

# TCAM

- Transfer of Care Around Medicines
- Those most at risk of medication errors may not be highlighted to Community Pharmacy e.g. those recently discharged from hospital.

# Referral Received

Referrals appear at the top of the Services page.

Click on the referral to accept.

You will need to know your account password to open the referral.

**Services** Assessments Reports Claims Admin Help


**Services**

Provision List Options

Show patient identifiable details

Received Referrals	Service (stage)	Identifiers	User	Status
2019-04-30	Pharmacy Follow-up - Barnsley Hospital	DX	manager	Pending Referral Accepted

Recent Provisions

Search for Identifier:  

# Enrolment

Enrolment is required by each pharmacist providing the service.

If new to the service type in New Practitioner and click the Enrol Me button.

Complete Enrolment Criteria and Click Enrol button.

## Pharmacy Follow-up - Barnsley Hospital

### Enrolment Requirements

The commissioner requires that the individual delivering this service meets certain criteria. Enter either your **name** or **registration number** in the box below and select from the list that appears.

Practitioner Name

To enrol to provide the service,  
simply click the button next to the box above


## Enrolment Criteria

Your Full Name   
This should be your full name

Registration   
Your registration with your regulatory body

The referral you have received allows you to send a letter to the patient's GP if they have suffered an adverse reaction. The notes field will be passed to the GP so you should **always** ensure that details of the drug and the reaction are there. It would also be **good practice** to provide an alternative suggestion to the GP if one is suitable and available.

Referral Notes  Yes  No  
Select Yes if you have made note of the comments above

 Needs to be 'Yes' to meet the requirements

Enrol

# Referral

Before proceeding the pharmacy should confirm that the patient is known to them.

## Patient Details brought forward

Original Referral	30th Apr 2019
Referred from	Barnsley Hospital (Gawber Road RFF01)

Client Name	DONOTUSE XXTESTPATIENTRBSR
Date of Birth	12-Nov-1981
Date of Birth	1981-11-12
Age	37
Gender	Female
Address	BARNSLEY HOSPITAL NHS, POGMOOR ROAD, BARNSLEY
Postcode	S75 2EP
NHS Number	9990261490
Contact Details	None Provided

## Registration details brought forward

Hospital MRN	710000
Discharge ward	xxTest Wardxx
Discharge consultant	
GP Practice selection	G99999998
GP Practice value	Y90206
Follow up pharmacy	Ward Green Healthcare Ltd - FAW19

## Admission Details ▼

# Referral

The referral will include discharge medication and any medication changes. This should be used to reconcile against the PMR.

## Allergies ▼

### ALLERGIES (D)

KitKat

Penicillin

## Discharge Medication ▼

### TTOS

Drug_Name	ISOSORBIDE MONONITRATE, Dose:20mg, Frequency:BD, Route:oral, Duration:., GP_Action:Repeat, Source:CONTINUE
Drug_Name	PARACETAMOL, Dose:1g, Frequency:QDS, Route:oral, Duration:continue, GP_Action:Repeat, Source:CONTINUE
Drug_Name	ASPIRIN, Dose:75mg, Frequency:OD, Route:oral, Duration:contineu, GP_Action:., Source:
Drug_Name	GLYCERYL TRINITRATE, Dose:1-2 sprays, Frequency:when required, Route:sublingual, Duration:continue, GP_Action:., Source:CONTINUE
Drug_Name	SALBUTAMOL 100microgram INHALER, Dose:1-2 puffs, Frequency:when required, Route:oral, Duration:., GP_Action:Repeat, Source:CONTINUE

## Stopped Medication ▼

### MEDICATION CHANGES (including Medication DOSE CHANGES, STOPPED OR STARTED (D))

Started on

Isosorbide mononitrate

GTN Spray

# Acceptance and Completion

The referral can now be accepted or rejected.

If rejecting please state the reason in the notes box before clicking the return box

## 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.

You can make relevant notes in the Notes box.

[Complete now](#) [Update](#) [Return \(unable to complete\)](#)

[\[-\]Click to hide Referral History](#)

### Referral History

Accepted by Ward Green Healthcare Ltd :

2019-04-30 09:51:11

Automated ITK Referral - Referred to Ward Green Healthcare Ltd (FAW19)

2019-04-30 02:52:15

# Acceptance and Completion

If the referral is accepted please complete the audit of support and GP contact sections.

Remember to click the Save box when finished

## Repeat reconciliation

Is the first repeat prescription information available following discharge?

Repeat available?  Yes  No

## GP Contact

If GP action is necessary as a result of this follow up review e.g. side effects require reporting or prescription repeat is incorrect - you **MUST** contact the GP Practice.

By clicking on the yes box below, the information will also be transmitted by email if the practice has set up a preference for this, if they have not set preferences the system will alert you of this at the point of GP practice selection.

- answer **yes** below to record relevant information

GP contact necessary  Yes  No

Other Actions/ Additional comments

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

Save

## Side effects and Adverse Drug Reactions

Has the patient experienced any side effects or adverse drug reactions?

Side effects/ADRs  Yes  No

## Audit of support provided

Only tick boxes that identify the additional services that you have provided including commissioned services.

### Support services provided

- Patient consulted - no support required
- Information reviewed, Medicines Reconciliation completed and no further action  
Select if you complete a medicine reconciliation but no other services
- Medicine Reconciliation completed in addition to other services  
Please tick boxes for other services provided in addition to Medicine Reconciliation
- New Medicines Service
- Medicines Use Review  
This will count as a targeted MUR
- MAR chart provided
- Large print labels
- Easy open tops
- Review dose form
- Review MDS arrangements  
NB: Complete Equality Act assessment
- Commenced MDS
- Pharmacy managed repeat service  
To support vulnerable patients
- NHS Repeat dispensing initiated
- Home delivery
- Stop Smoking service
- Flu vaccination  
September to March only
- Talking labels  
If available
- Specialist Medicines Management Service assessment  
If commissioned in your area
- Other Public Health Intervention
- Other

Tick ALL that apply, If Other please specify

### Medicines Reconciliation

Medication reconciliation is the process of creating the most accurate list possible of all medications a patient is taking - including **drug name, dosage and frequency**, and comparing that list against the discharge information with the aim of providing correct medications to the patient at all transition points.

