Are all enquiries to the patient medicines helpline appropriate?

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Background

The medicines helpline at MYTT provides a medicines advice service, primarily to patients who have been discharged from one of our three hospitals. In the past 5 years the average number of patient helpline calls has increased from 10 to 30 per month. Enquiries through the helpline account for up to 20% of Medicines Information's (MI) enquiry workload.

Objective

We undertook a review of the types of enquiries received via the helpline to identify common themes. We wanted to use this data to highlight potential areas where provision of information around medicines could be optimised prior to discharge. This may reduce enquiries to the helpline that may be more easily dealt with at ward or dispensary level and improve patient safety and experience.

Methods

- ❖ We reviewed all Medicines Helpline calls over a 6-month period from Jan-Jun 2023 (n=147)
- ❖ Data was extracted from MiDatabank retrospectively, then entered and analysed in Microsoft Excel
- ❖ We categorised the enquires into one or more of seven themes (see figure 1)
- ❖ Other data we recorded included designation of caller, involvement of critical medicines, identification of medication errors or discharge documentation discrepancies, and where an enquiry was unrelated to medicines use
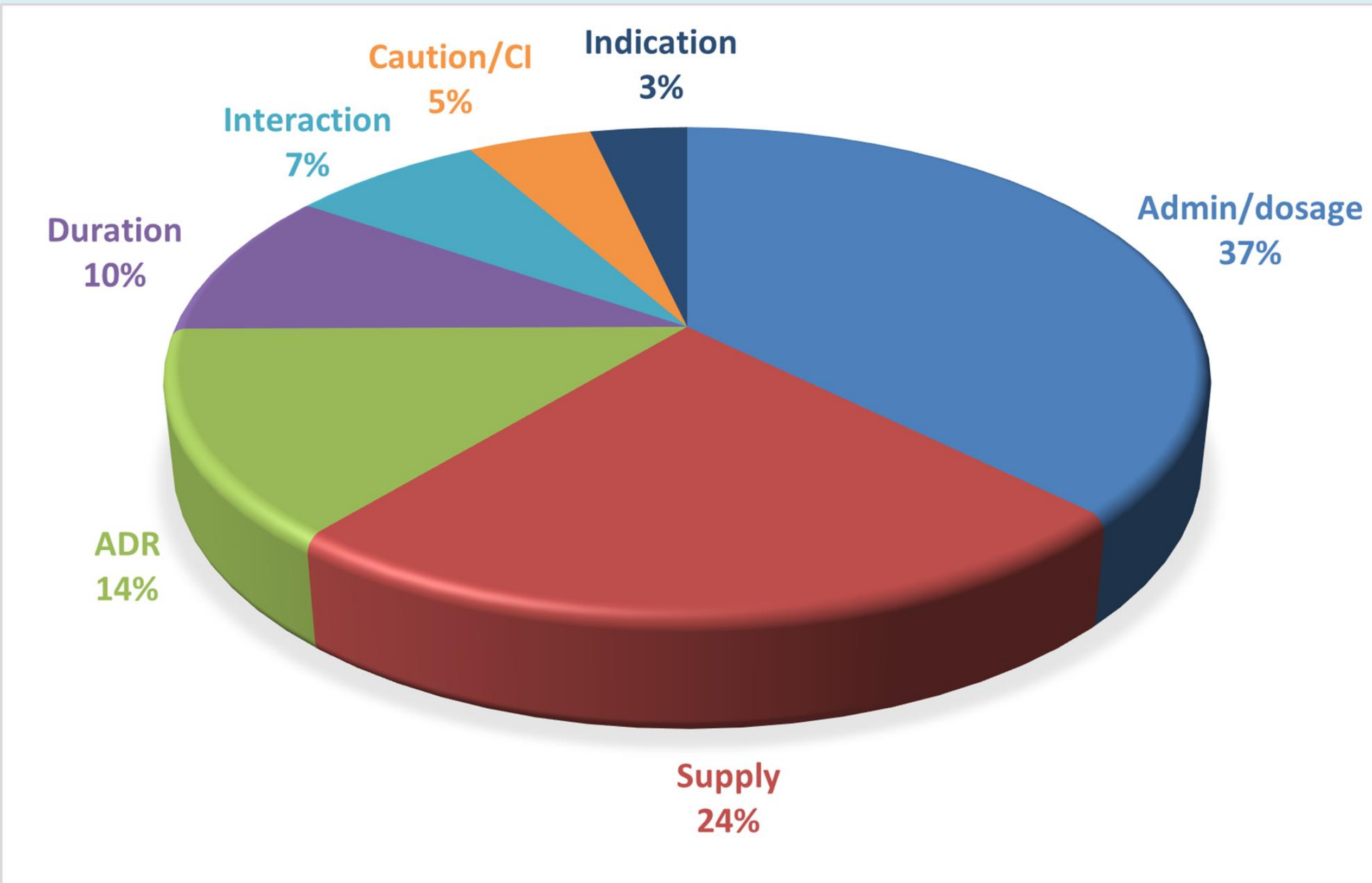
Results

Figure 1 – Helpline enquiries categorised according to theme

Percentage of total enquiries that involved:

Straightforward general counselling points on discharge medicines	41% (60/147)
Questions regarding a critical medicine	35% (51/147)
Discharge discrepancies identified	11% (17/147)
Questions not specifically related to medicines	8% (12/147)

What Next?

Priority ideas for improvement:

- ❖ Add course lengths/day of week to labels where appropriate (e.g. antibiotics, colecalciferol)
  - • Lead: MI and Dispensary
- ❖ Improve patient understanding of medicines e.g. supply of analgesia at discharge
  - • Lead: MI
- ❖ Review process for removal of ceased or changed medications from patients' bedside lockers - check if covered in nurse induction training
  - • Lead: Ward Pharmacy /Meds Opt Nursing Teams
- ❖ Review process for documenting/resolving medicines discrepancies on admission
  - • Lead: Clinical teams
- ❖ Increase provision of pharmacy-led discharge medicines counselling at ward
  - • Lead: Ward Pharmacy Teams