

## MEDICATION IN CARE HOMES TASK AND FINISH REVIEW GROUP

28<sup>th</sup> February, 2014

**PRESENT** – Councillor S Richmond (in the Chair); Councillors Harman, Kelley, Newall and Mrs Scott.

**OFFICERS** – Angela Coates and Yvonne Hall.

**Medication in Care Homes** – The Group met to consider arrangements for Members to undertake planned visits to care homes which currently had agreements with this Council to assist them with the work they were undertaking in relation to medication in care homes.

A draft questionnaire which could be used as a basis for Members undertaking visits was circulated at the meeting, together with a crib sheet from the Contracts Team and a copy of the standards of which the homes are measured by.

Members were informed that Boots Chemist was the main pharmaceutical company used by the majority of Care Homes in Darlington, and discussion ensued on the findings of a previously held meeting and discussion took place on the selection of homes to be visited by Members.

**IT WAS AGREED** – (a) That the following care homes be visited during weeks commencing 3<sup>rd</sup> March, 2014 and 10<sup>th</sup> March, 2014 :-

- Willow Green                      Councillor S Richmond and Mrs Scott
- Wilton House -                      Councillors Harman and Newall
- Rydal Care Home                      Councillors Kelley and Donoghue
- Lakeside Care Home –              Councillors Harman and J Taylor
- Hundens Park                      Councillors S Richmond and Francis
- St Williams -                      Councillor Knowles and Newall
- Springfield                      Councillor Knowles and J Taylor
- Riverside -                      Councillor S Richmond and Newall

(b) That the findings of the visits be reported back to a future meeting of this Task and Finish Review Group.

## **MEDICATION IN CARE HOMES TASK AND FINISH REVIEW GROUP**

**30<sup>th</sup> May, 2014**

**PRESENT** – Councillor S Richmond (in the Chair); Councillors Donoghue, T. Richmond and Mrs Scott.

**OFFICERS** –Yvonne Hall.

**ALSO IN ATTENDANCE** – Susan Goat, Safeguarding Adults Lead Nurse, Sue Moffatt and Debbie Howe, Care Quality Commission, Darlington and Tees Valley, and Barbara Nimmo, Medicines Optimisation Pharmacist.

**MEDICATION IN CARE HOMES – 1 Findings of Visits** - Submitted – A document (circulated at the meeting) summarising the comments received from Members following their visits to a number of care homes with agreements with this Council to assist them with the work they were undertaking in relation to medication in care homes. It was reported that all of the visits allocated had been undertaken by Members, however, the findings in relation to Lakeside and Rydal were still awaited.

Members reported that, overall, they were satisfied with the findings, and there was evidence of good practice, although there were some concerns about Wilton House and the Officers gave an update position at the meeting in relation to that care home in particular.

Particular reference was made to two specific areas which had been highlighted during the visits, which related to the need for better medication management to reduce wastage and costs and the need for the GP alignment project to be extended to those homes which were not yet participating.

Discussion also ensued on the different training packages which were available for staff in care homes.

**IT WAS AGREED** – That the Adults and Housing Scrutiny Committee be advised that :-

(a) with the exception of (b) below, this Task and Finish Review Group is confident that there is sufficient evidence to suggest that the ordering and administration of medication in those care homes visited is being correctly managed and there are examples of good practice within the homes visited; and that any issues which might occur in the future would be dealt with promptly and efficiently by Officers within the Contracts Team in liaison with other external partners/agencies;

(b) in relation to Wilton House, this Task and Finish Review Group has some concerns in relation to the comments received and notes that the Officers are aware of those concerns and requests an update on the current position at the next meeting of this Group and will undertake a further visit in six months' time;

(c) this Task and Finish Review Group is awaiting further information on the feedback from the pilot of the GP alignment to care homes project, however, following the visits undertaken, there is evidence to suggest that this is working in those care homes where it is in place and requests the Darlington Clinical Commissioning Group to continue to support and fund this scheme so that all the care homes in Darlington are aligned to a practice;

(d) this Task and Finish Review Group is aware, and there is evidence to suggest, that savings could be made if there was better medication management in relation to medication ordering and requests the Darlington Clinical Commissioning Group to investigate this further with GP's; and

(e) this Task and Finish Review Group takes on board the comments in relation to the definition of 'appropriate' and 'adequate' training for staff in care homes and recognises that this is a national issue.

