

Working in Partnership with Social Care Providers



Background

Care Homes and Children's Homes

The PCT currently has 298 care homes which include nursing homes, homes providing personal care and a number of smaller units providing care for people with learning disabilities. In addition there are nine children's homes-three are children's resource centres offering respite care to children with complex health needs.

Handled with care? CSCI February 2006

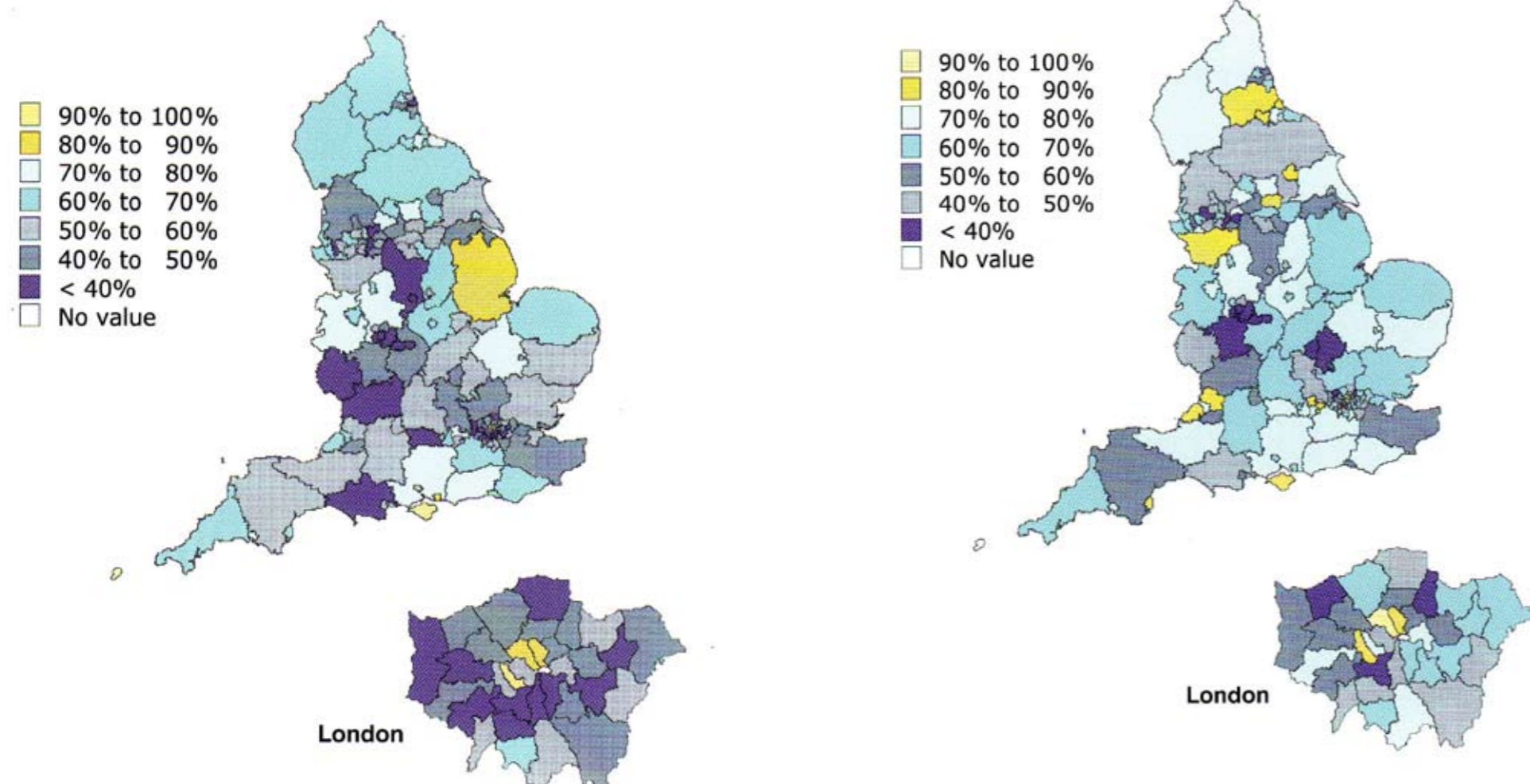
'The management of medication in care homes and children's homes is one of the most important aspects of care for some of the most vulnerable people in this country.'

- Only 60-70% of older people's homes in North Yorkshire had met the medication standard and only 40-50% in York
- Only 40-50% of younger adult's homes in North Yorkshire had met the medication standard and in York 80-90% met.



Map 1: Percentage of older people's homes meeting the Medication Standard

Map 2: Percentage of younger adults' homes meeting the Medication Standard



The report recommended **'that NHS Primary Care Organisations acknowledge and act on their responsibility to support health care provision within private and voluntary care homes and children's homes'**.

