



SPSP Medicines

Prepared by: NHS Dumfries and Galloway



MEDICINES

Medication Reconciliation: Story so far

- *Project in Orthopaedic ward (16) half way through. Involves improving quality of Med Rec on admission and discharge. Project has two part time staff and runs to Q3 2016. Project includes measurement and improvement work*
- *Recently completed 1 year Med Rec Local Enhanced Service in 32 General Practices*
- *Data is being collected in all other wards of DGRI which indicates whether Med Rec is taking place, but does not look at quality. No improvement activity in other wards currently*



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Medication Reconciliation: Story so far – Ward 16

- *Funding applied for through Health Foundation to utilise Safer Clinical Systems methodology and some dedicated resource to augment improvement activity. Focus – trauma patients in Orthopaedic ward 16.*
- *To Sept 2015, focus has been on improvement activities to make Med Rec achievable, with small tests of change to better facilitate the process, including Kardex accessibility and trolley reorganisation*
- *Concentration on Junior doctors completing (national) Learnpro module of education.*



MEDICINES

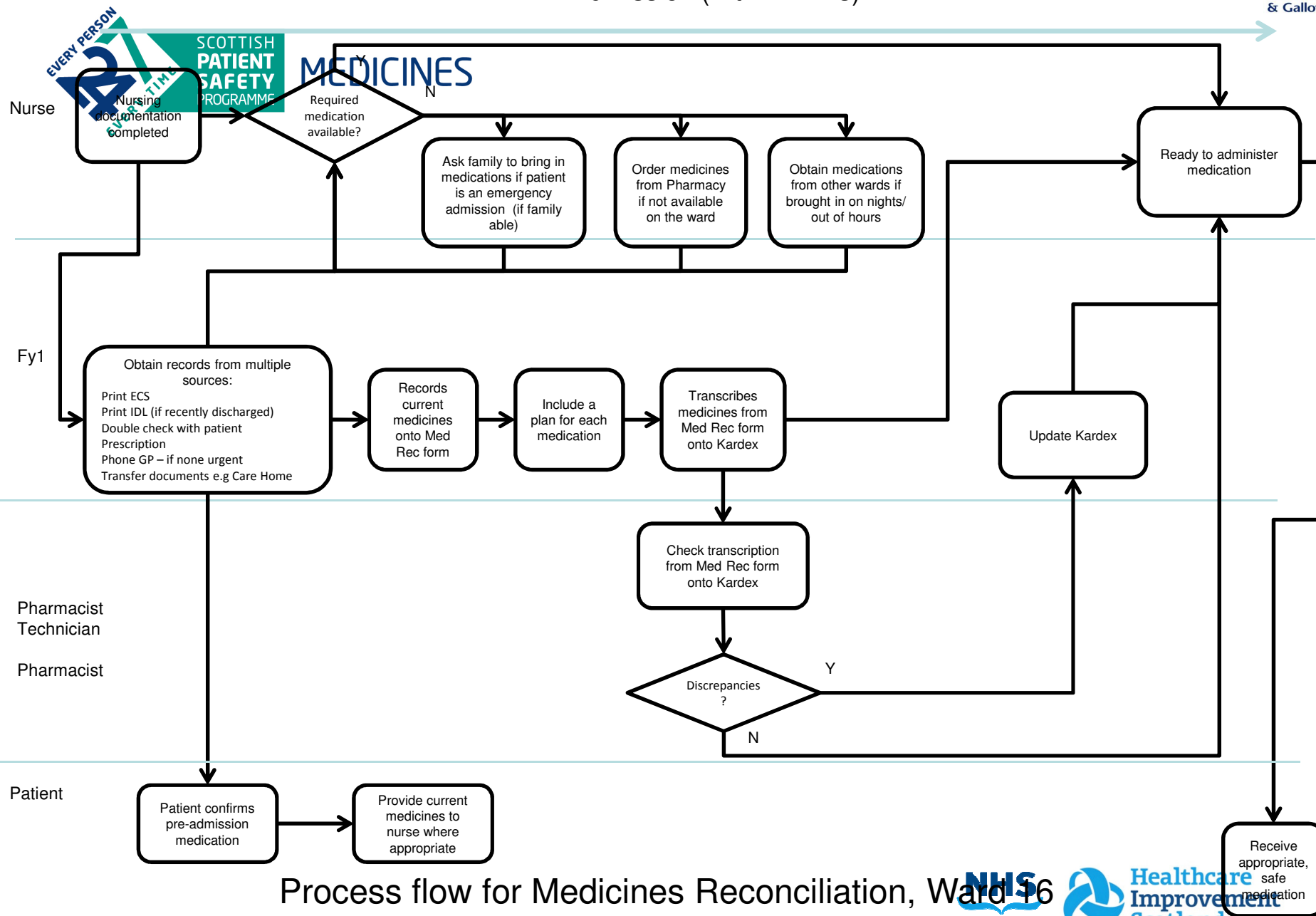
Medication Reconciliation: Story so far – Ward 16