**2 Medication Issues/Reporting** – Susan Goat reported that the Darlington Clinical Commissioning Group was currently running a pilot whereby all care homes must report any medication issues/errors through the Multi-Agency Safeguarding Hub (MASH) to enable an accurate record of the numbers involved to be maintained.

**IT WAS AGREED** – That the results from the outcome of the pilot be reported to the next meeting of this Group.

**3 Use of Multi-Compartment Compliance Aids** – Yvonne Hall gave an update on the current position in relation to work being undertaken by the Durham, Darlington and Tees Local Pharmacy Network to recommend the appropriate use of Multi-Compartment Compliance Aids (MCAs), also known as Monitored Dosage Systems (MDAs) or 'dosette boxes' by community pharmacists.

Reference was made to a letter (circulated at the meeting) which had been received from the Chair of the Durham, Darlington and Tees Local Pharmacy Network which highlighted the concerns by the British Medical Association and by the Pharmaceutical Services Negotiating Committee and also locally by the Local Medical Committees, Local Pharmaceutical Committees and Clinical Commissioning Groups within Durham, of inappropriate use of MCAs and referred to one of the pharmacy network's priorities to recommend their appropriate use which they firmly believed would lead to better use of local resources, maximise clinical outcomes for patients and reDuce risk to patient safety.

As the majority of patients in receipt of regular medication were also likely to be receiving social care support either in their own homes or in a nursing or residential

care setting, the pharmacy network were seeking the support of Directors of Social Care to support the aim either through contractual mechanisms or training and education.

Discussion ensued on the use of 'dosette boxes' where a specified need was demonstrated, together with the advantages and disadvantages of their use and it was reported that the contract agreements which the Council had with care homes could be varied if a framework agreement and governance arrangements were in place.

Discussion ensued on a visit which had taken place to Rowlands Pharmacy by Members of the Health and Partnerships Scrutiny Committee and it was suggested that Members of this Group visit Boots Pharmacy to see their medication management process as they were the main provider of medication to care homes within the Borough.

**IT WAS AGREED** – That Boots pharmacy be contacted with a view to Members undertaking a visit and that the outcome thereof be reported to a future meeting of this Group.

**4. Suggestions for future meetings IT WAS AGREED** – That, in addition to the items referred to above, the following items be included on an agenda for future meetings of this Task and Finish Group :-

- GP alignment to Care Homes;
- SystemOne – overview of electronic prescribing; and
- Hospital discharge letters – overview of work being done by the Darlington Clinical Commissioning Group to review and improve discharge letters.

## **MEDICATION IN CARE HOMES TASK AND FINISH REVIEW GROUP**

**18<sup>th</sup> August, 2014**

**PRESENT** – Councillor S Richmond (in the chair); Councillors Crichlow, Donoghue, Knowles, Newall, and H. Scott.

**OFFICERS** – Gordon Peacock

**ALSO IN ATTENDANCE** – Susan Goat, Safeguarding Adults Lead Nurse, Barbara Nimmo, Medicines Optimisation Pharmacist, Yvonne Mineham, Nurse Practitioner from Moorlands Surgery and Jayne Turner, Practice Manager from Backetts Medical Practice.

**(1) WILTON HOUSE** – Pursuant to Minute 1(b)/May/14, Gordon Peacock, Contracts Officer, Darlington Borough Council, updated the Group on the current position in relation to Wilton House following the concerns which had been expressed at the last meeting of this Group. He reported that the suspension which had been in place in relation to the home had now been lifted, however, three-monthly monitoring continued to be undertaken by Contracts Officers from the Council and that good progress was being made towards the Improvement Action Plan.

