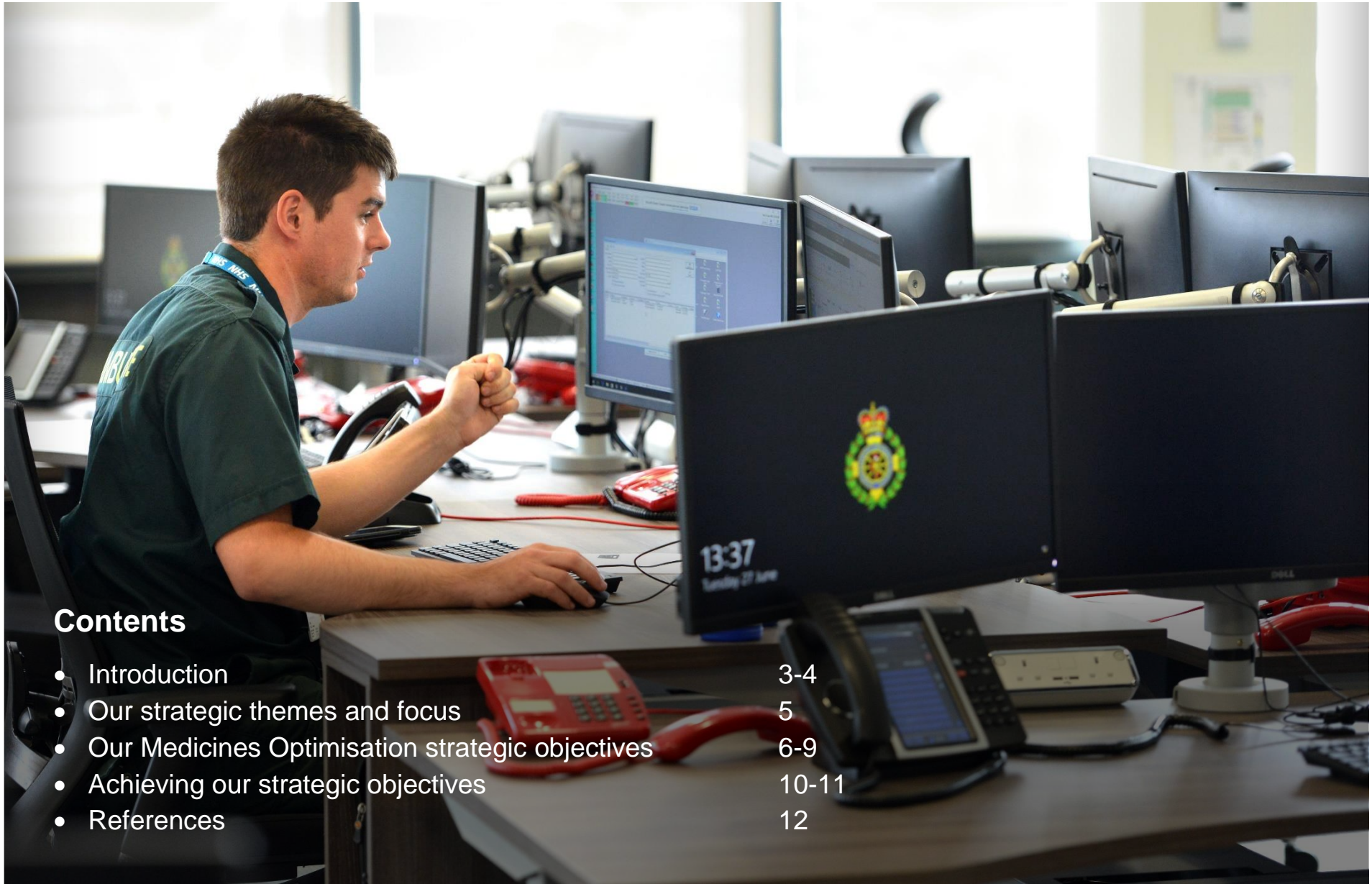




Caring for you and everyone

Medicines Optimisation Strategy 2017-2022



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Introduction

This Medicines Optimisation strategy will guide the development of safe and effective management of medicines within our Trust. This is a key document specifying how the principles of medicines optimisation are integrated into our systems, work practices and culture at all levels from the individual practitioner to our Board.

