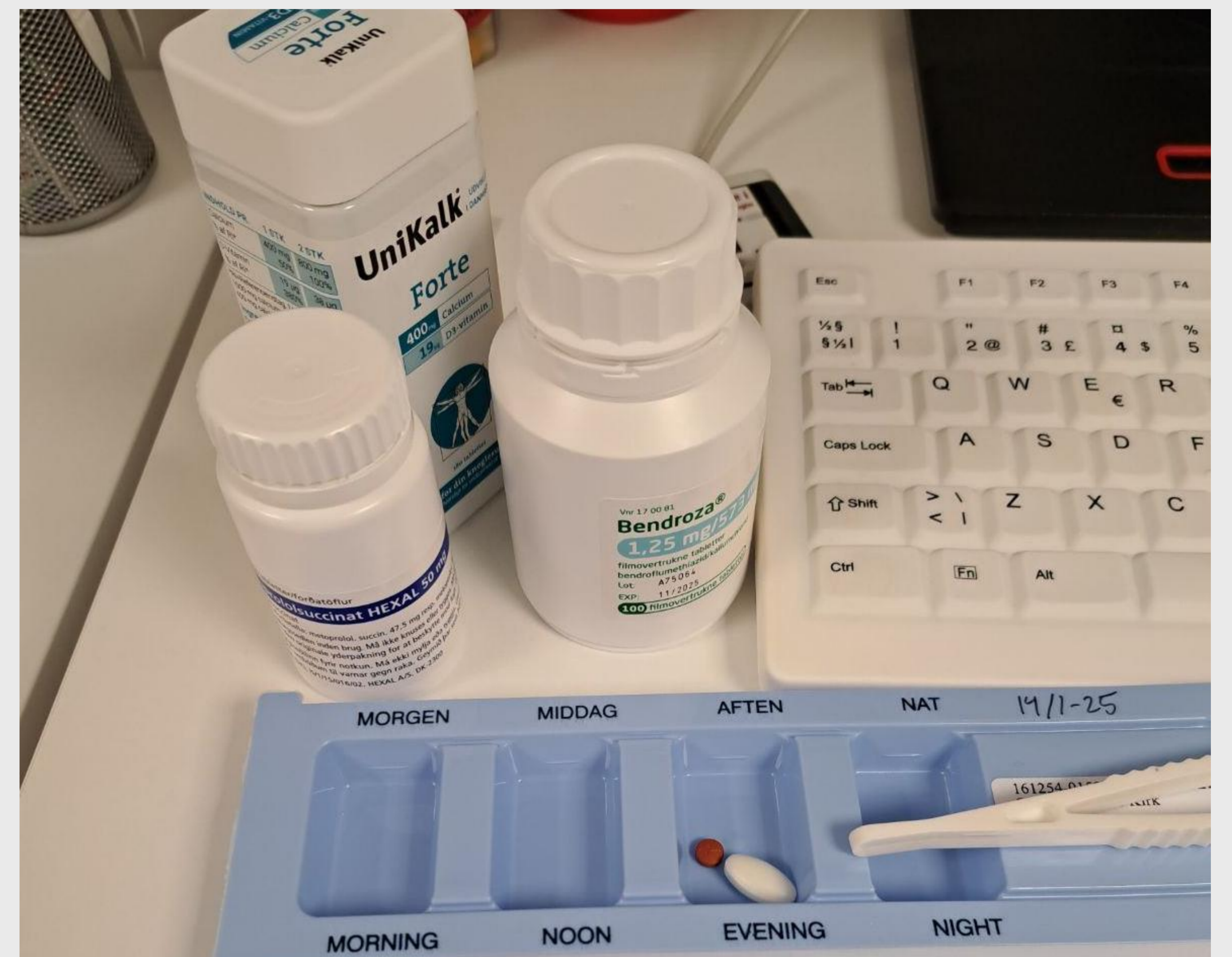
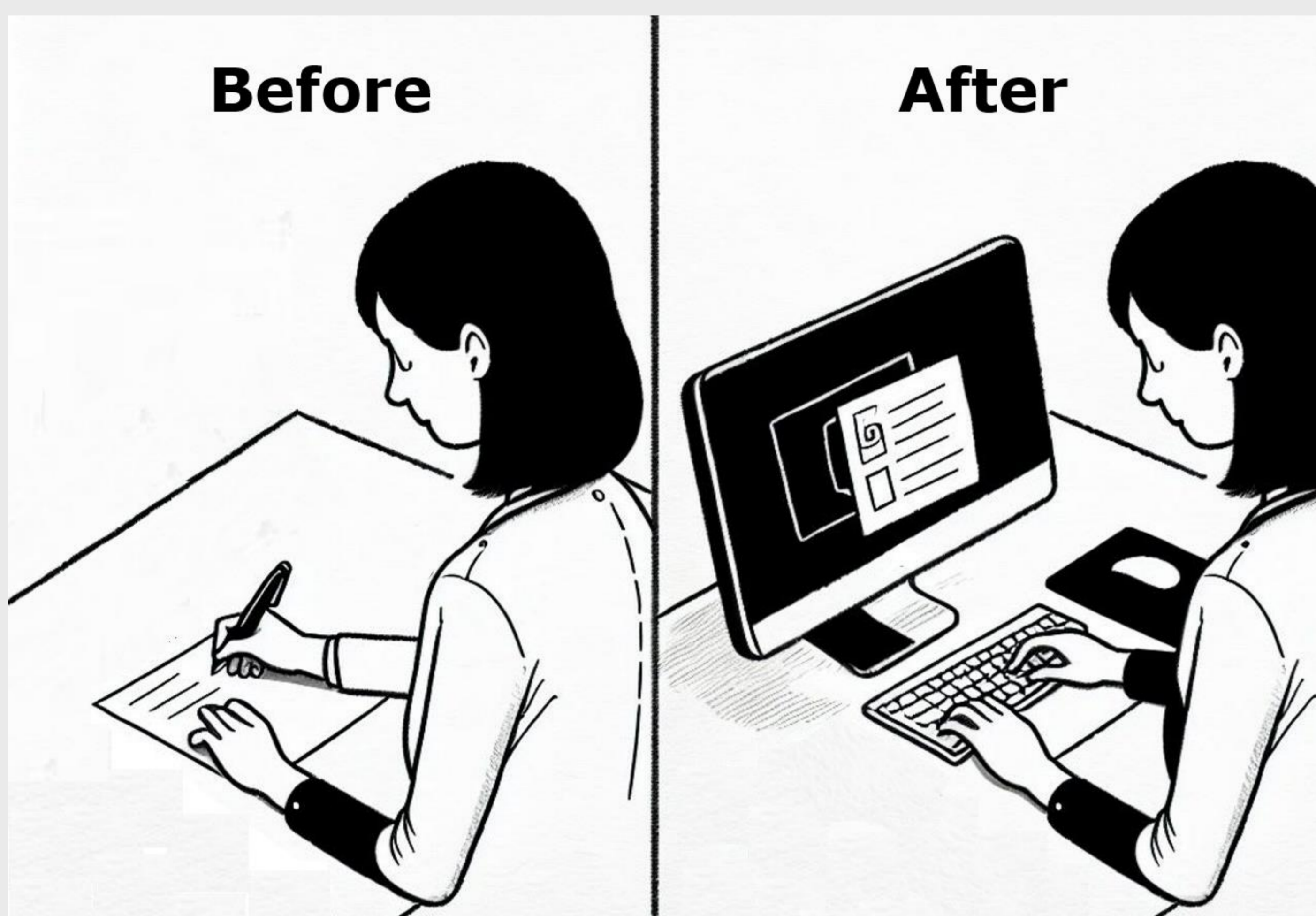


