

***Pharmacy Department***

**Community Pharmacy Referrals - Guidelines for Pharmacists**

**Background**

Evidence shows that when patients move between care providers the risk of miscommunication and unintended changes to medicines remains a significant problem. The Royal Pharmaceutical Society report “Keeping patients safe when they transfer between care providers –getting the medicines right” recommends that health care professionals transferring a patient should ensure that all necessary information about the patient’s medicines is accurately recorded and transferred with the patient and should be communicated in a timely, clear and legible way, preferably by electronic means. This is supported by the NICE guidance for medicines optimisation.

Community Pharmacy Referral via PharmOutcomes is part of the NHS England’s Electronic Transfer of Care to Pharmacy (eTCP) Implementation Strategy, supported by the NHS Innovation Agency.

**What is a Community Pharmacy Referral?**

Community Pharmacy Referral is an automated transfer of admission and discharge information from secondary care to nominated community pharmacies. It allows the hospital pharmacy team to make a patient specific referral directly to their community pharmacy for various kinds of support with their medicines post-discharge.

With the patient’s consent, the referral is generated via Meditech and automatically sends an electronic notification of the patient’s admission to hospital on the date the referral is entered (midnight). On discharge, the community pharmacy receives an admission notification and a list of the patient’s discharge medication as well as any information entered directly into the referral screen.

**What are the potential benefits?**

* Optimises safe medicines use and patient care through sharing of information with community pharmacies
* Ensures that medication changes on discharge are translated to primary care accurately and quickly
* Reduces hospital re-admissions / bed days and therefore cost savings
* Reduces drug waste by preventing unnecessary dispensing
* Improves patient satisfaction
* Saves time in telephone calls

**Who should be referred?**

All hospital **inpatients** should be considered for a referral unless they fall under an excluded category.

Excluded patients include:

* patients whose medicines are dispensed by a GP Surgery
* patients with a GP Surgery and/or Community Pharmacy in Wales
* patients outside of the Cheshire and Merseyside area
* Patients unable to give consent (under discussion)

**Who can refer?**

Pharmacists and Pharmacy Technicians can enter a referral.

**What discharge information is NOT sent to the Community Pharmacy?**

* Edischarge letter
* Start date/time of medication
* GP External Comments field
* Clinical Indication for antibiotics
* PRN Reason

**Procedure**

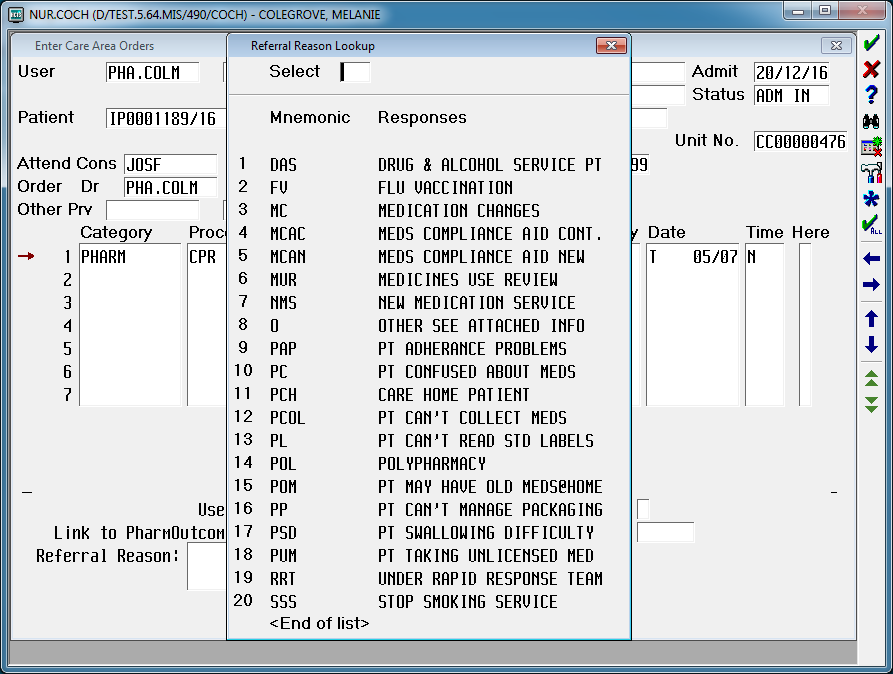
1. **Patient selection**

It’s the responsibility of the hospital pharmacy team to assess and identify suitable patients throughout the inpatient stay.

This could be done:

* on admission
* at any time during the inpatient episode
* on discharge

Use the Referral Reason Lookup list (shown below) as a guide to determine whether a patient is suitable for a referral.



1. **Obtaining consent**

Patient consent must be obtained and documented for an electronic Community Pharmacy Referral to be made.

* Give the patient the information leaflet “***Community Pharmacy Referrals – Information for Patients***” (Appendix A)
* Discuss the leaflet content with the patient explaining how a referral may be beneficial for them.