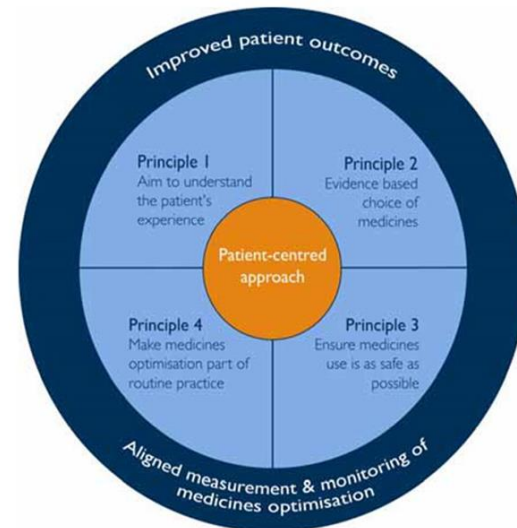
This Medicines Optimisation strategy is a dynamic document, which we expect staff at all levels within our Trust to refer to when making decisions about medicines.

The NHS Constitution establishes the principles and values of the NHS in England. It sets out rights to which patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with responsibilities, which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively.

Although medicines remain the most common therapeutic intervention in healthcare, there is a national evidence base which demonstrates that there is much to be done to help patients, the public and society more broadly to get the best outcome from medicines. We must all collectively make an even greater effort in working together to ensure that individual patients and society get maximum value out of our efforts including ensuring resources are used wisely and effectively.

Medicines optimisation is about ensuring that patients get the right choice of medicine, at the right time. The goal is to improve patients' outcomes, that they take their medicines as intended, avoid taking or being administered unnecessary medicines, reduce wastage of medicines and improve medicines safety. Therefore, medicines optimisation is a vital agenda which is central to what we do. Medicines optimisation sets out four important principles as outlined in figure 1 (right).

Figure 1: Medicines optimisation principles



This Medicines Optimisation strategy is a fundamental component to realising our vision and mission.

Our vision: 'Support our staff to provide a caring, high quality and efficient urgent and emergency care service to our communities'

Our mission: 'To deliver our aspiration of being better today and even better tomorrow for our people and our patients'

We receive and respond to 999 calls from the public, urgent calls from healthcare professionals and receive and respond to calls to NHS 111 as well as providing the regional Hazardous Area Response Team (HART).

South East Coast Ambulance Service NHS Foundation Trust (SECAmb) employs about 3,500 staff, 85 per cent of whom are patient facing. The Trust provides services to 4.7 million people over the 9,400 square kilometres of Kent, Surrey, Sussex and North East Hampshire. The demographics of our catchment area and of our staff varies from an area of great affluence to those with high unemployment and areas of poverty.

There is an increase in acute demand, and delivery of care at home or close to home. Our work includes conveyance to hospital and increasing 'Hear



and Treat' and 'See and Treat' interventions which involve working with commissioners and other partners in developing alternative pathways including integrated models of care to provide care closer to home.

Medicines management is the entire way that medicines are selected, procured, stored, handled, delivered, prescribed, administered and reviewed to optimise the contribution that medicines make to producing informed and desired outcomes of patient care. It also encompasses how we manage medicines that have expired or are no longer required. Medicines form an integral part of most patients' treatment or diagnosis. The care we provide to patients often involves medicines at some level and hence medicines command a significant part of our Trust's resources, either directly or indirectly.

The Trust's 2017 Care Quality Commission (CQC) inspection report highlighted the need to improve safety with particular emphasis placed on medicines. This strategy and the supporting delivery plan is an outline of the corrective action the Trust is taking.

Medicines optimisation is a core component of this and we will ensure the provision of safe, quality care to our patients and our communities. We recognise that we are not yet where we want to be. We acknowledge that this is in the process of improvement and consolidation to get back to a consistent provision of quality whilst delivering financial balance. This will require a continuation of the journey that moves us through the different stages of recovery, improvement and consolidation. We will strive to deliver sustainable services, secure the best possible outcomes for our patients and meet fundamental standards for medicines optimisation.

This strategy is informed by various external reviews of how medicines are managed within our Trust and by national good practice guidance. The aim of this strategy is to provide strong medicines optimisation leadership and engagement by building on the strength of the improvement work we have carried out to date. It supports and focuses on continuous improvement of medicines optimisation to ensure better patient outcomes.

