SPSP Medicines

June 2016 WebEx

Reducing medicines harm across transitions
NHS Grampian

Welcome

Support the learning and sharing between boards regarding medication reconciliation as a whole system

A few WebEx etiquette points for our meeting today:

- If you are not presenting your phone is atomically on mute

- Be open to learning and sharing

- Please use the chat box to participate in the discussion during the presentation, and type in any questions you might have

- There will be time at the end of the WebEx for Q and A with the presenting board, and we will be monitoring the chat box
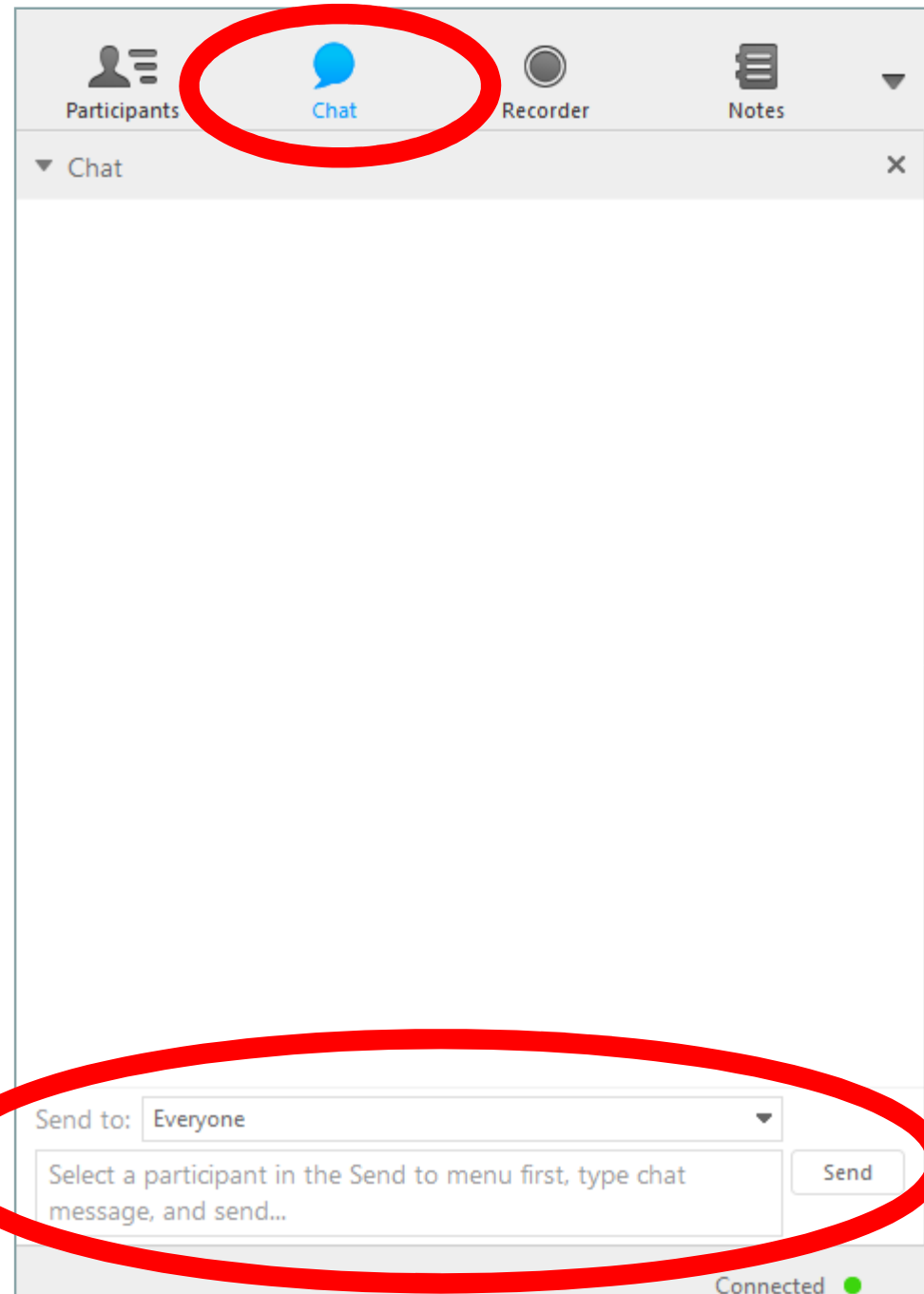
If you want to get involved in the conversation, please click on the Chat icon circled in red.

Select **Everyone** from the drop down menu, type your message then click send!

This WebEx is being recorded as a resource for SPSP teams

National Priority for Medication Reconciliation

Alister Maclaren (National Clinical Lead – Pharmacy)
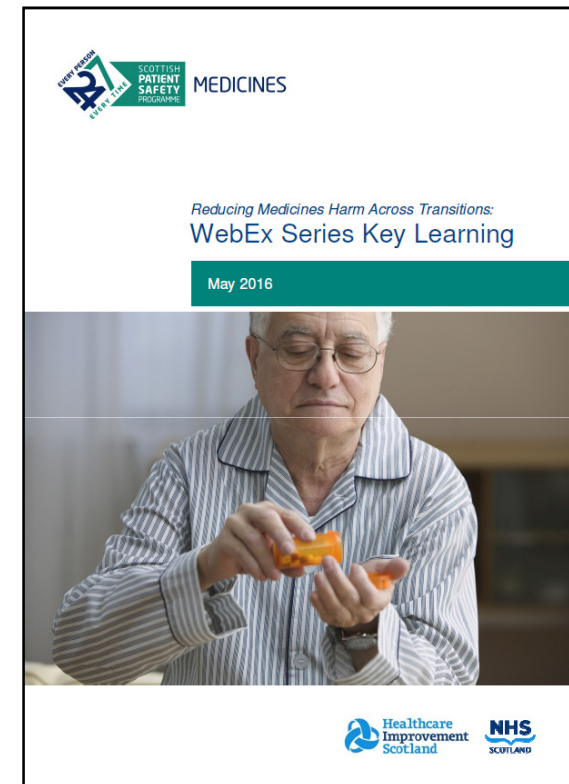
From previous 3 WebExes:

