

Discharge Medicines Service (DMS)

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Discharge Medicines Service (DMS)

- **DMS** is an Essential service within the Community Pharmacy Contractual Framework (CPCF- Pharmacy Contract). 15th February 2021 saw the start of NHS Trust referrals to community pharmacies in England under the NHS Discharge Medicines Service (DMS).
- It should be noted that as an essential service, community pharmacy contractors cannot choose whether they provide the service thus has to be provided as part of the contract.
- Lister Hospital, Watford General Hospital and PAH are live with this service with a good rate of referrals to Pharmacies.



Discharge Medicines Service (DMS)

Pharmacy training and stages

- **Training requirement-** Read the NHSE&I regulations guidance and the [NHSE&I DMS toolkit](#). Complete CPPE DMS e-learning, assessment and Declaration of Competence (DOC)
- Referrals are sent to Pharmacy through Pharmoutcomes.
- There are 3 Stages for DMS that need to be completed in pharmacy on Pharmoutcomes:
 - **Stage 1:** The community pharmacy receives a discharge referral.
 - **Stage 2:** The community pharmacy receives the first prescription following discharge.
 - **Stage 3:** The community pharmacy checks the patient's understanding of their medicines regimen.



Discharge Medicines Service (DMS)

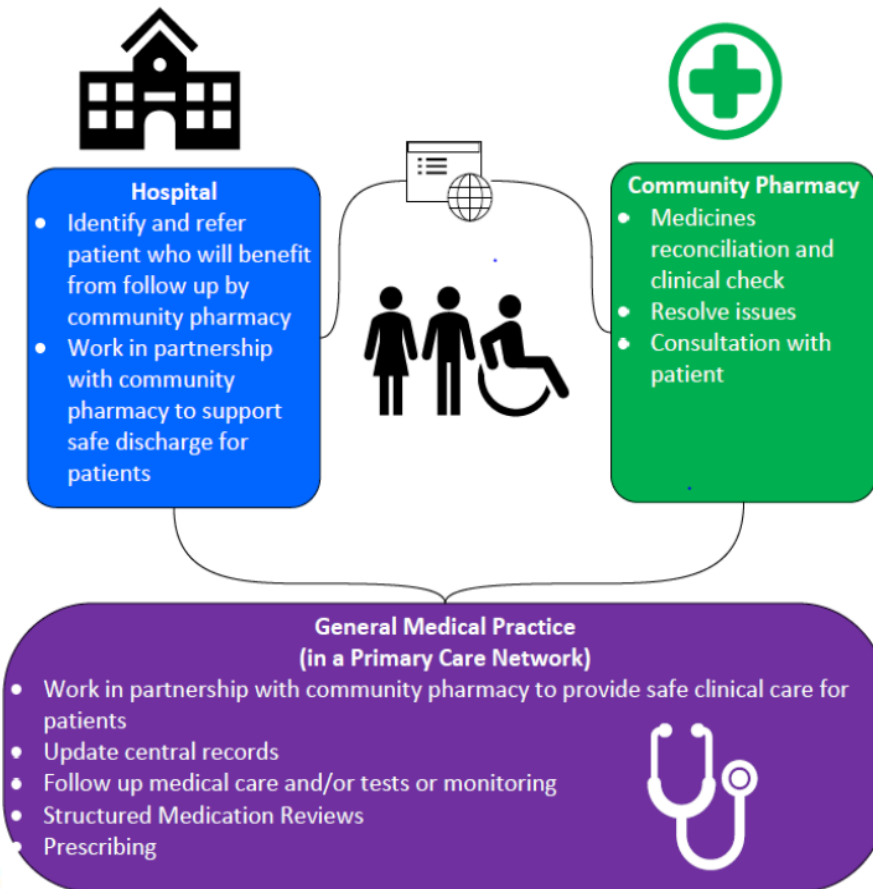
Payment and summary

- Contractors providing the full service, completing 3 stages will be paid **a fee of £35**.
- Where **only part of the service** can be provided, in certain circumstances as defined in the Drug Tariff, contractors will be paid **a partial payment as follows**:
 - Stage 1: £12
 - Stage 2: £11
 - Stage 3: £12
- Contractors Should make a monthly claim for completed DMS provisions via the NHSBSA's Manage Your Service (MYS) portal.