Our strategic themes and focus

This Medicines Optimisation strategy contributes to and is aligned to Trust's Five-Year Strategic Plan from 2017-2022. The Strategic Plan demonstrates how the Trust will ensure the provision of safe, quality care to its communities and staff. As a Trust, we recognise that there is significant work needed to improve quality for patients, deliver improved performance against targets, meet financial targets and in doing this support and develop our staff. As a Trust, we are determined to continue to learn from feedback from our staff, our volunteers and our patients and embed trust-wide change as a result of this learning. The next five years is focused on delivery of our four strategic themes which are:

Our people – supporting and developing our staff and volunteers

Our patients - ensuring timely quality of care, in the right place by the right people

Our enablers – fit for purpose technology, fleet and estates, underpinned by sustainable financial performance

Our partners – working with health, 'blue light' and education partners

These strategic themes are translated into our strategic focus over the next five years. See figure 2 below.

Figure 2 – Our Trust's Strategic Focus



The nature of medicines use means that medicines optimisation relates to a range of objectives across all our four strategic themes but mainly sits under the theme 'our patients' within our Strategic Delivery Plan, and under the two-year objective:- *'Further improve and embed governance and quality systems across the organisation, building capacity and capability for continuous improvement'*

Medicines optimisation improvement is a key priority for us.

Our Medicines Optimisation strategic objectives

Our six medicines optimisation strategic objectives will ensure that our staff, volunteers, patients and public have an understanding of what we want to achieve in terms of medicines optimisation.

- **Medicines governance framework**
- **Medicines optimisation leadership**
- **Antimicrobial stewardship**
- **Medicines safety**
- **Medicines training**
- **Medicines use in pre-hospital, urgent and emergency clinical care**

These medicines optimisation objectives are aligned with and informed by the Trust's vision, mission, goals and objectives as stated in our Five-Year Strategy, 2017 – 2022 and associated Strategic Delivery Plan.



Medicines governance framework: Our medicines management systems, processes, procedures and work practices reflect legislative, national good practice guidelines and standards including standardising medicines management processes across our Trust. It takes account of how different operational delivery units work. The aims are to prevent or reduce harm to patients from medicines and to support our people/staff.

- All our policies, procedures, formulary, guidelines and patient group directions are all in date and we have a system in place to ensure their timely review.
- Governance framework is in place for medicines and these are in line with national best practice and legislation for example for controlled drugs as these types of medicines require that additional checks and controls are in place.
- Patient group directions are used within a governance framework based on national good practice.
- Policies and procedures support good practice in medicines management and ensure the correct medicines are given at the right time by competent and capable practitioners to maintain life and to prevent admission to hospital.
- Medicines audits form part of routine practice to identify gaps and ways of addressing these gaps and thereby improve practice. Audits are used to evidence that changes to practice have been made.
- Medicines waste is reduced due to good medicines management processes and practices.
- All medicines are stored securely in accordance with legal requirements, robust procedures ensure that storage conditions are monitored and all medicines no longer suitable for use (e.g., past their expiry date) are removed in line with policy.
- Medicines are purchased and procured following processes that allow central oversight, control and traceability as well as delivering best value for money.
- All new medicines are evaluated and if appropriate added to our formulary before being added to medicines stock lists and our formulary are reviewed regularly as part of managing new entries or removal of medicines on our formulary.



Medicines Optimisation Leadership: We have strong medicines optimisation leadership. All staff and volunteers are aware of their responsibilities related to medicines use. We have clear lines of accountability for medicines optimisation within our Trust from the individual, to ambulance stations, to operational units to the Board.

- The Chief Pharmacist provides medicines optimisation leadership and vision to strategically consolidate medicines optimisation within our Trust. Our Chief Pharmacist reports directly to our Medical Director who is responsible for medicines optimisation and controlled drugs at Board level.
- Paramedics and other registered healthcare professionals take on Medicines Optimisation leadership roles and have a clear understanding of issues and priorities pertaining to medicines and their use to ensure we deliver safe and effective patient care.
- A Controlled Drugs Accountable Officer (CDAO) with responsibility for leadership in terms of governance around controlled drugs is appointed and registered with the Care Quality Commission (CQC).
- A Controlled Drugs Accountable Officer (CDAO) annual report is presented to the Board.
- A Medicines Optimisation annual report is presented to the Board which includes progress with the implementation for this strategy including completion of annual medicines optimisation objectives within the agreed time-lines. This report will also summarise risks related to medicines and how these are being mitigated.
- Medicines optimisation and medicines outcomes are integrated into the Trust's strategies, policies, working practices and culture at all levels.
- All staff and volunteers are aware of their responsibilities for medicines use and inform their line managers and chief pharmacist if there are problems with medicines use, help solve these and implement appropriate action to improve practice.