- March 15th (NHS Greater Glasgow &Clyde)
- April 19th (NHS Ayrshire & Arran)
- May 19th (NHS Fife)

National Level
Medication reconciliation is a complex clinical process
Senior medical engagement is key to success in the acute care setting
Boards are looking at ways to capture feedback across points of transition regarding the quality of information being communicated

Reducing Medicines Harm Across Transitions:
WebEx Series Key Learning

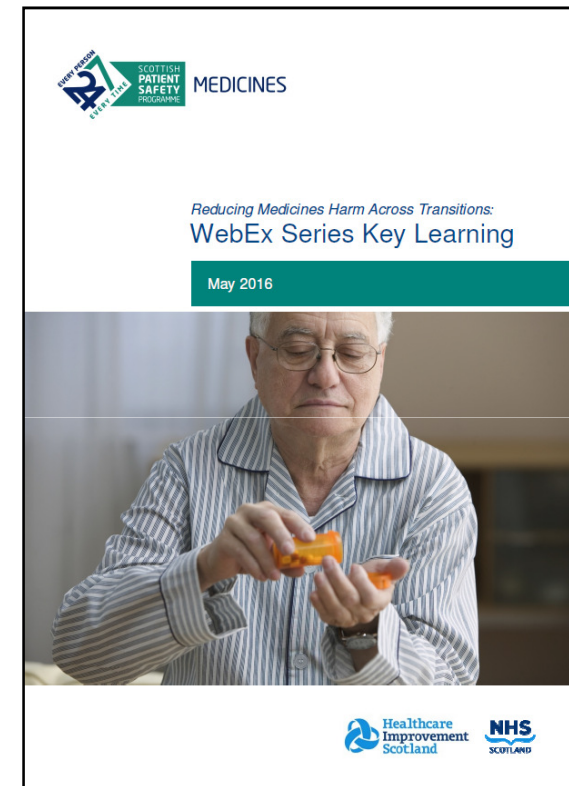May 2016

From previous 3 WebExes:

- March 15th (NHS Greater Glasgow &Clyde)
- April 19th (NHS Ayrshire & Arran)
- May 19th (NHS Fife)

NHS Fife (May 2016)

Patient questionnaires and Medication Reconciliation forms for GP Practices.

Applying for Caldicott approval for access to the Clinical Portal.

Development of post take ward rounds to improve reliability of Medication Reconciliation.

