REDESIGN OF THE MANAGEMENT MODEL AND PHARMACEUTICAL CARE OF PATIENTS WITH HEPATITIS C VIRUS INFECTION

After the approval of the use of Direct Antiviral Agents (DAA) by The Spanish Ministry of Health, public hospitals had the challenge of treating an elevated number of patients in a short time, forcing the hospital pharmacy to redesign the working procedures of the Ambulatory Care Unit.

BACKGROUND

OBJECTIVE

To redesign the management model and pharmaceutical care of patients with HCV and evaluate the results.

MATERIALS AND METHODS

1. Coordinated Care

2. System of appointment

ADVANTAGES

- To avoid unschedule visits, optimizing working hours and offering the patient a better care.
- To estimate the stock of drugs

3. Standar interview (registered in the electronic medical record)

KEY POINTS:

- Objective
- Method of administration and preservation
- Interactions
- Compliance to treatment

4. Patient satisfaction

(Survey before setting up the new system and 6 months after that)

MAIN POINTS

- Global Quality
- Attention
- Information received

5. Database for management

MAIN DATA (to elaborated weekly and monthly reports):

- Patient’s treatment, duration, previous treatments
- Genotype, Fibrosis
- Final result
- Packaging consumed

RESULTS

- In six months of project, 372 patients have been treated with DAA

CONCLUSIONS

Establishment of an appointment system for patients instead of attending unscheduled visits, as well as the coordination of the healthcare team, enhance patient satisfaction and optimize the working hours of the pharmacists, increasing the time to develop new projects, and to become a clinical service to the managing of the hospital.

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