

Promoting patient safety: an audit of Dartford Gravesend and Swanley Home Treatment Team's (DGS HTT) communication with primary care

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Introduction and Aim

- In 2021, a closure summary with incorrect information about a patient's medication was sent by a non-prescriber within our HTT to the GP, who subsequently prescribed incorrect medications
- The Operational Policy was not clear on who should communicate changes with primary care
- Recommendations following the incident included: *only doctors/prescribers should correspond directly with GPs about medication changes made by the HTT*
- This audit aimed to ensure Dartford Gravesend and Swanley Home Treatment Team (DGS HTT) communicated medication changes safely with primary care**

Audit Methodology

- Patients' data on medication changes under DGS HTT were collected retrospectively on Rio digital records (in "progress notes" and "clinical documentation"), tabulated and analysed on Excel
- Performance benchmarking was used in 2 audit cycles (December 2022 and December 2023); red-amber-green (RAG) rating scale (green 90-100% compliance, amber 50-89%, red 0-49%) to investigate compliance in the standards found in **Table 1**

Results and Actions Following First Cycle

- Compliance rates (sent to GP, within 24 hours) were 93% and 90%
- Recommendations made:
 - Doctors/prescribers to communicate medication changes digitally to GPs with a new standardised template (see **Image 1**). This refers to medication that is stopped/started/or has doses changed under HTT
 - Other advice to GP to be communicated via freestyle text in digital GP Letter
 - To update Operational Policy to ensure practice across Trust is standardised

First audit action plans started 30/3/23, completed 23/6/23

Image 1

Standardised template example

[GP details] [HTT details]
[Patient details]

During the course of this patient's treatment with us the following medication changes have been made which will require prescription:

Medication	Dose	Route	Indication	Frequency	Duration

The following medications were stopped:

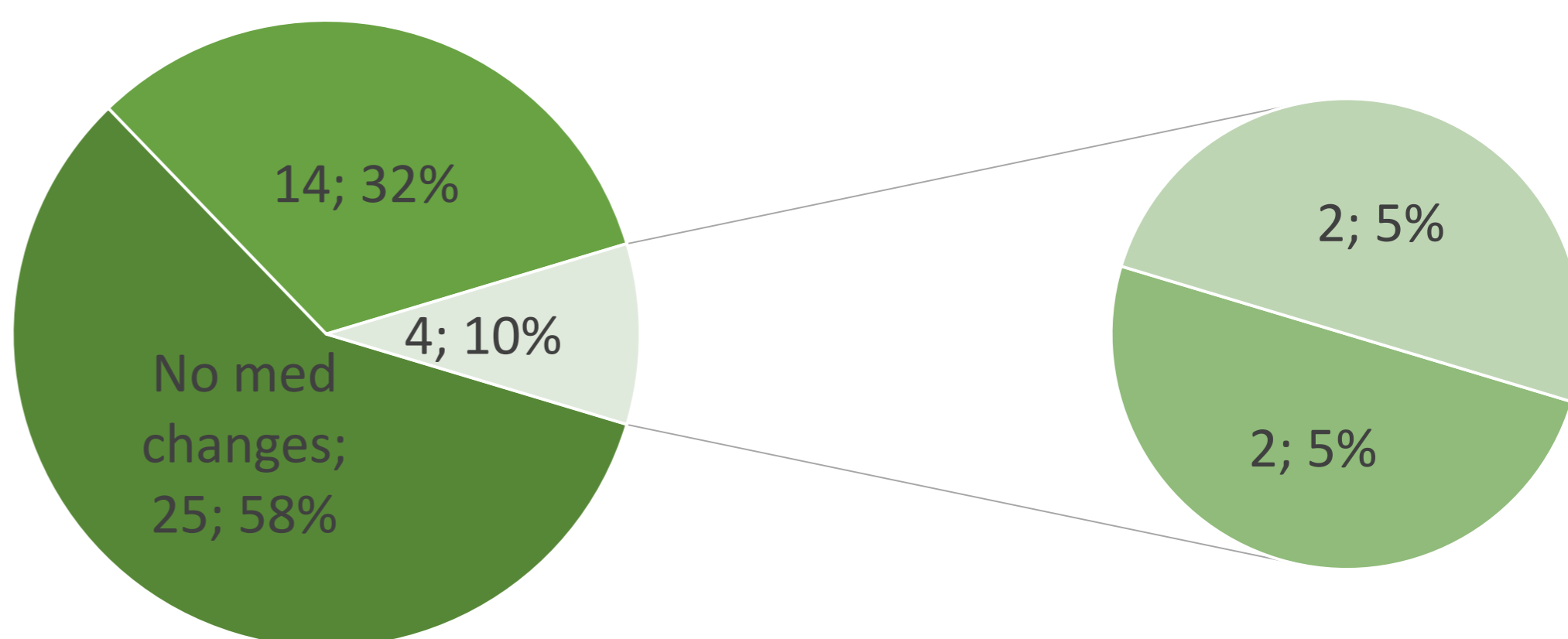
Medication	Dose	Route	Indication	Frequency

[Freestyle text]
[Signature]

