

# Streamlining the handover

*JAC's medicines management solution allows the effective exchange of information between acute and community healthcare providers.*



**Following an inpatient episode of care, a lack of clinical information and inconsistent provision of the information to GPs can introduce clinical risk and lead to a discontinuity in patient care.**

A national survey into the information provided to GPs by hospitals when patients are discharged (*A Very Present Danger, March 2007, NHS Alliance*) clearly highlighted the potential risk to patients and the need for immediate action. Among its findings were:

- GPs frequently received illegible handwritten discharge summaries and information about medication was often missing or incomplete.
- Nearly six out of ten GPs said that clinical care had been compromised as a result of delays while nearly four out of ten said that patient safety had been compromised.

- Seven out of ten practices experience severely delayed discharge summaries either very often or fairly often, with delays of six weeks not uncommon.

Today, JAC offers acute Trusts with a proven solution for ensuring fast, and reliable communication between acute and community care systems using electronic interfacing with GP systems.

The Department of Health's Operating Framework for 2008/2009 includes new obligations on acute trusts to deliver discharge summaries more promptly from April 1 2008. Summaries are to be delivered within 72 hours by March 2009, within 48 hours by March 2010 and within 24 hours after April 1st 2010.

## To find out more

**Nigel Toms**  
National Sales Manager  
07885 828596  
nigel.toms@jac-pharmacy.co.uk

## Patient discharge with JAC

**The JAC solution produces a comprehensive discharge summary for a patient's GP via the Discharge Prescribing module – a solution that already meets the April 1st 2010 targets.**

In addition to the medicines prescribed on discharge, the letter contains detailed information about what medicines the patient was admitted on, which medicines on admission were modified or stopped and the reasons for change.

The discharge summary is populated with patient demographic information drawn directly from patient record. Additional information can be included about known allergies and under twelve other configurable clinical notes headings.

All the information can be printed out as a clear and legible letter and output electronically via the outbound GP Interface.