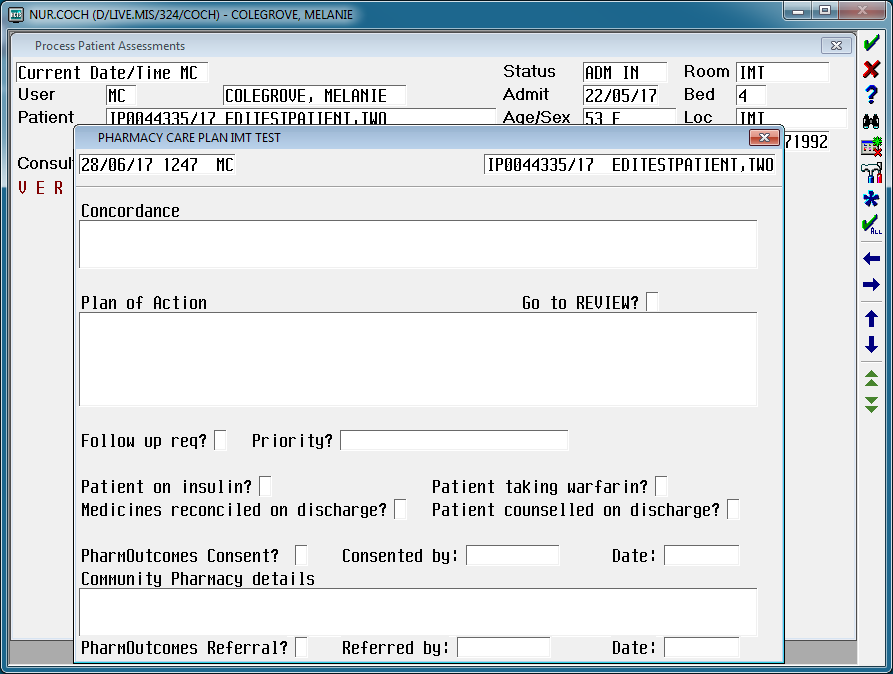
**What if consent can’t be obtained????????????**

**Insert appendix A (PIL)**

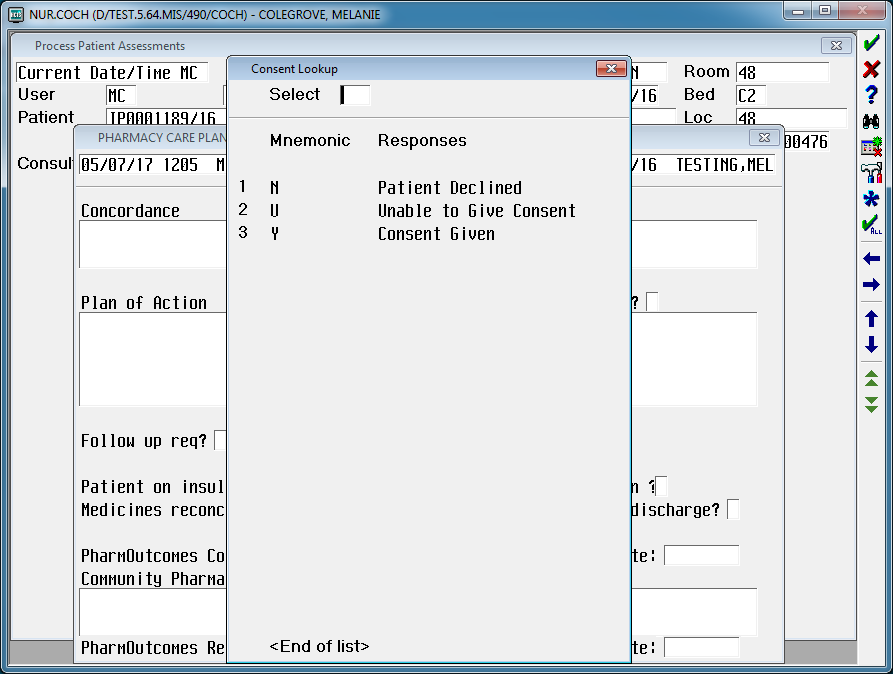
1. **Recording consent**

If the patient agrees to share their information with a nominated community pharmacy, the patient consent should be recorded in the Pharmacy Care Plan (on Meditech).

Complete the 3 fields highlighted below:



* PharmOutcomes Consent ? – select an option from the <F9> **Consent Lookup** menu (shown below)



* Consented by: - enter your **Meditech mnemonic** (e.g. PHA.XXXX)
* Date: - enter the **date** consent was obtained/refused