Supporting Links for DMS:

NHS Discharge Medicines Service patient pathway



- [Discharge Medicines Service : PSNC Main site](https://www.england.nhs.uk/wp-content/uploads/2020/12/B0274-guidance-on-the-nhs-charges-pharmaceutical-and-local-pharmaceutical-services-regulations-2020.pdf)
- <https://www.england.nhs.uk/wp-content/uploads/2020/12/B0274-guidance-on-the-nhs-charges-pharmaceutical-and-local-pharmaceutical-services-regulations-2020.pdf>
- <https://www.england.nhs.uk/wp-content/uploads/2021/01/B0366-discharge-medicines-toolkit.pdf>
- <https://www.cppe.ac.uk/programmes//transfer-e-02>
- <https://psnc.org.uk/wp-content/uploads/2020/12/DMS-briefing-for-pharmacy-teams-V1.pdf>
- <https://www.npa.co.uk/discharge-medicines-service-dms/>
- [Discharge Medicines Service \(DMS\) Declaration of Competence \(DoC\)](#)

as one

HPFT joining the Discharge Medicines Service (DMS)

Sanaa Loothfaully

Lesley Bodell



Why DMS for HPFT?

HPFT medication incidents on transfer of care

Beta-blocker
switch: Atenolol
→ Bisoprolol

Overdose from
collecting
medication from
MH team and
GP/Community
Pharmacy

Venlafaxine in
dossette and
out of the
dossette



HPFT Treatment Journey

Direct admission via mental health act detention

Crisis Resolution and Home Treatment Team (CRHTT)

Waiting list admission

First Response Service

Acute hospital transfer

Out of area transfer

Example admission routes

Adult Acute inpatient MH

- Swift (AAU)
- Owl
- Robin
- Aston
- Albany Lodge
- Oak (PICU)

Learning disability and Forensic MH:

- Dove
- Beech
- 4 Bowler's Green
- Warren Court
- SRS

Older People MH

- Wren
- Seward Lodge
- Victoria Court
- Logandene
- Lambourne Grove

Other specialist MH

- Thumbswood
- FHAU
- Rehab – Beacon, Hampden and Gainsford

HPFT Inpatient teams

Home (self / informal care)
Home (formal care)
Acute hospital
Out of area service

Crisis & Home Treatment Team

Community Team

Support from outside agency

Discharge destinations and potential care teams

HPFT Teams and their roles

Acute Adult and Rehab Services

- Adult inpatient services
- Adult Rehabilitation Services
- EROS (Enhanced Rehabilitation Outreach Service)
- Crisis Services
- Host families
- Mental Health Liaison Team
- Street Triage

Adult Community Services

- Location based services for longer term community management of severe mental illness
- Includes Eating Disorders Services, Perinatal Team, PATH, Herts Wellbeing Services, etc

Mental Health Services for Older People (MHSOP)

- EMDASS (Early Memory Diagnosis and Support Service)
- Community Team
- Crisis team
- Therapy Team
- [Older People's Mental Health Services \(hpft.nhs.uk\)](http://hpft.nhs.uk)

Learning Disability and Forensics Services

- Specialist Residential Services (SRS)
- Forensic
- Continuing Care Placements
- MH Prison In-Reach Services

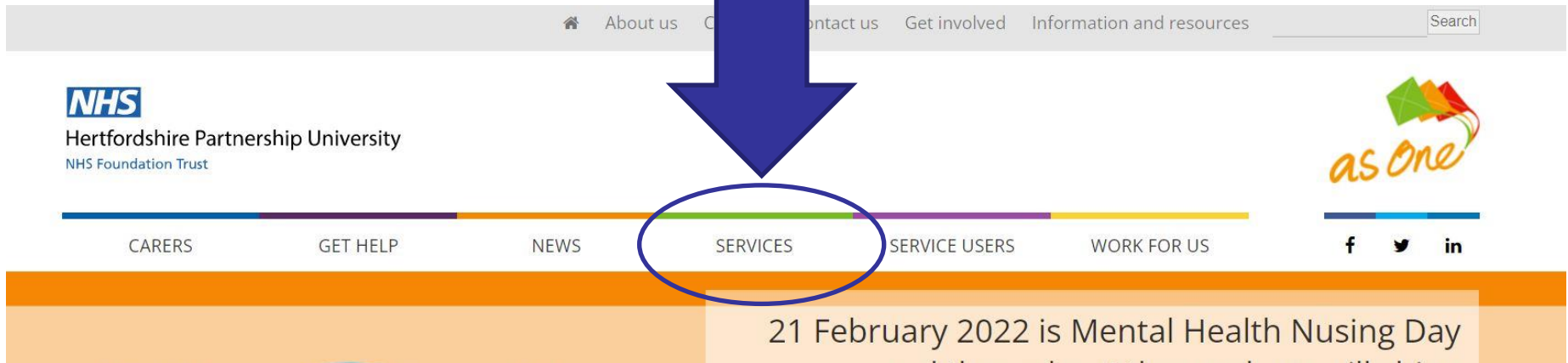
Child and Adolescent Mental Health Services (CAMHS)