Reducing Medicines Harm Across Transitions:
WebEx Series Key Learning

May 2016

SPSP Medicines

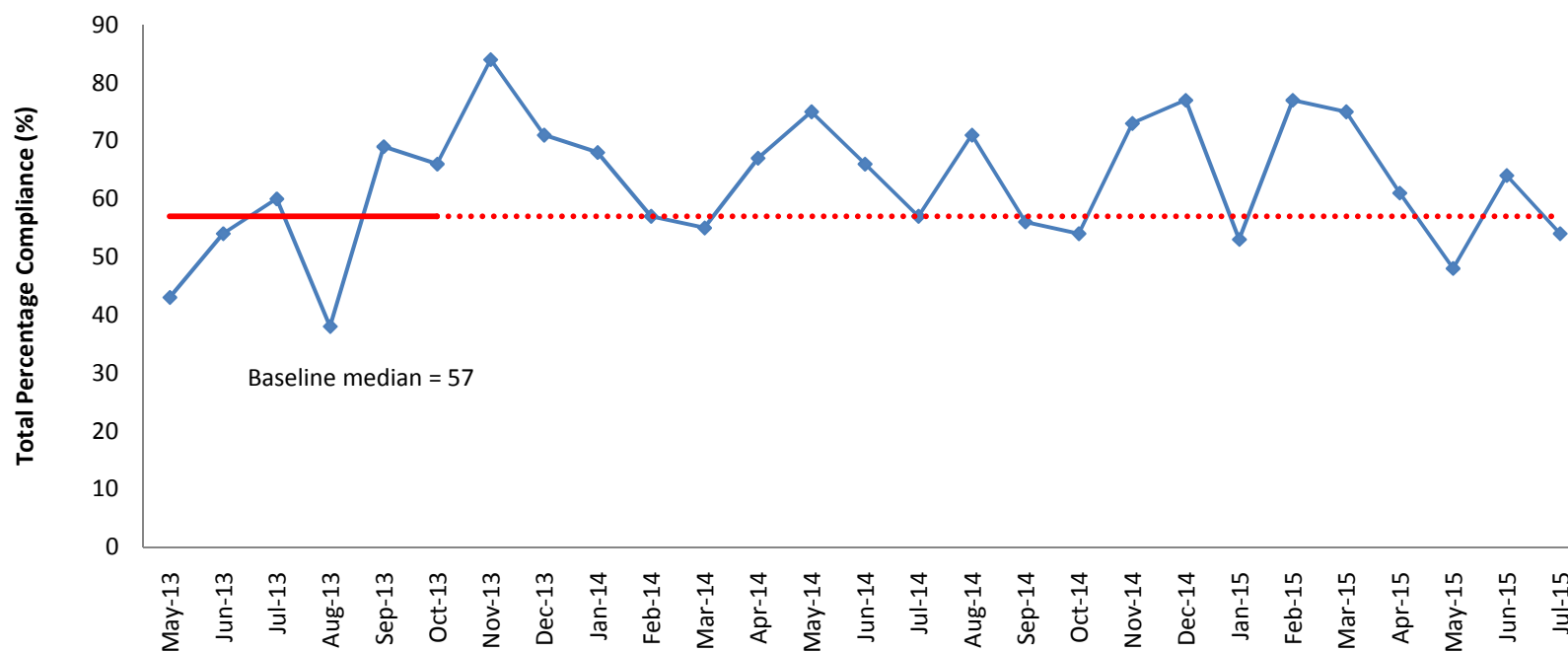Prepared by: NHS Grampian
16 June 2016

Medication Reconciliation: Story so far

- Variable

- Med Rec in Community Pharmacy

- Building QI capability

- Slow progress
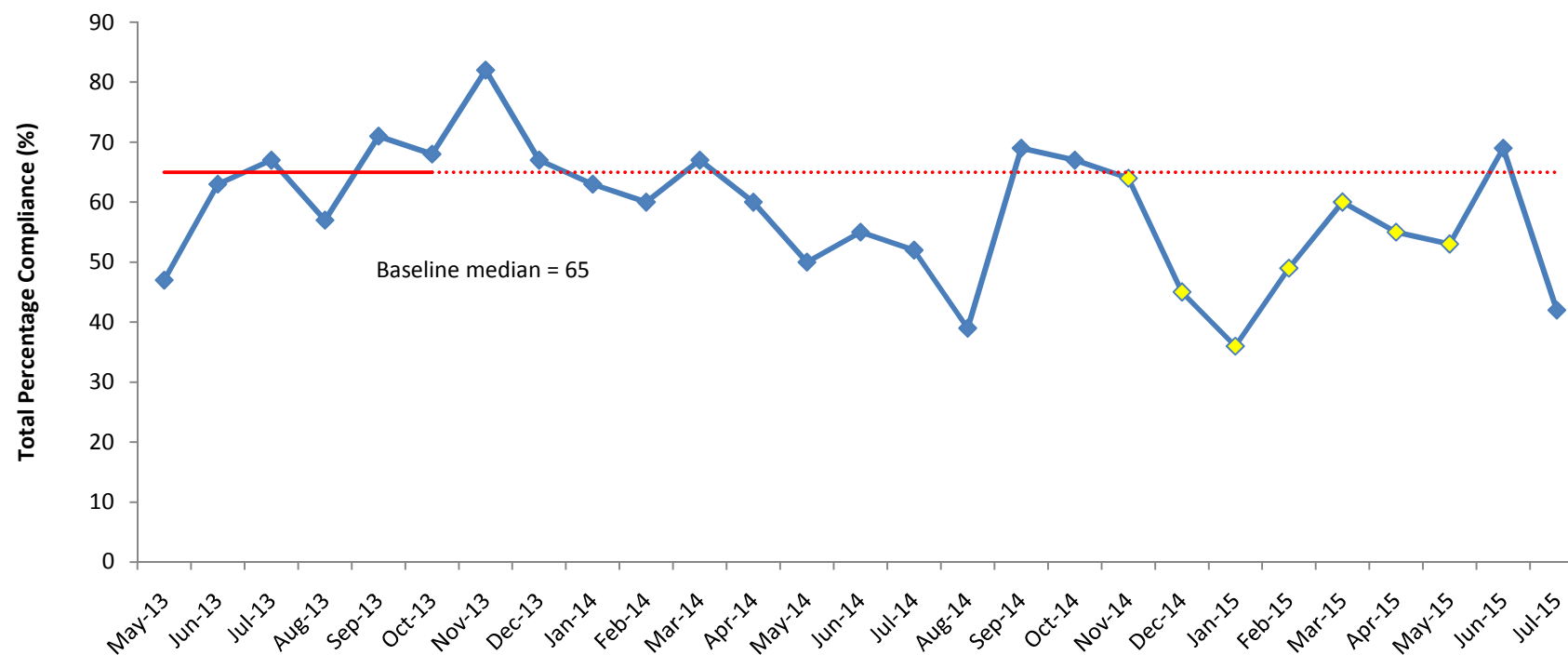
- Medication Safety is a priority

Paediatrics

Compliance with Medicines Reconciliation

Medical - Total Trend of Percentage Compliance with Medicines Reconciliation 2013/14/15