- *Data indicates that improvement activity is generating slight improvement in some areas.*
- *However we still have continued challenges with Junior doctors using multiple sources, and completing plans.*
- *Polypharmacy reviews recently commenced in Orthopaedic ward*

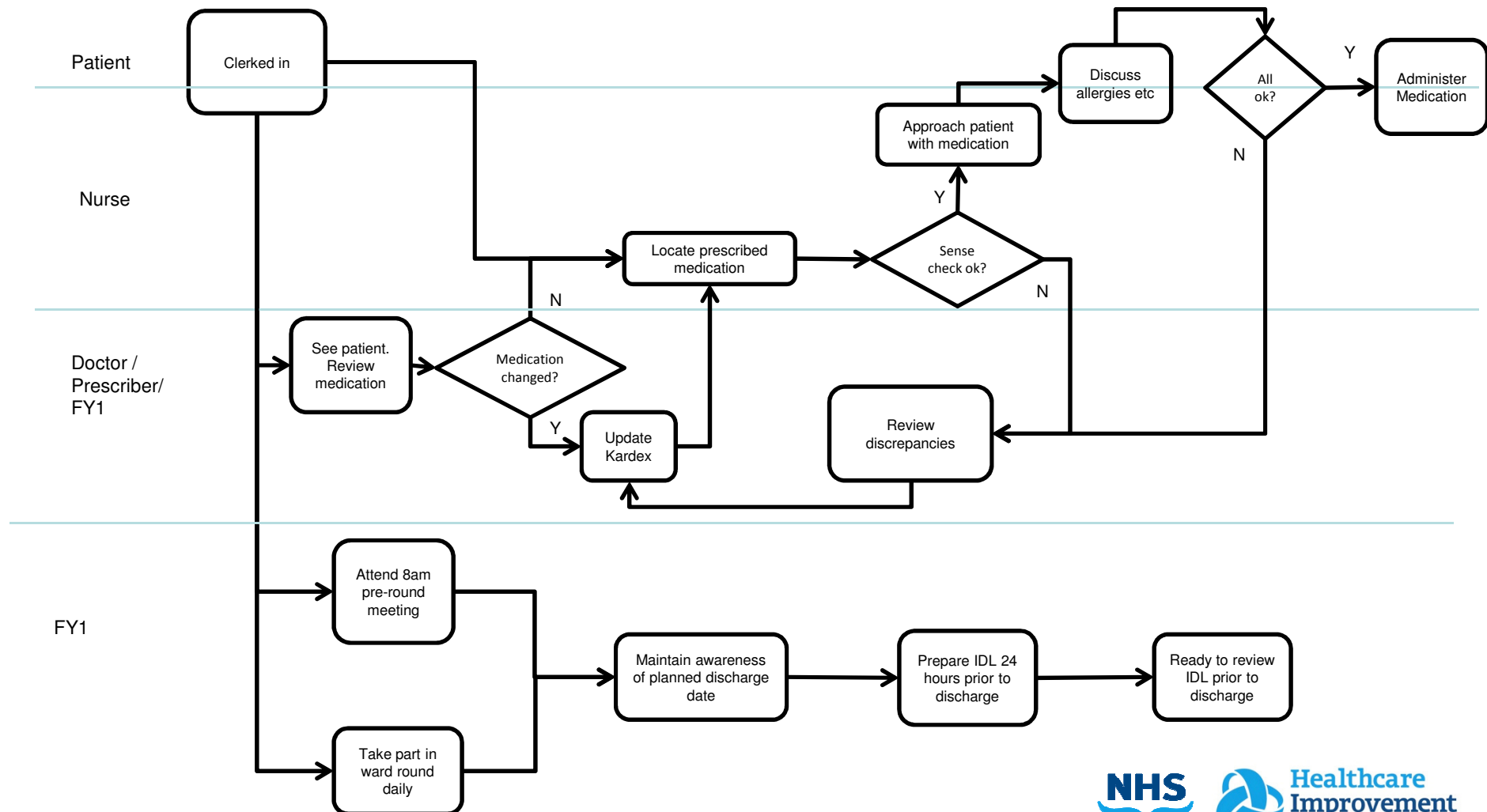
Medication Reconciliation: Story so far – Ward 16

