

Risks and Benefits of Self-Administration of Medicines in Hospital

“This House believes that it is entirely appropriate for self-administration of medicines to be an indicator in Medicines Management Scores as part of the Trust annual health check”

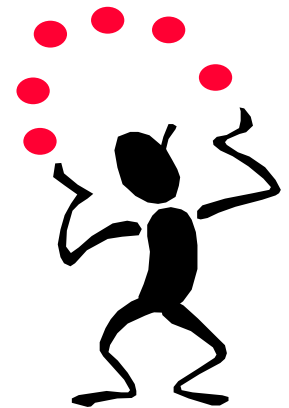
Is it “entirely appropriate”?

YES ... it indicates

- Delivery of a patient focused service
- Development of clear and managed accountability for medicines held by patients
- Team working at ward level and the integration of pharmacy into those teams
- Implementation of systems for safe and secure handling of medicines by patients (and carers)

Based on core national standards

- Reducing the risk of harm
- Meeting individual needs
- Leadership and accountability





Progress towards self-administration

“A CHALLENGE FOR TRUSTS”

Value for commissioners of care:

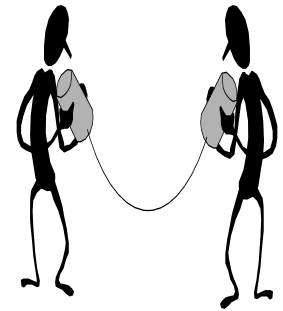
- Reflects the approach of the whole Trust towards patient autonomy, choice and risk management
- Can improve transition from and to home, for patients with their medicines

Value for pharmacy services:

- Opportunity to provide clinical leadership on strategy and on implementation
- Can demonstrate benefit from pharmacy managing risk, and in educating and supporting patients and staff

Rationale and Principles

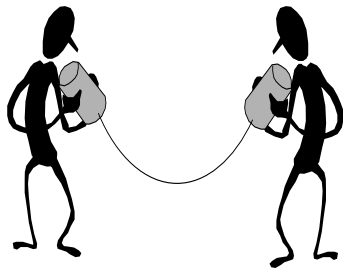
- *“Patients remain empowered, which can reduce the stress involved in their stay in hospital and allow them to take their medicines at the optimum time”*
- *“Allows hospital staff to ensure patients are competent enough to manage their medicines after discharge”*
- Manages risk of errors with medicines
- New systems supported by education and training:
 - Procedure to assess patient need and suitability for self-administration
 - Agreed information that should be shared with patients
- *“Ideally all patients who are competent on admission and those who will become competent during their stay should be offered the opportunity to administer their own medicines”*





Who should be a priority for help to self-administer medicines?

- Timing of medicines administration is vital
e.g. Parkinson's Disease, Diabetes, Asthma, GTN
- Compliance with treatment is critical
e.g. transplant patients
- Admission is linked to non-adherence:
focus on rationalising therapy and agreeing a plan with the patient (and, where relevant, their carers)
- People in rehabilitation programmes



Patient focus

Safe and effective self-administration requires that we

- Listen to patients and their carers
- Engage the ward's multidisciplinary team in delivery
- Develop ward staff competence using the systems and, more importantly, in provision of the clinical information about medicines that patients need and want
- Monitor the systems and processes

Provide direct patient care

Clinical Focus
Efficiency and Capability

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Safe and Effective Self-Administration of Medicines:

- Increases patient empowerment, engagement and satisfaction with care
- Improves communication and risk-awareness
- Provides formal systems and processes to manage risks and support patients and staff
- Demonstrates clinical and managerial leadership
- Reflects how the Trust is managing and improving the medicines aspect of its service, balancing patient autonomy & organisational risks

I ask you to support the motion