

Medicines Management Team

Audit of Hospital Discharge and Outpatient Letters

Background

In line with the Wirral Repeat Prescribing Guidance (Draft) Medication initiated by hospitals and other agencies.

- There should be a system for dealing with requests to start medication from other agencies e.g. hospital discharge notifications, outpatient appointments.
- All such notifications should be added by a prescriber who has access to the clinical record, before being added to the clinical system.
- Management systems should be in place to ensure these are dealt with efficiently and consistently and involve a prescriber.
- The prescriber should also ensure that any discontinued medication is removed from the screen and the reason documented in the patient's notes.
- Responsibility for prescribing in some cases should remain with secondary care. The RAG list defines Red and Amber drugs, where prescribing should remain with secondary care (Red) or responsibility should be shared (Amber). If prescribing is to remain with secondary care, details of these drugs should still be included on the practice system to enable prescriber awareness of any interactions with other drugs they may prescribe

Aim

- To ensure that the practice has a robust procedure in place ensuring that medication changes from secondary care are actioned appropriately.
- To identify processes in GP practices that do not meet best practice and support them to update these processes to an agreed standard.
- To re-audit the process later within the financial year to ensure that systems remain robust or have been updated as agreed in the first audit.

Audit Process

The audit is to be undertaken by the MM Team twice in 2014/15 with the first audit to be undertaken during September and October 2014. The results will be discussed with the practice and the MM Team will support practices to produce an action plan to address any issues. The second audit will be undertaken in February 2015 to ensure revisions to procedures have been incorporated successfully.

The number of letters sampled will be dependent upon practice list size. Those with a list size of 5,000 or below will have the audit based on 10 discharge letters and 10 clinic letters (total of 20 letters). Those with a list size 5,000 to 7,500 will have the audit based on 15 discharge letters and 15 clinic letters (total of 30 letters). Those with a list size over 7,500 will have the audit based on 20 discharge letters and 20 clinic letters (total of 40 letters).

An action plan template and advice will be provided by the Medicines Management Team. To achieve payment practices will have to achieve a rate of 95% or greater of appropriately actioned and documented medication changes when the second audit is undertaken.

Outcome Measure

Practices will complete the provided action plan proforma and submit by 15th December 2015. When the second audit is completed in February 2015, 95% of the letters reviewed should be appropriately actioned and documented in line with agreed action plan. For 30 letter practices this means 28 letters need to be appropriately actioned and for 40 letter practices this means 38 letters need to be actioned.

First Audit of Hospital Discharge and Outpatient Letter Processes

Practice Name			
Date of Audit			
Audit Completed By (MM Team)			
Summary of Audit Findings – including reference to Practice Repeat Prescribing Protocol.			
Areas Identified For Improvement			
Details of Action Areas Agreed by Practice including timescales.			
Results of Individual Letter Audit			
No of letters reviewed		No of letters appropriately actioned	
% of letters reviewed have been appropriately actioned and documented			
Prescribing Lead GP Signature			
Date Agreed			

Second Audit of Hospital Discharge and Outpatient Letter Processes

Practice Name	
Date of Audit	
Audit Completed By (MM Team)	
Summary of Audit Findings with specific reference to progress against agreed action areas from first audit together with feedback on specific letters that were not actioned appropriately.	
Results of Individual Letter Audit	
No of letters reviewed	
No of letters appropriately actioned	
% of letters reviewed have been appropriately actioned and documented	
95 % of letters reviewed have been appropriately actioned and documented.	YES / NO

[illegible]



Cheshire and Merseyside
Commissioning Support Unit