

# Remote Clinical Pharmacist Rapid Medication Reconciliation

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## Project Background

Time in General Practice identified wide variability in how practices import DALs, allocate meds rec to staff; and the time taken to action DALs (24 hours v 2-3 weeks)

## Project Approach:

Use remote access to WCP and GP clinical systems to:

- identify patients discharged from WGH in preceding 24 hours
- update repeat prescriptions
- identify and arrange monitoring and raise queries relating to changes with Secondary Care / Specialist teams as necessary.

## Aim:

Streamline medication reconciliation, working across care settings to rapidly and safely act on information shared to release capacity for Clinicians in practice.

## Objectives:

Reduce variability between staff in practice who undertake medication reconciliation work

Reduce time GPs spend on medication reconciliation

Improve communication of medication changes to Community Pharmacy for patients who require compliance aids to support medication administration.

## Project Outcome(s):

Identification of critical prescribing errors in secondary care, and prevention of repetition in general practice

Reduction in number of patients accessing medication that has not been updated following changes in Secondary Care

Release Clinician time in Practice

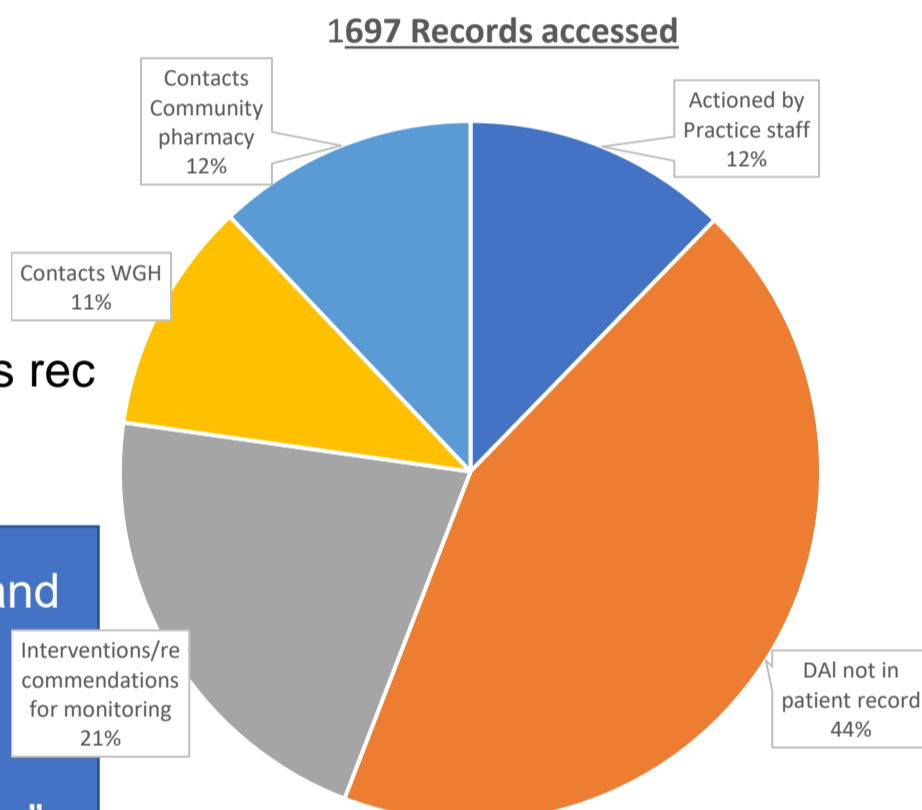
Identification of common themes that may contribute to medication errors when patients move between care-settings.

## Project Impact:

- 6 DATIX forms completed
- 2 Yellow Cards
- 11 errors in meds rec undertaken in practice

“Saves a lot of time and mistakes by GPs”

“A great resource in Community Pharmacy”



## Key Conclusions:

Timely communication between HCP and care settings can be challenging, with the result that changes that have been effected may fall at one of multiple hurdles

Timely, remote medication reconciliation by a clinical pharmacist benefits patients and HCP in different settings

## Next Steps:

Propose formal adoption of successful Cluster project by HB with suitable resource and staffing to continue to deliver services to patients in North Pembrokeshire, with potential to increase scope to expand into other Clusters.

