



Salford Transfer of Care

Dipesh Raghvani – Clinical Lead GMLPC

What we will Cover

- Context
- The Service
- Processing a referral – live demo
- How to Implement in the Pharmacy
- Hints and Tips
- FAQs

Context

- Medication errors contribute to admissions
- Developed over time to ensure works for pharmacies
- Collaborative working
- PharmOutcomes chosen platform
- HInM supporting unactioned referrals and evaluation
- RPS guidance paper
- Expecting a handful per month



University Teaching Trust

safe • clean • personal



The Service

- Covers compliance aid patients initially
- Once embedded will expand to other cohorts
- Admission notification and Discharge notification including discharge summary via N3 connection
- Pharmacy reconciliation of discharge will support better transfer of care into the community
- Cement community pharmacy as part of the discharge pathway
- Utilise the information to deliver care e.g. discharge MUR, NMS or other relevant services



Hospital

- Patients will give consent during admission
- Hospital will have access to a look up to Salford pharmacies
- All hospital pharmacists will be trained
- Opportunity to work more closely with community pharmacy
- Reduce the number of faxes

Benefits to Patients

- Ensure patients are supported to get the most from their medicines
- Remain in a better state of health through formal contact with their community pharmacist.
- Fewer hospital readmissions or emergency department attendances as a result of medication errors in particular if their old medicines were a contributory factor to their admission to the hospital for example in drug induced AKI

Benefits to Community Pharmacy

- Offers community pharmacists an opportunity to use their clinical skills and to be an integral part of the patient pathway
- Allows community pharmacies to plan their workload better when patients are discharged from hospital
- More efficient medicines reconciliation
- Pro-actively communicate medication changes if appropriate
- Increase time with patients
- Increase patient loyalty



Benefits to Hospital Teams

- Allow the hospital team to communicate in a safe and secure way with their community pharmacist colleagues around any medication issues
- Supports continuity of supply and if any follow ups need to be flagged up
- The fully integrated model will free up the hospital team from attempting to make a telephone and fax communication in the knowledge that their communication is securely delivered and acknowledged by their community pharmacy colleagues



Benefits to GPs

- Reduces the need for unplanned hospital re-admissions due to medication errors for patients at risk of post discharge medicines adherence issues
- Community pharmacy will be in a position to clearly review new prescriptions they have received against the discharge information and clarify any discrepancies
- GPs will also benefit by knowing a patient has been through a medicines adherence programme and provides them with the added assurance that their patients are taking their medicines correctly and limiting medicine waste



Benefits to System

- Improve utilisation of medicines with less waste
- Expert Patients
- Better transfer of care between sectors



How to Process a Referral

Kevin Noble – Partner Pinnacle Health Limited



PharmOutcomes[®]

Bridging the Gap – Integrated referrals

Kevin Noble MRPharmS

Partner Pinnacle Health LLP

PharmOutcomes[®]

Evolution of solutions

- Most smaller DGHs have relationships with larger community pharmacies in an informal manner
- Some areas formalise this with fax transfer of critical patient care information for vulnerable patients
- However, this doesn't bridge the gap for the majority of patients...for that, we need integration
- Network of AHSNs ratified hospital dataset based upon RPS Guidance

PharmOutcomes[®] - Supporting hospital referrals

Integration methodology – Business as usual model

- Utilises the current messaging functionality within the hospital
- Provides a secure N3 receiving service
- Uses web-based technology in community pharmacy to capture outcomes

PharmOutcomes[®] - Supporting hospital referrals

Message types identified – Three types

1. Discharge message HL7v2 – Automated discharge notification

At the beginning of this year, we introduced two new capabilities to the platform

2. Admission message HL7v2 – Automated admission notification
3. Discharge message HL7v2 – Automated “for information only notification”
 - the ability to differentiate a referral “For Action” from “For Information Only

Pharm**Outcomes**

PharmOutcomes[®] - Community Pharmacy follow up

Referral received

outcomes4health[®] Delivering Evidence

Home Services Assessments Reports Claims Admin Gallery Help

Provide Services

Most Recently Provided

- Minor Ailments Service Stage 1 - Registration
- Accessible Service Info
- Stewart Base Service
- Stewart Stage 2 Service

2016 Updates

- Chlamydia Treatment Stage 1 Treatment
- EHC and Chlamydia Testing Service
- Minor Ailments Service Stage 1 - Registration
- AAAAA
- Accessible Service Info
- Needle Exchange 2015
- Polar Bear Survey
- Any Provider
- Any Provider Registration
- Any Provider Testing
- Blood-borne Virus
- BBV Testing

Outstanding Referrals	Service (stage)	Identifiers	User	Status
2016-03-22	Attachment - Followup	SF	Ben Johnson	Referred to you awaiting follow-up action
2016-02-12	Attachment - Followup	AH	Ben Johnson	Referred to you awaiting follow-up action
2016-02-10	Hospital referral provider	CW	Ben Johnson	Accepted
2016-02-10	Hospital referral provider	CW	Ben Johnson	Referred to you awaiting follow-up action
2016-01-26	Attachment - Followup	HJ	Ben Johnson	Referred to you awaiting follow-up action
2015-08-21	Attachment - Followup	JH	Jason Harris	Referred to you awaiting follow-up action
2014-08-26	Hospital referral provider	KN	Jason Harris	Accepted

