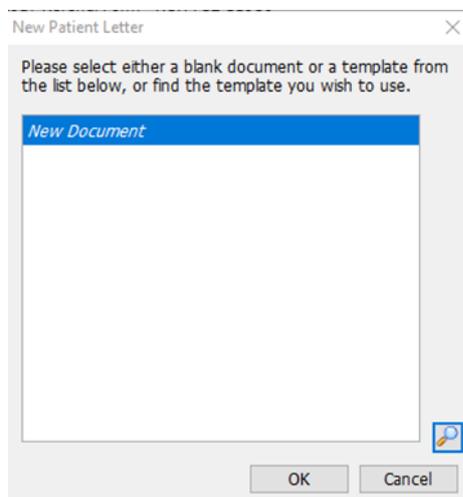
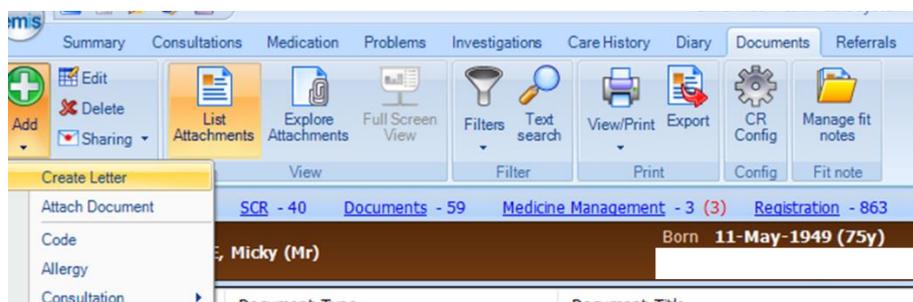
- An electronic signature is pulled from the smartcard avoiding the need for physical signatures.
- Forms have been reviewed and standardised.
- Editable forms – whilst prefilled with some parameters, can be altered, with prescriber taking responsibility for content.
- Paper forms can be used if there is no access to the electronic record. These will need a physical signature; name of organisation and a copy would need to be uploaded to the patient's record at the earliest opportunity.

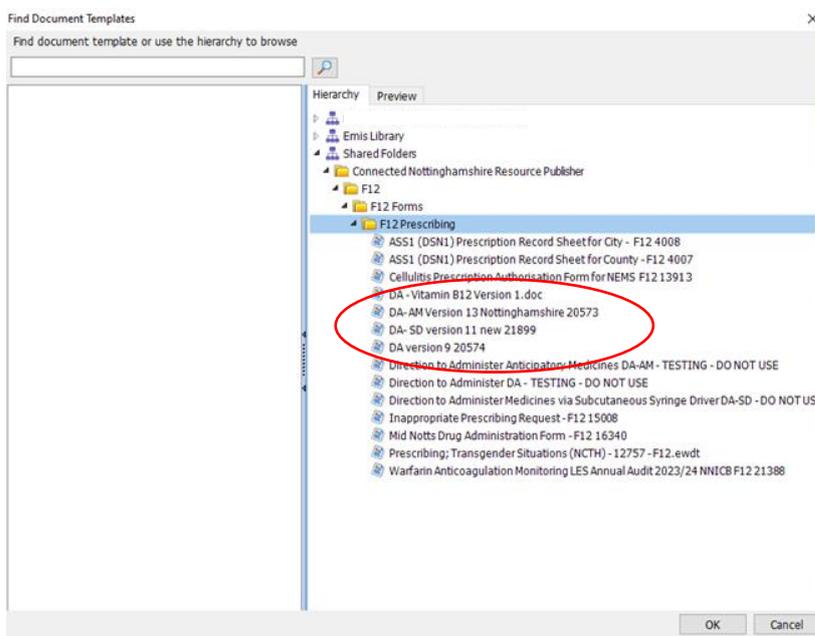
Key points to bear in mind

- There needs to be a new form if any change is made. It is possible to view an audit trail of the form to check if a form has been amended.
- Forms will be saved in documents. An entry will also be made in the consultation tab within the patient's records.
- The forms must be emailed to the community nurses as per usual process. This must be done by the prescriber using their nhs.net email address. This task should not be delegated to anyone else.
- Always use the F12 template – please do not use any practice created or downloaded forms. This will ensure the nurses are able to find the labelled DA forms as well as ensure you are using the most updated version of the forms.
- Keep a set of printed blank forms should you need to visit patients' home for times when there is no electronic access.
- Please fill in all boxes as required as this information is needed by the nurses in order to enable them to administer the medications safely.

