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| Board | |
| Practice | |

Please circle response as appropriate

| Month and comments | Patient | Has the Immediate Discharge Document (IDD) been workflowed on the day of receipt? | | Has medicines reconciliation occurred within 2 working days of the Immediate Discharge Document being workflowed to the GP or Pharmacist? | | Is it documented that any changes to the medication have been acted upon? | | | Is it documented that any changes to the medications have been discussed with the patient or their representative within 7 days of receipt? | | |
|--------------------|---------|---|---|---|---|---|---|-----|---|---|-----|
| | | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 1 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| Comments | 2 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 3 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 4 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 5 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 6 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 7 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 8 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 9 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 10 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 11 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 12 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 13 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 14 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 15 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 16 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 17 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 18 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 19 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |
| | 20 | Y | N | Y | N | Y | N | N/A | Y | N | N/A |