

# **A qualitative exploration of the underlying causes of preventable drug-related admissions to hospital, from primary care**

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## **Affiliations**

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## **Aims**

1. To identify the system failures associated with medication-related admissions to hospital, from primary care.
2. To explore the views of general practitioners, pharmacists and patients on a range of issues concerning medication related morbidity in primary care.

## **Method**

- Patients admitted to hospital with suspected drug-related admissions (PDRA) are identified by clinical ward pharmacists, according to a sampling framework developed from the most common drug-related causes of hospital admissions identified in a previous study<sup>1</sup>
- Patient consent is obtained, where the patient's GP and consultant have given prior permission to enroll their patients into the study
- The causality and preventability of the drug-related cause of the admissions is independently assessed by three practitioners using previously validated criteria<sup>1</sup>
- Where admissions are felt to be drug-related and preventable, semi-structured, qualitative interviews with patients, general practitioners and community pharmacists are used to explore the underlying causes of these potentially preventable drug-related admissions.
- Verbatim transcripts from these interviews will be analysed using theming and coding to develop a framework for the underlying causes of PDRA, based on human factors theory.

## **Progress**

- To date, nineteen patients have been recruited into the study, and I plan to recruit up to four more patients.
- Preliminary results suggest that communication problems, medically and socially complicated patients, and inadequate computer alert systems are some of the main themes emerging from this study.

## **Reference**

1. Howard R et al. Investigation into the reasons for preventable drug-related admissions to a medical admissions unit: Observational study. *Qual Saf Health Care* 2003; 12: 280-5.