



**INNOVATION AGENCY**  
Academic Health Science Network  
for the North West Coast



# TCAM

Transfers of Care Around Medicine

## Frequently asked questions

A guide to support community pharmacists in  
dealing with electronic discharges

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TCAM connects hospitals with community pharmacies as a way of helping to reduce errors in medication following a patient's stay in hospital.

## Introduction

Evidence shows that patients who see their community pharmacist after an admission to hospital are less likely to be readmitted, and if they are they will have a shorter length of stay.

When some patients leave hospital they need additional support taking their prescribed medicines. This may be because their medicines have changed or they need help taking their medicines safely and effectively.

**This is what TCAM (Transfers of Care Around Medicine) delivers. Prior to discharge patients are identified by the hospital pharmacy team and are referred, through a safe and secure digital platform, for support from their local community pharmacist.**

NHS England and the Innovation Agency are working with hospital trusts and community pharmacy representatives to set up a secure electronic interface between the many hospital IT systems and PharmOutcomes. This allows each hospital to refer at risk patients to **any** community pharmacy in our area.

**In short TCAM provides our community pharmacies with relevant patient discharge information securely, quickly and seamlessly. This allows each hospital to refer all suitable patients to their community pharmacy.**

**Medication errors post discharge from hospital are associated with an increased risk of adverse effects.** NICE NG5

6.5% of patients are admitted as a result of adverse drug reaction (ADR) of which 72% are deemed to be avoidable.

**We hope you find this handy Q&A guide helpful. Here is a link to our website <https://tinyurl.com/y7bfjqjw> and if we can assist you in any way you can also contact us as follows;**

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# Frequently asked questions

- **What is the key objective of the TCAM project?**

The TCAM project is intended to improve communication between the hospital pharmacy team and community pharmacy colleagues.

The main focus will primarily be on patients most at risk from medication changes following hospital admission and discharge.

TCAM will improve patient pathways and become more integrated across different sectors of care [vs current practice of reliance on the use of telephone and fax to inform community pharmacy without any record of their continuity of care].

- **How will TCAM do this?**

Having identified and selected the patient following their consent, TCAM will allow hospital pharmacy team to electronically send medication discharge details directly to their community pharmacist so that they can get advice about any of the changes to their medicines.

TCAM will alert community pharmacists that their "at-risk" patients are being discharged and may need a suitable follow-up. This avoids any prescription or medication currently in the system to be intercepted and interrogated before any supply is made to the patients.

- **What are the key benefits to patients?**

TCAM will ensure patients are supported to get the most from their medicines and remain in a better state of health through formal contact with their community pharmacist.

The pathway will result in fewer hospital re-admissions or emergency department attendances as a result of medication errors in particular if their old medicines were a contributory factor to their admission to the hospital for example in drug induced AKI.

- **Other than community pharmacy have you identified other professional groups that may benefit from certain elements of TCAM communication?**

During our extensive consultations other key groups were identified as; Patients' medical practices - Although awaiting development of this part of the pathway, developing the module for general practice to receive admission notification for the first time can allow the practice to put any immediate arrangements for the patients on hold and this should free up some immediate capacity in the practice.

There will also be some unintended but beneficial consequences in suspending any immediate prescriptions and reducing medication error risks and medicines waste simultaneously.

CCG domiciliary or 'virtual ward' teams - In CCGs with domiciliary teams or virtual wards linked to the local trusts, the notification can result in follow up on certain vulnerable patients or those who may have experienced frequent hospital admissions in the past by visiting these patients post-discharge.

Practice pharmacists - similarly they can follow up and close the medicines discharge loop for many patients and to watch out for any medicine concordance issues when patients go home or return to their care setting.

# Frequently asked questions

- **What benefits do community pharmacists gain from TCAM?**

TCAM offers community pharmacists an opportunity to use their clinical skills and to be an integral part of the patient pathway. It also facilitates a greater degree of professional relationship with their patients and allows community pharmacies to plan their workload better when patients are discharged from hospital.

- **What are the key benefits to hospital pharmacy teams from TCAM?**

TCAM allow the hospital team to communicate in a safe and secure way with their community pharmacist colleagues around any medication issues, continuity of supply and if any follow ups need to be flagged up. The fully integrated model will free up the hospital team from attempting to make a telephone and fax communication in the knowledge that their communication is securely delivered and acknowledged by their community pharmacy colleagues.

- **What are the key benefits to GPs from TCAM?**

TCAM supports GPs by reducing the need for unplanned hospital re-admissions due to medication errors for patients at risk of post-discharge medicines adherence issues. Community pharmacy will be in a position to interrogate new prescriptions they have received against the discharge information and clarify any discrepancies. GPs will also benefit by knowing a patient has been

through a medicines adherence programme and provides them with the added assurance that their patients are taking their medicines correctly and limiting medicine waste.