Antimicrobial stewardship: We will ensure the optimal use of antimicrobials, helping to reduce healthcare associated infections and development of resistance to antimicrobials.

- A consultant microbiologist supports antimicrobial use and review of antimicrobial patient group directions.
- Prompt recognition and actions are taken to manage sepsis.
- Staff have improved knowledge and understanding of antimicrobial resistance.
- National guidance and strategies related to antimicrobials are reviewed and if appropriate a development plan produced to ensure we address and implement the areas relevant to our trust.

Medicines Safety: Medicines use is as safe as possible.

- All medication errors including those that are near-misses are reported and these are analysed and the lessons learned are routinely embedded into our policies, training and work practices.
- Staff and volunteers receive clear feedback from medication errors so they know that lessons have been learnt and improvements to practice have been made.
- Staff and volunteers are empowered to develop a patient safety culture that supports everybody to challenge poor practice and to implement improvements in patient care.
- The Chief Pharmacist is involved in root-cause analysis following any serious incidents related to medicines.
- It is routine to share learning from medication errors across the Trust to allow staff and volunteers to reflect on this learning in relation to their area of practice.
- A robust and effective system exists for responding to medicines alerts such as national recalls of defective medicines and nationally issued patient safety alerts.
- Risks related to medicines are either mitigated or actively managed through dynamic use of our risk register.



Medicines training: We support and develop our staff and volunteers (i.e., community first responders) in terms of medicines management and medicines used according to their needs and roles undertaken.

- There is a high-level medicines management training needs analysis which sets out the training needs of the different staff and volunteers groups.
- All staff and volunteers are trained and competent to undertake activities expected of their roles in terms of medicines.
- A structured training programme is embedded around the different medicines elements related to our clinical care pathways.
- Medicines training needs of our staff and volunteers are assessed each time we change our working practices, establish new care pathways or clinical services.
- Innovative ways of delivering medicines training are considered and evaluated to identify the most effective way to deliver this to our staff and volunteers.

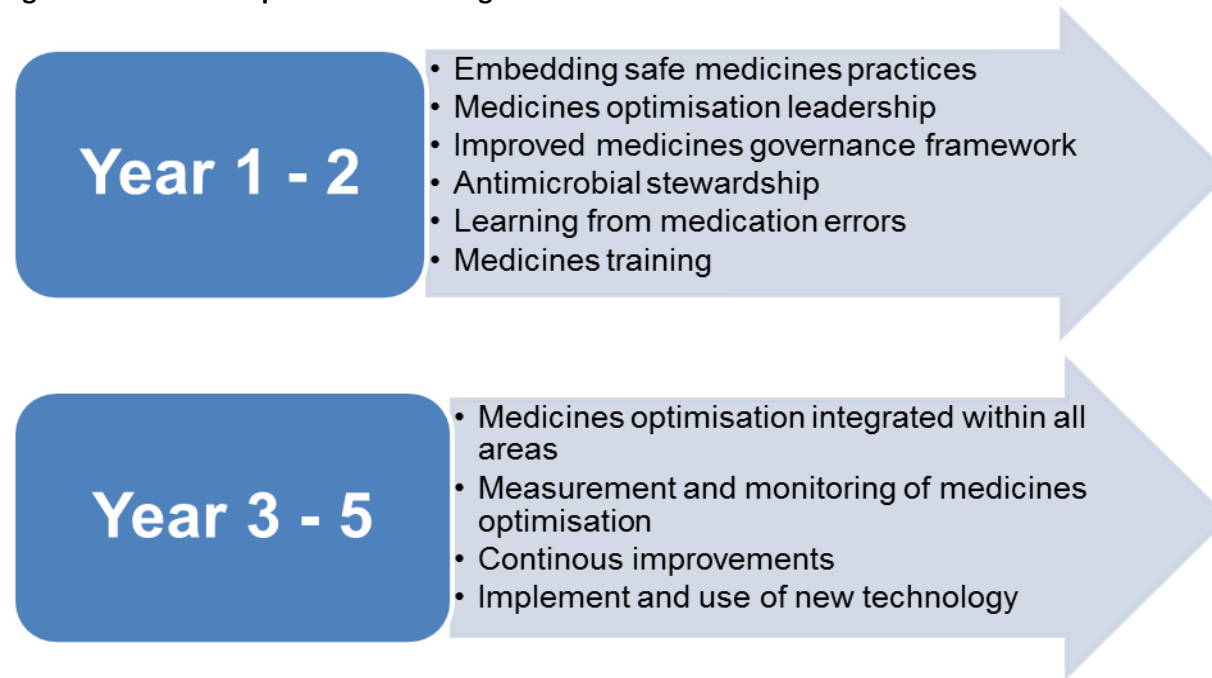
Medicines use in pre-hospital, urgent and emergency clinical care: When we design new clinical care pathways or services that involve medicines (e.g., cardiac survival, pain management, stroke prevention, mental health and end of life care we shall ensure we have systems and processes in place that help us to deliver good clinical outcomes through effective medicines optimisation supported by local decision making.