Recent Provisions

Search for Identifier:

• Click here to show explanations of the Provision Status column

Provisions in date order [-] Click to show Provisions ordered by most recently entered

Date Order	Service (stage)	Identifiers	User	Status
2016-04-05 Sawed 2016-04-11	Minor Ailments Service - Stage 1 - Registration	JD	Jason Harris	Active Click to Cancel
2016-03-25	Stewart Stage 2 Service	LS	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Stage 2 Service	OT	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Stage 2 Service	NW	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Stage 2 Service	EJ	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Stage 2 Service	LS	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Base Service	OT	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Base Service	NW	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Base Service	EJ	Stewart Webb	Active Click to Cancel
2016-03-25	Stewart Base Service	LS	Stewart Webb	Active Click to Cancel

mail

New referrals

Referral actioned

GP Practice value

Follow up pharmacy Pinnacle ITK Test Pharmacy Two - ITK02

Clinical Details

Referral Details

Priority ROUTINE

Details

Start Date 2018-09-25

Recommendations

Notes and Actions

Hospital team member Perez Esteban Berta Maria

Discharge Letter File1 DischargeLetter.pdf

Link to discharge summary

Acceptance and completion of referred service

This referral has been made to your organisation at the request of a patient. If you are unable to complete the referral, you can reject it, but please state the reason for rejection in the notes box below. If you can complete the referral but cannot complete the associated actions immediately, click on the accept button to acknowledge receipt of the referral. You can make relevant notes in the Notes box.

Complete now Accept Close (unable to complete)

[-]Click to hide Referral History

Referral History

Automated ITK Update - Referred to Pinnacle ITK Test Pharmacy Two (ITK02)

PharmOutcomes[®] - Completing the loop

Side effects/ADRs Yes No

Audit of support provided - Tick all that apply

Support services provided

- Information reviewed, Medicines Reconciliation completed
This applies to ALL patients
- New Medicines Service
- Medicines Use Review
This will be count as a targeted MUR
- MAR chart provided
- Inhaler technique check
- Large print labels
- Talking labels
- Easy open tops
- Review dose form
- Review MDS arrangements
- Commenced MDS
- Pharmacy managed repeat service
- NHS Repeat dispensing initiated
- Home delivery
- Stop Smoking service
- Flu vaccination
September to March only
- Other Public Health Intervention
- Specialist Medicines Management Service assessment
- Other

Tick ALL that apply, If Other please specify

Repeat reconciliation

Medicine Supply on Discharge
Routinely patients will be discharged with a minimum of supply unless they are blister-pack patients who will receive supply

Side effects and Adverse Drug Reactions
Has the patient experienced any side effects or adverse drug reactions?

Side effects/ADRs Yes No

Adverse Drug Reactions

- Manageable and non-harmful - patient to continue
- Patient has stopped taking medicine - Refer to GP
Due to side effects/ADR's

If you need to report an adverse drug reaction to the GP please complete the GP referral section below when review is complete

Was a yellow card report submitted?

Yellow card submitted? Yes No
See link in side box

Audit of support provided - Tick all that apply

Support services provided

- Information reviewed, Medicines Reconciliation completed
This applies to ALL patients
- New Medicines Service
- Medicines Use Review
This will be count as a targeted MUR
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Yellow Card

Home About Yellow Card Downloads Contact Us

Enter Keyword(s) to Search

Welcome to the reporting site for the Yellow Card Scheme

Report a suspected problem or incident:

- Side effect to a medicine, vaccine, herbal or homeopathic remedy **Side effects**
- Medical device adverse incident **Devices**
- Defective medicine (not of an acceptable quality) **Defective**

Download the Yellow Card App!

You can now receive news updates from the MHRA and report side effects to medicines via the Yellow Card app. At the moment you will need to create a separate account on the app to report. Please download it from the [Apple App Store](#), or [Google Play Store](#).

If you have any comments on the app please [contact us](#).

Already Registered?

If you have already registered with this

PharmOutcomes[®] - Notifying key stakeholders

Repeat reconciliation

Is the first repeat prescription information available following discharge?

Repeat available? Yes No

GP Referral

If a GP referral is necessary as a result of this follow up review e.g. side effects require reporting or prescription repeat is incorrect - answer yes below to record referral information

GP referral necessary Yes No

Consent to refer to GP Yes No

GP Practice Brookside Health Centre, Queens Road,

 Notifications for: GP Referral will be queued to send by email after the record is saved.

try to filter results by "nearest first" ...