Baseline median = 57
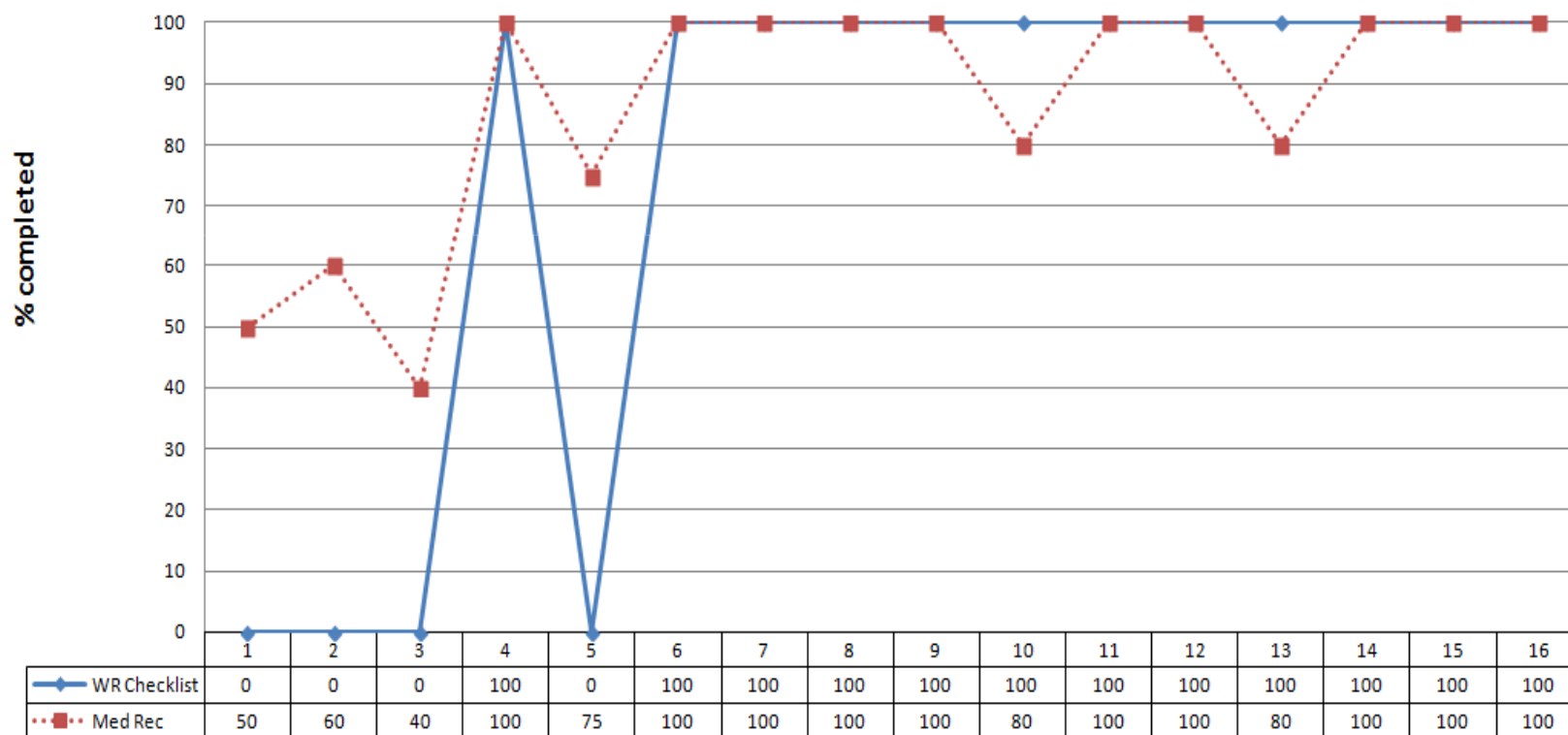
Paediatrics

- Data collection by pharmacy

- Data display in clinical areas

- Feedback to medical staff

- Zero-tolerance weeks

- Education / induction programme

- Ward round checklist...

Paediatrics

Use of Wardround Checklist vs Medicines Reconciliation compliance Ward 2

|	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
WR Checklist	0	0	0	100	0	100	100	100	100	100	100	100	100	100	100	100
Med Rec	50	60	40	100	75	100	100	100	100	80	100	100	80	100	100	100

Improvements with Paperwork

- August 2013 only medical admissions and surgical admissions had medicines reconciliation paperwork in place.

- Early 2015 there were 7 different versions of medicines reconciliation forms within acute adult.