- The most appropriate choice of clinically and cost effective medicines are made that can best meet the needs of patients.
- The Chief Pharmacist is consulted when new clinical care pathways or services are being designed and where these involve medicines. This includes when new services are being commissioned from our Trust.
- The implementation and use of new technology is supported where this helps to improve processes to make these more productive and efficient and/or help to improve patient care and outcomes.
- Include medicines optimisation as part of surveys or other methods used relating to patients' experience within our services

Achieving our strategic objectives

Our medicines optimisation strategic implementation plan is based on the Medicines Optimisation strategic objectives with the strategic focus being as included in Figure 3 below.

Figure 3: Medicines optimisation strategic focus

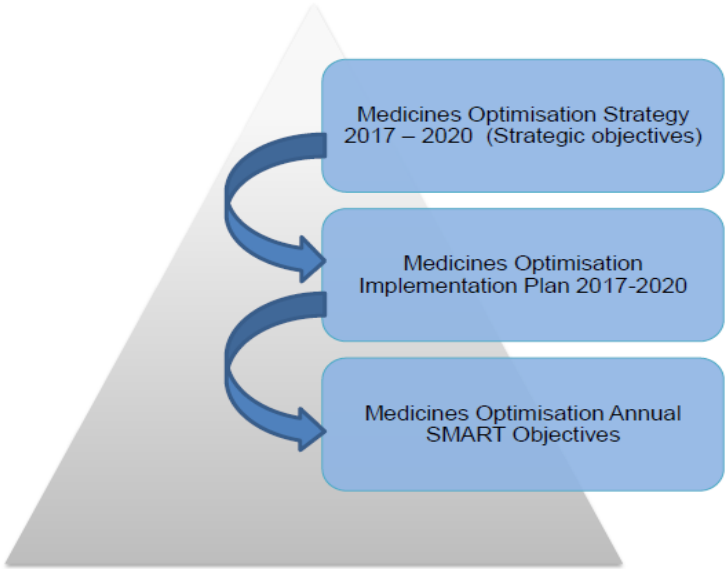


Our Medicines Optimisation strategy implementation plan is maintained outlining the objectives and required actions that will enable us to achieve all our medicines optimisation strategic aims within the required time-frame.

This Medicines Optimisation Strategy and implementation plan will inform our annual Medicines Optimisation objectives. These annual objectives are SMART (Specific, Measurable, Achievable, Realistic, and Timely) with agreed target dates for their completion. See Figure 4 for the links between our Medicines Optimisation Strategy, implementation plan and our SMART annual objectives.

Our Chief Pharmacist will produce regular progress reports and a Medicines Optimisation Annual Report, which has a section that summarises the completion of the annual SMART objectives. This Medicines Optimisation Annual Report will be shared with our Board.

Figure 4: How our Medicines Optimisation strategic objectives inform our implementation plan and annual objectives



In the future we wish to explore the use of a medicines optimisation performance dashboard to measure, manage and drive our performance.

As we continue to improve we will also review our medicines optimisation strategic objectives to ensure these remain current, reflect our priorities and our overarching guiding Five-Year Strategic Plan, 2017 – 2022. Therefore, each time we update our Five-Year Strategic Plan, 2017-2022 we will also review and refresh our Medicines Optimisation Strategy maintaining this as a dynamic document.

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