

The successes and challenges of remote working and delivering a Regional Medicines Information Service during the COVID-19 pandemic

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Abstract

Remote working was introduced for the medicines information (MI) team in March 2020 at the Regional Drug & Therapeutics Centre (RDTC). This was in line with government guidance for those able to work from home, should do so.¹ It was done initially in a phased manner but all staff were working remotely by April 2020.

Each member of staff was issued with a laptop and mobile phone. Each individual's desk phone was diverted to their work mobile phone to enable call answering remotely in line with standard operating procedure and supported by Liberty® call answering software. An upgrade to Converse® in March 2021 enabled direct use of mobile phone numbers.

The message on the RDTC website was altered to encourage email for non-urgent enquiries, to maintain telephone capacity for more urgent enquiries. All staff completed a home-working health and safety assessment and our host Trust provided working from home 'Top Tips'.

This poster will discuss the successes, challenges and mitigations of delivering a regional MI service from home.

SUCCESSSES

- Staff safety and service resilience. No physical interaction with colleagues in the office or members of the public on public transport reduced the risk of transmission of coronavirus. This reduced possibility of staff sickness and increased resilience of the service. Working a blended model since February 2021.
- All staff completed a home-working health and safety assessment and our host Trust provided working from home 'Top Tips'.
- Liberty® call answering software - desk phone diversions enabled remote call-taking.
- Starleaf® web-based communications enabled regular and good quality team communications via video and voice calls and instant messaging.
- Replaced Autumn 2020 with Microsoft Teams® which was equally effective
- Daily and then twice weekly team video catch-ups, formal and informal group chats, appraisals / probation reviews and remote teaching sessions.
- Instant messaging has already been found to be a useful tool to support out of hours pharmacy services. Here it is used to support remote MI services.
- Access to e-Resources and MI Databank®
- MI service accessibility and delivery was not adversely affected.
- Waiting times were reduced and have remained low even as we return in 2021 to call numbers similar to pre-COVID levels
- Time taken to answer enquiries did increase initially and has remained higher although this is in part to having new staff start in early 2021

CHALLENGES AND MITIGATIONS

Challenges	Mitigating actions
Reduced ability for adhoc peer discussion	• Good use of StarLeaf® and later Microsoft Teams® messaging and calls to discuss and request help
Lack of paper resources for all team members e.g. Maudsley	• Able to ask a MI team member to look up information • Additional hard copies ordered • RPS e-library members access • Staff returning in 2021 to office means this became easier
Social isolation of staff members	• Initially daily virtual catch-ups; twice weekly from July 2020 • StarLeaf® work groups but also a social chat group later on Microsoft Teams® • StarLeaf® and later Microsoft Teams® 'drop-in coffee/tea breaks' and evening social events • Frequency of catch-up meetings was reduced as staff became more used to remote working.
Unable to accommodate pre-registration and clinical pharmacist RDTC rotations or visits	• Signposted MI resources such as Medicines Learning Portal and MI training basics webinar • Ongoing work designing remote MI training for Pre-Registration and Early Career Pharmacists
Challenges of home living arrangements, home WiFi, and family commitments	• Flexibility around when non-MI rota work could be done
Unable to upload to MI sharer when working remotely	• Upload possible on desktop in RDTC office • Worked with COACs in August to enable uploading to MI Sharer remotely
Dependence on diverted office phones.	• Initially phone diversions had to be checked regularly in the office by a staff member. • Upgrade to Converse® phone system allows direct divert to staff mobile phone number.

CONCLUSION

Future

- Remote working has worked very well for the RDTC MI service and staff, and is to continue.
- A survey of staff concluded that most staff wanted to continue home working. There was general support for a future blended model of home and office working.
- Currently, limited numbers of staff are working in the RDTC office on two days a week to support training, supervision and general team inclusion of new staff members.
- UKMI User QA Survey feedback is to be analysed.
- Pre-registration and pharmacist MI training is to be provided remotely.

RESOURCES

1. MI Databank® Medicines Enquiry Management System. CoAcS Ltd. <http://www.midatabank.com/>
2. Liberty® Converse. Netcall. <https://www.netcall.com/>
3. StarLeaf web-based communications <https://starleaf.com/>
4. Microsoft Teams® collaboration and video conferencing www.microsoft.com

OBJECTIVES

To demonstrate that the RDTC Regional MI Service could be delivered with staff working from home; without adversely affecting the service provided and whilst supporting our staff during a challenging time.

RESULTS: PERFORMANCE INDICATORS – EFFECT ON ENQUIRY SERVICE