- End of 2015 only 2 versions of the form exist
  - Booklet
  - Separate sheet

- November 2015 (of 400 patients) 86% had a form which had been completed to some degree.
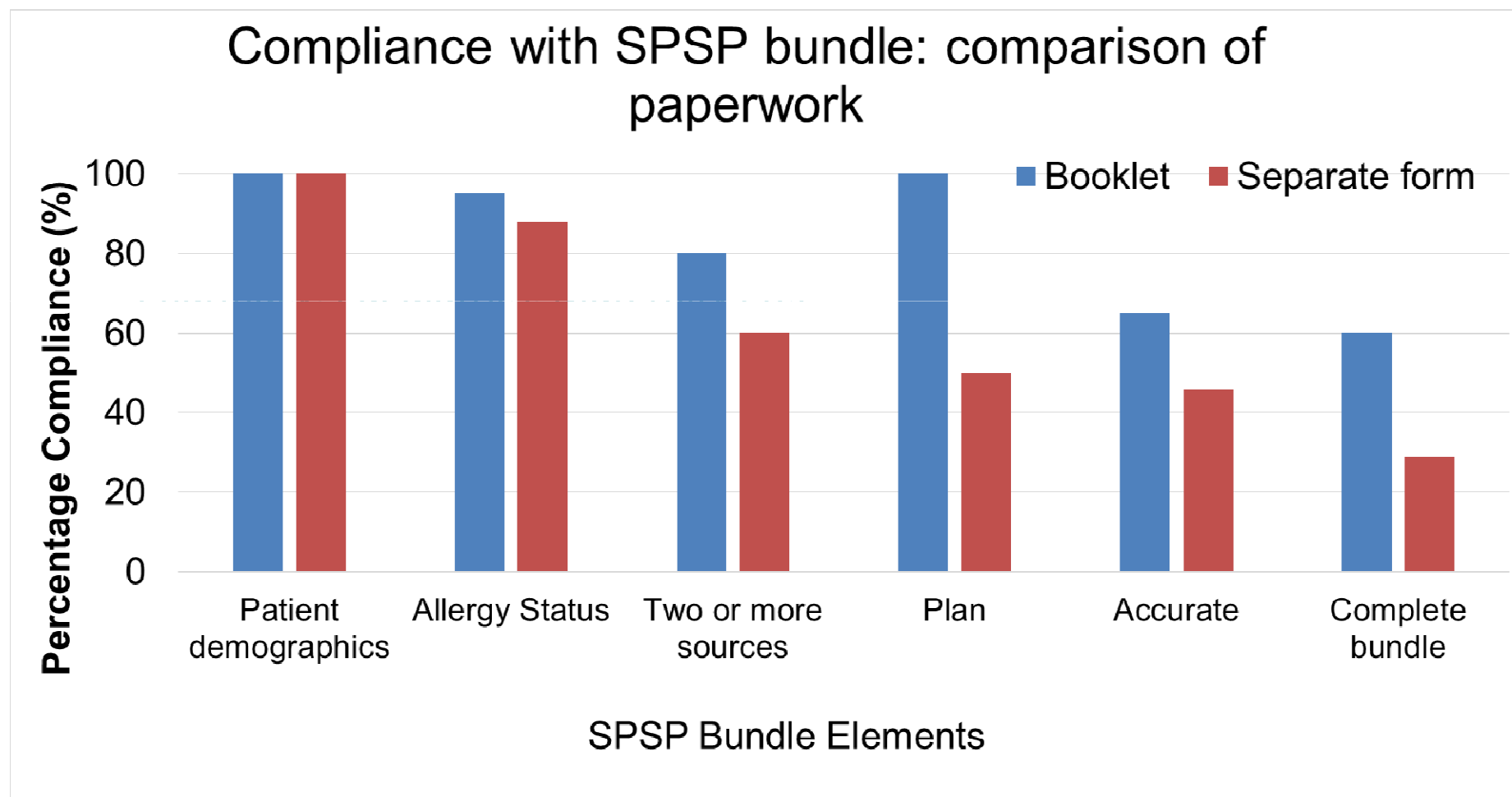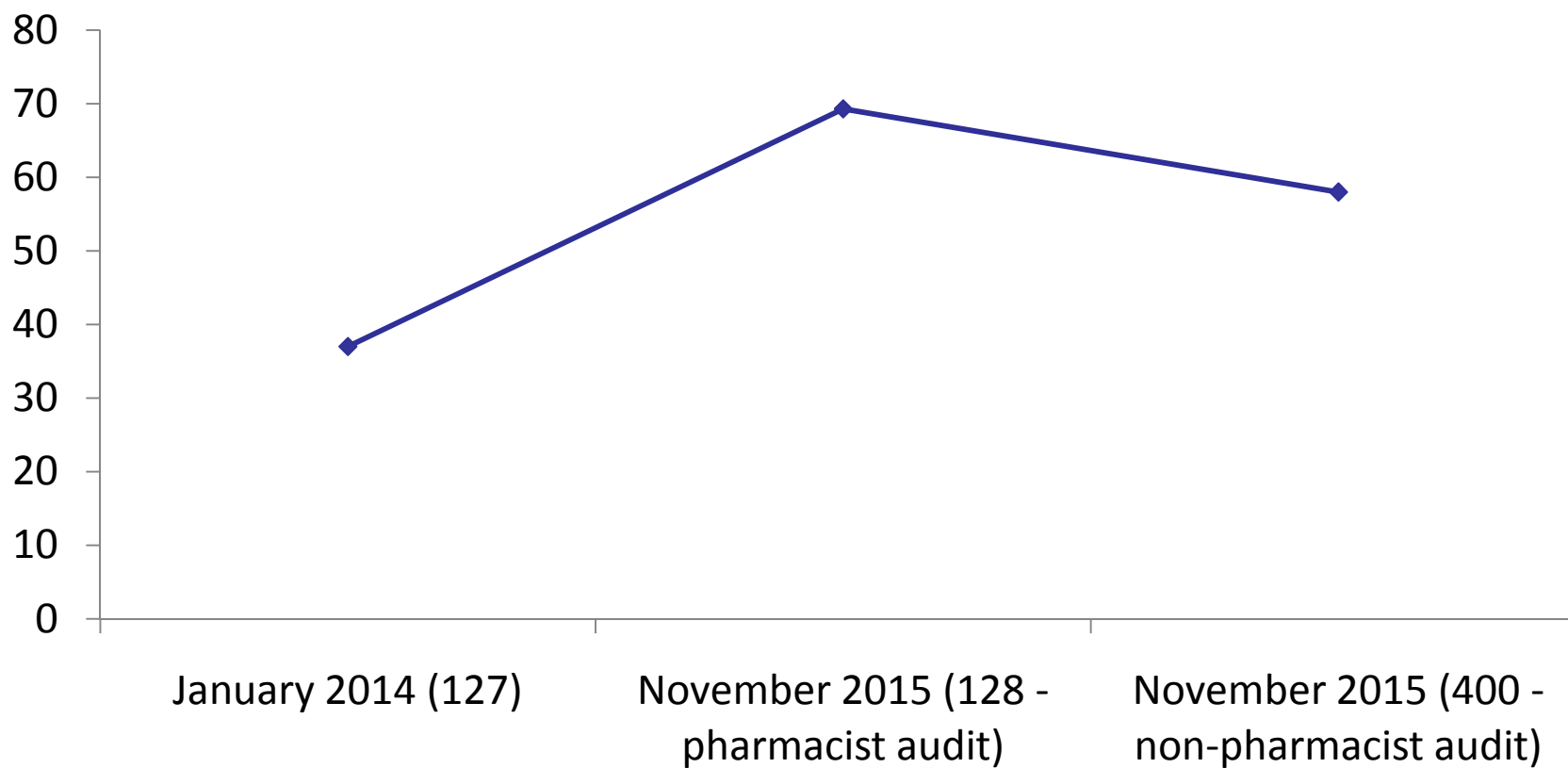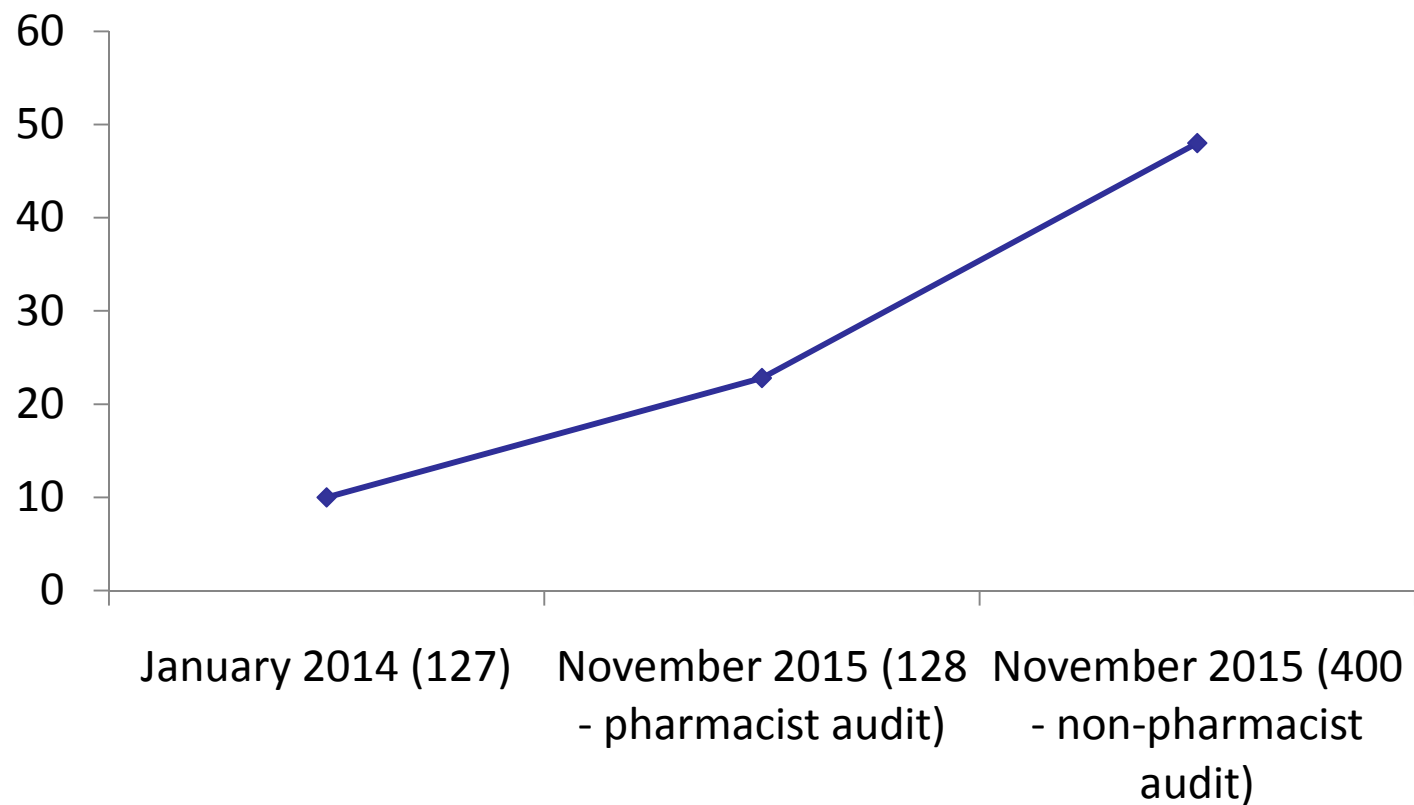
Medicines Reconciliation