- *Recognise that Junior Doctors hold the key to success*
 - *Multiple sources*
 - *plan*
- *Improvement activities*
- *Process map to help identify that Med Rec involves multiple disciplines*
- *Focus on making multiple sources more accessible*
- *Focus on emphasising the importance of a completed plan*
- *Focus on performance feedback to Junior doctors.*

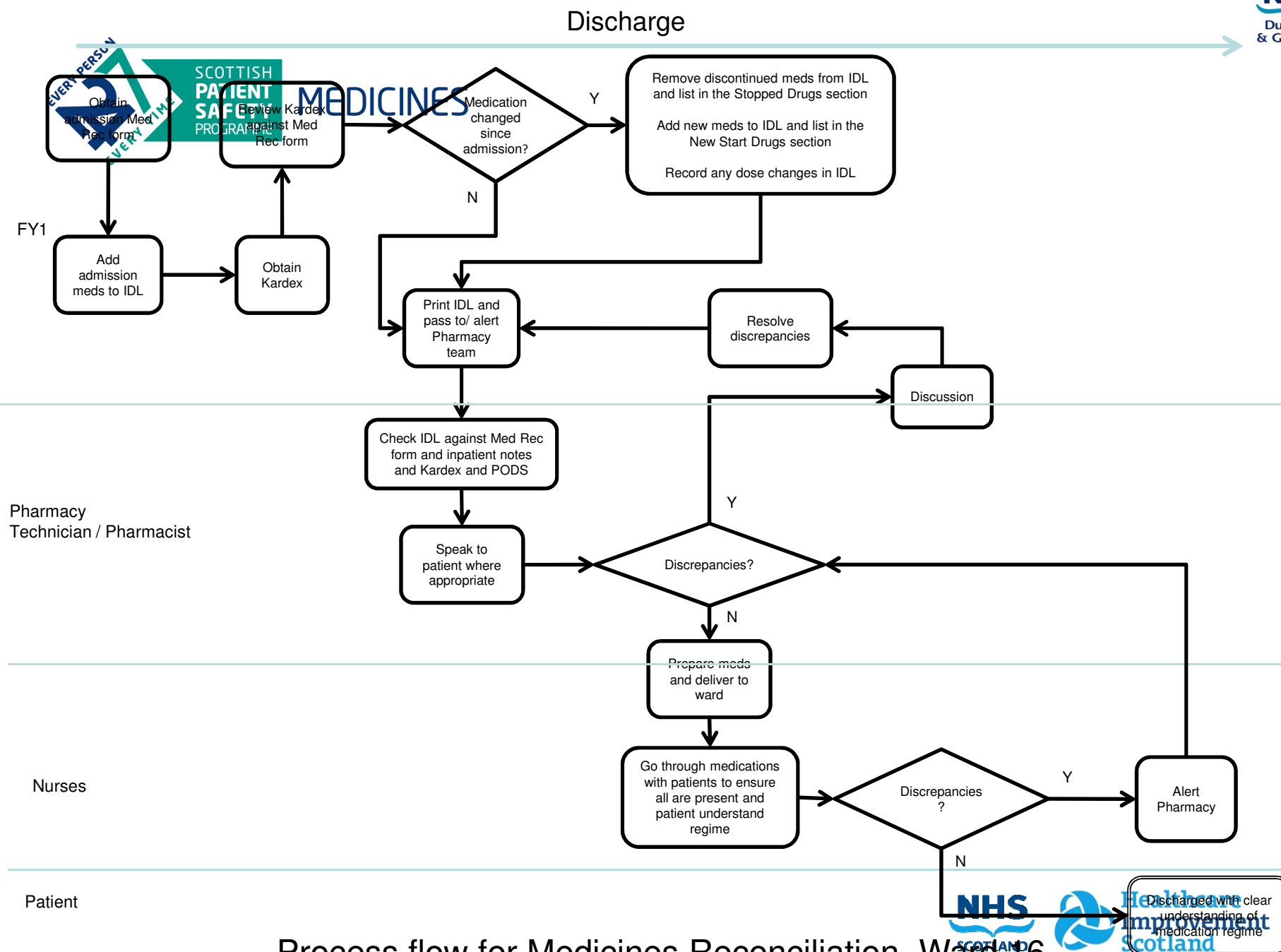
Admission (within 24hrs)