... nearest to either patient postcode (if found) otherwise your provider postcode

Referral reason(s)

- Significant Adverse Drug Reaction
- Patient has stopped taking medicines
- Prescription repeat following discharge is incorrect
- Other

Please detail any referral information below e.g. ADR's or prescription reconciliation information - recorded information will populate GP notification that will send when data is saved

Referral information

Risk of hospital readmission

Please complete RIO evaluation below to identify risk of re-admission. For a more detailed definition click [here](#)

Is the first repeat prescription information available following discharge?

Repeat available? Yes No

GP Referral

If a GP referral is necessary as a result of this follow up review e.g. side effects require reporting or prescription repeat is incorrect - answer yes below to record referral information

GP referral necessary Yes No

Long term condition

As a result of the support provided, the patient has a better understanding of:

From NMS, MUR or Advice Given

- Their cardiac condition
- Their diabetes
- Their respiratory condition
- The purpose of their medication
- When to take/use their medicines
- How to take/use their medicines
- Other

If 'other', please provide details. Tick ALL that apply

Other Actions/ Additional comments

This information will be used for service evaluation so please do not include patient identifiable information

20 Apr 2016

Violet Patch Pharmacy
678 A Street in a Town
Narrow
EF45 6GH
0789 123456

GP practice [Selection from "GP Surgeries" lookup list \[From Dorset Hospitals \(RBCH and DCH\) referral\]](#)

The patient named below has been recently discharged from hospital. At a follow up review the patient has reported adverse drug reactions as detailed below

Patient name	Answer to Patient Name
Address	123 Alphabet Road, Broad way [From Dorset Hospitals (RBCH and DCH) referral]
Postcode	AB12 3CD [From Dorset Hospitals (RBCH and DCH) referral]
Date Of Birth	01-Feb-2003 [From Dorset Hospitals (RBCH and DCH) referral]
GP referral as	"GP referral as": One or more of: Significant ADR; Patient stopped taking medicine; Other
Details of ADR	Answer to "Detail of any side effects/ADRs" text box

Pharmacist making report [Answer to "Pharmacist Name" single line input](#)

PharmOutcomes[®] Savings based on validated outcomes

Imputing against a counter-factual of “No Follow-up” for the study cohort of 1,386 patients referred with no domiciliary service commissioned in the community from pharmacy or the hospital

- Savings for the Trust: £330,241
- Savings for the CCG: £391,634
- Total for the local health economy: £721,875

During the period of the study, follow-up rejection rates were higher than current levels so projected savings are conservative. Costs of integration and support are included.

To support engagement, a calculator has been developed for illustrations.

PharmOutcomes[®]

Newcastle Hospital Then

- Manual Data input
- Number of referrals=1386
- Referral follow up = 36%

Newcastle Hospital Now

- Fully integrated solution
- Number of referrals = 5214
- Referral follow up = 91%

PharmOutcomes[®] - Some headline statistics from Live sites

Site name	Solution adopted	Number of referrals	%age follow up	%age follow up last Qtr
Newcastle	Full integration	5214	91%	88%
Cornwall	Full integration	2464	82%	76%
Dorset	Full integration	920	60%	73%
Countess of Chester	Full integration	630	89%	89%

PharmOutcomes[®] - Engagement to date

- Currently engaged with 65 NHS Trusts
- 27 Technical go live
- 25 at stages of technical development/near to go live
- Remainder at planning stage
- Approximately 9 Trusts using the Web Interface

Not one site has the same IT infrastructure as another!

PharmOutcomes[®] - Reflection on the evidence

- Supports the findings of the SPS Audit (June 2016)
Medicines reconciliation on discharge?
- Behaviour change in hospital crucial to success
Challenge is how to replicate across the country
- Community pharmacy responded to “push” patients
Behaviour change management crucial to success
- IT System is an adjunct to the solution, not the solution itself

PharmOutcomes[®] - Further Support

- Visual alert that flashes when a referral is received into PharmOutcomes





Implementing in the Pharmacy

Dipesh Raghvani – Clinical Lead GMLPC

How will I receive a message

- When your pharmacy receives an eTCP referral you will be notified by an email being sent to your PharmOutcomes management email address
- If you have a “PharmAlarm” installed it will alert you to a new referral

Successful Implementation

- Ensure PharmOutcomes checked regularly
- Think about the patient needs – discharge MUR, NMS, Inhaler Technique
- Medicines Reconciliation should be standard – think about next prescription timing and align processing the referral with this
- Discharges are subject to amendment so we suggest actioning discharges around 72 hours
- Train team members – does not need to be pharmacist only
- Utilise the information available
- Link to other services

Hints and Tips

- Read supporting documents – FAQ and service guide
- Action admission notifications as soon as possible and update patient information as per your process
- Ensure appropriate staff have logins to PharmOutcomes – amount of access can be adjusted to role
- Practice makes perfect
- If reject referral – ensure reason is input clearly – ONLY REJECT if they are not your patient or no longer use your pharmacy
- Utilise the GP referral form within the consultation record for comms



Questions?



Developing teams, enhancing care for future generations



**Thank you for Listening and
Best of Luck with the Service**