

The role of the director liaison technician

By L. EDWARDS

This article discusses the rationale for creating the post of directorate liaison technician at North Staffordshire hospital

The North Staffordshire Hospital NHS Trust (NSHT) is responsible for 1,300 beds and provides a range of acute services and a number of specialties, including infectious diseases, cardiology, haematology, neurology and neurosurgery. Within the trust, there are six clinical divisions. These are subdivided into specialist directorates, each having a clinical director, a general manager and a directorate pharmacist.

In 1997/98 the trust's drug budget of £5.7m was overspent by more than

£800,000 which prompted a review of the systems in place to control drug expenditure. As a result of this, a comprehensive medicines management system was developed. This involved the restructuring of the directorate pharmacy service so that a named pharmacist was attached to each directorate. All directorate pharmacists liaise on a regular basis with the business manager, clinical director and accountant in their directorate. In addition, the directorate pharmacist works with medical and nursing staff to improve the quality and cost effectiveness of prescribing.

The result was a rapid increase in the demand for detailed drug expenditure and usage data. This was seen as an opportunity to create an extended role for pharmacy technicians. In May 1998, a full time direc-

torate liaison technician (DLT) at MTO3 (medical technical officer grade three) was appointed. The post was funded by "top-slicing" the drug budget. This paper outlines the impact of this newly developed post.

AIMS AND OBJECTIVES

The DLT post was created to ensure provision of regular, high quality drug usage data and dedicated support to the 14 directorate pharmacists.

Following discussions at a directorate pharmacists' meeting, a number of key areas for involvement were identified:

- To standardise and improve the quality and presentation of drug expenditure and usage reports

Ms Edwards is senior directorate liaison pharmacy technician at North Staffordshire Hospital NHS trust, Stoke-on-Trent and winner of the AAH Hospital Pharmacy Technician of the Year Award in 2000

- To participate in drug related audits and project work
- To assist in the production of directorate reports for the chief executive's review meetings with the heads of division
- To attend regular directorate meetings.
- To take the lead in the production of shared care guidelines
- To act as a link with other units in the pharmacy department, thus ensuring the effective dissemination of information and project work
- To be involved in the training of pharmacists and pharmacy technicians in key prescribing messages

OUTLINE

This post required the DLT to develop high level information technology skills. To enable the generation of drug usage data, the technician had to become proficient in obtaining reports from the Cortex pharmacy computer system. The technician had to develop appraisal skills which allowed drug utilisation data to be interpreted into a clear and concise report. This required a thorough knowledge of Windows applications, spreadsheets and databases, using Microsoft software.

These information technology skills form the backbone of the directorate pharmacy service. The appointment of a DLT thus enables the pharmacists to concentrate on the clinical issues affecting their directorates.

The technician produces the following information:

- Monthly spreadsheets of expenditure on the top 20 drugs and total expenditure
- Monthly analysis of adherence to budget in spreadsheet format. The technician liaises with accountants to obtain budget information
- Provision of monthly expenditure on certain high cost drugs, for example, riluzole and drugs for human immunodeficiency virus (HIV) infection, to the directorate accountants. This information supports existing virement agreements and facilitates the accurate invoicing of health authorities
- Monitoring of the impact of directorate cost reduction plans and key prescribing messages. These are compared with the previous year's expenditure
- Supply of medical and surgical wards with a price list of frequently used drugs, updated every three months. This is in the process of being extended to other directorates.

Examples of project work undertaken include an evaluation of the usage of flumazenil and midazolam in the gastroen-

terology department. The technician was involved with proforma design, data collection, monitoring expenditure and with the production of a database to present the results. Another project was undertaken to improve the accuracy of outpatient prescription costing.

OUTCOMES

The creation of this post has led to the following benefits:

- The information package enables comparisons in expenditure to be made and allows trends to be identified and action taken at the earliest opportunity
- Information is now available to ensure accurate invoicing of health authorities, for instance, £9,700 was generated from riluzole expenditure within the neuroscience directorate in 1999/2000
- A continuous audit programme has been established for HIV drugs. This includes monitoring the implementation of a repeat prescription service for HIV patients, which has saved approximately £16,000 in the first year of operation. Expenditure on HIV drugs is monitored monthly, presented graphically and fed back to the medical division accountant and the health authority. This information highlighted an overspend in the HIV drug budget for 1999/2000 and helped secure additional funding of about £69,000 for 2000/01
- The results of an audit on midazolam and flumazenil produced savings of £5,500 per annum
- A detailed quarterly report for each directorate is prepared for the chief executive to coincide with his review meeting with the head of each division. This report shows drug expenditure and budget status, gives an update on directorate pharmacist activities and highlights any new cost pressures or problem areas. In addition, a directorate pharmacy report is presented quarterly to the management board. The reports have raised the profile of the service and have highlighted the impact of successful projects. The chief executive has acknowledged the quality and usefulness of these reports
- Auditing the impact of key prescribing messages initiated by the medical directorate pharmacists has highlighted cost savings of £35,000 for 1999/2000
- Improved accuracy of outpatient prescription costing was achieved by running a poster campaign in clinics. This encouraged medical staff to include accurate cost centre information on all prescriptions. Pharmacy patient services were provided with an updated cost centre list for each direc-

Winner in Las Vegas

As part of her prize for winning the AAH Hospital Pharmacy Technician of the Year 2000 Award, Ms Loraine Edwards enjoyed an expenses paid trip to the 35th American Society of Health-System Pharmacists mid-year clinical meeting held in Las Vegas last December.

Speaking to *Hospital Pharmacist* shortly after returning from the trip, Ms Edwards, who has worked as a pharmacy technician for over 16 years, described the meeting as "an experience of a lifetime." She particularly valued the opportunity of sharing ideas with other pharmacy technicians.

Ms Edwards stated that she had received enquiries from other pharmacy technicians in the UK about her role as directorate liaison technician. She would like to see the new role publicised so that it could be replicated in other hospitals.

torate and were encouraged to challenge cost centres or consultants classified as unknown. The results show a reduction in "unknown" prescription costs by a monthly average of 7.6 per cent. The success of this project is monitored monthly and fed back to the clinics, patient services and the directorates

- Shared care guidelines, which define the areas of responsibility between the hospital and the general practitioner for the prescribing of certain drugs have been produced, for example, latanoprost eye drops for glaucoma and interferon alfa for use in hairy cell leukaemia

RELEVANCE TO PRACTICE

In the majority of United Kingdom hospitals, pharmacy departments are striving to improve the services provided to directorates. A directorate liaison technician can improve the production, interpretation and dissemination of drug usage and expenditure information to both pharmacists and directorates, thus enabling new areas for review to be identified, actioned and fed back.

The development of a comprehensive medicines management system has resulted in the drug budget being underspent for the past two years (£21,000 underspent on a budget of £6m in 1998/99 and £40,000 on a budget of £6.4m in 1999/2000). The post is viewed as a vital component of this system. As the service has developed, demands for directorate support and information have increased. The management board acknowledged this, and in April, 2000, a business case for a second DLT with full time secretarial support was approved. The new appointee has been in post since September, 2000.