

### **Pharmacy and Medicines Service**

## NHS Fife

## Hospital at Home (H@H)

### **A Guide for Community Pharmacies**

# What is Hospital at Home (H@H)?

The role of the H@H team is to treat patients at home, providing the same level of care that would be expected should they be admitted to hospital.

The H@H service can take 2 types of patient referrals:

 'step-up' referrals from a patient's GP e.g. perhaps for a patient with worsening heart failure who does not require full hospital admission but who needs i.v. diuretics and close monitoring

or

'step-down' referrals from an acute hospital
e.g. perhaps for a patient with an infection who
is well enough to be discharged but who needs
their course of i.v. antibiotics completed.

H@H aims to prevent acute hospital admission or facilitate earlier discharge where acute hospital admission has taken place. The service is an adult service and is predominantly aimed at the frail elderly population in Fife. Common reasons for admission include delirium, dehydration, infections, reduced mobility or falls or worsening chronic disease symptoms.

# Where Does the H@H Service Operate From?

There are 3 H@H hubs which provide cover for the whole of Fife:

- Queen Margaret Hospital, Dunfermline, which covers Dunfermline/West Fife (Tel 01383 674082)
- Whyteman's Brae Hospital, Kirkcaldy, which covers Kirkcaldy/Leven (Tel 01592 729492)
- Adamson Hospital, Cupar, which covers Glenrothes/East Fife (Tel 01334-651329)



### **Opening Hours**

Patients can be admitted to the service between 9am - 5pm, Monday to Friday. There is on-site nurse cover in each of the 3 bases from 8am - 10pm, 7 days a week, with on-site medical cover from 9am - 5pm, Monday to Friday. Between 10pm and 8am cover is provided by GP out of hours (USCF, Unscheduled Care Service, Fife).

# What Staff are Involved in the Delivery of H@H?

H@H has a full complement of staff looking after the various aspects of the patient's care as they would if they were in hospital (medical staff to consultant level, nursing staff to advanced nurse practitioner level and sessional pharmacist and pharmacy technician input at each site).

The team have rapid access to equipment, investigations, treatment and therapies. Patients are discussed daily at virtual ward rounds in each of the hubs and then the care implemented by the appropriate staff member(s) visiting the patient's home.

As pharmacy input is sessional, it is best to contact the pharmacy staff via the main hub telephone numbers and to leave a message if they are not available.



# How are Medicines Managed During a Patient's Stay with H@H?

As patients are being managed in their own homes, the patient's own medication is used throughout the duration of their stay. Whilst the patient is under the care of H@H, the H@H team take over the ongoing supply of that patient's medication (the GP practice suspends supply until H@H discharge to avoid duplication of supply).

When a patient is admitted to H@H, this should be recorded by community pharmacies e.g. flag on PMR or recorded on a white board.

If a new supply of medication is required for a patient during their H@H stay then a blue hospital prescription will be generated, dispensed via a community pharmacy and delivered to the patient's home (either by H@H staff, the patient's relatives, or where possible the supplying pharmacy's delivery service). Any requests to change a multi-compartment compliance aid (MCA) will be accompanied with a prescription AND a written 'change form' (listing which drug has changed and the clinical rationale for this).

Medication changes can sometimes be required quickly, and on a frequent basis, due to the unstable nature of the patients under the care of the service. Requests for any changes will always be made either by telephone or in person. If appropriate (and mutually agreed) scanned prescriptions can also be sent via community pharmacy NHS generic e-mail addresses to expedite supply. NB. Generic email address inboxes should be checked regularly throughout each day.

#### **Standard Duration of Supply**

It is routine practice for 2 weeks supply to be issued for non-nomad/multi-compartment compliance aid (MCA) items. Prescriptions for MCAs will be issued for up to 4 weeks supply.

#### MCAs/Nomads

Prescriptions for MCAs will always be taken to the patient's regular supplying pharmacy.

#### **NOTE**

The geographical area covered by the H@H teams means that the dispensing pharmacy for non-nomad/MCA prescriptions may NOT always be the pharmacy that the patient routinely uses whilst a patient is treated under the H@H service.

# **Communication Between Community Pharmacies and H@H**

Community pharmacies are encouraged to call the listed hub numbers should they require clarification on any medication issues for patients under the care of H@H.

Information regarding medication changes can also be found within the H@H continuation notes which are accessible via clinical portal.

### **Useful Contacts**

Lisa Dudley, Clinical Pharmacy Technician

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Rona Martin, Senior Pharmacy Technician

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Linda Bell, Pharmacist

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