

STANDARD 7.0 SUPPLY OF MEDICINES

Medicines are supplied, distributed, stored and if necessary disposed of in a legal, safe and timely way.

7.1 DISPENSING

Medicines are dispensed or prepared accurately, available when needed and clinically appropriate.

North Bristol NHS Trust

Discharge medication is processed at ward level with the use of a mobile dispensing trolley. A Medicines Management Pharmacy Technician will process clinically screened discharge letters, using facilities available on the mobile discharge trolley. The trolley is a lockable unit which contains a laptop computer, pharmacy label printer, commonly used medication to suit the ward specialty and all dispensing items such as boxes / bottles / bags. Once dispensed, all discharge prescriptions are checked at ward level by a designated member of the pharmacy team. All discharge prescriptions completed via the mobile unit are logged onto the pharmacy system and the monthly data processed to provide a KPI of activity and impact of the service.

North Bristol NHS Trust

The dispensary supports the re-use of patients' own drugs (PODs) whilst dispensing for discharge. All clinically screened discharge prescriptions are POD screened by a pharmacy technician to check for suitability and re-use. Unsuitable items are separated and returned to the ward in a specific green POD bag with a label attached to explain the reason for not reusing them. As PODs are the legal property of the patient, the discharging nurse needs to gain patient consent, on behalf of the Trust, to destroy items no longer required. The pharmacy department is currently taking legal advice to review this process and determine whether unwanted PODs, that may be unsafe for patients to use, can be destroyed by the Trust without prior consent. All suitable items are incorporated into the discharge medication. POD paperwork is completed for each patient as a record of processing PODs, which is then used to calculate savings. All POD screening technicians will have completed an in-house accuracy training program, before being assessed as competent to screen PODs.

Betsi Cadwaladr University Health Board

The Telepharmacy project entails the use of a videoconference system linked with high definition cameras located in the community hospitals across North West Wales and a video screen in the dispensary at the District General Hospital in Bangor. The telepharmacy equipment enables the team within the acute hospitals to link with the community hospital hubs allowing pharmacists more time with patients and multi-disciplinary teams in clinical areas. The aim of the project is to enable remote clinical validation of medicine treatment charts and prescriptions by pharmacists thus saving significant travel time in this rural area, where the road links are poor and the furthest community hospital is 65 miles away.

Betsi Cadwaladr University Health Board

Ward automation of medicines is now firmly established within A&E departments and medical admission wards in each acute hospital in North Wales. Further implementation is underway for all medical wards and critical care units as well. The systems consist of several frameworks of computer-controlled drawers. Staff access the software's graphic user interface using biometrics and an integral touch-screen. They can search for a required medicine in a number of ways but the most commonly used is by 'fast code' searching. Having selected the product and quantity required, the computer allows only the specific storage drawer to be accessed. Ward automation provides a number of benefits over manual systems. It provides a robust and highly secure storage of medicines and medicinal products; 'live' stock control and automatic ordering directly to the central pharmacy; clinical decision support is available visually and audibly at the point of drug administration e.g. warnings of products with cross-sensitivity to penicillin.

These systems have been demonstrated to significantly reduce nursing time in the handling of medicines, reduce stock-outs and importantly reduce omission of drug doses. They provide a total audit trail of which member of staff has accessed what medicine at what time, reducing any opportunity for theft or inappropriate access to an absolute minimum.

Wishaw General Hospital – NHS Lanarkshire

Wishaw General has implemented an electronic tracking system that tracks the turnaround time for prescriptions coming into the main dispensary. All prescriptions are identified with a bar code that is scanned at each stage, from receipt by dispensary, throughout the dispensing process and up until the prescription leaving the department. The process time is fed into a central system, whereby ward staff are able to monitor the prescription and assess when it will be ready. There is no tracking system in the near ward pharmacy area but they implement a manually recorded workload throughout the day, with the turnaround time, which is quicker than the main dispensary.

LEAN audit has demonstrated an overall reduction in phone calls to the department with this system. The turn around time for prescriptions can also be audited using the tracking system and changes to the service implemented where required.

7.2 LABELLING

Medicines dispensed or prepared are labelled for safety in line with legal requirements.

North Bristol NHS Trust

North Bristol NHS Trust has put in place a system to reduce the wastage of medicines, yet also ensures that patients receive medication that is correctly labelled. Using a Standard Operating Procedure (SOP), even if the dose for a medication has been changed, the patient's own drugs (PODs) can be relabelled for re-use at discharge.

County Durham and Darlington NHS FT

A resource pack developed to aid patients with visual impairment / literacy problems includes resources such as:

- Medicine reminder charts
- Pictorial aids
- Talking labels - these attach to medicines boxes and enable the drug and dosing directions to be recorded. Patients can listen to the recording to identify the drug and follow dosing instructions. The Trust is currently in the planning stages and reviewing issues such as continuity of care following discharge from the Trust, re-usability of the labels and who will manage the service in the community etc.

This range of labelling helps to take into account the diversity of patients accessing medicines and meet their needs.

7.3 DISTRIBUTION AND STORAGE

Medicines are safely and securely distributed from a pharmacy and stored in a secure and suitable environment prior to administration.

North Bristol NHS Trust

The Pharmacy department has implemented the installation of an Abloy CLIQ locking system in Maternity and Delivery wards, which enables controlled access to ward drug cupboards. These cupboards have digitally coded keys that are assigned to specific members of nursing staff whilst they are on duty. The digital only access provides a detailed audit trail for access to the medicines locked in the cupboards. The Trust is looking to extend this system throughout the hospital to provide greater security and audit trail access to other areas such as:

- The 'out of hours' emergency drugs cupboards
- The out of hours deposit hatch for the pharmacy automated dispensing robot. This would enable nurses to access the out of hours robot delivery hatch with an audit trail digital key. The on-call pharmacist is able to remotely dispense from outside the hospital e.g. at home, using the robot to delivery medicines to the secure hatch. Medication can then be collected by nursing staff without the need for the pharmacist to come into the hospital.

University Hospitals Bristol NHS FT

Senior nursing staff carry out a monthly audit on the storage of medicines on their wards using a routine "Quality of care" tool. The measures are based on CQC requirements e.g. fridge temperatures, drugs cupboards locked etc. Pharmacy monitors this via the Medicines Governance Committee, reviewing the audit outcomes and will feedback any recommendations or actions required.

The North West London Hospitals NHS Trust

Northwick Park and Central Middlesex Hospitals carry out a 'Safe & Secure Handling of Medication' audit on all wards and departments, every six months. The aim of the audit is to ensure that medicines are handled in a safe and secure manner, as per regulatory and good practice requirements. The audit monitors practice in areas such as appropriate handling of high risk medicines; medicines securely locked on wards; safe handling of medicines by staff etc. The results are presented to the Drugs and Therapeutics Committee and the Patient Safety Committee for review. The outcomes from the audit are used to develop further training and raise awareness. Over time, the audits have significantly improved practice, from 50% of wards complying to now 86% of all wards complying with safety measures. This process of continuous improvement has developed a more safe, open and fair culture around medicines management, which the organisation will continue to build on.

Additional Examples to demonstrate this standard in practice are available on the RPS 'Map of Evidence' for the following titles:

- Hospital Standards (7.1) – Dispensing – Electronic Medicines Management