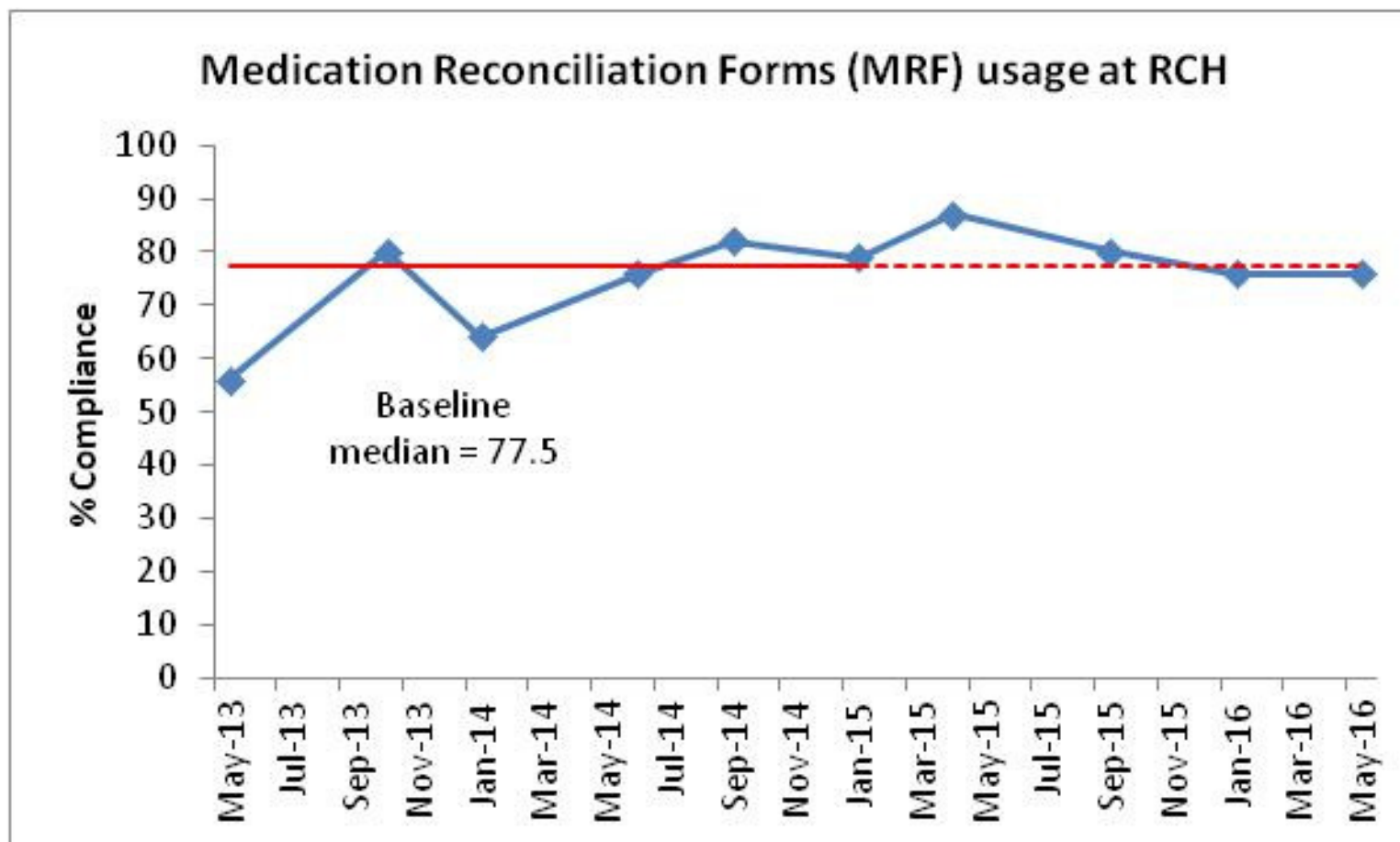| Pharmacy	enter pharmacy name
Board	enter board name

