

Implementing a Medicines Helpline for Hospital Patients: A Practical Guide for Hospital Pharmacy

The information below is a guide to some of the many things you need to consider when establishing a medicine helpline for patients and their carers. These are recommendations or suggestions – you may decide that you wish to implement only some of them – but the advice here is based on the experience of those who run successful helplines.

This guide should be read in conjunction with the national [Patient Helpline Standards](#) and example SOPs produced jointly by Thames Valley & Wessex, UKMi, and the Royal Pharmaceutical Society.

Introducing a Helpline

Most Pharmacy departments are concerned that the potential workload generated by a patient helpline may be too much to bear. However, the extent to which the helpline is used is heavily determined by the methods used to promote it (see Promoting the Helpline below). It is also possible to introduce a helpline in a stepwise fashion to reduce any sudden impact. For example:

1. Start with clinical areas with a fast patient turn-around (e.g. medical assessment wards, A&E). Patients may receive limited Pharmacy contact here and a helpline may show a Pharmacy contribution to urgent care targets.
2. Extend to other inpatient wards.
3. Extend to outpatients.

This stepwise introduction, accompanied by a gradual escalation in promotional methods, may help to reassure Pharmacy staff that they will not be overwhelmed with calls.

External to Pharmacy, it has proved valuable to involve matrons, medical directors, Trust publicity departments, and directorate-level managers in the early stages of roll-out to increase awareness. It is also helpful to be clear about the potential benefits that a helpline offers (see Appendix 1).

Ownership and Management

It is very important that Pharmacy as a whole recognises the importance of the helpline to patient care and contributes to its success. The service is a direct method of ensuring patients' medicines are optimised in response to their own concerns, and so it should be viewed as having an equivalent importance to providing a clinical pharmacy service to a major ward.

The helpline should be a Pharmacy-wide service, linked to relevant host-Trust strategies, not one that emanates solely from one section of Pharmacy. If the helpline is only championed by a small group of people it will be less likely to succeed. In particular, a helpline needs support from these staff-members:

1. Chief Pharmacist

To uphold the benefits of the helpline to the Trust, to promote it at a high level, and help secure the resources needed to run it. Recognition, support and buy-in at senior Trust management level is crucial to ensuring patient benefit (e.g. Medical Director, Chief Nurse).

2. Clinical Pharmacy and Patients Own Drugs (POD) Teams

To alert patients to the existence of the helpline at discharge and to encourage ward staff to do the same. To advise helpline staff how to deal with specialist enquiries from patients or to take ownership of some calls and give specialist advice to the caller directly.

3. Dispensary team

To issue promotional materials (e.g. cards) to patients with discharge and outpatient medicines.

4. Medicines Info (MI) team

Often the location from which the helpline is run but if not, offering specialist advice, information resources and support for more complex patient calls.

A senior manager in charge of a Pharmacy section should be responsible for ensuring that adequate and appropriate staff are available to take helpline calls every day for the complete duration of the advertised opening hours. This might be the Clinical Pharmacy Manager or Patient Services Manager for example. If the helpline is run by an MI Pharmacist then there must be cover when he or she is absent.

Access for Patients

1. Telephone Access

If it will prove difficult to ensure that there is always a Pharmacist available to take helpline calls during the advertised hours of access, then consider these options:

- a) Run the helpline from a mobile phone, so that a pharmacist can carry the helpline around with them whilst performing other duties.
- b) Many calls can be answered by a pharmacy technician so a helpline could be operated by technicians in the dispensary or a POD team. A pharmacist should be available if needed.
- c) If the helpline will not be staffed during advertised opening hours, ensure that calls are diverted to another extension where a pharmacist is available. As a minimum, make provision for someone on another extension to take a message; the person taking a message need not be a pharmacist.
- d) Use of answer-phones is not encouraged during opening hours because patients do not like to leave messages. Out of hours, a short message must remind patients to leave contact details, and tell them when to expect a call back and what to do if their call is urgent. Do not instruct patients to “bleep” someone as they will not understand what this means.

Some hospital switchboards operate 'withheld numbers' so that a person receiving a hospital call cannot determine who has rung them. Unfortunately, because withheld numbers are abused by 'cold-calling' companies, some domestic phones are set up to bar calls from organisations that utilise withheld numbers. Check with your organisation to see whether the number from which you operate the helpline is a withheld number, and investigate if this can be stopped. Otherwise, some callers may never know that you tried to ring them back, and you may need to routinely alert callers to ring the helpline back after a certain time if they have received no response.

2. Email Access

Establish a generic email address for the service that everyone who operates the helpline can access. This might take the form of medicinehelpline@mytrust.nhs.uk. A generic email address means that any enquiries by email can always be accessed by anyone in the helpline team, even if the manager of the service is absent. Make sure the email account is checked regularly.