Prescriber How to Guide for Direction to Administer forms (EMIS practices)

- The forms can be located by following these steps. Within the patient records select documents, open the drop-down menu from the add icon, select create letter. A new window will appear, from here select search then open shared folders. Locate connected Nottinghamshire resource publisher folder, expand the folders until you locate F12 prescribing.





2. The form will open. An example of the DA form is shown below. Please fill out the required information



Direction to administer (DA) form
Please write a separate form for each medicine to be administered with the exception of insulin.

Patient Name: Mr Test Patient Patient Address: Testling Avenue NG12BC Date of Birth: 01/01/75 NHS Number: 12345678 <small>(or affix patient sticker)</small>	MEDICINE ALLERGIES Penicillin allergy <small>MUST be completed by prescriber</small>	Write a new direction to administer form if any changes are made. This form is valid for 6 months for all medicines
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MEDICINE	ROUTE	DOSE	FREQUENCY	STOP DATE/COURSE LENGTH

*Please insert a row as required for multiple insulin preparations

Prescriber Name: Dr.XY Zed GMC/NMP Registration Number 98765432 Date 01/05/2025

Electronic copies do not require a wet signature.

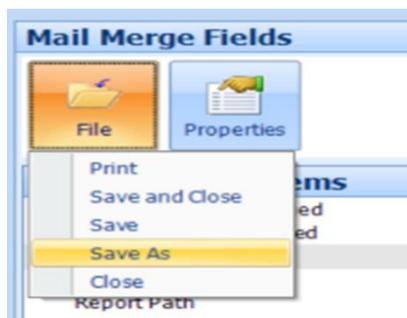
For paper copies only (if access to patient record in SystemOne is not available)

Prescriber signature _____ Prescriber organisation _____

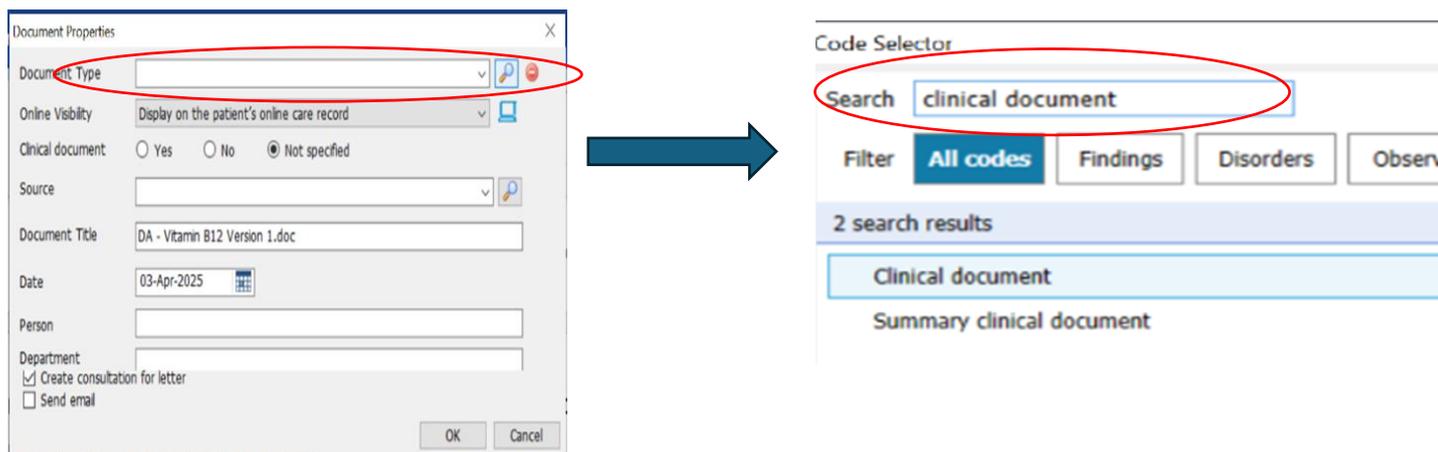
Please cross through any unused lines in the table above if using a paper copy

Printed copies of this document are not controlled. Document users are responsible for ensuring printed copies are valid prior to use. Please refer to the electronic patient record for the latest version.

