

IMPLANTATION OF HOME DELIVERY AND TELEPHARMACY SYSTEMS IN A THIRD LEVEL HOSPITAL

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Background

Our hospital catchment area it is mainly formed by several villages. For patients suffering pathologies that decreases their autonomy like multiple sclerosis, to go to their hospital pharmacy can be a stressful activity. Given the increasing number of patients, we decided to design a new delivery system but keeping all the benefits of pharmaceutical cares.

Objetives

Our main purpose was to design a home delivery system (HDS) and a telepharmacy system (TS). Our secondary objective was to stablish what happened to patients, evaluating patients' acceptance, time saved and kilometers (km) avoided.

Material y Métodos

We designed the new pathway, HDS and TS, and also a nine-months observational retrospective study (December 2018 to September 2019). A monthly-bimonthly HDS and TS was proposed to patients attending the outpatients' service, prioritizing patients with low autonomy. One of the requirements for patients to access the HDS was to provide their consent to cede personal data as their address and phone number. To ensure HDS, patients were advised by phone call 3–5 days before the next delivery. In that call, a pharmacist also interviewed the patient, to asses adherence, asking about how the treatment goes, and looking for any adverse reaction that the patient can refer. Electronic medical records were consulted to obtain variables. For evaluation of the time and distance saved by the pathway, we estimated the distance between the patients' home and the hospital in minutes and kilometers by Google Maps.

Resultados

The new pathway commenced on December 2018, nine months later 135 were included in the HDS and TS, 73 females (54%) with a median age of 56 \pm 15 years. 420 deliveries took place (on average 3.1 deliveries/patient). No patient rejected the program once included. HDS and TS saves 67,8 minutes (41-97,6) and 69,3 km (47,5-88,2) to each patient per dispensation on average.

Conclusiones

The implementation of the new pathway was well accepted by patients and implies saving a lot of time and km per dispensation. For people who find it very difficult to move due to their illness, HDS and TS can mean a huge impact in their quality of life.

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