Recording Helpline Activity

It is important to gather data on the activity generated by the helpline to help demonstrate its worth. In particular, you should gather data on the total number of calls, and the advice given and actions taken in response to serious calls. The easiest way to do this is to run the service from an MI centre where an enquiry recording system is already in place. If the helpline is not run from an MI centre then some other means of recording activity should be considered before initiating a helpline.

For helpline services run from MI centres, it is impractical to record every single patient/carer by name in the database of enquirers within MiDatabank. It is recommended that you:

1. Go into the Admin function and create an individual with the surname "Helpline" and the first name "Medicines"; record their enquirer category as "member of the public" but leave the other details blank. When calls are received, enter "helpline" in the surname box and select this option to identify the caller. Patient identity can be recorded in the 'Patient' section (bottom left-hand side of the Input screen), and contact details in the 'Contact for this enquiry' box.
2. Some callers wish to be anonymous, so you should also create an individual in the same way as above with the surname "Helpline" and the first name "Anonymous".

Promoting the Helpline

It is helpful to have a promotion strategy for the helpline, to ensure that as many patients as possible are aware of it, but also so that it is promoted at a level where local resources can meet the demand. As already noted, promotional methods can be gradually escalated to increase awareness of the service.

Involving your Trust's PR department at an early stage is sensible – they may also require a standard appearance for any written promotional materials to match a Trust's corporate identity.

A list of promotional approaches is provided on the next page:

1. Credit card sized promotional adverts*	To be added to every patients discharge medicines or outpatient medicines by dispensary and POD staff.
2. Promotional details on all bags of medicines supplied by pharmacy	Bags can be pre-printed with helpline contact details, or a sticker added manually in the dispensary.
3. Posters	Useful in the Pharmacy waiting area, in the PALS office, in outpatients, in A&E, and on wards.
4. A5 promotional flyers	Helpful to display with posters on wards, A&E, and in PALS. They give more info for patients and carers to take away with them.
5. Use the helpline telephone number on all discharge and outpatient medicines labels	Labels may be pre-printed with this number or it can be added during the course of printing prescribed instructions. This reaches those patients discharged without dispensary involvement.
6. Add helpline number to all electronically generated discharge paperwork given to patients	A particularly valuable way to reach every inpatient. A standard note printed after the list of discharge medicines that the helpline can assist with any medication problems can significantly increase call volume.
7. Add helpline number to all Trust patient info sheets concerned with medicines	Enables the helpline to act as the 'hub' for direct communication with patients about medicines post-discharge.
8. Talking to matrons and ward managers	A valuable way to engage senior nurse support within your Trust. Most wards have nurse-led meetings and attending them enables you to promote the helpline as a way to support a ward's patients and the nursing team at discharge.
9. Trust open days	Have a stand to promote the helpline and engage the public who visit.
10. Web presence	A valuable back-up to a helpline. Include similar information to credit card sized adverts*, but also consider answers to frequently asked questions and copies of current Trust patient info leaflets.
11. Local media	Work with local newspapers and radio stations to gain publicity by giving interviews or free articles.
12. Seek a sponsor	This might be a local business who would like every discharged patient to be aware of their services, or a national company such as a pharmaceutical manufacturer or telecoms provider. What are the big businesses local to you? They may fund only the publicity materials but they might lend IT support or even sponsor a post.
13. Advertise on inpatient TVs	A static advert or screensaver?
14. Community pharmacists	Alert them to the service so they can refer patients.
15. Link promotion to other initiatives	e.g. keeping healthy for the elderly; A&E waiting times

*Notes on Credit Card-sized Adverts are given overleaf

Credit Card-sized Adverts

These are a popular method for promoting a helpline. It's helpful to consider the following:

1. Make them bright and colourful so they show up in a white paper bag of medicines.
2. Include examples of questions that patients can ask, so they understand what's being offered.
3. Make sure you include days and hours of operation.
4. Include your direct dial-in telephone number, and an email address if you have one.
5. Indicate that the helpline is intended for hospital-initiated medicines.
6. Work with your dispensary team to design the cards and ask them if they are willing to distribute them.

