Aim

- To review and describe the role of the Pharmacist-initiated E-prescription Transcription Service (PETS) pharmacist during discharge and to assess current user satisfaction since implementation in Aug 2008.

Method

- Data collected between Nov 2008 and Aug 2010, and a staff satisfaction survey (Sep 2010) were used.

Background

- Started 2008
- Collaborative approach to non-medical prescribing
- Discharge prescribing
  - Generation of an unsigned prescription
  - Reviewed and signed by the doctor.

Background

- DHS funded pilot study done by senior pharmacist showed PETS:
  - Reduced prescribing errors
  - Reduced time taken for doctors to prepare discharge prescriptions
  - Hastened the discharge process
- Survey during pilot study revealed 91% of respondents "agreed" or "strongly agreed" to being very satisfied with PETS. (95/165 responses).

Background

- Banakh I. Experience and Outcomes of a Junior Pharmacist in a Prescribing Role. Poster presented at: SHPA 35th National Conference; 2009 Nov 5-8 Perth
- Compared PETS data between senior and non-senior pharmacist
- Showed PETS position can be filled by a non-senior pharmacist
- 7 non-senior pharmacists trained ever since.

PETS now (Nov 08 – Aug 10)

- Stages of PETS
  1. Receiving referrals
  2. Initial review
  3. Preparing prescription
  4. PETS communication sheet
  5. Prescription complete
- High level of satisfaction maintained
  - 100% of 2010 survey respondents (n=37) either “agreed” or “strongly agreed” that they were very satisfied with PETS.
1. Receiving referrals
   - Who makes them?
     - Pharmacists (38.4%), doctors (29.6%), ward clerks (26.4%), nurses (5.7%) (n=2895)
     - Most helpful when there is a discharge plan in place (e.g. antibiotic duration, rationale for ceasing meds etc)
   - 81.4% of referrals were for same-day discharges
   - Due to high demand only 61.7% of referrals could be accepted.

2. Initial review
   - Medication reconciliation form (MRF)
     - Ward pharmacists prioritise MRFs for pt's referred to PETS
     - 29.3% of all PETS prescriptions (n=2261) have MRFs completed by PETS
     - PETS pharmacist can leave important/useful notes for ward pharmacist.

3. Preparing prescription
   - 2010 survey reveals:
     - 100% of doctors and pharmacists (n=23) were happy for PETS to make dosage suggestions on the prescription
       - e.g. Prednisolone weaning dose, warfarin dose & repeat INR
     - 92.9% of doctors (n=14) were happy for PETS to change medications on prescriptions (e.g. As per TG).

4. PETS communication sheet
   - All prescriptions are complete with a communication sheet
     - All clinical interventions listed for review by the doctor
     - All intentional changes during the admission are formally documented with their corresponding rationales
     - This information relating to continuity of care is included
       - E.g. Asking the GP to repeat phenytoin levels one week after discharge
     - 11.3% of PETS prescriptions contained clinical issues for the GP to follow up:
       - 100% of doctors and pharmacists (n=23) in the 2010 survey found the PETS communication sheet useful.
5. Prescription complete

- PETS prescription reviewed by doctor before being signed and pass onto ward pharmacists for dispensing
- Median time for writing prescriptions is 30 minutes

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<tr>
<th></th>
<th>% prescriptions requiring amendments by ward pharmacist</th>
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<tbody>
<tr>
<td>Doctors Rx (Pilot study)</td>
<td>37.0%</td>
<td>454</td>
</tr>
<tr>
<td>PETS Rx (Pilot study)</td>
<td>3.5%</td>
<td>200</td>
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<tr>
<td>PETS Rx (Nov 08-Aug10)</td>
<td>4.9%</td>
<td>3693</td>
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The PETS role

- Enjoyable role
- Greatly appreciated by all staff involved in the discharge process
- Rapidly appreciate the difficulties encountered by junior medical staff when it comes to writing prescriptions and formal documentation of changes
- Opportunity to greatly affect the post-discharge care of a patient
- Get to work closely with all units in the hospital
- Mentally challenging
  - Number of scripts generated = number of in-depth patient reviews

Comments from the survey

- “Valuable service – however providers need running shoes – would be work for more than 1”
- “Very handy”
- “Need more than 1 PETS pharmacist on duty”
- “At times when high volume of discharges within the hospital it is difficult to get PETS pharmacist in a timely manner”
- “Find PETS service very helpful – always obliging – helpful to assist in the progress of D/C”
- “Having somebody who is focused on medication of pt at the time of discharge can save time, reduce mistakes and increase pt care”
- “PETS – very good job”
- “Intern’s best friend”
- “Definitely benefits Doctors and pharmacists”
- “Speeds up discharges and less errors on scripts”
- “For pharmacists – easier to communicate with community pharmacy for webster packs”