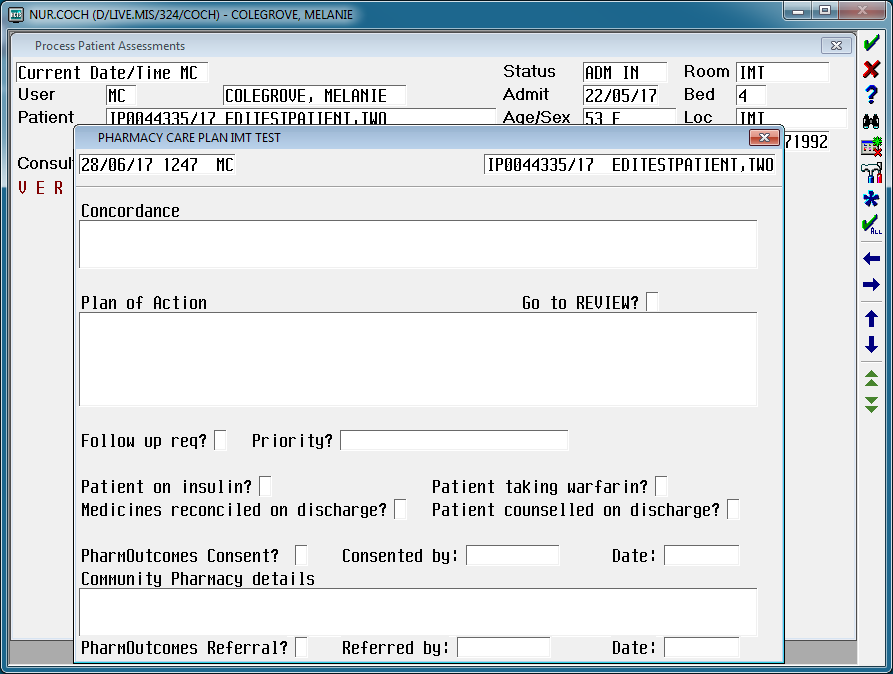
1. **Recording Community Pharmacy details**

Identify the patient’s nominated Community Pharmacy to which the referral is to be sent.

This will commonly be their usual Community Pharmacy but could be different (e.g. a patient moving in with a relative or moving to a new Care Home on discharge).

Record the Community Pharmacy details in the Pharmacy Care Plan (on Meditech) in the field shown below (including, where known):

* name
* address (including post-code)
* telephone number



1. **Entering a referral**

This can be done:

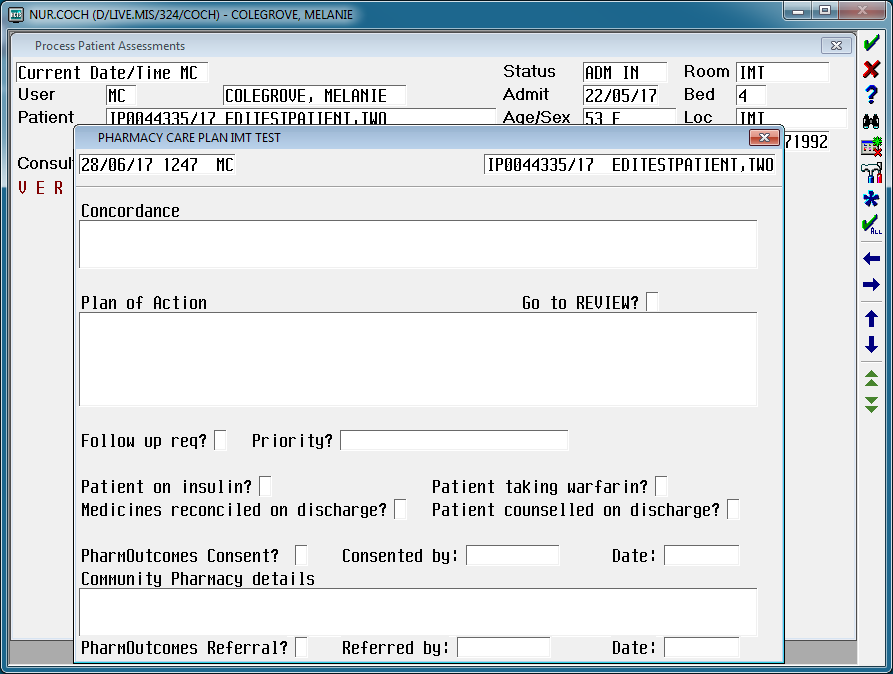
* on admission
* at any time during the inpatient episode
* on discharge
* but MUST be done **BEFORE** the patient is discharged from Meditech

A referral is made on Meditech using **Orders** via the **Status Board –** refer to “***Procedure for entering a referral to community pharmacy via Meditech***”.

1. **Recording a referral**

Record when a referral has been entered in the Pharmacy Care Plan (on Meditech).

Complete the 3 fields highlighted below:



* PharmOutcomes Referral ? – enter a **Y/N** response
* Referred by: - enter your **Meditech mnemonic** (e.g. PHA.XXXX)
* Date: - enter the **date** a referral was made

1. **Upon Discharge review and amend any referral information**

At the point of discharge any referral information entered during the admission should be reviewed and amended if necessary.

To facilitate this, a statement (shown below) will print on the“**EP TTO PRINTOUT FOR PHARMACY**” paperwork only when a referral has been entered on Meditech during that inpatient episode.



Existing referral information can be viewed using **VIEW ORDERS** accessed via **Review** from the **Status Board**.

A referral is amended on Meditech using **ETTO PRESCRIPTION TRACKING** accessed via **Regulatory** from the **Status Board** – refer to “***Procedure for amending a referral to community pharmacy via Meditech***”.

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