Welcome to the April 2017 Refer-to-Pharmacy newsletter; as ever feel free to pass it on within your networks.

Last time I mentioned that *Hospital Admission Notifications* went live at the end of February; and different questions were asked around community pharmacy outcomes (screen shot below).

Did this information prevent an unintentional prescribing error from the next GP's prescription? * | Yes there was an unintentional pr ⌄

Briefly explain your selected option if you feel further information helps (optional): | patient started warfarin and aspirin stopped in hospital but was still on the GP's prescription - got it stopped

Has Refer-to-Pharmacy saved time or cost additional time for this patient?: *   ● Saved time   ○ Neither saved or cost time   ○ Cost time

Please estimate how many minutes were saved: * | 20

Has Refer-to-Pharmacy reduced or generated medicines waste for this patient?: *   ● Reduced wasted medicines   ○ No effect on wasted medicines   ○ Caused additional wasted medicines

Please tell us how many items were NOT dispensed: * | 2

Here's the short screenshot film showing all the new functionality in action: https://youtu.be/uU6-2IHo--A

A lot of information has been captured on the referrals that have been completed. Apologies in advance for the 'stat attack' which follows… and in no particular order, here is some of March's data.

714 referrals were made from hospital. Many of these patients are still in hospital, or have been 'Accepted' by their community pharmacist and are either awaiting a consultation or their GP's next prescription has yet to be received. The number of referrals 'Completed' in this time frame was 167.

91 *Hospital Admission Notifications* were sent.

10 referrals were rejected: 7 were not known to the pharmacies in question; 1 patient could not be contacted; 2 rejections were due to the pharmacy being 'unable to provide the service' referred in to (MURs).

From the completed referrals, 48 have resulted in 130 prescription items *NOT* being dispensed. A quick check of the PSNC's website reveals the current average item value to be £9.18. No negative values were reported so that means a saving to the Pennine Lancashire health economy of £1,193… and forty pence!

Also from the referrals completed so far, 82 have led to *28.5 hours* of time being 'saved' by community pharmacists. For balance 140 minutes have been 'wasted' (4 referrals – the reasons are not documented).

21 referrals have so far identified *unintentional prescribing errors* on their next GPs' prescriptions; this really underpins the safety benefits of Refer-to-Pharmacy. It's likely this figure will rise as more referrals are completed.

On two referrals, the GPs had intentionally decided *not* to affect changes instituted in hospital.

**Finally, in other news, interviews have taken place for the [HSJ Value in Healthcare](#) awards ([R2P](#) is in three categories and our [#DedicatedWardPharmacy](#)
project is in one). We get the results on 24th May.**

Until next time…

Many thanks,

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