

**For full functionality of the data collection tools, ensure macros are enabled.**

## Data Tab

The data tab is the area for auditors to use when entering data throughout the audit process. Data entered here is automatically summarised inside the Summary tab of the QUM indicator.

Listed below is a breakdown of the different segments found within each QUM indicator.

### Pre-audit Data collection

The pre-audit data collection section allows auditors to summarise the conditions that the audit took place. The cyan data entry fields allow for the auditor to enter in the date, hospital name, number of beds and other questions that are related to the indicator being evaluated. Data entered here will be automatically reflected in the Summary tab.

Date of audit:	
Hospital name:	
Number of adult beds in the hospital:	

Describe PDMR service available at your organisation if applicable

Who was the audited high risk population? E.g. all, inappropriate polypharmacy, falls risk, cognitive/physical impairment or other specified criteria (please describe).

View Indicator

Inclusion/Exclusion Criteria

Date of audit:	30/03/2020
Hospital name:	Alpha Hospital
Number of adult beds in the hospital:	380

### View Indicator and Inclusion/Exclusion Criteria Buttons



The 'View Indicator' button redirects to the Indicator Tab to display the description of the QUM indicator.

The 'Inclusion/Exclusion Criteria' button opens a popup to inform the criteria used to include or exclude patients throughout the audit.

Inclusion/Exclusion Criteria

Inclusion criteria:

- Patients aged 65 years and over, or other ages for HIGH risk groups as appropriate
- Patients admitted to hospital for greater than 24 hours
- Patients at HIGH risk of medication-related harm
- Patients who do not receive a hospital-based medication review

Exclusion criteria:

- Patients with length of stay less than 24 hours from time of hospital admission
- Patients cared for in the emergency department

OK

## Data Entry Table

The data entry table is where the findings from the audit are recorded. This area displays each question being asked, and the subsequent available answers directly below in grey italics.

Question	Indicator 8.5						
	1	2	2a	3	4	5	6
Patient Audit Number	Is there documentation that a hospital-based medication review (HBMR) was performed?	Is there documentation recommending or arranging a post-discharge medication review (PDMR)?	If answer to Question 3 is Yes, has the recommendation/arrangement been documented in the discharge summary/letter or other locally-approved place?	Is there a documented rationale for the PDMR recommendation provided to the primary care clinician(s) responsible for ongoing care?	Age of Patient (Years)	Ward/Team	Comments
(High Risk Patients Only)	Yes, No	Yes, No	Yes, No	Optional Question Yes, No	50-120	FreeText	FreeText
1							
2							

Each patient is recorded in each separate row.

1							
2							

Most questions have a dropdown box to help answer selection. To choose, simply select the Down arrow next to the selected cell to see the available options and select the option that applies. Some answers will prefill with "N/A" if the question does not apply according to prior responses.

Indicator 8.5		
2	2a	3
Is there documentation recommending or arranging a post-discharge medication review (PDMR)?	If answer to Question 3 is Yes, has the recommendation/arrangement been documented in the discharge summary/letter or other locally-approved place?	Is there a documented rationale for the PDMR recommendation provided to the primary care clinician(s) responsible for ongoing care?
Yes, No	Yes, No	Optional Question Yes, No
Yes		
No		

Indicator 8.5		
2	2a	3
Is there documentation recommending or arranging a post-discharge medication review (PDMR)?	If answer to Question 3 is Yes, has the recommendation/arrangement been documented in the discharge summary/letter or other locally-approved place?	Is there a documented rationale for the PDMR recommendation provided to the primary care clinician(s) responsible for ongoing care?
Yes, No	Yes, No	Optional Question Yes, No
No	N/A	N/A

## Summary Tab

Once the data is entered into the Data Tab, it will be summarised automatically in the Summary Tab. There is no need to enter raw data or amend calculations in this tab.

Audit date:	30/03/2020
Hospital name:	Alpha Hospital
Number of adult beds in the hospital:	380
Who was the audited high risk population? E.g. all, inappropriate polypharmacy, falls risk, cognitive/physical impairment or other specified criteria (please describe).	All
Describe PDMR service available at your organisation if applicable	HITH

**Note:**  
'DO NOT enter raw data or amend this summary sheet. This summary sheet automatically provides you with a summary of the results based on the raw data you have entered into the 'Data' sheet'

Total Number of Patients Audited	Criteria	Indicator 8.5: Percentage of older patients at high risk of medication-related harms with a recommendation for a post-discharge medication review, when hospital-based medication review is not performed.		
7	Number of patients	3		
	Percentage	75.0%		
Summary of each data point				
Indicator 8.5	Data point	Older patients at high risk of medication-related harms who received a hospital based medication review (HBMR)	Older patients at high risk of medication-related harms with a recommendation for a post-discharge medication review	Older patients at high risk of medication-related harms who had neither HBMR completed or PDMR recommendation/arrangement
	Absolute number	3	5	5
	Percentage of total audits	42.9%	71.4%	71.4%
Age data (years)	Average age	Youngest age	Oldest age	
	74	51	100	