- MDT community clinic teams,
- Eating disorders team,
- CCATT,
- DBT team,
- FHAU (inpatient team),
- Home Treatment Team



Trust Services

- For full list of services and contacts, see our Trust website - <https://www.hpft.nhs.uk/>



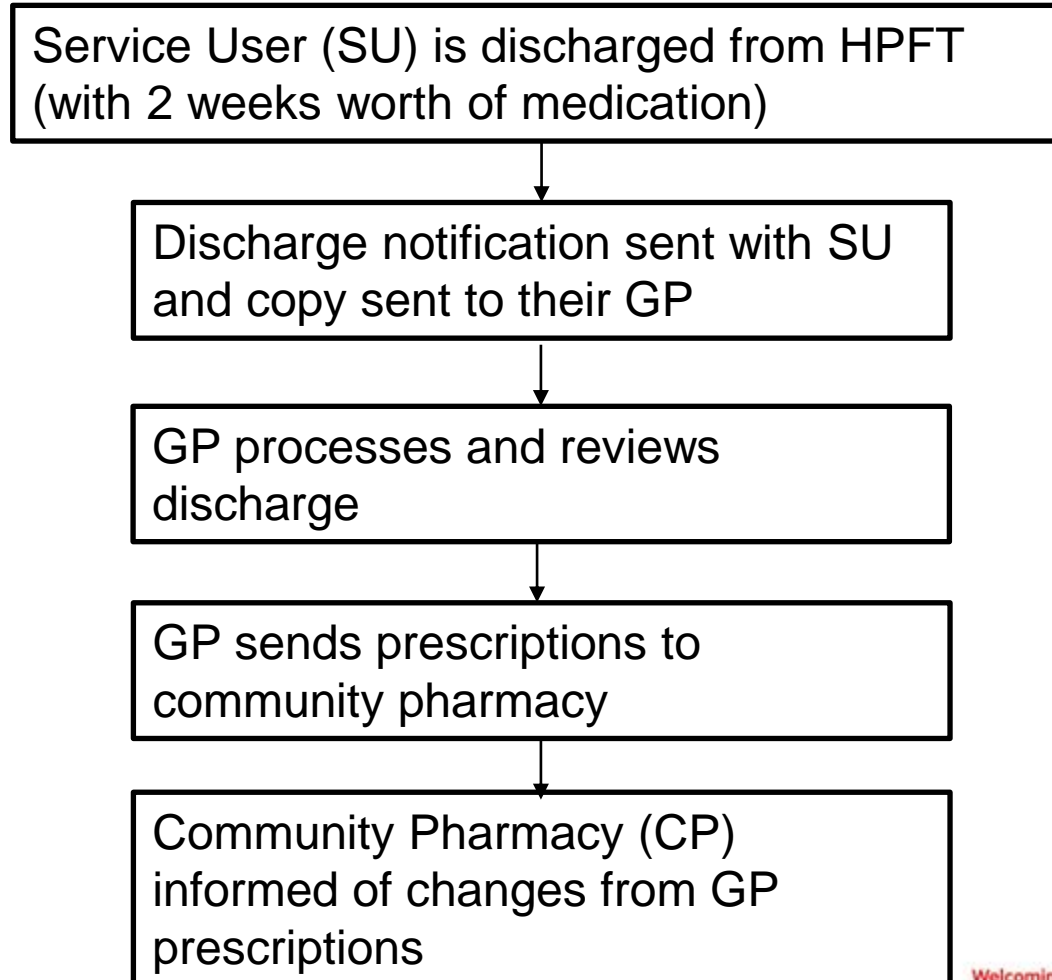
Referral Criteria for DMS

All service users within HPFT (on the selected wards – during the pilot phase) are eligible and they must provide consent to participate (or have a decision of best interest) **AND** meet at least one of the criteria below:

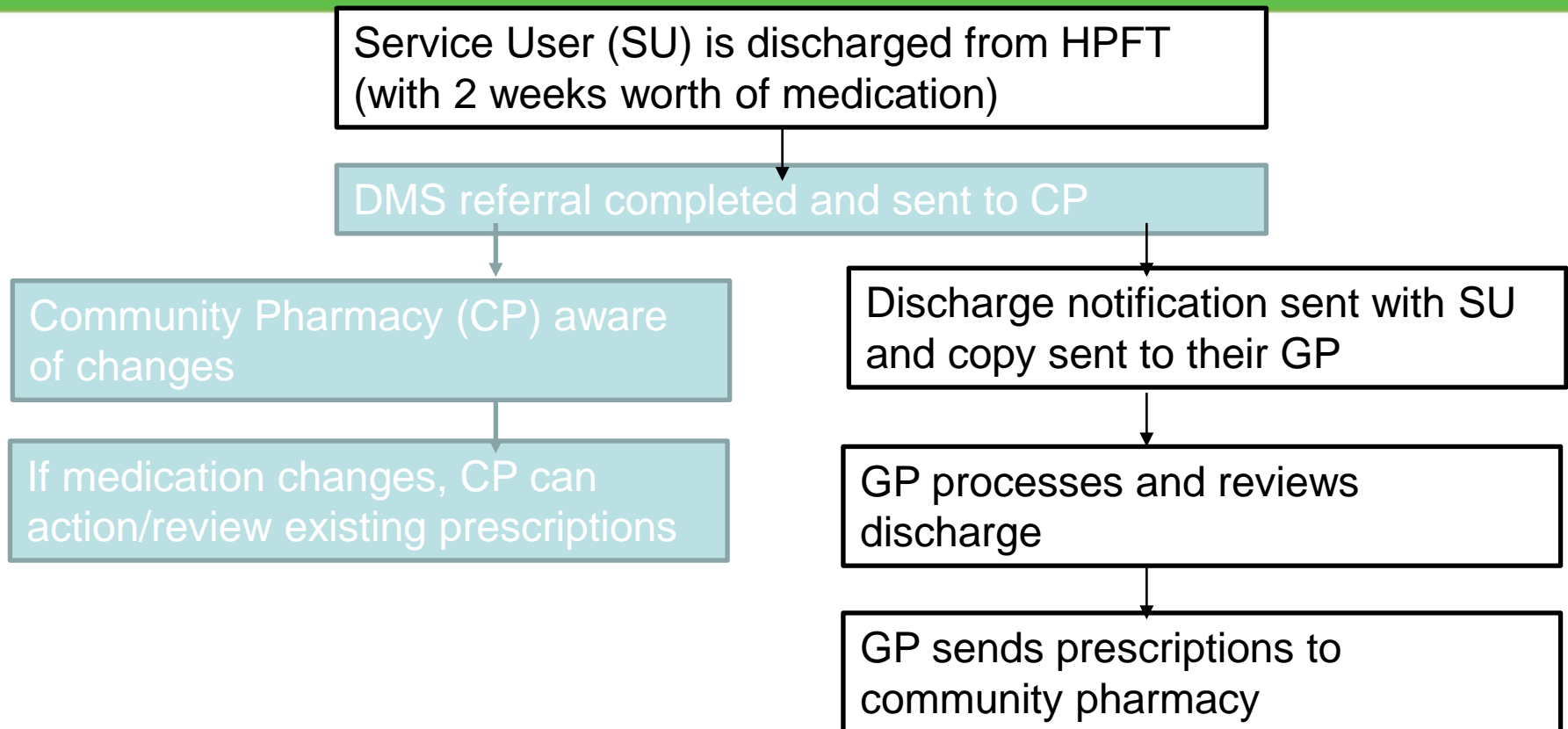
- The discharge notification specifies medication changes and the GP is required to action these changes post discharge e.g. new medicine initiated, dose change made, medication withheld or discontinued.
- The service user was using a compliance aid prior to admission or newly started on a compliance aid at the point of discharge (in agreement with the GP).
- The service user has physical/intellectual disabilities and requires support with medicines use.
- Specific quantities of medication are requested e.g. overdose risk
- The service user is prescribed a high risk/critical medication (as per HPFT Medicines Policy).
- Medication on discharge requires follow-up e.g. blood monitoring, dose titration.