Please circle response as appropriate

Month and comments	Patient	Is there a record that the GP10 prescription has been reconciled with a minimum of two sources?		Have identified differences been discussed with the prescriber?			Have the changes been explained to the patient/carer?			Has the patient/carer been counselled on their medicines?	
	1	Y	N	Y	N	N/A	Y	N	N/A	Y	N
Comments	2	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	3	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	4	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	5	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	6	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	7	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	8	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	9	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	10	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	11	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	12	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	13	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	14	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	15	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	16	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	17	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	18	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	19	Y	N	Y	N	N/A	Y	N	N/A	Y	N
	20	Y	N	Y	N	N/A	Y	N	N/A	Y	N

Medicines Reconciliation in General Practice

% of compliance Medicines Reconciliation bundle
NHS Grampian - Aberdeenshire Primary Care (14 practices)

Baseline
median = 69
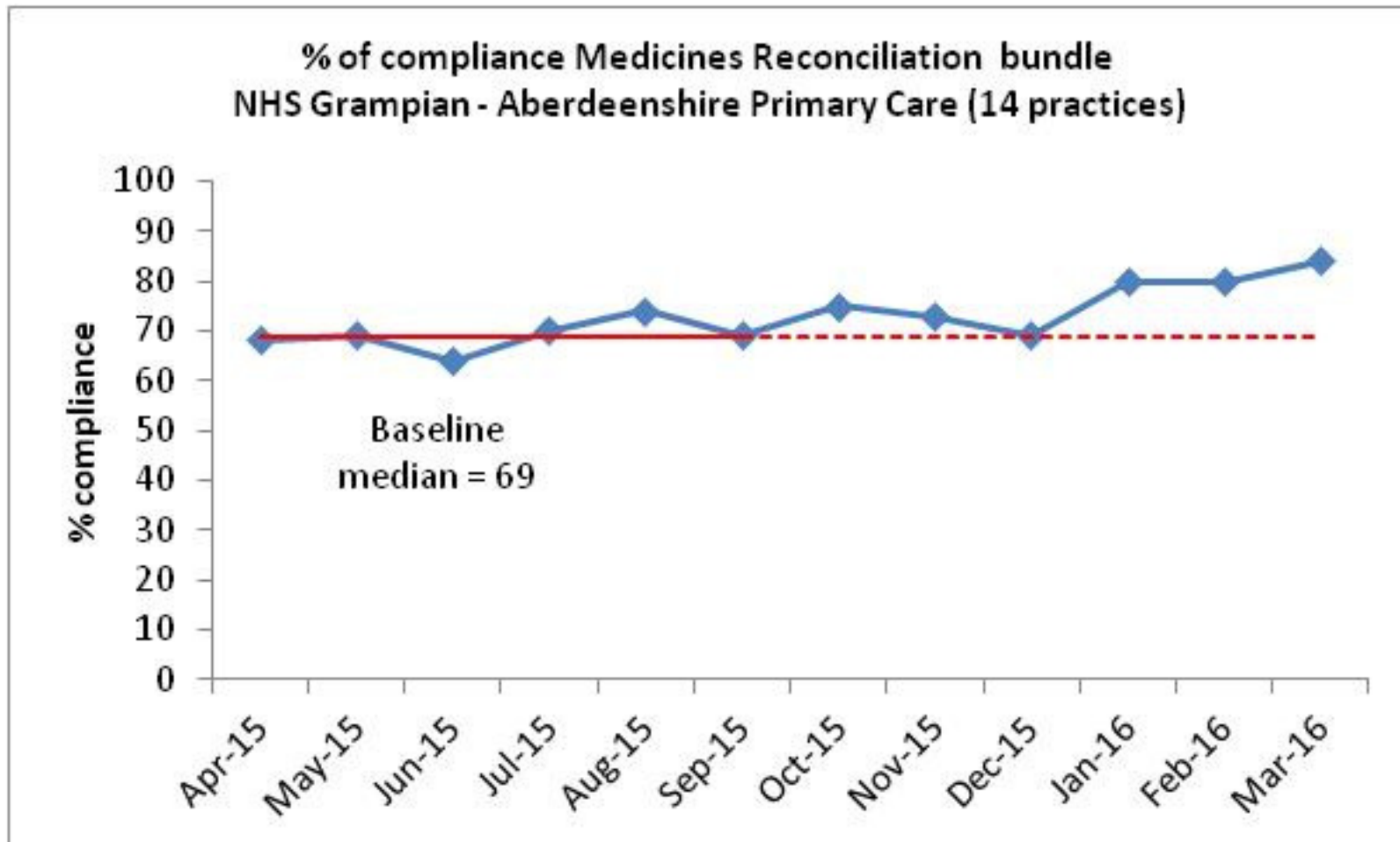
Mental Health on Admission