An example is shown below



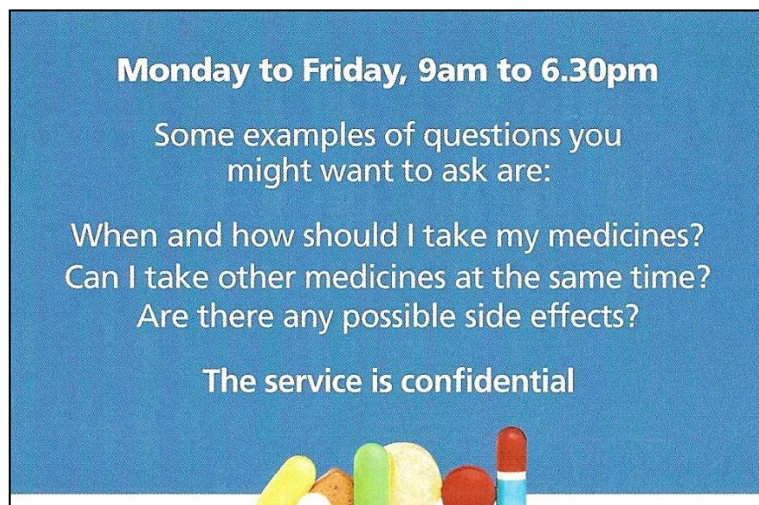
University Hospital Southampton **NHS**
NHS Foundation Trust

Medicines helpline

If you have any questions about your medicines after your hospital visit our pharmacists are here to help

Telephone: **023 8120 6907**
Email: **medicinesinformation@uhs.nhs.uk**

The image shows a credit card-sized advert for a medicines helpline. On the left, a large question mark is formed by a cluster of colorful pills. The right side of the card has a blue header with the University Hospital Southampton NHS Foundation Trust logo. Below the header, the text 'Medicines helpline' is written in large white letters. Underneath, it says 'If you have any questions about your medicines after your hospital visit our pharmacists are here to help'. At the bottom, the telephone number '023 8120 6907' and email address 'medicinesinformation@uhs.nhs.uk' are provided.




Monday to Friday, 9am to 6.30pm

Some examples of questions you might want to ask are:

When and how should I take my medicines?
Can I take other medicines at the same time?
Are there any possible side effects?

The service is confidential



The image shows a blue rectangular box containing text. At the top, it says 'Monday to Friday, 9am to 6.30pm'. Below that, it says 'Some examples of questions you might want to ask are:'. Then, it lists three questions: 'When and how should I take my medicines?', 'Can I take other medicines at the same time?', and 'Are there any possible side effects?'. At the bottom, it says 'The service is confidential'. At the very bottom of the box, there is a small image of several colorful pills.

Measuring Helpline Impact

Consideration must be given to how the workload and benefits of the helpline can be measured. The following can be considered as initial, uncomplicated, metrics:

- Total number of enquiries received per month (It is helpful to set a target commensurate with the local resource available to answer calls).
- Proportion of enquiries answered within the callers' deadline (target >99%).

