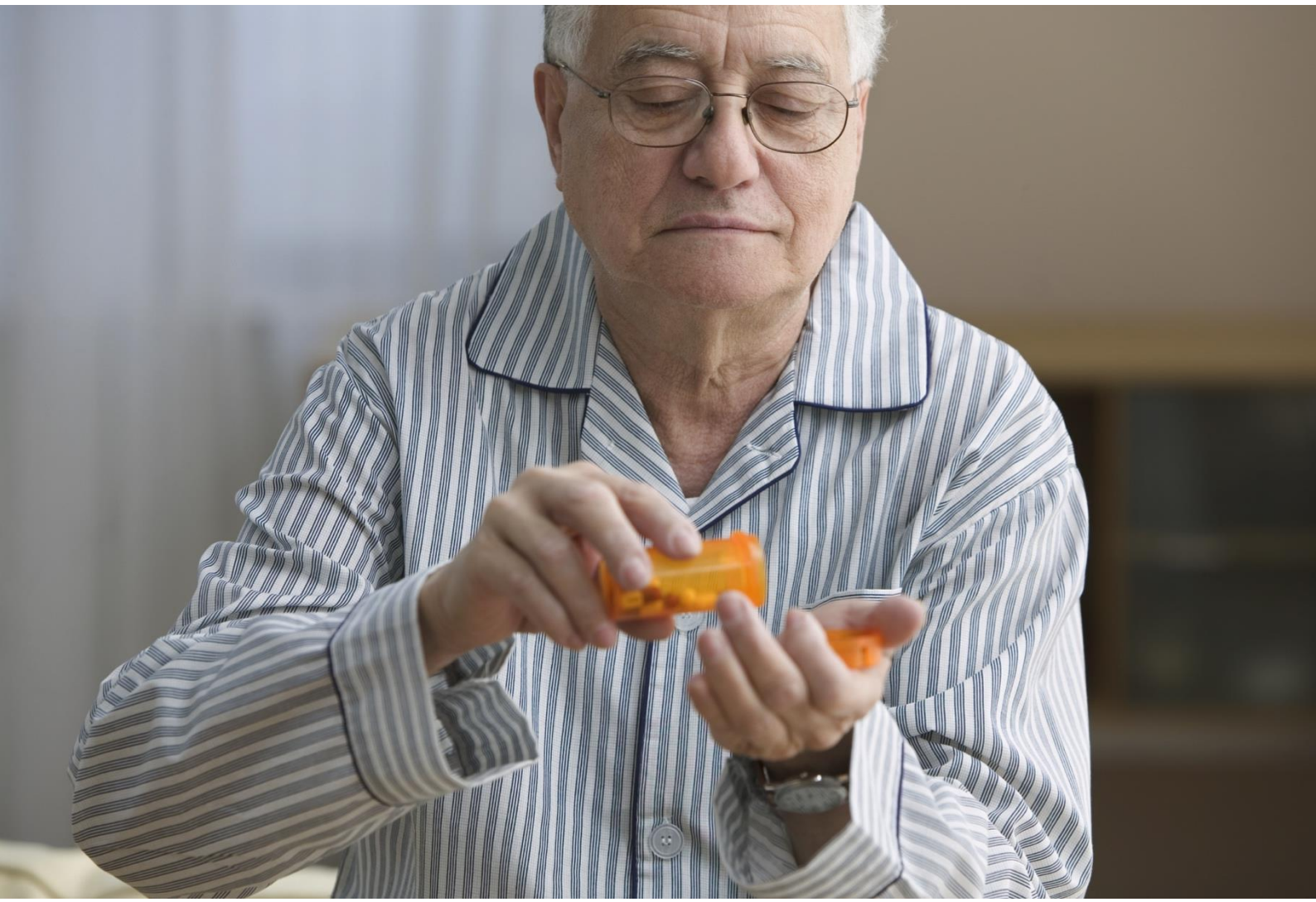
SCOTTISH PATIENT SAFETY PROGRAMME

MEDICINES

Reducing Medicines Harm Across Transitions:

WebEx Series Key Learning

February 2017



Healthcare Improvement Scotland

NHS SCOTLAND

Reducing medicines harm across transitions

The following are three key points identified during each of the WebEx that you may be interested in contacting boards to learn more about:

Board Level
NHS Dumfries and Galloway (November 2015)
The Safer Clinical Systems initiative focusing on medication reconciliation and medication reviews on an orthopaedic ward and testing of an e-medication reconciliation computer application.
Process mapping and process flow visualisation in acute care.
Medicines reconciliation in Primary care and practice feedback on quality of Initial Discharge Letters from secondary care sources.
NHS Highland (November 2015)
Processing mapping and flow charts in primary care.
Standardising common admission documents in acute care.
Developing the role of community pharmacists and dispensing GP practices in medicines reconciliation.
NHS Lothian (December 2015)
Taking a human factors approach to medication reconciliation.
Processing mapping in primary care.
Using a failure modes and effects analysis and cause and effects diagrams to support improvements.
NHS Tayside (December 2015)
Applying the Vincent framework, measuring and monitoring safety, to medication reconciliation in mental health services.
Testing and improving medication reconciliation at discharge from surgical wards.
The role of the Scottish Ambulance Service as part of the whole system supporting medication reconciliation.

Board Level
NHS Greater Glasgow & Clyde (March 2016)
The value and importance of an oversight group and links to Area Drug and Therapeutics Committee to support improvement activity to reduce medicines harm across transitions.
Use of electronic applications to support medication reconciliation and reduce transcription.
Exploring access to medicines information via clinical portal for community pharmacy services.
NHS Ayrshire and Arran (April 2016)
The impact of HEPMA on medication reconciliation at discharge.
Considering service change to focus on medication reconciliation.
Learning from significant/adverse events to reduce medicines harm across transitions.
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.
NHS Grampian (June 2016)
Development of structured ward rounds and admission booklets are increasing compliance
NHS Grampian is at various stages of medication reconciliation improvement across the whole system
Would be keen to hear about Boards who are using electronic records
NHS Forth Valley (July 2016)
Understanding the value of involving community pharmacy in medicines reconciliation.
Gaining the engagement and support of leads (whether medical or nursing) is key.
Experience of implementing HEPMA.

Board Level
NHS Borders (August 2016)
Nurse led medicines reconciliation
Senior clinical engagement
Our medicines reconciliation project in primary care
NHS Lanarkshire (September 2016)
Using pharmacy view to improve medicines reconciliation at transitions of care
Engaging patients in the medicines reconciliation process
Prototyping – reducing harm from insulin as a high risk medicine
NHS Island Boards (October 2016)
Difficulties of engaging locum doctors in medicines reconciliation process
Communication between secondary and primary care
Integrated team working
NHS Highland (November 2016)
Medicines reconciliation process in community pharmacy
My Medicines wallets
NHS Lothian (December 2016)
Working with TRAK IDL templates
Developing Medicines Management Plans to improve the documentation and communication of medicine related issues across transitions.
Analysing and understanding your systems, and asking the question 'How can we make it safe?'
NHS Dumfries & Galloway (January 2017)
Meds rec on discharge: FY1 and ward pharmacist process with electronic discharge letter
Clinical ward pharmacy team on AMU 7/7 since Dec 2016
electronic Medicine Reconciliation

Board Level
NHS Tayside (February 2017)
Testing, spread and implementation of the Insulin Prescription and Administration Record (IPAR) and Paediatric IPAR (PIPAR) across Tayside
Medication Reconciliation – testing and spread of the green sticker to support discharge
The benefits of working across the system in particular the joint wok between the SAS and Acute admissions unit – information shared at handover

For more information about the SPSP Medicines programme please email: spsp-medicines.hcis@nhs.net.

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