Mental Health Medication Reconciliation: Story so far
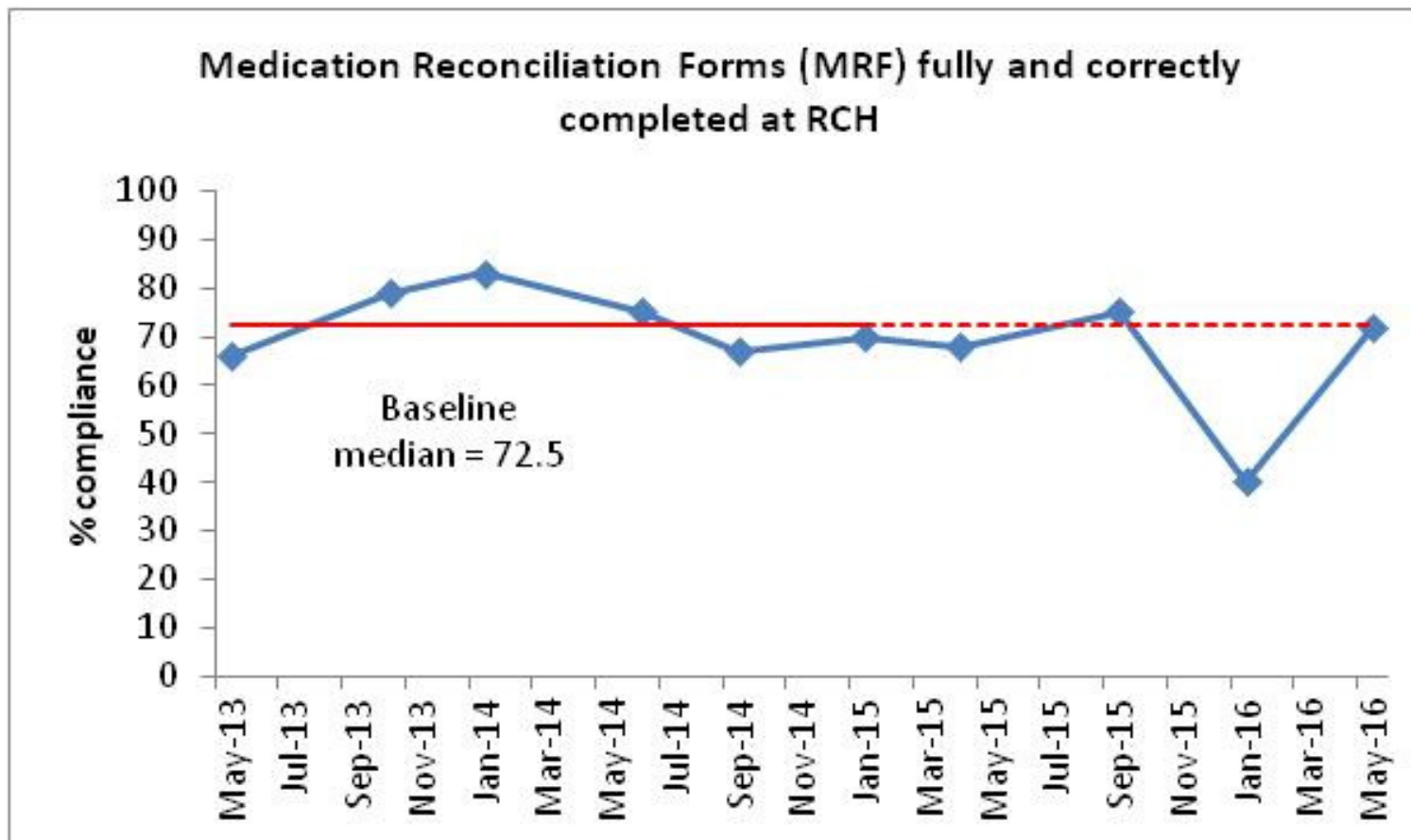
Feedback

- Prompt by pharmacist if no form completed by admitting doctor
- Medical staff- individual feedback by SBAR 6-8 weeks after starting
- Junior doctors – emailed copy of latest report (4 monthly)
- Ward Managers- printed copy of latest report
- SPSP Leadership meetings-Summary of results across medication work stream (2 monthly)

Improving feedback on junior doctors' prescribing errors : mixed-methods evaluation of a quality improvement project

Reynolds M, et al. BMJ Quality & Safety published online first [4 April 2016] as 10.1136/bmjqs-2015-004717

Successes

- Finally achieving high level engagement/ support from management team around medicines reconciliation and prescribing processes and moving forward with plans for:
  - Zero tolerance
  - Increased auditing/ feedback to prescribers at individual and service level (e.g. M&M meetings)
- Standardisation of paperwork
- Discharge letter transfer to named community pharmacy for medicines reconciliation purposes

Challenges

- Ensuring staff sign MR forms
- Getting champions/ auditing completed by non- pharmacy staff

Key Points for Sharing:

- Not an easy process – varies across organisation
- Structured Ward Rounds/ Admission Booklets
- We are making progress

- If anyone using electronic records – improving compliance?
- Anyone who has a process for sharing information across whole system?