Before DMS



After implementing DMS



Implementation plan

May/June:

- Finalise SOP
- in-house training
- Community Pharmacy engagement event

June 13th – Sept

- Pilot phase
- Owl, Wren and Seward Lodge

Sept – onwards

- Review pilot findings
- Implement changes
- Roll out Trust-wide



DMS SOP

HPFT

Standard Operating Procedure for the Discharge Medicines Service (DMS) for Ward Based Hospital Pharmacists and Technicians

HPFT Standard Operating Procedure (SOP)

Version	1
SOP Number	
Lead Author	Sanaa Loothfaully Reviewed by Lesley Bodell
Authorised by	
Approved Date	xx/xx/20xx
Approved By	
Issue Date	xx/xx/20xx
Expiry Date	xx/xx/20xx
Target Audience	• All Pharmacy Staff



DMS Patient information leaflet

Contact Details

Pharmacy Department

Kingfisher Court HPFT
Kingsley Green
Harper Lane
Shenley
Radlett
WD7 9HQ

Tel: 01923 633 000

PALS contact info

Out-of-hours Service for HPFT Mental Health Service Users

Please call NHS 111 for health advice and support.

If you require this information in another format such as braille, large print or another language, please let us know

Adapted from West Hertfordshire Hospitals NHS Trust, March 2018
and Cambridge and Peterborough NHS Foundation Trust Community
Discharge Medicines Service Patient information leaflet

Hertfordshire Partnership University NHS Foundation Trust
works toward eliminating all forms of discrimination and
promoting equality of opportunity for all.

We are a smoke free Trust therefore smoking is not
permitted anywhere on our premises.

www.hpft.nhs.uk

Reviewed May 2022



Discharge Medicines Service (DMS) Patient Information Leaflet



DMS Patient information leaflet

What is this Service about?

We want to make sure that when you leave hospital your medicines are in good order. A free and routine NHS 'Discharge Medicine Service' is in place to have community pharmacists (chemists) give extra focus to those people just out of hospital – to make sure all the medicines adjustments are accounted for, and that you have what you need. We think this service would be of benefit to you.

With your permission we will notify your community pharmacy of your discharge and ask them to support you with your medicines. Your community pharmacy is there to provide you with advice and support after you leave hospital at a time convenient to you for free.

Sharing Medicines Information with your Community Pharmacist (local Chemist)

You have been issued with a supply of medicines to take home with you (also known as TTOs). This may be in addition to what you already have at home, or your medication may have changed. This will have been explained to you.

Information about your medicines is routinely sent to your GP practice so they can update your records.

The hospital pharmacy can also send information about your medicines to a community pharmacy (local chemist) of your choice.

This allows the community pharmacist to:

- be made aware of your hospital discharge
- update their records
- provide you with information about your medicines and other options of treatment that might be of interest to you.
- ensure there is the opportunity to discuss any medicines related issues including side effects, taking medicines safely and how to get the most out of your medicines

- find out how you are getting on with any new medicines and discuss any problems you are having.
- ensure subsequent prescriptions are appropriate
- contribute to the continuity of care when you leave hospital If you are in agreement that you would like your medicines information to be shared, the hospital pharmacist or pharmacy technician will ask you for the name of your preferred community pharmacy and your contact phone number. All Information will be sent electronically and securely.

This is a confidential conversation and will take place at a time convenient to you, in private place which could include video call or telephone.

Is this Service for me?

We think this service will benefit you. It is free and takes place at a time of your choosing with a professional that is perfectly placed to support you with medicines use.

We know that people value a chance to check their medicines with an expert and talk about their medicines. Once you are home your community pharmacy can answer your questions and make sure that everything is correct.

If you are interested, please contact the pharmacy team or a member of the team caring for you on the ward.

If you decide not to be involved, you can still get this additional support from your local pharmacy directly whenever you are ready.

Who can I speak to for more information about this service?

Each ward has access to pharmacy staff who will be happy to answer any questions you might have about the service. Please speak to a member of ward staff and ask them for a member of pharmacy staff to see you to discuss the service.



What kinds of actions will we be recommending

All DMS related -

- Medicines management housekeeping.
 - Supporting adherence.
 - Ensuring the discharge plan goes to plan.
 - Patient 'check-in'.
 - Being vigilant towards risk management issues.
-
- Aim for smooth transition of care, not for long-term follow up



Where we think issues may arise

- Changes to medicines made when patient goes into multiple care settings (e.g., acute trust, then HPFT unit)
- When patient moves out of area to new care providers, e.g. care home
- Discharge supplies given to patient, but previous medicines supplies already at home or ready in pharmacy. (opportunity to return discontinued meds to pharmacy for disposal)
- Stockpiling.
- Confusion over process for getting new medicines again on discharge.
- Patients going back to old medicines when not used in hospital.
- Giving up on treatment.
- Switching/discontinuation plans not taken to conclusion.
- Emerging adverse effects and impact on adherence.



