

Medicines Helpline for Hospital Patients: National Standard

Standard: The Pharmacy provides a helpline that patients and their carers can contact after discharge with any queries or concerns about their medicines.

This is an outline standard, and the details should be agreed with patient representatives locally.

Risks of non-implementation

- Patients do not take their medicines, or take them incorrectly, so do not gain sufficient benefit.
- Prescribing errors, supply errors, non-adherence, and adverse effects are not identified, and patients are harmed, inconvenienced, re-admitted, or have to seek corrective healthcare or advice from elsewhere.
- The Trust does not learn from adverse patient experiences so that errors or poor practice continue.
- Patients and carers do not have a satisfactory experience of the Trust.

Satisfactory	✓	Commended	✓
<p>1. Access</p> <ul style="list-style-type: none"> • Phone line allows direct dialling from outside. • Calls charged at local call rate or freephone (not a premium number). • Contact with a pharmacy professional always available during advertised hours. • An answerphone allows a message to be left outside advertised hours or if line engaged. 		<ul style="list-style-type: none"> • Dedicated phone number • Access to the service by means other than telephone, in consultation with local patients, such as: <ul style="list-style-type: none"> - Email. - Webform. - Personal visit. 	
<p>2. Availability</p> <ul style="list-style-type: none"> • Accessible to patients/carers for minimum 4 hours per day. • Five days per week. 		<ul style="list-style-type: none"> • 8hrs or more per day. • Extended hours for evenings, weekends. 	
<p>3. Promotion</p> <ul style="list-style-type: none"> • Helpline promoted to discharged inpatients by methods agreed with patients locally e.g.: <ul style="list-style-type: none"> - Promotion with discharge medication (e.g. business card, counselling, labels). - Notice on discharge documents. - Posters/leaflets on organisation's premises. • The helpline is promoted at all the healthcare organisation's sites. • Promotional materials identify access times and types of enquiries patients/carers can make. 		<ul style="list-style-type: none"> • Also promoted to outpatients. • Additional promotional methods, such as: <ul style="list-style-type: none"> - Awareness meetings with senior healthcare professionals. - Leaflets distributed via PALS or similar local patient organisation. - Promotion to patients and carers on the employing organisation's website. 	

<p><i>4. Standard Operating Procedure (SOP)</i></p> <ul style="list-style-type: none"> • All enquiries should be documented where advice is given or a decision is made to refer patients/carers elsewhere for healthcare advice. • An SOP advises all staff how to: <ul style="list-style-type: none"> - Receive, record, and respond to enquiries. - Escalate enquiries into critical incidents or similar, as determined by local policies. - Decide which enquiries are inappropriate to answer and/or how to refer elsewhere. 			
<p><i>5. Information and professional support</i></p> <ul style="list-style-type: none"> • All enquiries should be answered by appropriately competent pharmacy staff. • The following sources and support must be available to staff answering enquiries from patients or carers: <ul style="list-style-type: none"> - The pharmacy's computer system that issues medication to patients. - Discharge documentation and e-prescribing system (if applicable). - Laboratory results system. - Contact details for local specialist clinical pharmacy staff. - BNF. - eMC www.medicines.org.uk/emc/ - Local prescribing guidelines/ formulary. - MiDatabank or similar enquiry recording system www.midatabank.com - Access to support from an MI centre. - A list of appropriate local contacts to refer patients/carers to, and a crisis support team or similar for those in distress. - Access to employer's support systems for patients with disability (e.g. hearing impairment) and services for patients who do not speak English. - Access to, and conformity with, employer's policies for complaints, patient confidentiality, incident-reporting, and data protection. 		<ul style="list-style-type: none"> • Hosted by an MI centre. • Answers to common questions about medicines on the employing organisation's website. • A local combined electronic health record, allowing staff to view patient records from primary and secondary care, if available. 	
<p><i>6. Quality and risk</i></p> <ul style="list-style-type: none"> • The standards for operation of the helpline have been prepared in consultation with local patient representatives. • An assessment of patient/carer satisfaction conducted on an ongoing basis. • A mechanism to feed back to the Trust medication problems and "systems errors" identified by patients/carers to prevent recurrence. 		<ul style="list-style-type: none"> • Meetings with patients, or research, to look at how to improve and promote the service. • A user survey designed in collaboration with local patients. 	

Key Performance Indicators

The recommended KPIs for a patient helpline should be agreed with patient representatives locally, but suggested measures are:

- Number of enquiries received per month: to be agreed against a local target.
- Proportion of enquiries answered within caller's deadline (suggested target 98%).
- Satisfactory response to user survey (as agreed locally).

This work was led by Dr Simon Wills, Wessex MI Centre, University Hospital Southampton NHS Foundation Trust.

*Original draft prepared by Medicines Information Pharmacists and Chief Pharmacists in Wessex and Thames Valley.
Endorsed and commented upon by UKMi Clinical Governance Working Group (Chair, Fiona Woods, Cardiff)
and UKMi Patient-facing Information Task and Finish Group (Chair, Graham Cox, Leeds).*

Version 3.2. March 2014