

Patient has been discharged to an aged care facility, but was the hospital's plan followed?

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BACKGROUND

Problems with continuity of medication management during transition of care from hospital to aged care facilities have long been recognised. Our Pharmacy Department conducted a study to investigate the level of compliance to the medication management plan after patients were discharged to aged care facilities.

AIM

To investigate whether the intended medication plan devised by the hospital was actioned for patients discharged to aged care facilities within the first 24 hours.

METHODS

From November 2021 to February 2022, patients who would be discharged back to aged care facilities were identified by the principal investigator. Consent to participate in the study was obtained. The principal investigator called the aged care facility's registered nurse (RN) to complete a post-discharge questionnaire on medication management.

RESULTS

Discharge medication, medication management plan and discharge summary

21 patients (84%) had medication changes and had a new medication management plan in their discharge summary. These patients were given three days' supply of medication on discharge from the hospital. 17 RNs (68%) reported the discharge medication was administered to the patients. A total of 68 doses were given to 17 patients in the first 24 hours post discharge. 23 RNs (92%) regarded the discharge summary as the primary source of the medication management plan.

General Practitioner (GP) review and organisation of blister pack medication post discharge

17 patients (68%) had their medication reviewed by their GPs within 48 hours of returning to the facilities (Figure 1). 15 patients (60%) had a new blister pack ready within 48 hours post discharge (Figure 2) whereas 3 patients (12%) did not require a new blister pack.

Continuity of medication management

Two patients missed at least one regular medication in the first 24 hours post discharge. It was discovered that one of them had the discharge medication lost during transportation while the other patient was not supplied the newly prescribed drug.

After returning to the facilities, one patient continued to receive a ceased medication while another patient received a medication at the previous dosage.

Table 1: Patients' demographics

	No. of patients	Percentage
Gender		
Male	14	56%
Female	11	44%
Age		
60-69	1	4%
70-79	4	16%
80-89	11	44%
90+	9	36%

When was the medication chart reviewed by the GP?

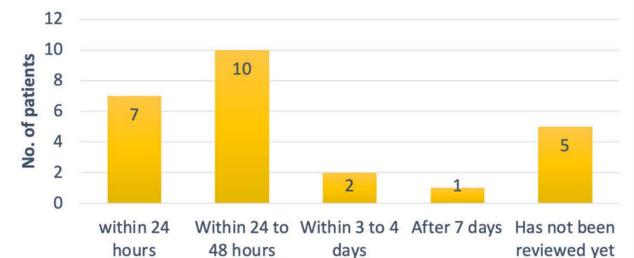


Figure 1

Time required for Aged Care Facilities to have a new blister pack ready

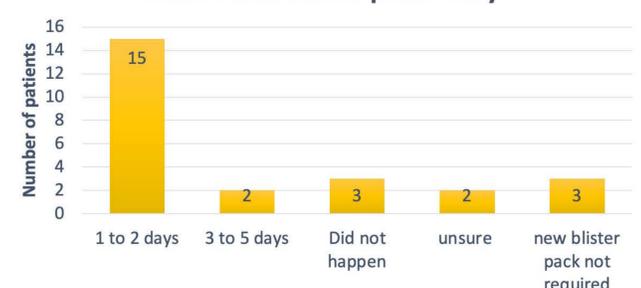


Figure 2

DISCUSSION

It is our hospital's policy to provide three days' supply of medication and a discharge summary with the medication management plan for patients discharged to aged care facilities. In this study, it was clear that our practice supported the aged care facilities to implement the medication management plan before the patient's review and preparation of a new blister pack.

Although 60% of the patients in our study were reviewed by GPs and had a new blister pack ready within 48 hours of their return, there were still a significant number of patients who failed to receive the service within the expected timeframe. We also identified a few incidents that required investigation. In response to this, a team was set up to evaluate our existing service and develop strategies to improve medication management for patients discharged to aged care facilities. We believe ongoing engagement with our local aged care facilities is essential to reduce medication misadventure post discharge in the future.

Scan the QR code to read our study summary :



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