# Summary

Referral via Pharmouctomes

Medicines Reconciliation

Accept or Reject

Complete and Save



# Next Steps

First wave of referrals June 2019

MDS / Venalink Patients (replaces information currently provided by fax)

Second wave will include other patients groups, details to follow but likely to be those in need of NMS.

Pharmacy staff should regularly check the Pharmoutcomes Services Page

# Commissioning update

- MDS working group
- APC reporting
- MMS

# MDS Good Practice Guidelines

# MDS: Secondary Care Issues

## **Increase in requests for MDS**

- Occupational therapists requesting
- Bed crisis – seen as a fast track solution
- Seen as a fix all

## **Impact on hospital pharmacy**

- Unpredictable workload
- Risks due pressure on pharmacy resources
- Demands for MDS after pharmacy cut off times

## **No standardised assessment tool for MDS suitability**

# MDS: Community Services Issues

## **Community nursing receiving inappropriate referrals for medication administration support:**

patients not supported to become independent with self-administration

## **High Risk Outreach Patients;**

due to frequent changes to medication the outreach pharmacy will supply all medicines for patients who have MDS to reduce risks. This has cost and resource pressures associated.

## **Patient Choice :**

Potential to disenable patients from making decisions about their medicines  
i.e. choice to omit certain medications

# MDS: General Practice Issues

**Complex** process for prescribers to understand:

Most practices will have one member of staff who deals with MDS scripts

Understanding the dispensing process – knowing which week is on is not always the same as the GP

record

No **standardised** assessment tool for MDS eligibility – appropriate request?

**7 day scripts** being issued in installments allowing changes midway through the repeat

Knowing who is issuing scripts for **shared care drugs**

Patients are not always involved in ordering the medications they need  
e.g. **items not supplied in the tray**

# MDS: Community Pharmacy Issues

## Communicating changes:

- dose changes
- medicines stopped / started
- missing items – intentional or not?
- not able to access appropriate clinician to discuss patient issues and make joint decisions

**Staff resource** – time consuming – MDS is not a funded service

**Trust** between HCP's – accepting an appropriate assessment has been carried out

**Patients** not understanding their responsibilities' and implications of having one off items dispensed elsewhere

Safe **Delivery** arrangements

# MDS Good Practice Guidelines

- Feedback and questions



# APC Reporting

Clinical Governance

APC Reporting

Medication Management System

# APC Reporting

Date Completed

## Issue Identified by: \_\_\_\_\_

Name

Job Title

Organisation

## Issue category and who was involved \_\_\_\_\_

### Issue Category

- Dispensing Error
- Prescribing Error
- Medication Supply Issue
- Medicines Administration
- D1 Communication
- Other Hospital Communication
- Formulary Related
- Shared Care Issue
- Summary Care Record
- Other GP Communication
- Care/Nursing Home
- Other

### Issue Involving

- Hospital- BHNFT
- Hospital - SWYFT
- Hospital - non Barnsley
- General Practice
- Community Pharmacy
- Care/Nursing Home
- Care Organisation
- Community Nursing
- Other



• APC Reporting provision successfully entered and saved

• The following system generated provision report letters are available

[Basic Provision Record](#)

[Barnsley Interface Issue Report >>](#)

Secure email is queued to send

## Issue Details \_\_\_\_\_

Patient NHS Number

GP Practice

Date Issue Identified

Enter as dd-mmm-yyyy (eg 23-Feb-1989)

Issue Identified

Action taken and outcome

Date Action taken

Enter as dd-mmm-yyyy (eg 23-Feb-1989)

# APC Reporting: Examples

- Most commonly reported relate to MDS
- Wrong Strength
- Wrong Medicine
- Missing Medicine
- Wrong Patient



Home

**Log in**

Registered user? [Log in here](#)

New user? [Register here](#) to start using the NRLS.

## Welcome to NRLS Reporting

The National Reporting and Learning System (NRLS) is a central database of patient safety incident reports. Since the NRLS was set up in 2003, the culture of reporting incidents to improve safety in healthcare has developed substantially.

All information submitted is analysed to identify hazards, risks and opportunities to continuously improve the safety of patient care. Please [click here](#) for further information.

**The published Organisation Patient Safety Incident Reports are generated by the Explorer Tool and can be found [here](#).**

**For the published data workbook, please [click here](#).**

**For the monthly published data reports [click here](#) and for the National Patient Safety Reports [click here](#).**

After logging in you can:

- Upload incident reports from your local risk management reporting system
- Review incident reports submitted by your organisation
- View incident reports submitted online to the NRLS for your organisation

# MMS Changes

- New fees
- Update medication plan and send to Clinical Pharmacist linked to GP as well as Care provider
- Plans must be done at least annually

# Pharmacyfirst Implementation Plan

- Letter out to Pharmacies giving notice 1<sup>st</sup> of August 19 implementation plan.
- Followed by:-
  - Resource Pack completed
  - PharmOutcomes Platform changes completed
  - PharmacyFirst Scheme resources “call back “ – quarantine and new materials circulated
  - Campaign materials/resources out before end of May

# LPC Activity

- LPC website <http://psnc.org.uk/barnsley-lpc/>
- LPC newsletter (sign up via website)
- Pharmacy BEST events
- Pharmoutcomes Activity Reports