

Service evaluation on the information provided to patients about their medications at St. George's Healthcare NHS Trust

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Introduction and objectives

There is a lack of studies covering the aspect of providing information about medication to patients in hospital settings by pharmacy staff. This study aimed to investigate the information about medication provided by pharmacy staff and also potential barriers and facilitating factors in providing information about medication to patients in hospital settings.

Objectives: To assess to what extent pharmacists, pharmacy technicians and pre-registration pharmacists provide information to patients about their medicines.

Method

The study used a survey and an observation method to collect data. The setting was St. Georges Healthcare NHS Trust in London, UK.

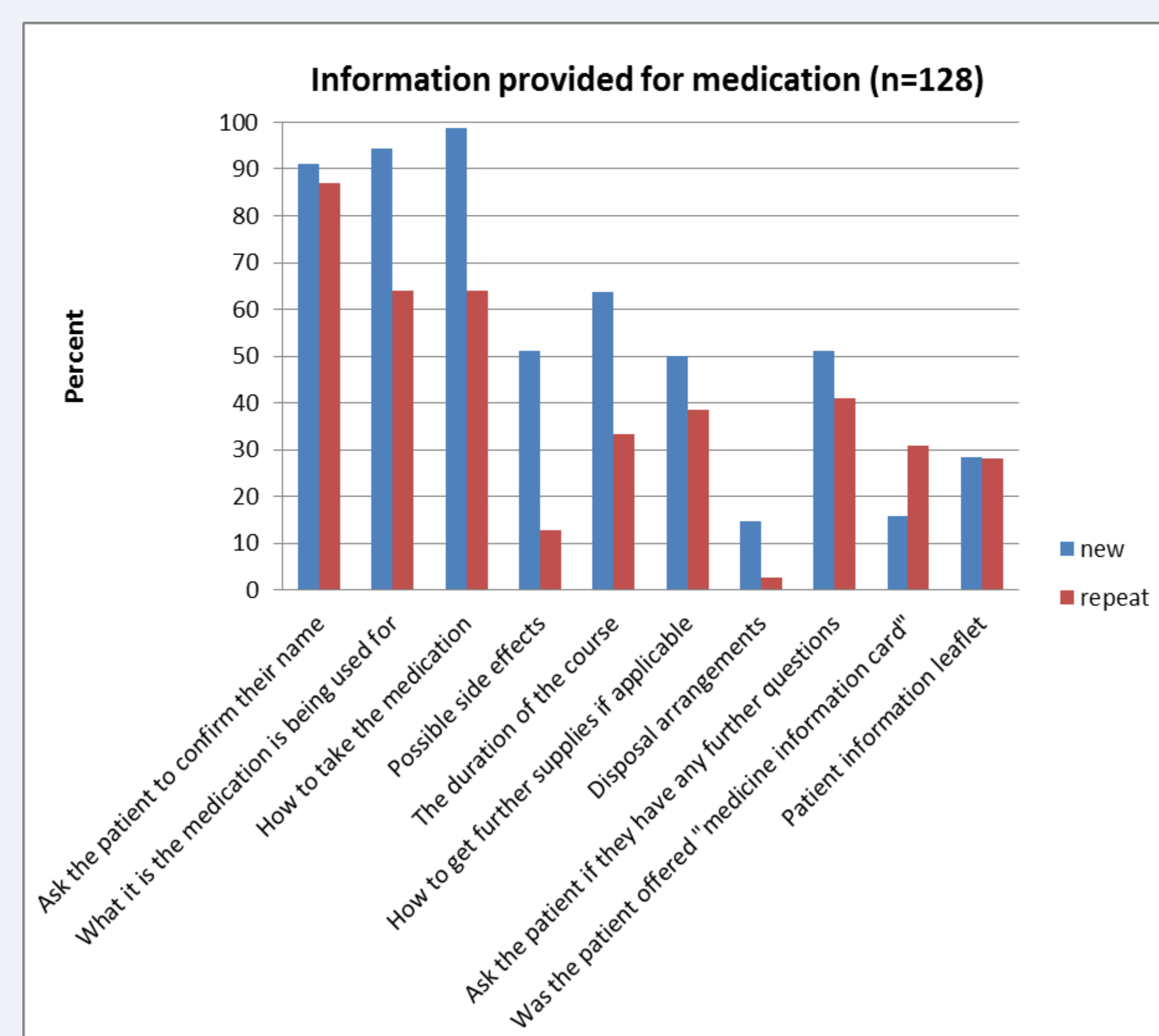
Results - observation

The observation of interaction between patients and pharmacy staff covered the process of providing information when handing out medications (n=128). The majority of pharmacy professionals observed were pharmacists (95%).

The results indicated that less information is provided :

- for repeat or regular medication compared to new medication; and

- during hours with a higher workload such as lunch hours. However regardless of workload the information about the purpose of the medication and how to take it was always provided to the patient.