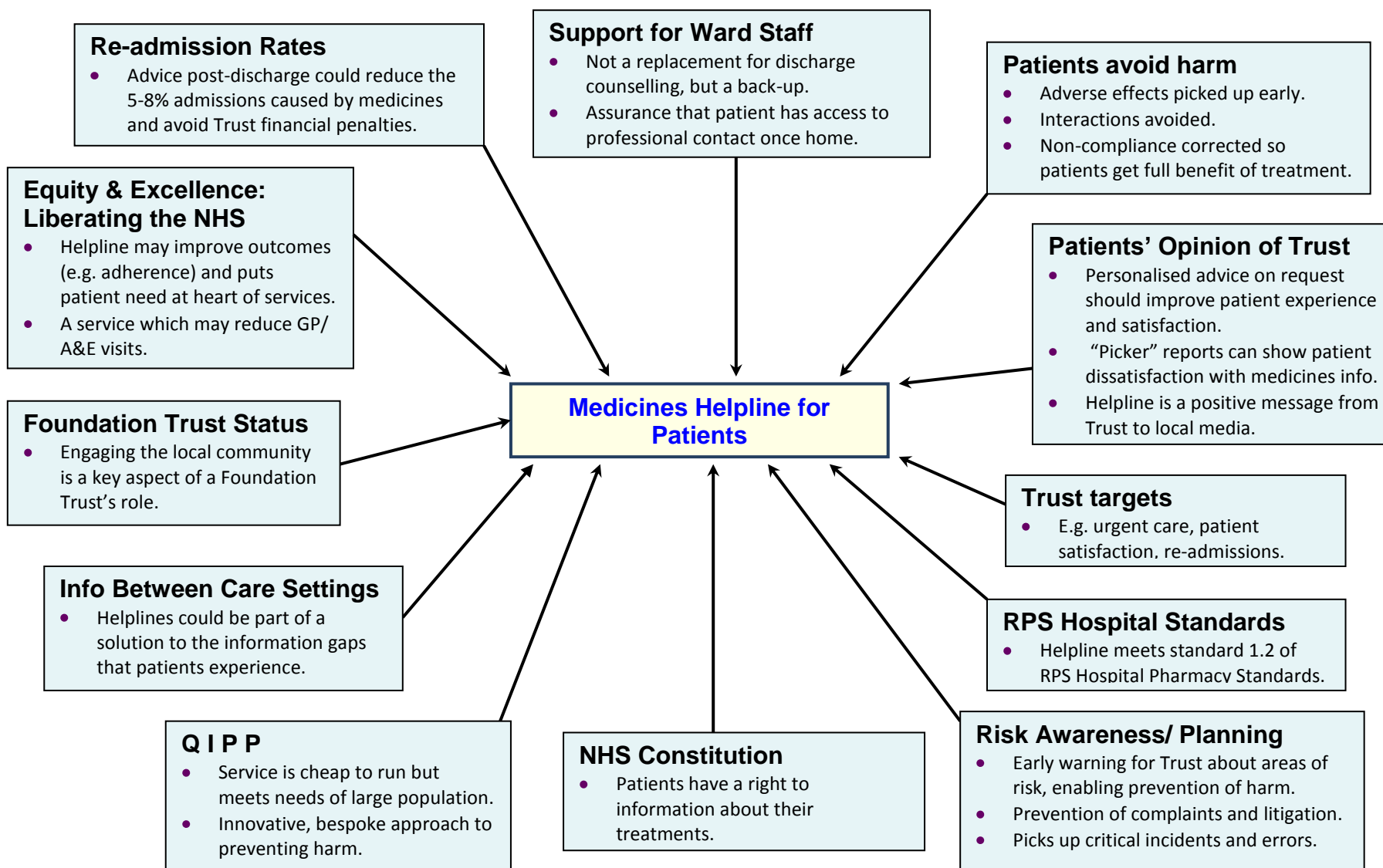
It is also valuable to measure patient satisfaction with the service. This could be a continual measure in which every caller is invited to complete a survey, or an intermittent survey at set points. An example patient survey is given in Appendix 2. This can be converted to an online version via e.g. SurveyMonkey to send by email, or may be posted to callers.

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Original draft prepared by Medicines Information Pharmacists and Chief Pharmacists in Wessex and Thames Valley. Endorsed and commented upon by UKMi Clinical Governance Working Group (Chair, Fiona Woods, Cardiff) and UKMi Patient-facing Information Task and Finish Group (Chair, Graham Cox, Leeds).

Version 1.4 Mar 2015

Appendix 1:
Potential Advantages of Running a Medicines Helpline for Patients



Appendix 2:

Example of a Survey for Callers to a Medicines Helpline for Patients

CONFIDENTIAL

You recently spoke to the Medicines Helpline at the hospital – we would like to know what you thought

We would like to invite you to take part in a survey to help us find out what you thought of the Medicines Helpline at Southampton General Hospital following your recent call.

You may remember you called us about

We would also like to know what happened to you after you spoke to us. This information will help us to develop the Medicines Helpline in the future.

You don't have to take part in this survey – it's up to you. If you do decide to take part, then please complete the questionnaire and return it in the stamped and addressed envelope provided. It should take about 10 minutes to complete.

Any information you provide will be held securely on a password-protected computer and in line with UK data protection law. Your future care in the NHS will not be affected by taking part in this survey.

If you have any questions about taking part then please contact **xxxxxxx**

Please tell us what you thought of the Helpline

1. Were you able to contact us easily?

Yes No Can't remember

2. Did our staff understand your needs correctly?

Yes No Can't remember

3. Did we agree a convenient time to get back to you?

Yes No Can't remember Not applicable

4. Did we get back to you on time?

Yes No Can't remember Not applicable

5. Was our advice helpful?

Yes No Can't remember

6. Did we give you enough information?

Yes No Can't remember

7. Were you confident in the answer we gave you?

Yes No Can't remember

8. Would you call the Helpline again if you needed more advice in the future?

Yes No

We would like to know what happened after you spoke to us

9. Did you follow the advice that the Helpline staff gave?

- Yes** **No** **Partly** **Not applicable**

10. What happened after you spoke to us?

? Please tick all that apply

- I was able to start taking my medicine
- A problem with my medicine was avoided
- I changed how I took my medicine
- My symptoms improved
- I contacted another healthcare professional
- My medicine was changed
- I felt reassured about my medicine or illness
- I obtained a supply of my medicine
- The problem was sorted out
- I became more worried about my medicine or illness
- I kept taking my medicines in the same way
- I was able to stop taking my medicine
- Something else – please tell us here

11. In your own words, please tell us what would you have done if the Helpline service didn't exist?

