

Introduction

Aim

To provide patients discharged from hospital or tertiary care centre with better accessibility to their hospital-initiated medications at primary care level, and in the process minimize the need for these patients to return to tertiary care centre to get their prescriptions filled.

Background

Some patients discharged from tertiary hospitals and specialty centres to primary care polyclinics were unable to obtain certain medications initiated by the hospitals/centres.

These patients therefore need to

1. Return to hospital/centre pharmacies from where they were discharged to purchase these medications, &/or
2. Purchase these medications from private retail pharmacies.

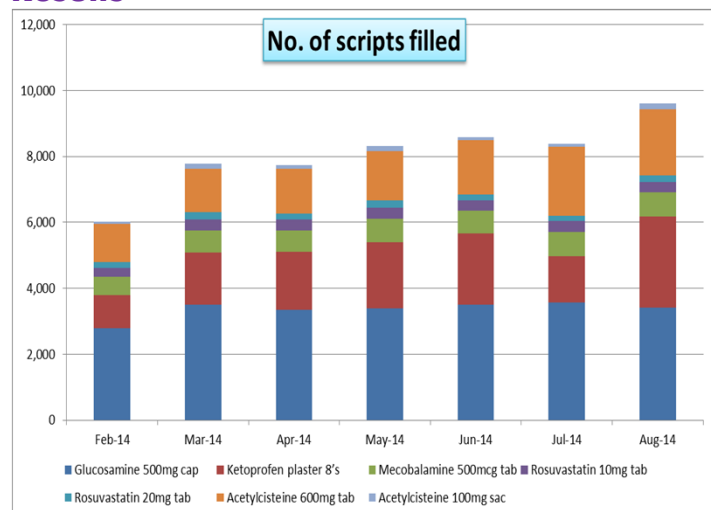
This results in inconveniences for patients, and may potentially increase the likelihood of patients' non-adherences to their medication/treatment regimens.

Methodology

A team (under SingHealth's Accessibility and Availability of Medications Workgroup), comprising of members from various SingHealth institutions, was formed to work on and develop measures to improve the situation.

The team collected and analysed data from various SingHealth institutions on the type of medications dispensed to discharged patients due to their unavailability at SingHealth Polyclinics (SHP). With the information, SHP then expanded its formulary to include 5 new and most commonly dispensed medications.

Results



Number of prescriptions filled at SHP for 5 newly included medications.

The team also worked with various doctors from hospitals and tertiary care to further streamline the discharge process to ensure that medications could be promptly available to all discharged patients.

Patients managed at Specialist Departments

- Communications of SHP formulary via intranet
- Linkage to SHP formulary in Sunrise Clinical Manager (SCM)
- Specialist Outpatient Clinics (SOC) were made aware of SHP formulary so that doctors may prescribe medication that is in SHP formulary

Discharge Planning / Care Coordination

- SHP continued to work with the various hospital teams overseeing discharge planning, right-siting and case management to ensure medication needs of patients are adequately considered as they are transited from hospital to primary care

Patients Managed at Polyclinics

- A continuous process for SHP formulary to be reviewed and enhanced to facilitate right-siting practices. 2 more medications were added into the formulary in Jan 2015 through this process
- Where appropriate, SHP doctors to switch patients to alternatives available at SHP
- To accommodate an expanded formulary and increased storage space demand due to immense success of the initiative, SHP embarked on a project to setup a central SHP warehouse



Conclusion

To facilitate right siting of patient care, the need to manage the accessibility to medications at the primary care level is important. If not managed appropriately, right siting efforts may be hindered as patients do not wish to be discharged to primary care for follow up due to unavailability of certain medications.

Proper right siting of care would also help reduce congestions at the tertiary institutions, as well as lead to better patient experiences and staff satisfaction.

Acknowledgements :

We would like to acknowledge the contributions and support of the co-chairs (Ms Lee Chen Ee, Ms Celia Tan and Mr Lim Mun Moon) and members of AAMWG, Director Pharmacy SHP (Mrs Pauline Lo) as well as SHP Pharmacy Department.