- **How does TCAM benefit CCG medicine management teams?**

TCAM will improve utilisation of medicines with less waste. If CCG MMT domiciliary services are also in place then TCAM offers a simple discharge referrals pathway. TCAM could also offer the possibility to spread innovative practice to non-acute providers such as community services (district nursing, virtual wards, community hospitals etc).

- **What are the issues for patients about medicines on discharge?**

Due to the nature of admissions, patients are less likely to be able to retain all the information provided to them prior to discharge. Their medicines-related problems after discharge from hospital can be addressed by more systematic involvement of their community pharmacists supporting the discharge process.

- **Would all patients admitted to hospital be admitted to the pathway?**

No. Hospital pharmacy teams, as part of their patient medication reconciliation process during admission could decide to identify the cohort of patients based on the likely changes to their medication.

Additionally, all patients included in the TCAM pathway are required to give their consent to have their information about their admission and discharge communicated to their regular community pharmacy.



# Frequently asked questions

- **How secure is TCAM?**

TCAM uses secure N3 connection meeting strongest IG standards. All C&M are community pharmacies included in the pathway will also meet the minimum IG standards as prescribed by NHS England through their contractual framework. Additionally, there is full encryption of the patient's data in transit and can only be accessed by the community pharmacy in the pathway through a very secure access gate. The processes ensure secure and audit-able retrieval or rejection of the referral by the community pharmacy.

- **Is there a user guide to TCAM?**

Yes. There is a video guide produced to help pharmacy teams better understand how to receive, accept and then complete a discharge referral.

The video is available at <https://media.pharmoutcomes.org/video.php?name=tocPharmacyNew>

- **How will I know if I have an TCAM message?**

When your pharmacy receives an TCAM referral you will be notified by an email being sent to your PharmOutcomes management email address. Please watch the TCAM video guide linked above to see how you set and change this linked email address.

If you have a "PharmAlarm" installed it will alert you to a new referral. These can be obtained from PharmOutcomes on a yearly rental basis and they also alert the pharmacy when referrals for other services such as NUMSAS are received.

- **How do I accept a referral?**

Transfer of care referrals can be found by clicking on the PharmOutcomes services tab. Any outstanding TCAM referrals will appear at the top of this screen. When you click on the name of the referral you will see the details sent to you by the hospital including patient details and other relevant information.

If the patient uses your pharmacy then click to accept the referral. You can then wait to discuss the referral with the patient or their carer at a later stage. When you have done this you can mark the referral as complete.

- **When to reject a referral?**

You should **only reject** a referral if they are not your patient or if you know that the patient no longer uses your pharmacy.

- **Can I accept referrals for housebound patients?**

With housebound patients you can accept the referral as the information will be useful for you. NHS England will support all requests for domiciliary MURs for TCAM

- **How do I complete a referral?**

The system is very simple to use and the online video guide will take you through this.

The video is available at <https://media.pharmoutcomes.org/video.php?name=tocPharmacyNew>

Any action plan identified by the hospital pharmacy team will appear in the pharmacy notes section. You can tell the system if you have carried out an MUR, NMS or medicines reconciliation. Note that

You can also report if the patients next repeat prescription does not match the hospital discharge and electronically send details of any variation to the patient's GP.

# Frequently asked questions

- **How many TCAM messages will pharmacies get?**

This will vary from hospital to hospital and their pharmacy communication policy and the Trust pharmacy team may decide to send all verified discharges or focus mainly on those patients who could benefit most from their community pharmacist having the most up to date information about their new medicines or dose changes following discharge (e.g. changes to blister packs or care home residents' medicines).

- **How much work does TCAM create for hospital pharmacy teams?**

TCAM is designed to be a fully integrated solution with hospital systems. The solution will automatically pick the generated discharge information at the point of discharge from the hospital's message handler without any additional workload from the hospital team through a secure N3 link that meets stringent IG standards.

- **How much work does TCAM create for GP practices?**

None as the TCAM discharge information sent to community pharmacies is already included as part of the existing information received at GP practices following patient discharge. Before admission notifications can become available in the pathway for community pharmacies and GP practices we will ensure that discussions take place with their representatives to ensure that the notification has minimal impact on practice workloads and meets their requirements.

