

DML Excellence Awards 2016 Report

Project No: 412 – Pharmacy Discharge Service Project 2016

Address: Pharmacy department St Luke's Hospital Kilkenny

Location: Ireland East Hospital Group

Brief Description (up to 200 words)

The aim of this unique project is to improve the discharge medication reconciliation and supply processes for targeted groups of complex patients, through the use of the ward based clinical pharmacy service and IT supports.

By improving the medicines reconciliation process at transitions of care for complex patients, the writing of discharge prescriptions for patients by clinical pharmacists, and the use of IT supports for the documentation and communication of information, patient safety and quality of care will be improved as the pharmacist intervention will ensure that all medicines are prescribed correctly on admission, during their hospital stay and on discharge. The project ensures that all information on changes or amendments to patients medication are supplied to GP's and Community pharmacists prior to discharge, thus ensuring timely provision of accurate information.

Improved communication with Medical teams and GPs facilitates improved in patient prescribing and quality of information provided on transitions of care.

Funding has been provided for a 0.5WTE basic grade Pharmacist, via the IEHG, following a joint application for funding by the Clinical Lead within St Luke's Hospital, Dr Gary Courtney; the Chief Pharmacist in St Luke's Hospital, Donal Carroll; and the chair of the local ICGP forum, Dr Ronan Fawcitt.

Main goal(s) and aims of the Project

The aim of this project is to improve the discharge medication reconciliation and supply processes for targeted groups of complex patients, through the use of the ward based clinical pharmacy service and IT supports.

For the purpose of the project, Complex patients are categorised as those aged over 70 years of age, and admitted to 2 x medical wards under the care of any of the 3 geriatricians who work in St Luke's Hospital.

The project outcomes are

- The target group of patients will have medications reconciliation carried out by the clinical pharmacy service in a defined time period of their admission in accordance with HIQA guidance.
- Discharge prescriptions for the target group of patients will be prepared by the clinical pharmacy service in a timely manner in accordance with HIQA standards.
- Once verified by the medical team, Discharge prescriptions for the target group of patients, will be transferred via secure methods to the GP and Community pharmacy, in accordance with HIQA guidance and timeless.
- All the above outcomes will be costed in terms of financial and activity measures, to demonstrate the value of the service.

Outline of Approach – main steps taken to implement the Project

Outline of approach

Funding has been provided for a 0.5WTE basic grade Pharmacist for the project, via the IEHG, following a joint application for funding by the Clinical Lead within St Luke's Hospital, Dr Gary Courtney; the Chief Pharmacist in St Luke's Hospital, Donal Carroll; and the chair of the local ICGP forum, Dr Ronan Fawcitt.

A project manager within the pharmacy department was appointed, Senior Pharmacist Ms Sinead Mc Cool. A project team was established

Project team composition

- Donal Carroll Pharmacy department St Luke's Hospital donaig.carroll@hse.ie
- Sinead Mc Cool Pharmacy department St Luke's Hospital Sinead.mccool@hse.ie
- Dr Ronan Fawsitt GP representative
- Dr Paul Cotter, Consultant geriatrician

Nursing staff from wards involved in the project were also consulted.

An outline of the project was prepared:

Targeted Complex Patients:

Patients aged 70 or older who are admitted to Medical 1 and Medical 2, St Luke's Hospital and under the care of Dr Emer Aherne, Dr Paul Cotter, Dr Rory Mc Govern.

Project Outcomes:

The project outcomes will be

- The target group of patients will have medications reconciliation carried out by the clinical pharmacy service within a defined time period of their admission

- Discharge prescriptions for the target group of patients will be prepared by the clinical pharmacy service in a timely manner in accordance with HIQA standards
- Once verified by the medical team, Discharge prescriptions for the target group of patients, will be transferred via secure methods to the GP and Community pharmacy, in accordance with HIQA guidance and timelines.
- All the above outcomes will be costed in terms of financial and activity measures, to demonstrate the value of the service

IT supports

IPIMS to identify all newly admitted patients aged over 70.

Healthlink to transfer completed discharge prescriptions to GPs and Community Pharmacists

Project timelines

Stage Sep-15 Nov-15 Dec-15 Jan-16 Feb-16 Mar-16 Apr-16 May-16 Jun-16 Jul-16 Aug-16 Sep-16

1 Pre project work

2 Design project processes

3 Pilot of service

4 Full implementation

5 Data collection

6 Project write up

Pre project work

Literature review carried out

Project plan and timelines provided to project team for approval.

Pre project meetings with individual consultant's and their teams to explain project and answer any queries that arose

Pilot Phase

Pilot phase from Oct-December 2015 to test process and refine as appropriate

Feedback processes

Updates were provided on a monthly basis from the pilot phase onwards. This included the local ICGP monthly meetings, the project team, the hospital Drugs and Therapeutics Committee as well as to the medical teams involved in the project and the pharmacy department staff.

- Number of patients who completed full process
- Time and motion figure

- Audit of standard care patients and those who received no clinical pharmacy intervention
- Issues arising such as timing of communications, documentation etc.