

IMPLEMENTATION OF THE FIRST MEDICINES INFORMATION SERVICE IN BELGIUM (GPI-CPS5776)

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WHAT WAS DONE?

We implemented the first Belgian Medicines Information Service (MIS) in our university hospital. In several countries, a MIS is common in most hospitals but was, until our project, not available in Belgian hospitals. The following goals were set out:

- To be a **central & dedicated helpdesk** for medication-related questions
- Promoting **safe and rational medication use**
- Providing **clinical pharmacy 'on-demand'**
- Provide a **template for future initiatives**

WHY WAS IT DONE?

Medication errors are a major threat to patient safety and are exacerbated by:

- **Increasing polypharmacy & complexity** of novel therapies
 - **Insufficient knowledge** among healthcare professionals
 - **Time constraints**
 - **Limited clinical pharmacists' presence** on Belgian hospital wards
- An efficient way to provide **fast, objective & individualized medication-related information** is therefore **greatly needed**.

HOW IT WAS DONE?

Search for best practices

- Literature
- Visitation MIS in *Imperial College Healthcare NHS Trust (London, UK)*

Define the needs in our hospital

- Survey amongst hospital personnel
- Customize activities

Implementation, promotion & registration

- 1 central phone number + e-mail
- 1 dedicated clinical pharmacist
- Posters, presentations, cards...
- Registration enquiries (MiDatabank®)

