

How does Medicines Information Contribute to Patient Safety?

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INTRODUCTION

World Health Organization (WHO) has announced its third global patient safety challenge,(1) which aims to reduce the global burden of iatrogenic medication-related harm by 50% within 5 years. This, and the Carter Report on productivity in the NHS,(2) means that it is important for NHS services to be able to demonstrate that they contribute positively to the quality and/or efficiency of patient care.

The West Midlands Medicines Information Service (WMMIS) provides an enquiry answering service chiefly to primary care health care professionals within the West Midlands, and a specialist lactation advisory service to all UK health care professionals. Although intuitively we believed that our work supported patient care, we did not have the data to support this assertion, or to state in what domain patient care was supported. Following a national initiative we, in common with other medicines information services, began to assign all enquiries a category describing the domain of patient care into which the enquiry fell, or whether it did not relate to patient care.

METHOD

To identify whether and in what domain enquiry answers contribute to patient care WMMIS classified enquiries into the following categories, in addition to the usual core categories:

1. Clinical – Patient Safety
2. Clinical – Patient Support and Experience
3. Clinical – Treatment Effectiveness and Outcomes
4. Clinical – Not Applicable

Additionally, a user survey was sent to 10 randomly selected enquirers each month. One of the questions asks whether the answer given directly contributed to patient care.

DISCUSSION AND CONCLUSION

Our results show that 95% of WMMIS enquiries are directly related to patient care, with over 50% being related to patient safety. As the classifying system was newly implemented, 20% of enquiries were not classified.

We conclude that Medicines Information services can play a critical role in helping to meet the WHO Patient Safety Challenge and improve the quality of patient care by providing healthcare professionals with advice on the safe and effective use of medicines.

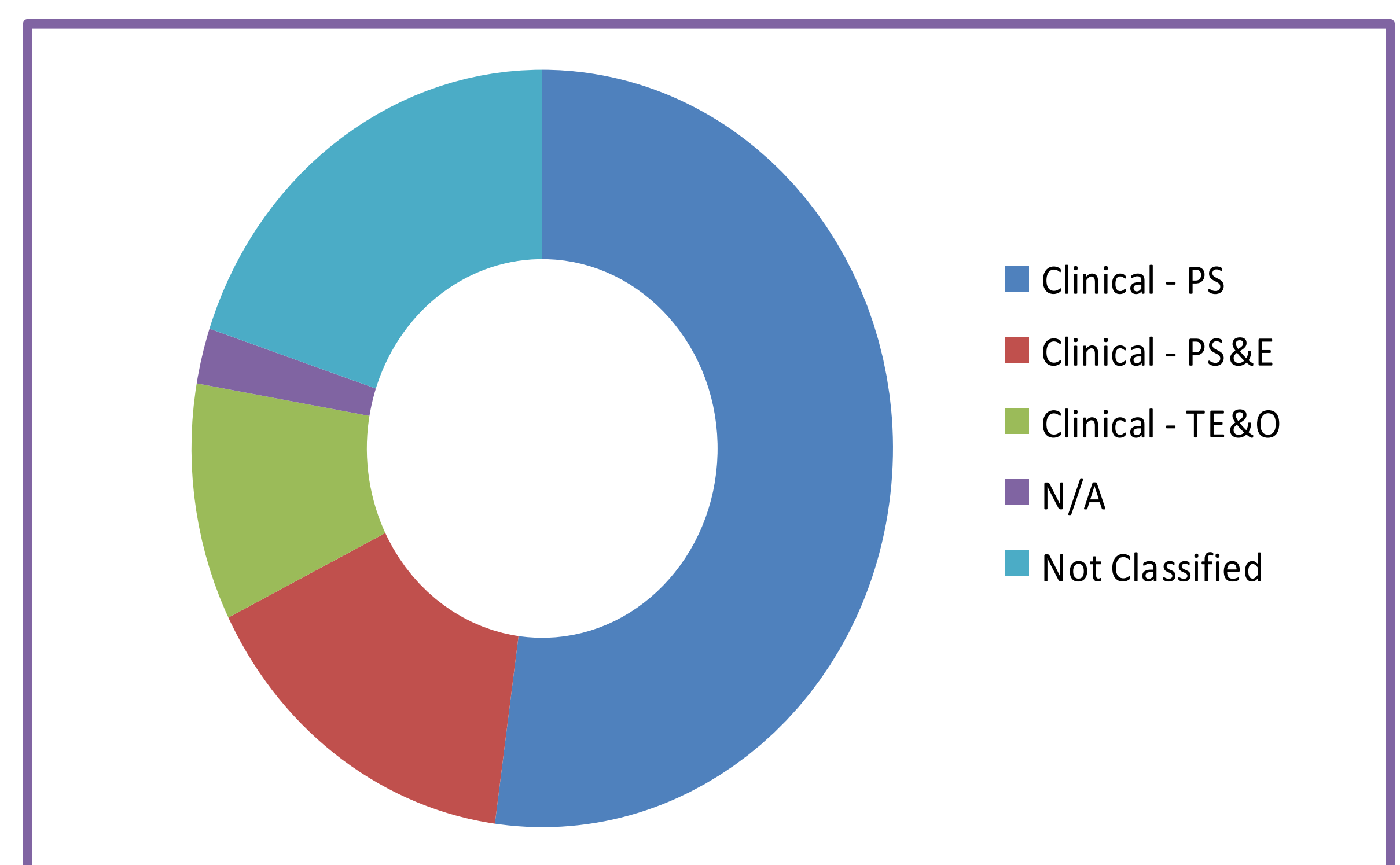
RECOMMENDATIONS

- All UKMI centres should also classify all enquiries based on these clinical categories so direct contribution to patient care can be quantified.
- MI pharmacists should receive brief standardised training on classifying enquiries.

RESULTS

From 1st June 2017 to 31st May 2018, 1137 enquiries were completed by 4 pharmacists. Figure 1 below shows how the queries were classified.

Figure 1



Classification of Query	Patient Safety	Patient Support & Experience	Patient Treatment, Effectiveness & Outcome	Not applicable	Not classified
Queries	593 (52%)	176 (16%)	115 (10%)	27 (2%)	226 (20%)

Figure 2

95% of enquirers surveyed stated that our service contributed directly to patient care. The remaining 5% of enquiries were not related to a patient.

Total Surveys Sent out	Total Surveys Returned	Agreed answer directly contributed to patient care
120	66	63

REFERENCES

- 1) Medication Errors: Technical Series on Safer Primary Care [Internet]. Geneva: World Health Organization. Licence: CC BY-NC-SA 3.0 IGO; 2016. Available from: http://www.who.int/patientsafety/topics/primary-care/technical_series/en/
- 2) Lord Carter of Coles. Operational productivity and performance in English NHS acute hospitals: Unwarranted variations [Internet]. 2016 Feb. Available from: <https://www.gov.uk/government/publications/productivity-in-nhs-hospitals>