Domiciliary Care

There are 88 domiciliary care agencies within the PCT – 70 Private Providers, 9 NYCC 'in-house' provider locality offices and 9 City of York 'in-house' provider locality offices. It is estimated that in excess of 15,000 people receive domiciliary care in North Yorkshire.

Time to Care? CSCI October 2006

'One of the areas of most concern is the handling of medication, where there is a need to improve both procedures and training'

Overview of Initiatives

POLICY DEVELOPMENT

All policies are in line with *'The Handling of Medicines in Social Care'* (RPSGB) and CSCI (CQC) Guidance Documents

Care Homes

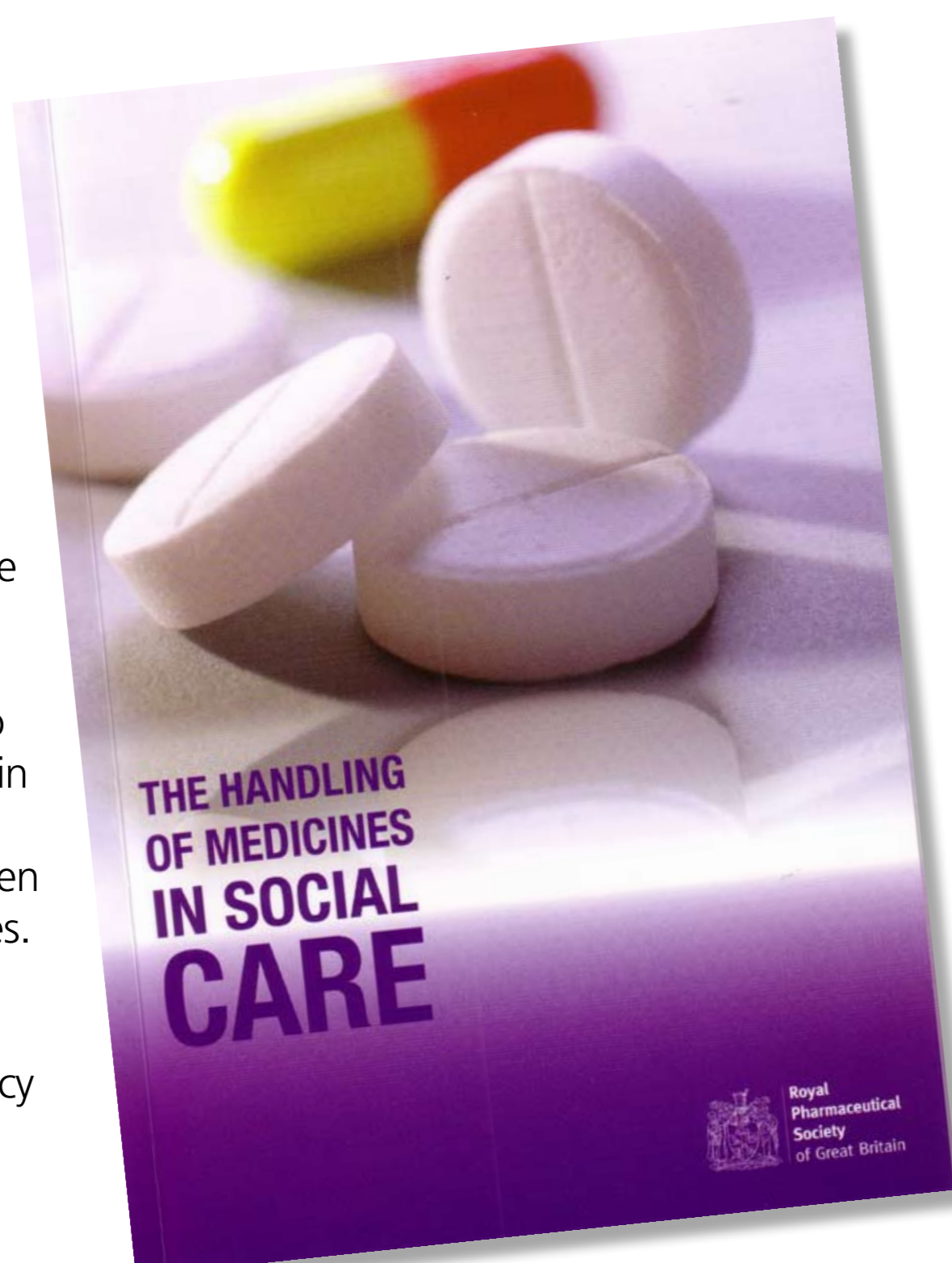
The team have worked with NYCC and City of York Council to review and update their policies. Private providers' policies are reviewed opportunistically and a leaflet has been developed to assist homes writing their medicines policies.

Domiciliary Care

The team have worked with NYCC and City of York Council to produce a shared policy and good practice guidance has been issued to private providers to try and encourage them to work in the same way as the councils who commission their service. A policy has recently been developed to enable PCT support staff to administer medicines-our staff will work in the same way as NYCC and City of York staff which will lead to seamless care when patients are transferred between agencies.