Evaluation & feedback

- Analyzing enquiries
- Time & cost analysis
- User satisfaction

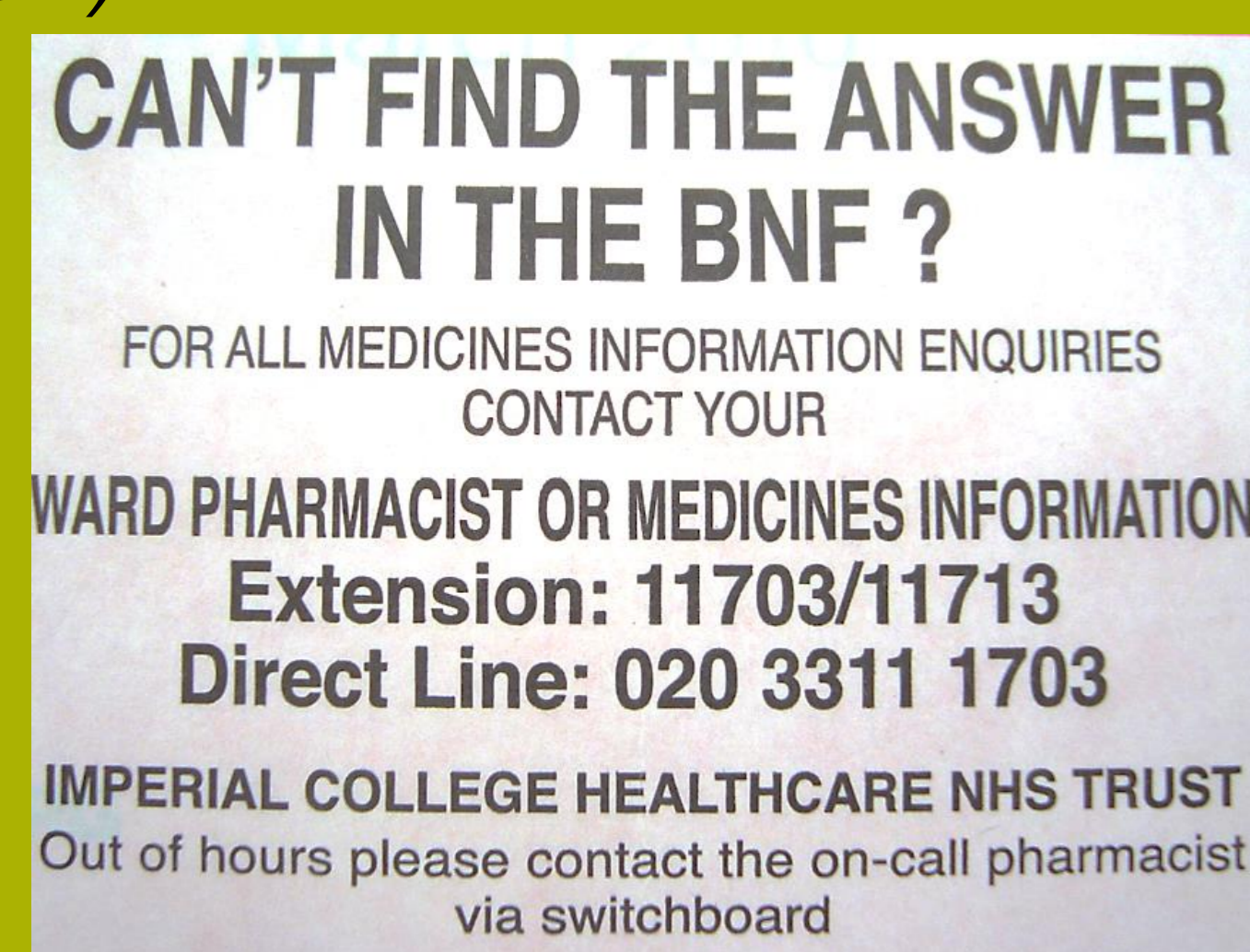


Figure 1. MIS promotion poster



WHAT HAS BEEN ACHIEVED?

Needs and wishes of the hospital personnel

Analyzing enquiries and user satisfaction

221 respondents: 113 physicians (15,3% response rate); 103 nursing (6,7% response rate)

247 enquiries between 09/01/2017 - 09/05/2017: 45,5% residents; 34,0% nursing and 13,8% clinical staff members

