

A service evaluation of Medicines Information (MI) enquiries following centralisation of MI services across two hospital sites: What has changed three years on?

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Introduction

Following the merge of Chelsea and Westminster Hospital (CW) with West Middlesex Hospital (WM) to form Chelsea and Westminster Hospital NHS Foundation Trust (CWHFT) in September 2015, there was a drive to integrate services across both sites in order to improve cost effectiveness and streamline resources. As of March 2016, the MI service was centralised to a single MI centre based at CW, covering both sites. It was considered necessary to review the evolution of the MI service over three years since centralisation in order to identify potential areas for improvement.

Method

Data was collected retrospectively using the Reporter function on MiDatabank.¹ Information was gathered regarding the number and type of enquiries completed from 1st March 2016 to 31st May 2016 (three months following centralisation) and over the same period (1st March to 31st May) of 2019. Information regarding enquirer type and the base hospital site was also gathered.

Results

A total of 183 enquiries were received from both sites in March, April and May of 2016; conversely a total of 425 enquiries were received across the same three month period in 2019.

Of the 183 enquiries received between 1st March and 31st May 2016, 118 were from healthcare professionals (HCP) and 65 were from members of the public (MOP) known to CWHFT. Of these enquiries, 126 were based at CW, 46 were based at WM and 11 were from enquirers based outside CWHFT. 172 enquiries were from the Base Organisation (HCP or MOP related to CWHFT). 5 were made by HCPs from other NHS organisations and 6 were made by HCPs in Primary Care.

Contact methods included via email (48), letter (1), in person (12) and telephone (122).

Three years on in the audited period of 2019, of the 425 enquiries received, 302 were from HCPs and 123 were from MOPs. Of these HCP enquiries, 207 were based at CW, 65 were based at WM and 153 were from enquirers based outside CWHFT. 267 enquiries were from the Base Organisation. 3 were from non-NHS enquirers, 78 from other NHS organisations and 77 from Primary Care. Contact methods were via email (65), person (23) and telephone (337).

Discussion

The results show a 132% increase in enquiries in three years since centralisation of the MI service at CWHFT. The number of enquiries submitted by HCP outside of the base organisation rose dramatically from 11 enquiries in 2016 (6% of total enquiries) to 153 enquiries in 2019 (36% of total enquiries). However, the percentage of calls from MOPs over the two audited periods did not rise in line with the 132% enquiry increase and remained similar (36% of total enquiries in 2016 compared to 30% of total enquiries in 2019).

Conclusions and Recommendations

This service comparison highlights the significantly increased workload that the MI service has experienced over the past three years, but draws attention to the lack of growth of enquiries from MOPs compared to the large percentage increase seen for overall enquiries. Patient helplines within the MI service aim to identify and mitigate risk of non-adherence, improve patient experience of the Trust and identify potential medication-related errors.² Given the benefits that the MI helpline offers, further work needs to be done to assess the reason for reduced MOP enquiries and work on potential improvements to overcome this in the future.

References

1. COACS. MiDatabank Enquiry Manager v3.2. Date accessed: 05 June 2019
2. Thames Valley and Wessex Chief Pharmacists Network. Medicines Helpline for Hospital Patients: National Standard. Version 3.2. March 2014

