**Purpose:**
During the 2020 COVID-19 pandemic, community pharmacies have been faced with several logistical barriers placing additional strain on the provision of safe dispensing. This research project focuses on patients with dosage administration aids ‘DAA’s’ and aims to assess how the transition of care from hospital to community pharmacy has been affected by the COVID pandemic.

**Method:**
Over a 3 month period, 55 discharges involving DAA’s were analysed. Pharmacists recorded patient demographics and supply related issues that impacted on continuity of care. Parameters that were recorded included delays of adjustment of DAA’s and the outcomes that occurred as a result of these delays.

**Results:**
This study identified delays in adjustment to DAA’s in 24% of patients. The average patient age was 70.5 years, highlighting the elderly prevalence of population requiring DAA. Of the 24% of patients who experienced medication adjustment delays, the following consequences occurred:
- increased length of stay in hospital (15%)
- needing to provide small quantities of medications for patients to take outside of their DAA (23%)
- relying on family members or the patient to adjust the DAA (31%)

**Conclusion:**
The pandemic has seen community pharmacies face unique pressures which have follow on implications in the transition of care. Delays in medication adjustment result in increased length of stay in hospital and greater risk of medication misadventure. Adjustments to medications regimens in a vulnerable population can compromise transition of care. Possibilities to improve medication safety include:
- identifying and prioritising discharge planning of elderly patients with DAA’s
- improving communication between multidisciplinary teams
- expanding of current hospital pharmacy services to enable on site adjustment of DAA’s