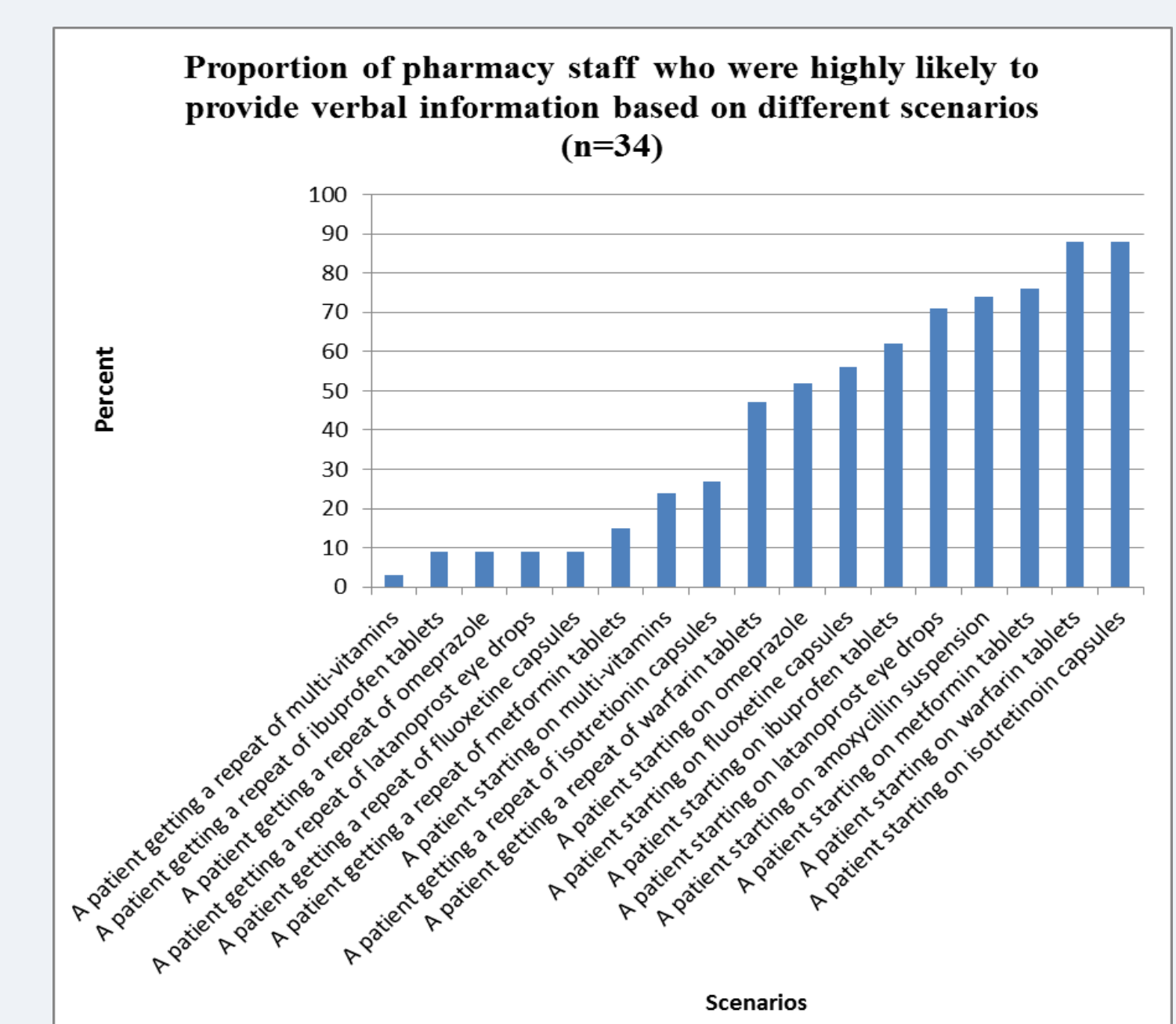
