

Medicines Management Strategy 2015-2018

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- It is the responsibility of Users to ensure that you are using the most up to date document i.e. obtained via the Intranet.
- In developing/reviewing this Policy Provide has had regard to the principles of the NHS Constitution.

Version Control Sheet

Version	Date	Author	Status	Comment
V1	May 2015	Nisha Desai		Noted at Q&S

In completing the table above, the Author should ensure they provide details of any changes including; legal; statutory; procedural; human resources; financial; formatting and details of changes to appendices. Authors should stat if the review of the Policy was a partial or full review.

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1. Introduction

Medicines are the most commonly used therapeutic intervention. Medicines management encompasses the entire way that medicines are selected, procured, delivered, prescribed, administered and reviewed, to optimise the contribution that medicines make to producing informed and improved outcomes for patient care whilst minimising patient harm.

Effective Medicines Management input can ensure that these processes are conducted in a cost effective manner, in line with current legislation and deliver on national agendas e.g. medicines optimisation, antimicrobial stewardship.

When used effectively, medicines make an enormous contribution to patient's health and well-being. However, there are risks associated with medicines usage within organisations, medicines safety and governance should therefore be integral to all services using medicines.

Provide is committed to the strategic development of medicines management to improve patient access to medicines within a safe and controlled environment and understands the importance of Pharmacy and Medicines Management systems and how these are fundamental to the delivery of exemplary community services.

The service will respond in a manner that is considered, coordinated and effective to ensure all Provide services can continue to meet their responsibilities whilst maintaining performance targets and improved patient outcomes in relation to medicines. This delivery will depend on the capacity of the team and other support services e.g. IT.

This strategy covers the period March 2015 to March 2018 describing the high level framework for the delivery of pharmacy and medicines management services across Provide and prioritises the key themes for development of the medicines management service over the next 3 years.

2. Scope

This strategy will provide assurance to the Board of continuous improvements in medicines safety, quality of prescribing, cost effective procurement, reduction in medicines waste and outcomes for patients.

3. Aims

- To deliver on national and key local drivers in relation to medicines management.
- To optimise the cost effective use of medicines and reduce waste
- To deliver high quality and safe medicines management processes
- To enhance the patient experience through medicines optimisation

- To ensure delivery of learning outcomes arising from medicines related incidents and trends
- Support admission avoidance by optimising medicines use
- To support the antimicrobial stewardship programme
- To raise awareness of the importance of the Accountable Officer for Controlled Drugs, The Medication Safety Officer and Medical Device Officer roles within the organisation.

4. Medicines Management and Medicines Optimisation

Medicines safety; by use of the medication safety officer and medical device officer to:-

- improve reporting of incidents
- quality of reports
- create an environment to continuously act, identify and learn from incidents across Provide services
- deliver training sessions on medication safety to raise awareness of quality reporting, identifying key learnings, reflect on incidents, engage staff and create an environment to aid learning.

This will help us to achieve improved outcomes and experience for our patients and support an improvement in quality of services provided by identifying and facilitating identified learning to reduce patient harm.

Service user experience; involving patients in the design and delivery of medicines management services and understanding the patients perspective in relation to the impact of medicines incidents on the patient journey; this will ensure organisational understanding from a patients point of view and enhance learning.

Collaborative working across the organisation and with external organisations where this is beneficial to patient care e.g. Development of Accredited Insulin training to meet organisational needs.

Support the QIPP agenda by ensuring cost effective and timely procurement including innovation in the supply of medicines to reduce waste, access and supply of medicines which complies with legislation and to meet patient needs and expectations.

Pharmacy technician led Medicines reconciliation on community hospital inpatient units to support medicines optimisation and reduce patient safety incidents

Management of procurement contracts and quarterly reviews to ensure these contracts meet the needs of the services and therefore service users and are cost effective.

Medicines governance and assurance framework to meet the CQC Medicines Management Outcome and legislative requirements; including the duties of the Controlled Drugs Accountable Officer.

Support and contribute to the dissemination and adherence to NICE guidance. (The Head of Medicines Management supports the NICE Associates to disseminate NICE guidance to all community services within NHS Midlands and East).

Support the Antimicrobial Stewardship programme in collaboration with the Infection Prevention team to ensure prescribing of safe, cost effective and appropriate antibiotics and manage any divergence in formulary pragmatically.

Support the delivery of the Non-Medical Prescribing Strategy to meet local identified need.

Develop a yearly medicines management audit programme for Provide services

Identify medicines management/pharmacy requirements for new services or as part of a service redesign

5. Medication Safety and Learning from Incidents

Lead on the implementation of patient safety alerts in relation to medicines and national directives in a timely manner.

