Dear All

Now that the DMS Toolkit has been published I wanted to write to set out our plans for support with regard to this service introduction and how the team at Pinnacle plan to implement its introduction.

As you will be aware various transfer of care services have existed for some time in a variety of formats across the country. They have been given different names depending on which part of the country you are in i.e., TCAM, eTCP, EMOP or connect with pharmacy.

On the 15th February these services will effectively change to reflect the requirements of the Discharge Medicines Service. This service will be an essential service detailed in the community pharmacy contractual framework and pharmacies will be able to submit claims for their activity.

As explained on the PSNC website at [https://psnc.org.uk/services-commissioning/essential-services/discharge-medicines-service/](https://psnc.org.uk/services-commissioning/essential-services/discharge-medicines-service/), there are a variety of mechanisms to support hospitals transferring discharge information from secondary care to community pharmacies at the point of patient discharge. One option is the use of PharmOutcomes and this email informs of changes we are planning to make to support the introduction of the DMS.

PharmOutcomes currently supports more than 100 hospitals across England with the current Transfer of Care services. Hospital sites pay an annual licence fee that supports secure transfer of information to pharmacies across a defined footprint set by Academic Health Science Network boundaries. There are several referral types that are supported via several mechanisms:

1. **Fully integrated discharge referral solution** – Hospitals send a message (HL7v2 or v3) from their own clinical system to the patients preferred pharmacy for follow up support to be recorded within PharmOutcomes. The pharmacy is alerted of the referral via a variety of mechanisms (email, visual) and can complete a structured follow up template to record support provided

2. **Fully integrated admission notification** – Again a message is sent from the hospital clinical system to alert a community pharmacy that a patient using their services has been admitted

3. **Fully integrated “For information only” notification** – Message sent from hospital clinical system to inform community pharmacy of issues that may not be connected specifically to support following discharge e.g., Patient requiring support non medicine related issue but no other info to communicate

4. **Fully integrated referral to care home teams** – A new feature that will be available towards the end of Q1. This supports referral of patients being discharged to care homes to a relevant care home team. **Again, the message is sent from the hospital IT system in use** using HL7

5. **PDS enabled web referral for admission and discharge** – For hospital sites that do not have the ability to send HL7 or other compatible messages from their IT systems, access to the web interface can be granted to support the sending of admission and discharge referrals

6. **PDS enabled web referral to care home teams** – enables referral from Trust to care home team for relevant patients using the web-based solution

**Service functionality**

The team at Pinnacle Health have been working through the Discharge Medicines Toolkit flowing its publication on Friday 15th January and we have developed a template that covers the requirements of this service. The template has been built using new features that supports:
1. A direct link to the DoC developed by the CPPE team to support practitioner declaration of competence.

2. A staged service follow up supporting record keeping for each stage of the DMS in one template. This uses new partial completion functionality to record:
   i. Prescription receipt and actions carried out at that stage,
   ii. First prescription receipt and reconciliation
   iii. Built in GP referral when required
   iv. Patient interview and record of support/actions that result from this interview
   v. Built in onward referral function that allows any partial records to be saved as pdf for onward transmission to another community pharmacy when a patient moves or asks for their referral information to be passed on
   vi. As soon as the API information is available from the NHSBSA the service will also manage pharmacy claims to MYS

Pharmacies can complete each stage as required. The service template supports completion of one, two or all stages depending on patient attendance or movement. Pharmacists or team members will be able to record the intervention as complete or partially complete at any stage. Partially completed interventions remain at the top of the PharmOutcomes services page for easy retrieval when the first prescription intervention or patient support intervention needs to be completed.

**Plans for service migration**

From the 15th February the Pinnacle team will be taking the following actions:

1. For each hospital site that currently has a licence to support TCAM initiatives, the hospital service will be moved from the current AHSN area to a national area. This move will support hospital referrals to any pharmacy in England.
2. For all discharge referral services, the pharmacy follow-up stage attached to the referral will be changed to the new Discharge Medicines Service template supporting the recording requirements of the new service
3. “Admission” and “For information only” referrals will also be moved to the national area supporting national referrals
4. When the NHSBSA API becomes available the pharmacy DMS follow-up completion will support claims against activity recorded. Pinnacle will update when this feature is available

The above will only apply to hospital services if the hospital site holds a referral service licence with Pinnacle Health.

More information on the service itself and service guides will follow over the next few weeks. We will also be contacting sites to explain about the service migration and how this will happen to ensure continuity of service

Regards

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