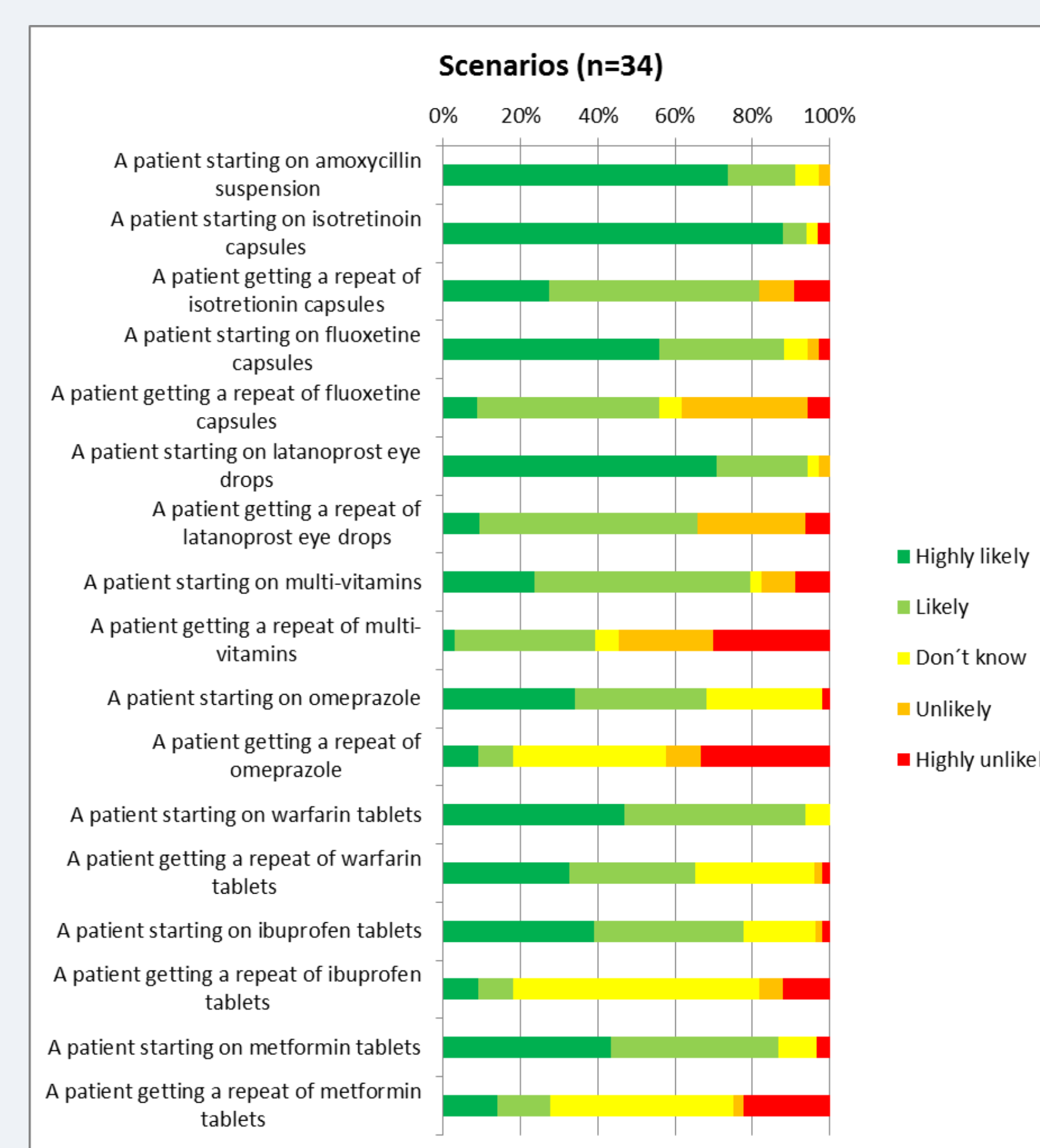