Children's Homes

The team led the development of the policy which has been a joint venture between NYCC and City of York Council.



TRAINING

All training packages meet the standards outlined by CQC in the guidance 'Training care workers to safely administer medicines in care homes' encompass the Skills for Care *'Knowledge set for medication'* and are in line with guidance from RPSGB *'The Handling of Medicines in Social Care'*

Care Homes

A comprehensive course delivered over two half days by PCT Care Homes pharmacists to groups of 20 staff-usually a mixture of council employees and private providers. Last year 16 courses were delivered in various locations across the patch. Community pharmacy staff have also attended courses and found that they learnt not only from the content of the course but also gained a greater understanding of the needs of the care staff.

Course Evaluation

The majority of participants rate the course as 'excellent' or 'very good'

Some of the responses received include:

- *'Will be looking at procedures and record keeping and making improvements where necessary'*
- *'It has made me more cautious and aware when doing medication'*
- *'I will be more vigilant and careful when administering medication. I will be more aware of what could go wrong and that I could be held responsible'*

Domiciliary Care

A half day training course-the Powerpoint presentation is supplemented by comprehensive trainer's notes and Home Care Managers in NYCC are trained to cascade the training to their teams - this approach is necessary because of the remote rural nature of parts of the patch. City of York Council work differently-two managers are trained to deliver the package to evening and night staff but pharmacists from our team train day staff and the sessions are opened up to private providers.

Children's Home Training

A half day training package has recently been developed-this was piloted with managers in October and five sessions have been delivered since. These are joint sessions for NYCC and City of York staff.

AUDIT/ADVICE VISITS TO CARE HOMES

When pharmacists are working in homes doing medication reviews they are always happy to answer questions and engage staff in discussions about best practice, if staff are interested an audit visit will be carried out and a written report sent to the home.

In January 2009 all homes in North Yorkshire and York who received a quality rating by CSCI (CQC) as 'poor' or 'adequate' (40 homes) were offered an audit visit.

Management of Controlled Drugs in Care Homes

Every home offering personal care that has been audited to date had had problems with the management of controlled drugs-either storage or documentation or both. This has resulted in the team sending all homes guidance about legal requirements relating to the storage and documentation of CDs. On several occasions documentation was so poor that there was no alternative but to refer the matter to CSCI (CQC).

It is very common for homes to return all stocks at the end of each month and reorder things that have been returned, such as liquid medicines, inhalers, creams and 'prn'

Sandra Sweeney – Senior Pharmacist Medicines Management; Rebecca Ventress, Karen Lepper and Julie Parker, Practice Support Pharmacists (Care Homes)

medicines, instead of counting them and carrying them forward to the next month. Care homes are the focus of the next stage of NYPCT Medicines Waste Minimisation Campaign and we will endeavour to stop homes returning medicines as waste whilst at the same time requesting more supplies.

CLINICAL MEDICATION REVIEWS IN CARE HOMES

Pharmacists start by reviewing the service user's notes in the GP's surgery and then visit the homes and discuss issues with staff and/or service users and review the Medicine Administration Record (MAR) in the home.

To date we have completed 598 medication reviews involving 52 care homes and 15 GP surgeries. Some 1,697 recommendations have been made to GPs and 1,573 (93%) were agreed and actioned. We would anticipate that we would do well in excess of 1,000 reviews in the next 12 months.

Case Scenario 1

Service user prescribed diltiazem SR on discharge from hospital and Adizem SR from surgery-both were being administered by staff in the care home. Picked up at medication review visit.

Case Scenario 2

Service user receiving eye drops to wrong eye. Appeared to be an error in transcription from consultant letter to surgery records. Picked up as part of the review of notes.

Case Scenario 3

Service user receiving a supply of medication from a relative which home was not aware of. This was a Polish cough remedy containing 10mg codeine which the lady was taking three of at a time. This may have contributed to symptoms she was experiencing which were under investigation by the GP. Picked up at review with patient

Common interventions are divided into

'Clinical'- checking any necessary monitoring has been undertaken, stepping down doses and suggesting the discontinuation of prescribed items which may no longer be required, adjusting doses of medicines in line with recommended guidelines and checking inhaler technique.

'Housekeeping' - altering quantities of 'prn' medicines supplied, changing expensive 'specials' for alternative licensed medicines when appropriate, changing medicines for patients with swallowing difficulties,

The focus of this work is on patient safety but we have made incidental savings of between £50-100 per service user per year by reducing waste and stopping medicines that were no longer required/indicated.

The Future

By 2020 in North Yorkshire there will be 65% more people over 85 and 54% more people with dementia. It is vitally important to build safe and secure systems for medicines management to protect these people who are the most vulnerable in our society.

We are committed to developing and extending our role and working in partnership with care providers, community pharmacists and neighbouring PCTs to provide the highest quality of pharmaceutical care.



North Yorkshire and York