Particular reference was made to the commitment of the Manager within the home; one medication error which had been made recently by an agency worker which had been picked up during the audit process; staffing levels, which were at an adequate level and staff training.

**IT WAS AGREED** – That the Adults and Housing Scrutiny Committee be advised that this Task and Finish Review Group is pleased to be informed that good progress is being made against the Improvement Acton Plan and that there are good management arrangements now in place at Wilton House.

**(2) MEDICATION ISSUES/ERRORS – OUTCOME OF PILOT OF REPORTING THROUGH THE MULTI-AGENCY SAFEGUARDING HUB (MASH)** – Pursuant to Minute 2/May/14, Sue Goat, Safeguarding Adults Lead Nurse, updated Members on the current position in relation to the pilot which was being undertaken whereby all care homes must report any medication issues/errors through the MASH.

It was reported that the pilot had been undertaken to enable accurate records of the number of medication errors to be maintained, as it had been felt that there was an issue around under-reporting, although it was accepted that, under the threshold tool, care homes were not obliged to notify instances of ‘one-off’ medication errors.

It was reported that although there had been limited data supplied and it was not

year-end, once analysed, there had been no surprises in relation to the results. The main areas which had been highlighted were mis-medication, issue of wrong medication, pharmacy error and incorrect medication supplied on discharge from hospital.

Discussion ensued on some solutions to the problem, some of which were already in place which included Monitored Dosage Systems, staff wearing red tabards to highlight they were undertaking medication management; staff training; the need for care home staff to take responsibility when patients' medication had changed; the allocation of two members of staff to check in all medication to the home and whether it should be mandatory for all medication issues/errors to be reported to the MASH in the future.

Particular references were made to the continued issues around the discharge of patients from hospital with the incorrect medication, the need for better medication management to be undertaken to reduce wastage and costs and the need for the GP alignment project to be extended to those homes which were not yet participating to assist with this; and to the view that all medication issues/errors should be reported to the MASH.

Sue Goat reported that the results and recommendations from the pilot would be reported to Ann Workman, Assistant Director, Adult Social Care, Darlington Borough Council for consideration.

**IT WAS AGREED** – That the report be noted and that the Health and Partnerships Scrutiny Committee be requested, through the Quality Accounts of the CDDFT, to look further into the issues around the discharge of patients with medication from hospital.

**(3) GP alignment Project** – Pursuant to Minute 1(c)/May/14, Yvonne Mineham, Nurse Practitioner from Moorlands Surgery and Jayne Turner, Practice Manager from Blacketts Medical Practice gave an update on the current position in relation to the GP alignment to care homes project.

Yvonne outlined how the pilot was working in the care homes which her practice was aligned to and gave Members some examples of the sort of things that were undertaken/discussed during the weekly visits i.e. medicine management, health reviews and discussions with patients and their families about end of life care.

It was reported that end of life was an area where further work and communication about how and where to get advice and support was required, including the need to ensure that care home staff were adequately trained and comfortable in discussing end of life care plans with patients and their families.

Discussion ensued on the need to extend the project to ensure that all care homes were aligned to GP practices as there was evidence to suggest that it was working well in those care homes where it was in place; an example of the time spent by staff

within one practice per week within the care home; some of the difficulties which might be encountered; and what the process was to ensure that all care homes were aligned.

**IT WAS AGREED** – That the report be noted and that the recommendation at Minute 1(c)/May/14 be re-affirmed.

**(4) SystemOne** – Barbara Nimmo, Medicines Optimisation Pharmacist outlined how SystemOne, the electronic prescribing service operated together with the advantages and disadvantages of the service and how it operated within the Care Homes.

**IT WAS AGREED** – That the report be noted.