Process flow for Medicines Reconciliation, Ward 16



Process flow for Medicines Reconciliation, Ward 16



Process flow for Medicines Reconciliation, Ward 16



MEDICINES

Medication Reconciliation: Story so far – Primary care



"A Tale of the Med Rec Fairy"

Once upon a time there lived a little old man who stayed with his wife in a little town. He had a medical problem called *atral fibrirelli, atral fibbriatin, altar fubblsus* - "stoppy, starty pulse" and needed to take *War Faring* pills which were *strong!!*

One day the little old man had a fall and hit his head - *ouch!!* He had to go to the *Big Hospital*. There a young Doctor told him he had to stop taking his *War Faring* pills, and to take the nicer *Ass Sparing* pills instead. But do you remember boys and girls - the man had hit his head and as a result forgot what he had been told, and continued to take his *War Faring* pills - he had lots of them at home!!

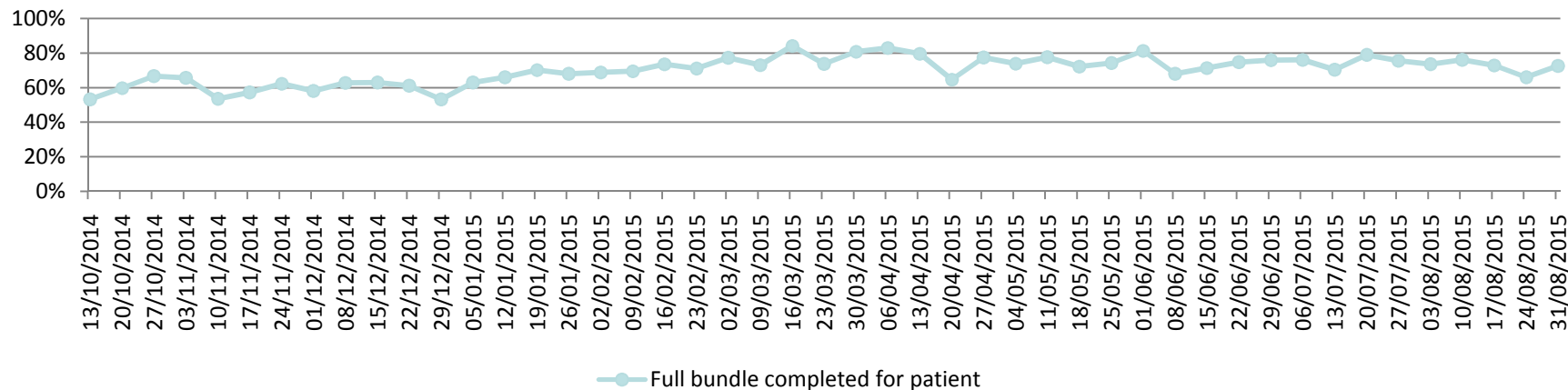
Sometime later the little old man went to see his *nice* GP and asked him why no-one came to take his blood anymore to check his *war faring* pills. The G.P. Looked at the discharge letter from the *Big Hospital* and said "*Oh s***!!*" - "Oh Dear" - you must remember boys and girls this was in the bad old days before the *Med Rec Fairy*.

