Northern Care Alliance
NHS Foundation Trust

Stakeholder briefing: electronic prescribing disruption and discharge medicines information 9/11/2026

The Northern Care Alliance NHS Foundation Trust (NCA) continues to manage disruption to its Electronic Prescribing and Medicines Administration (ePMA) system at Bury, Rochdale and Oldham, following an unrecoverable failure of the infrastructure supporting the MedChart system on 16 July 2026. The electronic prescribing system at Salford Royal continues to operate normally.

Extensive attempts to recover the affected system were unsuccessful and restoration of the legacy system is not considered viable. Affected hospital services continue to use business continuity arrangements, including approved paper prescribing and medicines administration processes.

We recognise the challenges this disruption presents for our colleagues, patients and partners such as GP colleagues, particularly around prescribing, medicines administration and the communication of medication information when patients leave hospital.

Patient safety remains our highest priority, and a range of measures are in place to support colleagues and primary care while we work towards a replacement electronic system.

Update on progress

The below details key progress in key three areas:

1. **An interim solution**

It is likely to be several months before we are able to introduce a new ePMA for use by NCA colleagues and to interface with primary care systems. In the meantime, we are working to find a way to reduce the burden on our GPs colleagues and have a safer system for our patients.

We are making good progress on the introduction of an interim solution. This involves developing a dedicated discharge medication within one of our existing systems. This approach would allow pharmacy review and amendment before automated transmission to primary care, removing the reliance on handwritten and scanned medicines information and aligning with existing workflows.

We are still developing this interim solution, which will be tested thoroughly with primary care colleagues to ensure it provides a safe, reliable and straightforward process. We are working to have an interim solution live in mid-November – though this is very much dependent on internal and external testing.

We will communicate with practices once an interim solution is in place. In the meantime, patients are being asked to take a paper copy of their discharge prescription to their GP practice. Any medication changes will also be documented in the transfer of care document, and GP practices are asked to update the patient's medication record accordingly, based on the information provided.

2. **14-day discharge medication supply**

We've acted on a suggestion and request from GP colleagues and from Monday 9 November, patients discharged from our affected services will be provided with a 14-day supply of discharge medication. This is intended to provide greater continuity for patients and help reduce further avoidable pressure on primary care at this time.

3. **Supporting GPs and primary care**

We have strengthened our processes so that we can provide a better and safer service to you when you raise discharge medication queries with us due to the absence of an ePMA.

This process is:

- The dedicated email address epmadischargequeries@nca.nhs.uk is the route for GP practices to raise concerns or queries relating to discharge medication. Our standard expectation will be for a response to colleagues within two working days, supported by clear ownership, tracking and escalation arrangements.
- We recognise there will be circumstances where a response is required more urgently. Where a concern cannot reasonably wait for the standard response time and requires more immediate clinical input, GPs should contact the relevant hospital ward directly.

Oversight and patient safety

The loss of the ePMA has been formally recorded on the NCA's risk register and is subject to executive and clinical oversight. Medication incidents are actively monitored through the Trust's incident reporting system, including specific identification of incidents associated with the ePMA outage. Themes and learning are reviewed through weekly medicines safety summits and shared across affected services.

A tactical incident-management structure brings together clinical, pharmacy, digital, operational and resilience teams at weekly review meetings to oversee risks, actions and mitigations and support timely and accurate information sharing with stakeholders.

This is supplemented by operational meetings involving Managing Directors, pharmacy leaders, Medicines Safety Officers and clinicians; escalation through executive operational and safety forums; and ongoing oversight through medicines safety, medicines optimisation and clinical governance committees. The NCA holds fortnightly assurance meetings with Greater Manchester Integrated Care Board pharmacy leaders and shares risk assessments and assurance information with system partners and relevant Integrated Care Boards.

Replacing the electronic prescribing system

NCA Board has approved the business case for replacement ePMA, and we are exploring with NHS England whether there is a procurement route that could safely shorten the timetable. We will continue to look for every reasonable opportunity to accelerate implementation but we are not in a position currently to confirm a precise timetable.

Keeping stakeholders informed

Our focus remains on supporting our colleagues and primary care partners with regular communications to ensure we all maintain safe prescribing and medicines management while putting a sustainable electronic solution in place.