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Plain English Publication Summary

Publication: Understanding the implementation, impact and sustainable use of an electronic pharmacy referral service at hospital discharge: A qualitative evaluation from a sociotechnical perspective

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Jeffries M, Keers RN, Belither H, Sanders C, Gallacher K Alqenae F, Ashcroft DM. et al. Understanding the implementation, impact and sustainable use of an electronic pharmacy referral service at hospital discharge: A qualitative evaluation from a sociotechnical perspective. *PLOS ONE*. 2021; 16(12)e0261153

What are the most important findings/conclusions in this paper? Why are they important?

The aim of the TCAM (Transfer of Care Around Medicines) is to electronically share timely and accurate information between community and hospital pharmacists about:

- patients who have been admitted to hospital
- the discharge of those patients and any changes to their medication whilst in hospital.

Until the TCAM service was introduced, most information of this nature was shared by fax or telephone and community pharmacists did not receive the full information about their patients. The study found:

1. There was general agreement that TCAM was effective in making sure the correct medication was given to patients on discharge.
2. The time involved in managing the exchange of information between the hospital and community pharmacists was significantly reduced. This allowed them more time to be actively involved in the care of their patients.
3. Although TCAM does not address the need for patients and carers to be actively involved in their prescribed medication, we concluded that the system would work more effectively if they were.

What did you do?

We talked to 27 different people involved in the TCAM service to find out how they felt the TCAM service was working. We interviewed 18 healthcare professionals, which included pharmacists working at the hospital, pharmacists working at general practices and community pharmacists. We asked healthcare professionals about their experiences of using the service and how it had affected the ways in which they worked.

What did you do? (continued)

In another five interviews, we talked to nine patients and carers – two interviews were just with patients, the others involved patients and carers. Patients and carers talked about their experiences of the TCAM service and about the information they were given about their medicines and which healthcare professionals had passed on the information. We also asked the patients and carers about the supply and availability of their medicines, for example, if they were delivered and whether they got the correct medicines after their stay in hospital.

Why did you conduct this research?

The Transfer of Care Around Medicines (TCAM) service is a new service that has only recently been introduced. We wanted to understand how it was working, how it was being used by different healthcare professionals and what improvements could be made. We also wanted to understand the views of patients and how the new service was affecting them.

What was known before your paper was published?

It is well understood that passing accurate and clear information about patients from hospital healthcare professionals to doctors and pharmacists in the community is important for patient safety. Patients have sometimes not been given information about the changes in their medicines made during their hospital stay.

Mistakes are sometimes made with patients' medicines after they have been in hospital. Sometimes the information about the changes to the medicines are not quickly and accurately passed on to community pharmacists and general practices. Very occasionally, this has led to medication errors and in a few cases patients have experienced medication-related harm.

Efforts to improve this situation have been made and we now know that when information is shared with community pharmacists this can reduce the chances of mistakes happening. The Transfer of Care Around Medicines (TCAM) service is an attempt to improve the transfer of this information. The service means that an electronic message is sent to the patient's nominated community pharmacy when the patient is admitted to hospital. This means they can put 'on hold' any of the patient's medicines until they leave hospital. After the patient leaves hospital a message is sent to the pharmacy with the new medicine list and the usual information about the patient's hospital stay that goes to the GP.

What is next? What is the potential impact of the work in this paper? What will change as a result of this paper (or the study it describes)?

The Transfer of Care Around Medicines (TCAM) service is being introduced across England. Hopefully our findings will help other areas to understand how the service might work and how it might be further improved. We have recommended that patients be more involved in the service and suggested that further connection and communication between different healthcare professionals can make the service better. We particularly think that fully involving pharmacists working at general practices will be of benefit.

Does this paper link in to a particular study / project? If so, please summarise the study and explain how this paper has improved understanding, or will move the study forward.

This study was not specifically linked to a wider project. It has built upon and will complement other work in the GM PSTRC that is trying to understand more about communication between healthcare professionals about medication safety.