

QuDoS in MS Recognition Programme

Natasha Hoyle, Outstanding MS Pharmacist Winner

Your name, job title and centre

Natasha Hoyle, neurosciences pharmacist, Sheffield Teaching Hospitals NHS trust

Project / initiative name

Disease modifying therapies: A comparison of initiation timescales between patient location and medication type within Sheffield MS service



Challenge

- The duration for patients to receive treatment following Blueteq funding approval is currently unknown, which can lead to patient anxiety and an increased volume of calls to the MS service.
- A need existed to establish a baseline to determine the time it takes for patients to get treatment.
- Although a plethora of extensive patient and treatment data was available, it remained unanalysed. This lack of analysis prevented an understanding of the service's performance and identifying potential areas for improvement in order to enhance the overall delivery of care going forward.



“It’s about coming up with ways to be more efficient and making use of the staff and time that we have to produce the results that can impact on patient care, and, hopefully, improve their experiences.”

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Solution

- Neurosciences pharmacist, Natasha Hoyle led a large and complex audit of delays in providing disease modifying therapies to MS patients, conducted within the Sheffield MS service.
- Blueteq approval forms from October 2018 to April 2019 were reviewed to identify patients who had started or changed treatment within a six-month period.
- Data from sources, including an in-house disease modifying therapies management system known as Infolex, pharmacy dispensing records, and homecare delivery company records were analysed alongside Blueteq forms to establish a timeline from Blueteq approval date to patient receiving treatment.
- Data was also examined by geographical areas to identify any inequalities in access to healthcare.

Results

The audit found that 167 patients had started or changed to a new DMT within the sample time period. Data analysis also revealed that the median time from Blueteq approval to a patient receiving treatment was 27 and 39 days, respectively, for homecare and day case treatments. Notably, day case data showed greater variation than in the provision of DMTs through homecare.

When reviewing treatment timelines based on patient location, it was found that it took a median of 51 days for patients in Doncaster to receive homecare treatments. This was significantly longer than patients in other areas, such as Sheffield or Rotherham.

Using this information, Natasha worked with the day care unit, arranging tests and prescriptions in advance, which means that people on infusible treatments wait a median of 2.1 hours less for the treatment on the day, and can be discharged quicker.

By proactively looking at medication costs, and use of generics, the audit helped to make changes that will save millions in drug costs per year, with no change in patient safety.

Next steps

Both of these cycles were conducted pre-COVID and there was a halt to any data collection over the past few years. It is something that would be useful to start again. The landscape in DMT provision has changed a lot over the past couple of years - in our centre alone, we've had an almost 30% increase in patients on homecare treatments compared to 2019/2020, when this work was last looked at. I think we really need to establish a new baseline because we've had new treatments come along which have really changed options for patients.

What has been the biggest challenge?

The greatest challenge was just the sheer amount of work that the project was. In the first year, our documentation, although we were documenting it, it wasn't necessarily detailed and there were parts missing, so we had to use more days' resources to find out the information that we needed.

How did you overcome this challenge?

Something that I probably still need to learn from is asking others for help and making it as a team project, which I'd probably change going forward.

In the first year, I was talking to lots of different areas to collect this information, which obviously takes a lot of time, whereas in the second year because we knew the points we were looking for, it really streamlined the process and it made the second year of auditing much easier and much quicker.

What would be your advice to others wanting to replicate this project?

Reach out to others to see if anyone else has an interest before you start. You can reach out to other centres, you can collate information as well, if needed, which can lead to guidance and publications and make things better around the country, rather than in pockets of certain areas.

Take a break.

Make a cup of something and enjoy an interview with, Natasha Hoyle winner of the outstanding MS pharmacist category.



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