



## Medication Safety Series: MSS 18

### Safe Transfer of Psychotropic Medication at Discharge from Inpatient Wards

- Where **psychotropic medication is unchanged (drugs & doses)** from admission, it is suitable for **immediate transfer to the GP**; a **minimum 7 day supply** should be provided on discharge & the GP requested to continue prescribing.
- Where **psychotropic medication is initiated or amended (drug and/or dose) during admission, or shortly prior to admission (e.g. by crisis team)**, it is important to ensure it is transferred in a timely manner to the **most appropriate community prescriber**. In these cases:
  - Patients should be **issued with a 28 day supply of any newly initiated or amended psychotropic medication unless:**
    - **prescribed clozapine** (quantity determined by the blood result & next clinic appointment)
    - **suicidality or another risk with > 7 days' supply** of medication is present. (see below)
- Where the patient uses a **monitored dosage system or requires 7 day supplies:**
  - **Extra care needs to be taken during the transfer process. The in-patient team should discuss with GP, CMHT and community pharmacy, the most appropriate route of supply to maximise patient safety. This should be part of the discharge planning meeting.**
  - Options may include CMHTs holding 3x7 days instalments, post-dated prescriptions or collection from Trust pharmacy, until arrangements can be actioned with primary care.
- The **RAG status** within the "Safe Transfer of Prescribing Guidance" of the newly initiated or amended psychotropic **drug determines the most appropriate community prescriber** for the next supply of medication (as described below)
- **Each drug on the discharge letter must have the CORRECT SOURCE of NEXT SUPPLY (Trust or GP)**

#### Transfer to GP:

- ✓ Newly initiated or amended medication with **GREEN** status, e.g. citalopram, sertraline
- ✓ Newly initiated or amended medication with **AMBER** status, e.g. pregabalin, donepezil
- ✓ If **prescribed for at least 3 months and stable** - newly initiated or amended **AMBER ANTIPSYCHOTICS**, e.g. olanzapine, quetiapine, or medication with **AMBER SHARED CARE** status, e.g. antipsychotic depot/LAIs, lithium, ensuring that appropriate documentation is completed and shared with the GP where appropriate.

#### Transfer to TEWV community team:

- ✓ If **prescribed for less than 3 months or not stable** - newly initiated or amended **AMBER ANTIPSYCHOTICS**, e.g. olanzapine, quetiapine, or medication with **AMBER SHARED CARE** status, e.g. antipsychotic depots/LAIs, lithium
- ✓ Any medication with **RED, PURPLE, BLACK** or **GREY** status which is not suitable for transfer to GP e.g. clozapine, lurasidone, asenapine
- ✓ If suicidality or another risk requires shorter supply, consider how instalments can be supplied until CMHT can arrange prescriptions. Options listed above.

#### Long Acting and Depot Antipsychotic Injections:

- These are **AMBER SHARED CARE** (exc. olanzapine = **RED**) so can transfer on discharge according to the process above **if >3 months treatment has been given and the dose/frequency is stable**
- Details of the depot/LAI must be documented within the electronic discharge letter (EDL) and must include **drug name, dose, frequency and date & site of last administration. This must be added in the "comments" section of the medication grid on EDL.**
- **Date and place** of the next injection should be **arranged & communicated to the patient prior to discharge**
- Prior to discharge, where the depot/LAI is to be initially transferred to a TEWV community team, the inpatient team must ensure arrangements to enable **completion of a NEW community depot card in time for the next dose** (including obtaining depot supply) and ensure any **previous depot cards are cancelled**.
  - This may be achieved by (**check local arrangements**):
    - In-patient team writing the new depot prescription and sending to CMHT base
    - Task allocation at discharge meeting where CMHT are present
    - E-mail to generic CMHT (or CMHT pharmacy team) mailbox (with high priority)
    - Scanning front page of drug chart (depot section) to CMHT

Title	MSS18: Safe transfer of psychotropic medication at discharge	Date of issue	20 <sup>th</sup> October 2021
Approved by	Drug & Therapeutics Committee (September 2021)	Review due	1 <sup>st</sup> October 2024