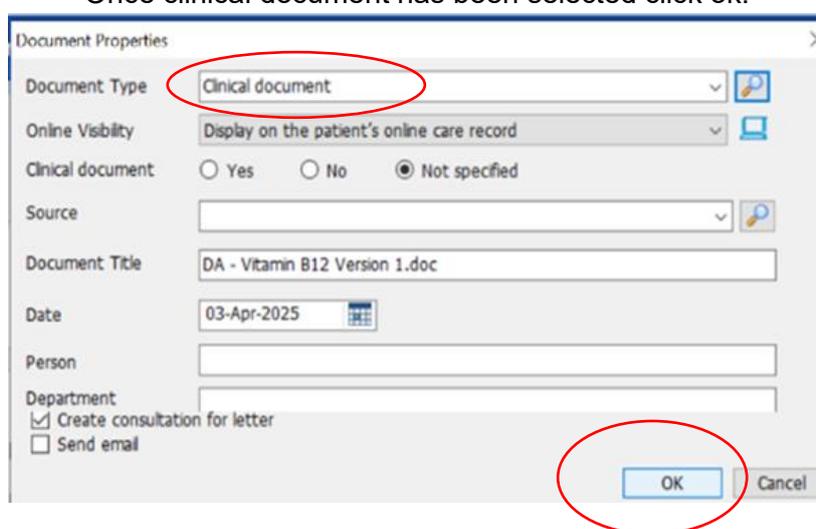
3. Once the DA form is completed, the final version needs to be saved to the patient record. To do this click file and select save as.



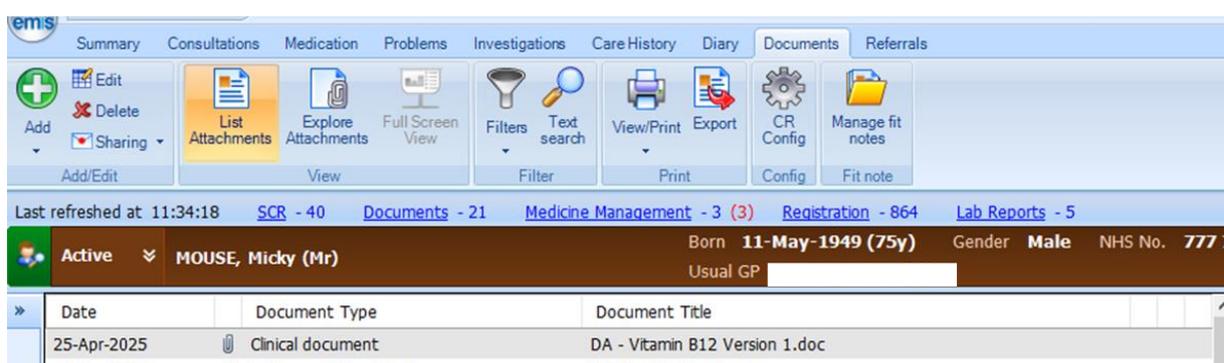
A new window will be displayed. From here locate the relevant document type using the search function.



Once clinical document has been selected click ok.



4. This will then save the final version to the patients record.



5. The DA form will need sending by the prescriber writing the form to the relevant healthcare professional via their nhs.net email. To do this open the latest DA form within the documents list. Click send, then from the drop-down menu select via email. This will then generate a new email in outlook. This is to enable traceability; this task should **not** be delegated to anyone else. See next page for images.

Direction to administer (DA) form for administration of Hydroxocobalamin injection (Vitamin B12)

Patient Name: XXTESTPATIENTABWF-TESTPATIENT, Ebs-Donotuse (Mr)	MEDICINE ALLERGIES		Write a new direction to administer for
	Allergies		
	Description	Associated Text	
	Adverse reaction to penicillins		
	Adverse reaction to		

1 of 2 140 words Accessibility: Unavailable Display Settings Focus

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via Email Direct Message

Type here to search