Luckily for the little old man he came to no harm and is now happily at home taking his *Ass Sparing* pills. The G.P. now has a nice *Med Rec Fairy* who looks after all the pills when people who have been sick come home from the *Big Hospital*.

And now everyone is living happily ever after (with their *Managed Repeats, Blister Packs* and *Level C dispensing*).

MEDICINES

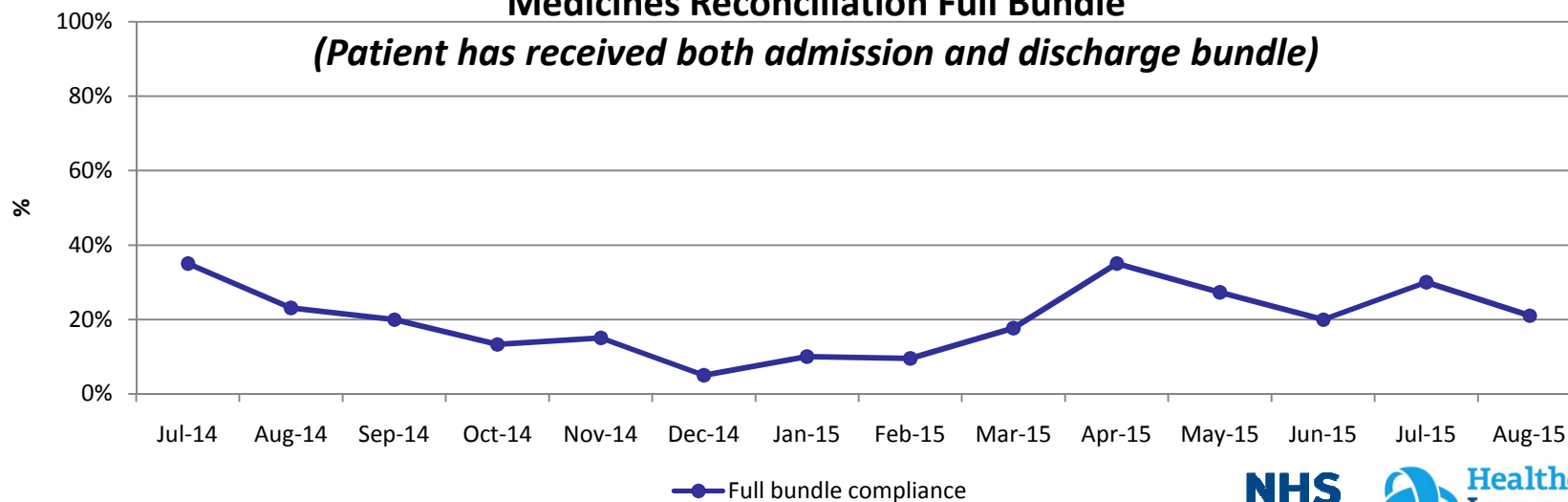
Primary Care – 32 Practices Full bundle completed for patient



NHS D&G Ward 16 Project

Medicines Reconciliation Full Bundle

(Patient has received both admission and discharge bundle)





MEDICINES

Innovation

- *DGRI has developed an electronic med rec programme which we are currently trialling on ward 16 with a view to rolling out to the rest of the hospital.*
- *Interface , fed from ECS, demographics , patient details, current medication.*
- *Avoids multiple transcriptions and therefore reduces errors*
- *Saves time and handwriting issues*
- *Can make some fields mandatory, i.e allergies.*
- *Med rec is printed and accompanies clerk in – no further interface available at present.*



MEDICINES

Successes and Challenges

- *We have eased the process of med rec by introducing small changes to reduce the time factor involved, and facilitated accessibility to remove some of the time factor excuses.*
- *Relentless high quality measurement in ward 16 alongside exploration of change opportunities.*
- *Continued challenges around engagement of all staff .*
- *Continued need to keep juniors focussed and educated by feeding back negative outcomes relating to patient care.*