Results of Second Cycle

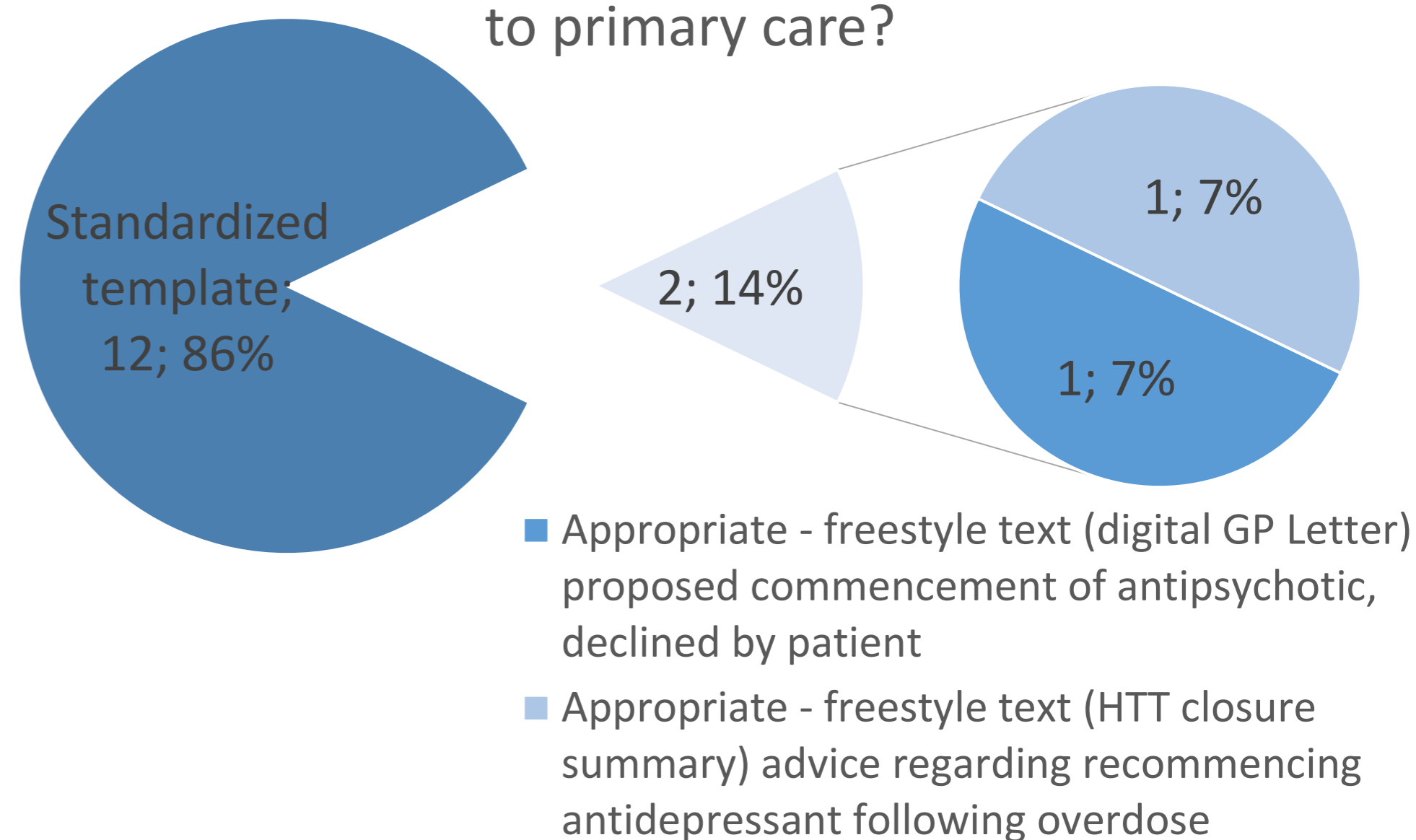
By the 2nd cycle (Dec 2023), full compliance was met in all standards

How many patients have medication changes communicated by HTT with primary care?



- Med changes, need communication, GP informed ✓
- Med changes, no need communication as short course of PRN ✗
- Med changes, no need communication as admitted into hospital ✗

How were medication changes communicated to primary care?



- Appropriate - freestyle text (digital GP Letter proposed commencement of antipsychotic, declined by patient)
- Appropriate - freestyle text (HTT closure summary) advice regarding recommending antidepressant following overdose

Table 1

Compliance in 3 Standards	1 st audit (Dec 2022)	2 nd audit (Dec 2023)	Change
Rates of GP notifications being:			
Sent in required cases	93% (n=15)	100% (n=14)	+7%
Within 24 hours of discharge	90% (n=10)	100% (n=14)	+10%
With standardised template	NA (as after 1 st audit cycle)	100% (n=12)	NA

Action Plan Following Completed Audit

- Audit results will be shared through the HTT Community of Practice to disseminate good practice
- HTT Operational Policy is being finalised and will include new recommendations
- Communication of medication changes with primary care will be audited across Trust HTTs

Conclusion

- Results of audit showed that excellence in communication standards could be met and sustained, particularly upon diligent implementation of actions after the first cycle
- Future audits could check the quality of 'closure summaries' in adequately and accurately communicating patients' clinical courses and management plans to GPs against communication tools like "SBAR"
- Proactive plans to improve secondary and primary care communication will enhance continuity of care and minimise harms to patients