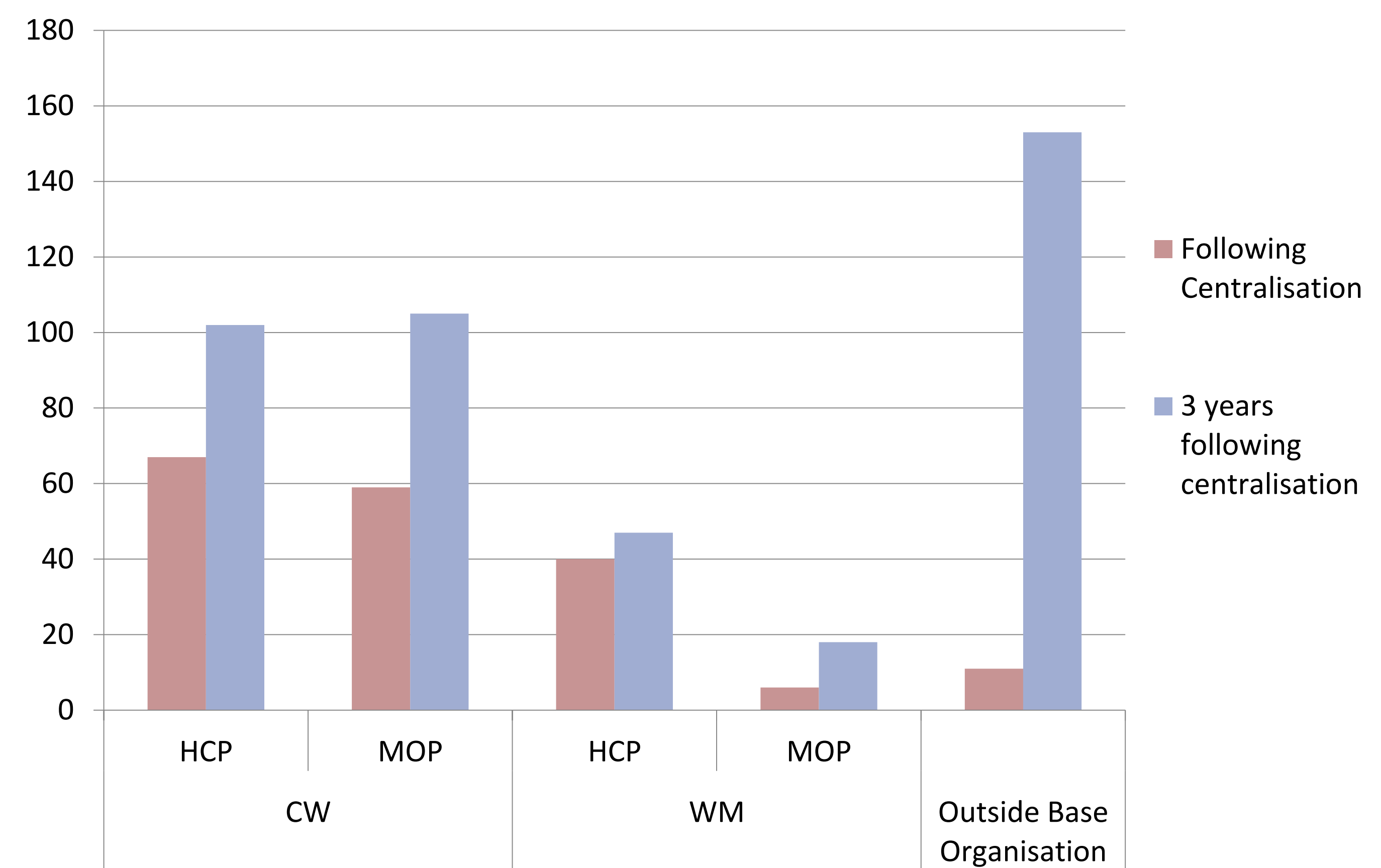


Fig. 1 Comparison of number of enquiries received in MI in 2016 following centralisation and three years following centralisation in 2019.

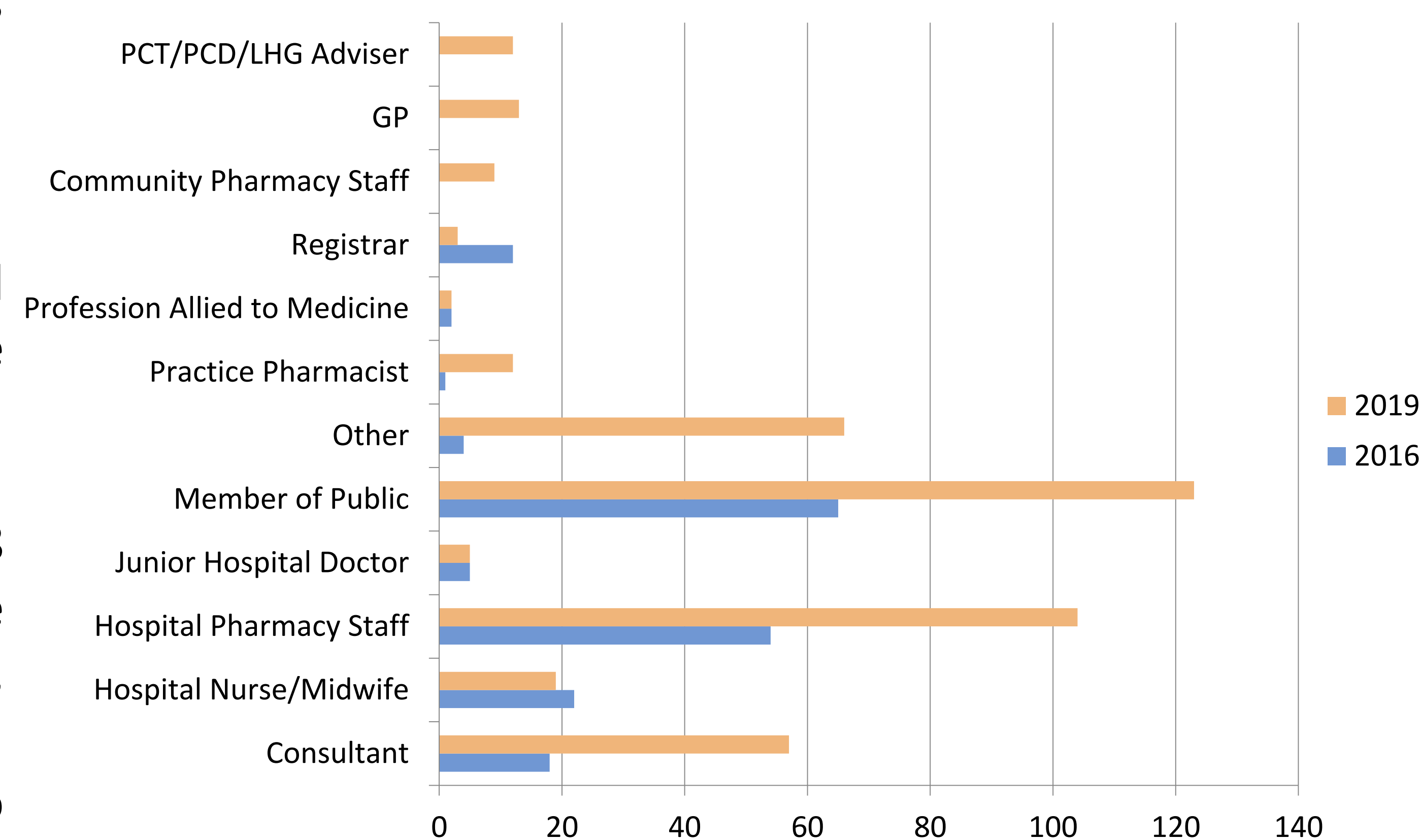


Fig. 2 Comparison of number of enquiries completed by enquirer type received in MI in 2016 following centralisation and three years following centralisation in 2019.

Contact Method	2016		2019	
	Number	Percentage	Number	Percentage
Telephone	122	66.7%	337	79.3%
Email	48	26.2%	65	15.3%
In person	12	6.6%	23	5.4%
Letter	1	0.5%	0	0%

Table 1. Overview of routes of enquiry to the MI Service