# The use of a digital discharge report providing information on dispensed medication to improve the interface between secondary and primary care

## What was done?

Communication with the local home care team regarding deviations from the medication list was enhanced through the use of an existing digital discharge report.



## Why was it done?

### Discharge from hospital

- Hospital dispenses medication for 1,5 days for at home use
- Hospital may not have all strengths available
- Dose can be composed of multiple or fewer tablets compared to the medication list at the home care team

### Medication administration by the home care team

- Before administration, assistants verify that the number of tablets matches the medication list
- If the number of tablets deviates from the medication list, the assistant must call on a nurse
- Consequence:
  - Time consuming for the home care team
  - Patient may receive their medicine at a later time
  - Patient may worry if they overhear the conversation between the assistant and the nurse

## How was it done?

After implementation of an existing digital discharge report in two hospital wards.

### Discharge from hospital

- Nurses and pharmacy technicians report any changes in the number of tablets in the digital discharge report

### Medication administration at home care team

- A nurse from the home care team adjusts the quantity of tablets in the home care teams digital system for the time period dispensed by the hospital

## What was achieved?

The home care team has indicated that each time deviations are noted in the digital discharge report, they will save a significant amount of time.

## What is next?

If a digital discharge report is available and the hospital wards and clinical pharmacy department can reach an agreement on its usage and timing, there is no reason not to utilize it, especially if it can enhance patient safety during transitions in care.