Results - survey

The response rate for the survey was 46% (43/94). The majority of the participants were pharmacists (72%).

The results show that firstly the pharmacy staff are more likely to provide information about new medication compared to repeat. Secondly they are more likely to focus on 'what the medication is for' and 'how to use it' for new medications. However, for repeat medication the pharmacy staff seemed to put less emphasis on providing the same elements of information and in general provide less information.

Scenarios for both new and regular or repeat medication were provided in the survey and the participants were asked to estimate the likelihood that they would provide information. For all scenarios the pharmacy staff reported that they were more likely to provide information for new compared to repeat medications. There is also a great variation between information provided in relation to different types medications, with more information being provided on medications which are known to cause more medication related problems such as warfarin, metformin and isotretinoin but less information being provided for medications such as multi-vitamins, omeprazole and ibuprofen.



Discussion

- The literature in the community settings has reported that more information was provided for new medication compared to regular or repeat medications (Puspitasari et al., 2009a). This study, both the observation and the survey, provide similar findings. There seems to be wide spread assumptions in the pharmacy profession that patients need less information when receiving repeat medication. This trend is debatable and perhaps we should provide even more information about repeat and regular medications since it is more likely that they will lead to medication related problems than medication taken for a short time.
- It raises concern that when the patient services department is experiencing higher workload there is less information provided to patients. If the information is important for the patients well being then the resources need to be shifted to match the level of workload.
- During busier hours the focus was mainly on informing the patient on how to use the medication. This information is always printed on the medication package. Perhaps the focus should be on issues such as side effects to watch out for and medication interactions (where applicable).
- There was also a great variation between the different types of medications with more information provided on medications known to cause medication related problems such as warfarin (Penning-van Beest et al., 2007), metformin (Tornio et al., 2012) and isotretinoin (Tripathi et al., 2013), compared with others presented in the scenarios such as multivitamins, omeprazole and ibuprofen. The reason could be that pharmacists believe that less precautions are needed in relation to these medications as the others. However, attention needs to be paid to these medications as well; ibuprofen is together with other NSAIDs one of the most common medications to cause medication related problems (Dhabali et al., 2012).

Conclusion

The study results confirmed and expanded on exciting research and even though the study has limitations, such as being a small and localised study, it surely has wider applicability as there is a lack studies covering the provision of information to patients about their medications by pharmacy staff in hospital settings.

Acknowledgement

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References

- Puspitasari, h. P., Aslani, p. & Krass, i. 2009. A review of counseling practices on prescription medicines in community pharmacies. *Res social adm pharm*. United states.
- Penning-van beest, f. J., Koerselman, j. & Herings, r. M. 2007. Quantity and quality of potential drug interactions with coumarin anticoagulants in the netherlands. *Pharm world sci*, 29, 671-5.
- Tornio, a., Niemi, m., Neuvonen, p. J. & Backman, j. T. 2012. Drug interactions with oral antidiabetic agents: pharmacokinetic mechanisms and clinical implications. *Trends pharmacol sci*, 33, 312-22.
- Tripathi, s. V., Gustafson, c. J., Huang, k. E. & Feldman, s. R. 2013. Side effects of common acne treatments. *Expert opin drug saf*, 12, 39-51.
- Dhabali, a. A., Awang, r., Hamdan, z. & Zyoud, s. H. 2012. Associations between prescribing nonsteroidal anti-inflammatory drugs and the potential prescription-related problems in a primary care setting. *Int J clin pharmacol ther*, 50, 851-61.



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