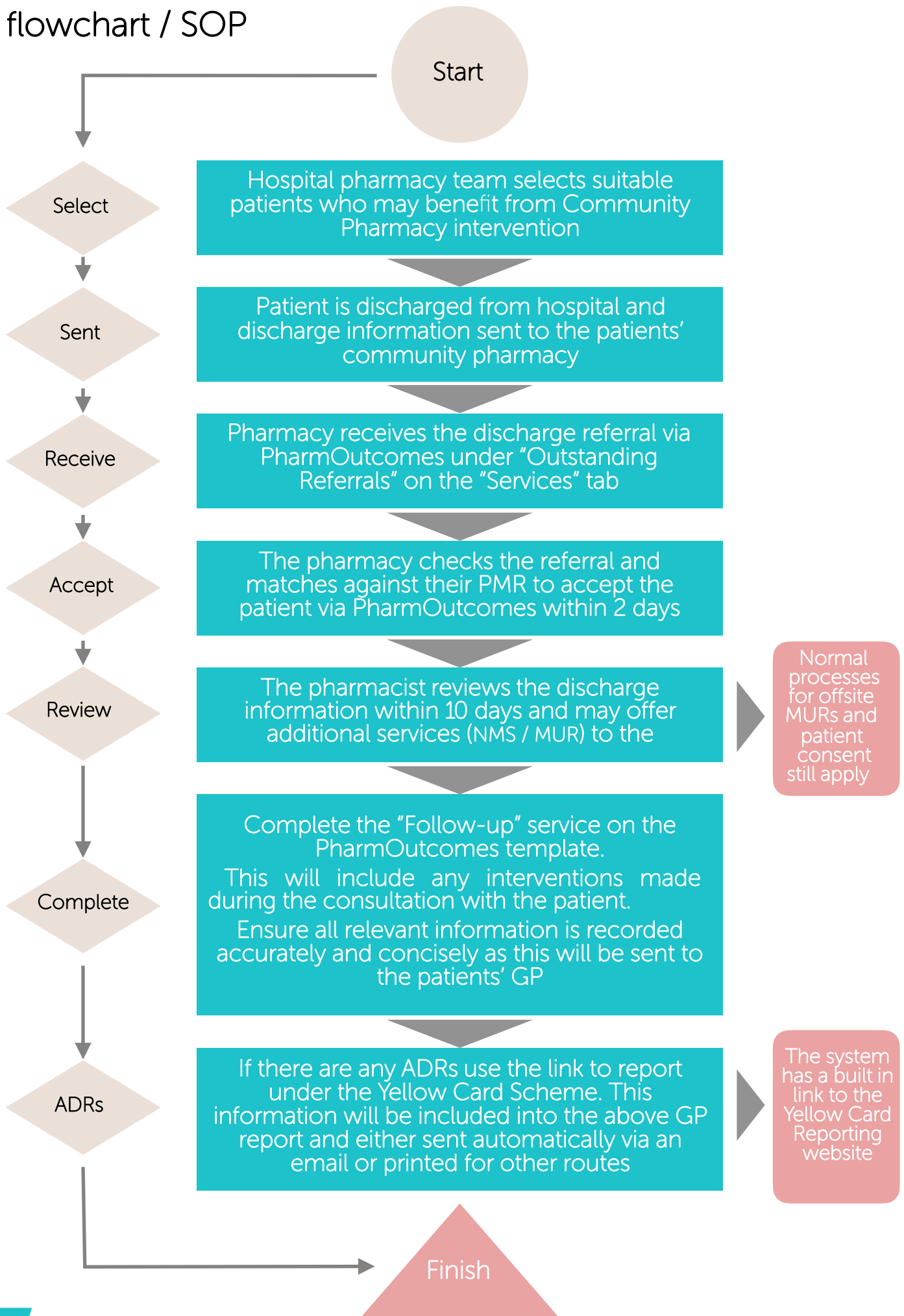
- **How much work does TCAM create for community pharmacy teams?**

The information being sent to community pharmacies via TCAM is there to assist pharmacies to better plan their workloads and to assist patients by being "in the loop" with regards to admission and discharge information. Pharmacists can, for the first time, review patient discharge information and work with their local GP practices to ensure that patients receive the appropriate medication support. This is particularly vital if a patient needs access to existing prescriptions in the system prior to their admission. There are already advanced pharmacy services in the national contract to support this type of review, such as, NMS (new medicines service) and MUR (medicine use reviews). Once admission notifications become available in the pathway for community pharmacies they will be also able to put on hold any dispensing activities for patients and avoid unnecessary workload, for example, production of MDS (blister packs).

- **How much work does TCAM create for CCG medicines management teams?**

None. The ability of community pharmacy colleagues intercepting and reviewing patient admission notification and discharge notification should reduce medication waste in the CCG area. For example, cancelling or not ordering prescriptions in the system and ensuring any prescriptions on hold are reviewed prior to supply.

# TCAM flowchart / SOP





**NHS**



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