Raise awareness of incident reporting and deliver training on medication safety to create a culture for reporting; this will be measured by an increase in reporting and data quality.

Use the Medication Safety Group to identify key learnings and include patient experiences from the patient representatives to support learning and understanding from a patients perspective. Synergistic working with the Harm Free Care Group will support the delivery of identified themes and learnings across the organisation.

Fulfil the responsibilities of the Medication Safety Officer and Medical Device Officer and support a culture of improved reporting and learning from incidents.

Raise awareness and improve the quality of data reported via datix to ensure maximal learning opportunities are identified.

Implement the medication safety thermometer across the organisation to support the patient safety agenda

6. Antimicrobial Stewardship

Work in partnership with Infection Prevention to support antimicrobial stewardship and promote and monitor the judicious use of antimicrobials

Ensure safe systems and processes for effective antimicrobial prescribing and use.

Monitor and evaluate antimicrobial prescribing in both inpatient and community settings

Develop training to raise awareness of antimicrobial stewardship and resistance.

Identify patient safety incident trends and outline key learnings from these to improve learning

7. Improve access to medicines

Implementation of the Non-Medical Prescribing strategy will further improve access to medicines in community services and community hospitals.

Ensure medicines are available via Patient Group Directions (PGD) and staff using these, are appropriately trained and competent.

Quarterly EPACT monitoring of NMP activity to ensure this is in line with Scopes of Practice and safe.

Innovative and cost effective procurement solutions to ensure patients can access the right medicines at the right time and to enable the timely delivery of seasonal contracts.

Optimise medicines use and reduce waste by supporting all community services to ensure appropriate use of medicines in relation to usage, stock control and wastage.

Monitor formulary compliance and challenge diversions to ensure safe and appropriate prescribing.

8. Quality, Innovation, Productivity and Prevention (QIPP)

Identify and support the delivery of proficiencies in medicines management to improve quality and efficiency to improve patient outcomes.

Optimise the use of medicines by supporting hospital admission avoidance and reducing length of stay where appropriate by avoiding delays in the supply of medicines for discharge.

Drive innovation in procurement, medicines use, ordering and storage to reduce waste wherever possible.

Continue to use ONPOS to manage wound dressings and reduce costs wherever possible by effective management of stock.

Utilise available resources to optimise prescribing quality, reduce waste and optimise the use of medicines

Effective implementation of the Pharmaceutical Care Plan in all inpatient wards to optimise medicines use and reduce waste wherever possible.

9. Training and Development

Deliver a planned comprehensive programme of medicines training across the organisation. To include:

- Medicines management and assurance
- Patient Group Directions
- Non-Medical Prescribing
- Medication Safety
- Controlled Drugs
- Insulin
- Induction

10. Auditing

Deliver a planned programme of yearly audits to include:

Audit	When	By Who	
Delayed and omitted dose	Monthly	Jayne Lucas	
Antibiotic Audit	Monthly	Alicia Reglero	
EPACT for non-medical prescribers	Quarterly	Jayne Lucas	
Controlled Drugs	Quarterly	Jayne Lucas/Nisha Desai	
PGD	Annual	Self-Audit	
Medicines Management Assurance	Annual	Jayne Lucas/Service Lead	

Deliver an agreed yearly audit programme in addition to the above (See Appendix 1)

11. Conclusion

This strategy will enable us to continue to drive quality improvement and ensure that we can deliver on ongoing challenges in relation to medicines optimisation and

medicines safety. The delivery of this strategy will ensure we can procure and supply cost effective medicines and reduce waste wherever possible.

Appendices

Appendix 1: Audit Programme

Year 1: 2015-16

Audit	Lead	Where	By When	Report to MMC		
Injectable Medicines Audit	Alicia Reglero Jayne Lucas	Community Hospital Wards	Sept 2015	Oct 2015		
Medicines Management Audit	Jayne Lucas	Respiratory Services Podiatry Services Physiotherapy Services	Jan 2016	Feb 2016		
Medication Safety-Data Quality	Nisha Desai		Sept 2015	Oct 2015		

Year 2: 2016-17

Audit	Lead	Where	By When	Report to MMC		
Injectable Medicines Audit		Community Hospital Wards				
Medicines Management Audit		Respiratory Services Podiatry Services Physiotherapy Services				

Year 3: 2017-18

Audit	Lead	Where	By When	Report to MMC		
Injectable Medicines Audit		Community Hospital Wards				
Medicines Management Audit		Respiratory Services Podiatry Services Physiotherapy Services				

