

Pharmoutcomes Implementation

Project aim

To provide a platform to which community pharmacies can view medications that patients have been discharged on from hospital, allowing them to make earlier reviews and interventions in the community in turn reducing re-admissions and complications post discharge from hospital



Project team

Joseph Grayson – EPMA/JAC team
John Biddulph – Chief Pharmacist
Anne Lambert – Pediatric Pharmacist
Anurita Rohilla – West Essex CCG Pharmacist
Hertfordshire and West Essex STP
Eastern Academic Health Network
Essex and Hertfordshire LPC

Timeline for delivery

From: January 2019 To: Ongoing

Measures

The data being monitored to ensure that the project is having a tangible impact post implementation is;

- Monitoring of interventions in the community
- Re-admission rates of patients referred to their community pharmacy vs patients who have not
- Monitoring total number of referrals made by hospital

Tests for change

To monitor and ensure that Pharmoutcomes system enabled improvement, we worked alongside our PAH information department, as well as the Eastern Academic Health Network to draw data and monitor the referrals and outcomes being made (see next slides for examples of this)

Results

A total of 1254 referrals were made by PAH, and a total of 690 have been followed up by the community pharmacies from January to June and a further 233 have been accepted and are awaiting contact with the patient. Of the 690 completed referrals, the community pharmacies contacted the GP to assist in the resolution of 128 cases and 17 interventions were made directly by the community pharmacies. These follow ups and early interventions for patients discharged from hospital support in a reduction in re-admission rates .

Learning and next steps

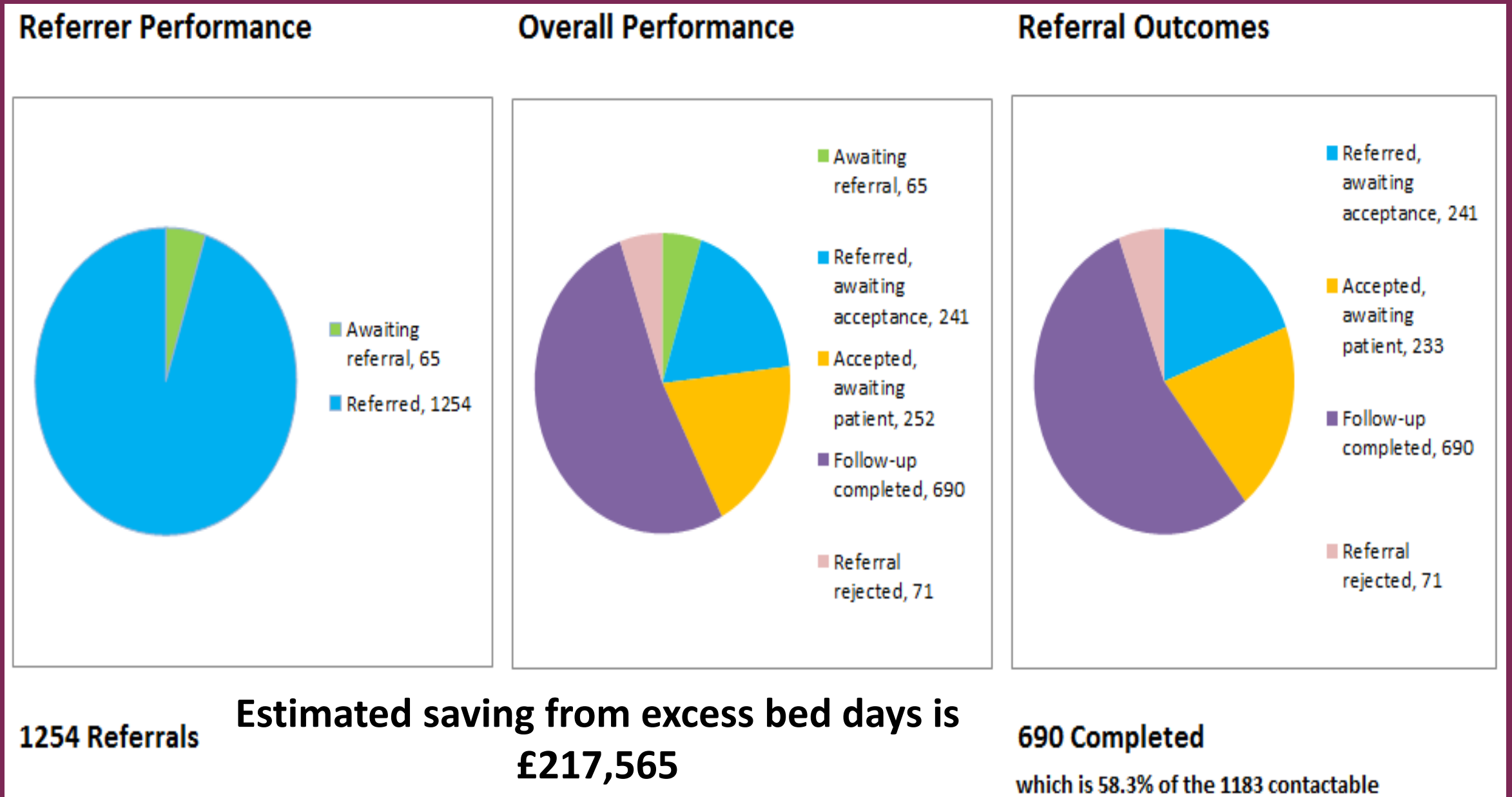
Key Learning Points from the project

- Importance of collaboration across Essex and Hertfordshire and the impact it can have for patients if information is shared across primary and secondary care
- Importance of integration of different clinical systems and ease of use for end users as this significantly increases engagement from all sides
- Additional 'Flu vaccine' function is being added onto the system this year



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How many referrals were made and how many have been followed up in the community?



What interventions were done by the GP?