HPFT Discharge Notification

DISCHARGE NOTIFICATION PILOT

Patient details

Name:

DOB: / /

NHS no:

Address:

.....

GP details

Practice name / identifier:

GP name:

Address:

.....

Telephone:

Discharge details

Ward / Team: Address:

Consultant: Ward / Team Tel:

Date of discharge: Discharge destination: Home Other

Address (if other):

Care co-ordinator name: Tel:

Follow up date: Team assigned to follow up:

(must be within 48 hours of discharge)



HPFT Discharge Notification

Admission details

Date of admission:

Reason for admission (*presenting complaint / method of admission / source of admission / legal status on admission*):

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.....
.....
.....

Diagnosis and physical health

Diagnosis: Diagnosis code:

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Clinical summary and follow up (*investigations / interventions / monitoring / management*)

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Pharmacy Notes (*review needs / nominated community pharmacy details / vaccination status*)

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HPFT Discharge Notification

DISCHARGE NOTIFICATION (Continued)

Patient details
Name: Ward / Team:

Allergies and hypersensitivities NKDA Yes (complete below)

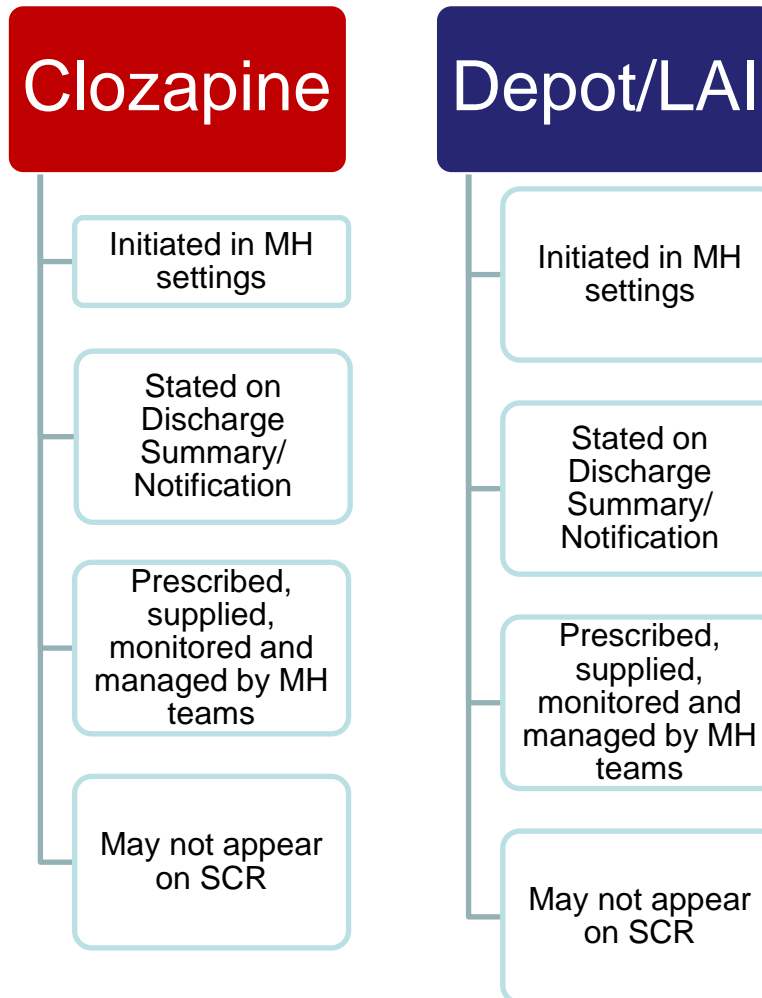
Causative agent	Nature of reaction

Medication on admission discontinued / withheld

Medicine name	Status (discontinued / withheld)	Reason



Clozapine and Depots



Useful Resources for MH

- Nice CKS
- [MIND](#)
- [National Institute of Mental Health \(NIMH\)](#)
- [CPPE – mental health courses](#)
- HPFT Choice and Medication



HPFT Pharmacy Contacts

- HPFT Pharmacy
- Tel: 01923 633 740
- Email: hpft.harperbury.pharmacy@nhs.net



Person in crisis – what to do?

Service Name	Contact number (and accessible hours)
NHS First Response Service	111 – option 2
Samaritans	116123 (operates 24/7)
Lifeline	08088082121 (operates 7pm-11pm)
SANEline	03003047000 (operates 4:30pm-10:30pm)

- Does the SU have any key contacts?
- In an emergency – call 999