Figure 2. Requested MIS activities

Figure 4. Type of MIS enquiries

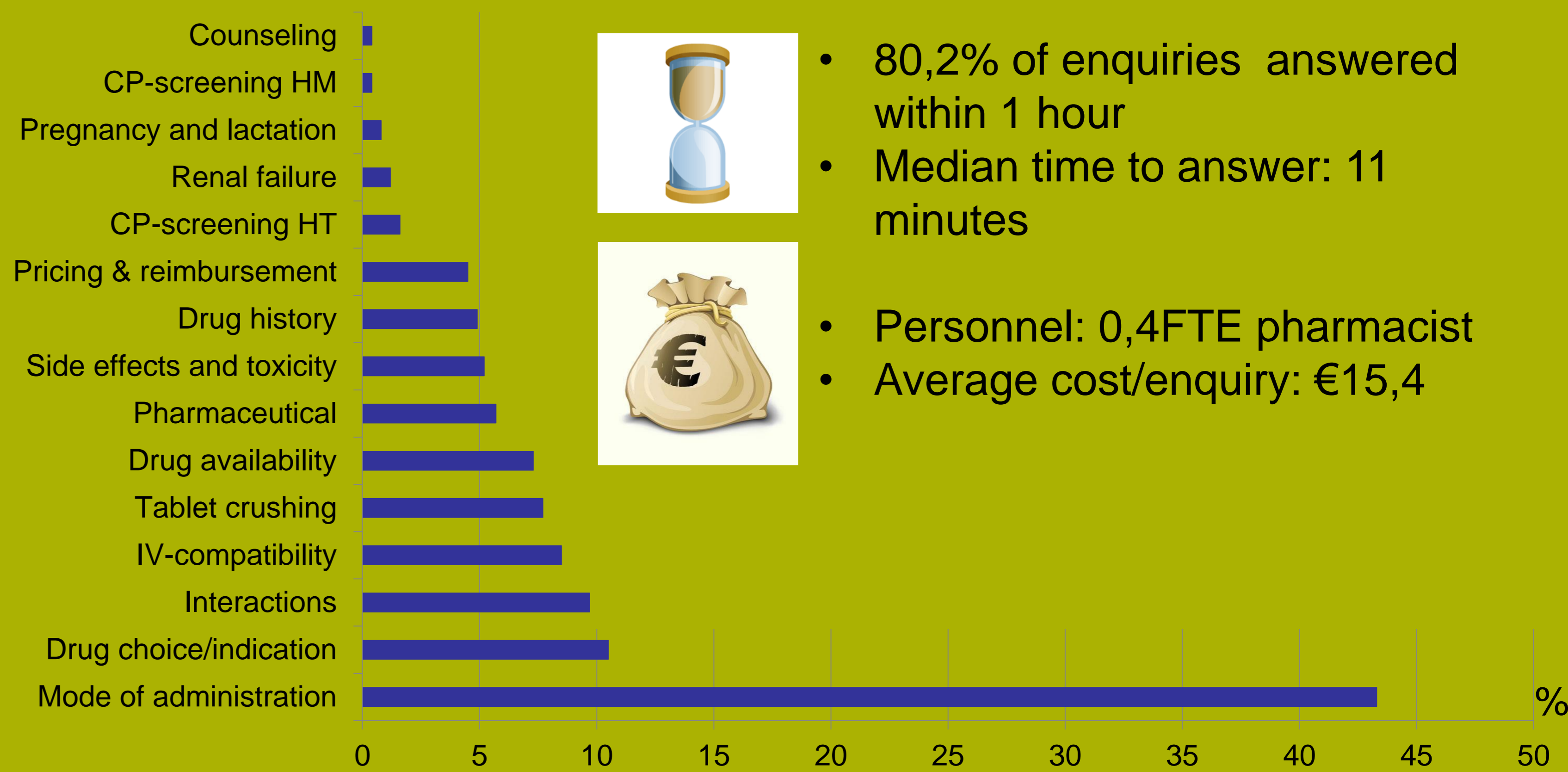
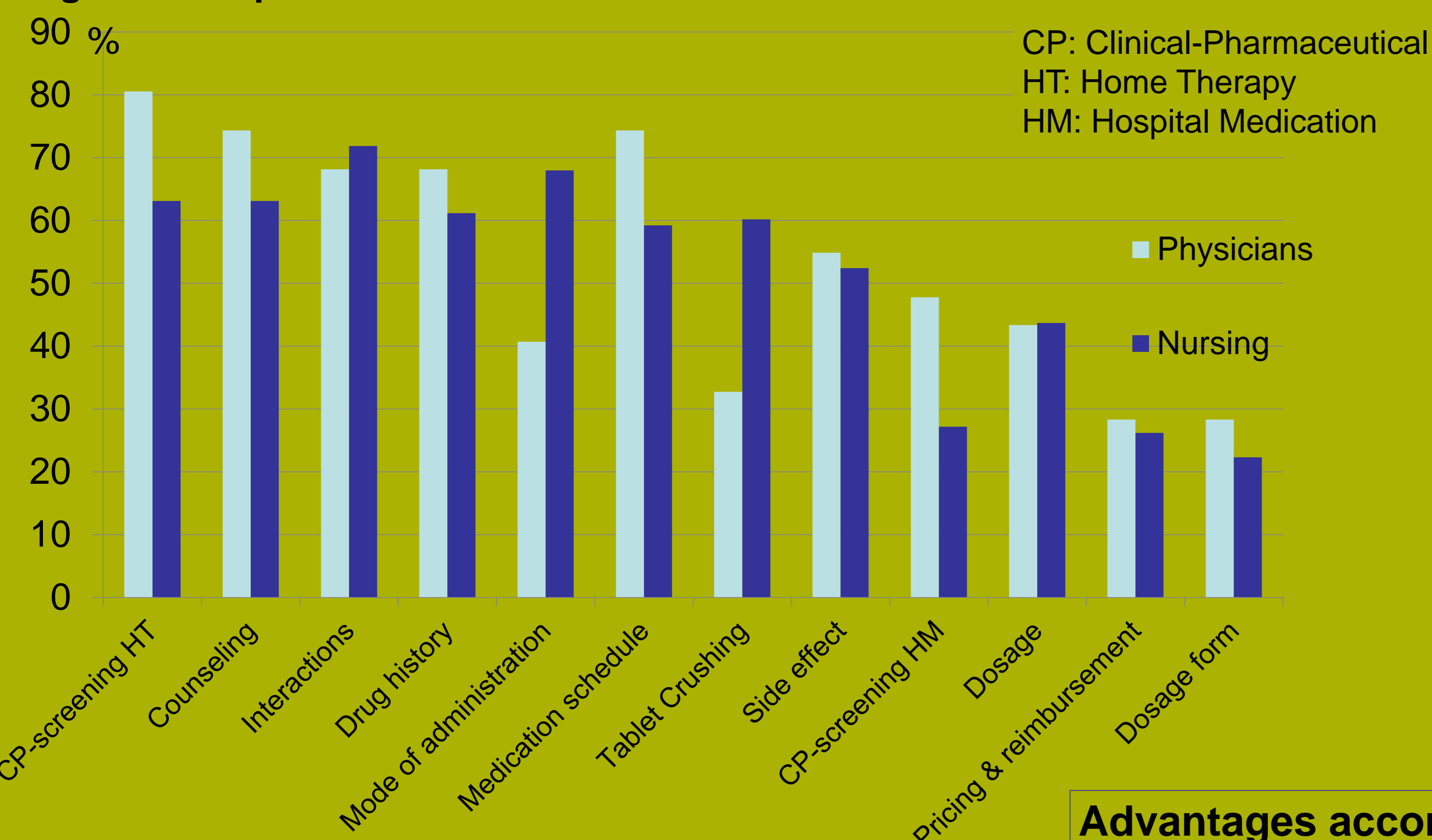
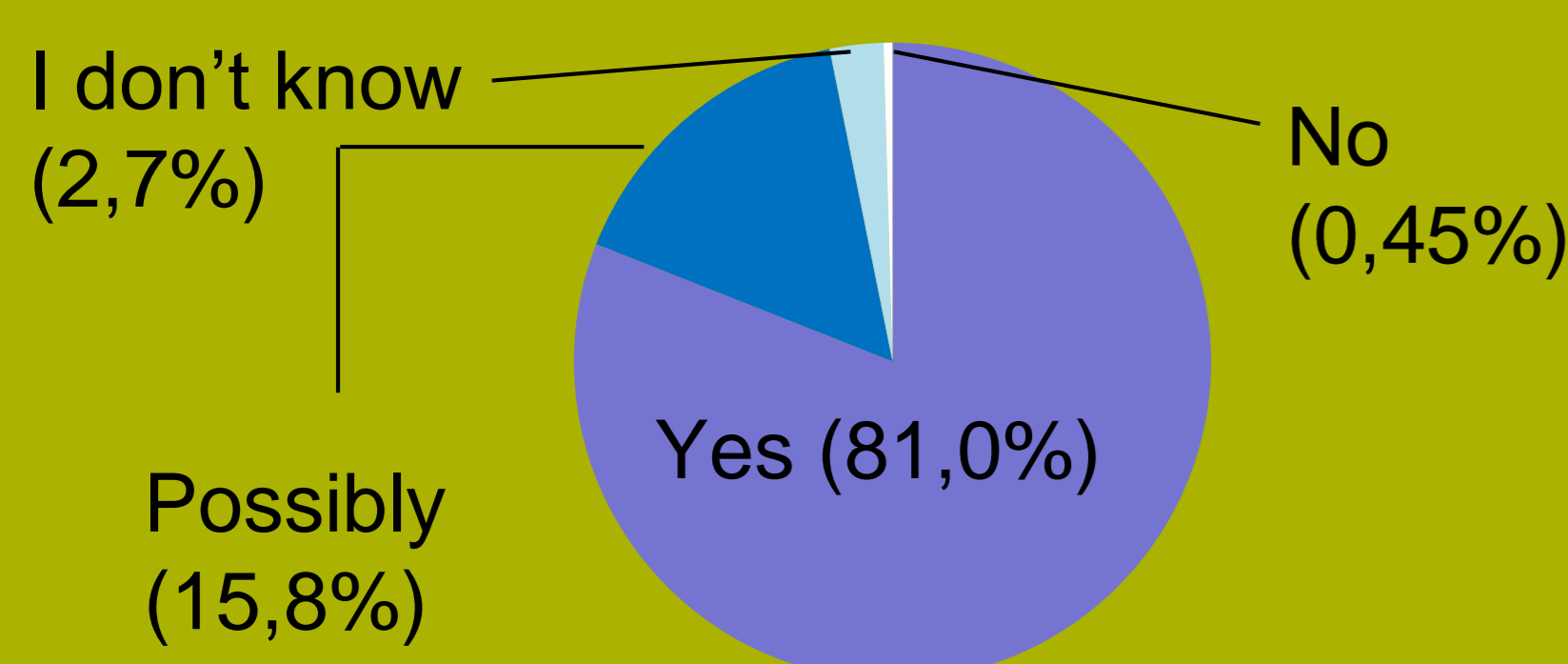


Figure 3. Intention to use MIS



Advantages according to MIS users (41 respondents)

- Improved knowledge (81%)
- Positive impact patient outcome (59%)
- Time savings (56%)

Suggestions for improvement

- Out-of-hours support
- Clinical pharmacist on every ward
- Perception improvement

Table 1. Difficulty level of enquiries

Information sources needed	% of enquiries
1 information source	68,3%
2 – 3 sources	26,3%
4 or more	4,9%

WHAT'S NEXT?

- There is a **clear need** amongst healthcare personnel for fast & reliable medication-related information in our hospital.
- We managed to implement a MIS with **high user satisfaction and positive impact** on knowledge, time consumption and patient outcome, at a **reasonable cost**, whilst at the same time **promoting other clinical pharmacy services**.
- **For the future**, we have to:
 1. Make additional efforts to **improve access to & familiarity with this service**, and explain potential benefits.
 2. Integrate our MIS as a **standard pharmacy activity**.
 3. Explore how to **share this service with other hospitals** in order to optimally use resources, share information and increase expertise.
 4. Explore how to **share with primary care and patients**.
 5. Demonstrate the **impact on clinical & economic outcomes**.

ACKNOWLEDGEMENTS

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