

## Standard Operating Procedure (SOP)

### Hospital Electronic Prescribing & Medicines Administration

<b>SOP Number:</b>	<b>8</b>
<b>SOP Title:</b>	<b>Process for dealing with patients who remain on TrakCare post physical discharge from ward and deceased patients</b>

	<b>NAME</b>	<b>TITLE</b>	<b>SIGNATURE</b>	<b>DATE</b>
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#### 1. Purpose

This purpose of this document is to describe the process to be adopted and implemented when a patient has not been discharged on TrakCare despite having been discharged physically or when a patient is deceased and awaiting a death certificate.

#### 2. Introduction

The GGC HEPMA system supplied by WellSky is designed to ensure administration of all doses before moving forward to current doses. Where patients are not discharged on TrakCare they may remain on the system even though they are not physically present in the ward. Also, if transferred to a location **not known** by HEPMA, they may not transfer appropriately and remain on the ward. HEPMA users will need to manually deal with these patients.

### 3. Scope

The scope covers the following:

- Wards involved where HEPMA is live

### 4. Definitions

- **NHSGGC**: NHS Greater Glasgow & Clyde Health Board
- **HEPMA**: Hospital Electronic Prescribing and Medicines Administrations
- **WELLSKY**: Software used to provide HEPMA (3<sup>rd</sup> Party software supplier)

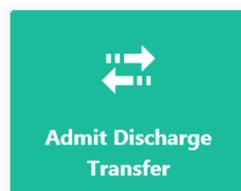
### 5. Specific Procedures:

**Patients transferred to a non-live HEPMA ward that are still visible on the HEPMA ward.**

In the event a patient has been transferred on HEPMA to a ward not recognised by the system the patient will remain as live in the HEPMA ward.

In this event a manual discharge process should be initiated.

1. Go to the **Home Screen** and select the **Admit Discharge Transfer** tile:



2. Enter the patient's CHI number at either **National number** or **Hospital number**
3. Check patient's details are correct before selecting patient
4. Select **Discharge** tab and then click **Discharge Patient** 

**Please note that discharges on HEPMA can be cancelled, up to 72 hours after the initial process is completed, in the event of a mistake. All HEPMA data will be retained in this scenario.**

**Patients who have left the ward who cannot be discharged on TrakCare (e.g. irregular discharge who need an IDL or deceased patients awaiting a death certificate)**

1. Select the patient in the **Inpatient Finder** or **Administration round** screen.  
**PLEASE ENSURE YOU ARE IN THE CORRECT PATIENT RECORD.**

2. Go to the **Inpatient Rx** tab
3. Select **ALL ORDERS**

Consultant **MACGREGOR, GORDON** Ward **Q7A QEUH 7A** Body Surface Area **1.93** sqm (e) Weight **80** kg (e) Height **172** cm

Communication zone

ADD DRUG **ALL ORDERS** PREVIOUS CARE EPISODE BULK CHANGE DRUG CLINICAL INFORMATION PATIENT NOTES HELP

**Inpatient Rx** Discharge Rx Short Term Leave Rx Discontinued Rx Monitoring & Assessment Conflict Log Administration

Sort items by: Order Add/Modify date A-Z BNF Chapter Order start date Order Type View: Legend

4. Select **Suspend all orders**
5. Select appropriate reason from the drop-down list; this will most commonly be **Patient Self-discharge/Awaiting IDL** or **Patient deceased**

**Action on All Orders**

Communication zone

Suspend ALL Orders  
 Will suspend all active inpatient orders. Orders already suspended will remain suspended

Suspension Reason **Select reason**

Suspend ALL Future Orders  
 Will suspend all future added orders

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Resume ALL Orders  
 Will resume all active and suspended inpatient orders. Orders which are not suspended will be unaffected

Cancel Action on ALL Orders

6. Click **Action on all orders**

The patient's medicines will now be placed in a suspended state and no further administrations will be created.

Once the patient is discharged on TrakCare the patient will be removed **automatically** from the HEPMA system.