Abstract

Scottish Patient Safety Programme in Primary Care: Patient Experience with the Medicines Reconciliation Care Bundle

Introduction: As most medication errors occur during the transfer between care settings, it is of great interest to improve the medicine reconciliation process after discharge from hospital. Discrepancy rates between patients' medication before and after admission range between 30-70 %. As part of the considerable work undertaken in primary care to address patient safety, a national medicines reconciliation care bundle has been developed for GP practices to reduce discrepancy rates. This project aimed to ascertain patient views on this care bundle service.

Methods: Telephone interviews were conducted over the phone and data was collected from 30 patients from four practices within Greater Glasgow and Clyde using validated questions from Healthcare Improvement Scotland. The questionnaires containing questions whether the patient received enough information about their medication from hospital staff when they were discharged or whether the patient got enough information from the hospital to manage their medicine at home. Results were analysed using Excel and the statistical software package SPSS.

Results: From 24 patients asked whether the GP spent enough time explaining about their medication and changes, 70.8 % answered "yes". All the 'yes' patients felt that the information was useful. Also, 33.3 % of the patients who stated that the GP had not spent enough time explaining about their medication and changes would have found it useful to receive more information from their GP. Lastly, 18 (60.0 %) of patients felt that they got enough information about their medicines before discharge and 30.0 % considered they did not get enough information.

Conclusions: It can be seen that the GP intervention with the medicines reconciliation care bundle had a positive effect on the patients and showed greater patient satisfaction than the hospital intervention. However, the care bundle project demonstrated that the health delivery service in both primary care and secondary care has some deficiencies.