

Discharge Medicines Service

Reference Number: F4792
Date of Response: 31/08/2022

Further to your Freedom of Information Act request, please find the Trust's response, in **blue bold text** below:

Royal Devon's Eastern FOI Office Response

I am requesting the following information on the NHS discharge medicine service (DMS), which became a nationally commissioned service on 15 February 2021.

1) When did your trust begin referring patients through the NHS DMS?
The Trust has been using the PharmOutcome system to refer discharges to community pharmacies since 23/5/2019. However the referrals specifically categorised as hospital discharge referrals have been used since 22/2/2021.

2) How many patients has your trust referred to community pharmacies through the DMS between 15 February 2021 and 14 July 2022? **1495**
a. How many patients has your trust discharged in total within this timeframe?. **There was a total of 340,870 patients discharged between 15 February 2021 and 14 July 2022**

3) According to [national guidance for operating the DMS](#), trusts are responsible for developing their own eligibility criteria for patients referred through the service that meet "local population needs" (see page 13).

Please could you supply a copy of your trust's eligibility criteria for referring patients through the DMS?

High risk patients

- **Taking more than 5 medications**
- **Starting new medicines**
- **Medication changes**
- **MI or stroke due to likelihood of new meds**
- **Confused about meds and needing support during admission**
- **Have help at home to take meds**
- **Have learning difficulties**

high risk medicines

Including but not limited to:

**Anticoagulants, antiepileptics, antipsychotics, cardiovascular drugs
(e.g. beta-blockers, diuretics), digoxin, lithium, opioids, MTX, NSAIDS,
insulin etc**

Newly started respiratory drugs including inhalers

Medication requiring follow-up e.g. blood monitoring, dose titration

Medicines that have the potential to cause dependence (e.g. opioids)

Medicines requiring dose changes over time (e.g. steroids)

Plus any deemed important by clinical pharmacists