

To:	Trust Board
From:	Clinical Support Division
Date:	3 November 2011
CQC regulation:	All applicable

Trust Board paper D

Title:	Providing Information to Patients about Medicines										
Author/Responsible Director:	Dr. Shona Campbell										
Purpose of the Report:	To Update the Trust Board on The Clinical Support Division's patient information, project as part of the Divisions 'Caring at its Best' plans.										
The Report is provided to the Board for:	<table border="1" style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">Decision</td> <td style="width: 25%;"></td> <td style="width: 25%;">Discussion</td> <td style="width: 25%;"></td> </tr> <tr> <td>Assurance</td> <td>x</td> <td>Endorsement</td> <td></td> </tr> </table>			Decision		Discussion		Assurance	x	Endorsement	
Decision		Discussion									
Assurance	x	Endorsement									
Summary / Key Points:	<p>'Wherever possible, patients will have information about the medicines being prescribed made available to them or other acting on their behalf'.</p> <p>This report aims to demonstrate how the Division is working towards achieving this standard, through the introduction of Medicines Information cards.</p>										
Recommendations:	<ul style="list-style-type: none"> • Develop a Medicines Management Technician working with the pharmacy discharge teams to counsel patients on their medicines and offer a medicines card prior to discharge (not all patients would like or need a card). • Assist the Senior Nurse Medicines Management in training nursing staff on the use of the database. • Increase and standardise medicines related patient information leaflets available – identification of key medicines/ therapeutic groups where patients would like further information. • Create a web area for access to all leaflets - a student has gathered together all medicine related leaflets in use across the Trust. • Develop other resources and tools to assist patients knowledge and adherence to medicines. 										
Previously considered at another corporate UHL Committee ?	QPMG as part of the Divisions patient experience report in July 2011										
Strategic Risk Register	No	Performance KPIs year to date	C-QUIN								
Resource Implications (eg Financial, HR)	Patient information leaflets £5k										
Assurance Implications	Part of the Nursing Directorate Improving the Patient Experience Strategy										
Patient and Public Involvement (PPI) Implications	Positive patient Involvement										
Equality Impact	None Known										

Information exempt from Disclosure
No
Requirement for further review ?

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: Trust Board

SUBJECT: Providing Information to Patients about Medicines

DATE: 3 November 2011

REPORT BY: Hannah Flint, Senior Nurse for Medicines Management,
Gill Stead, Principal pharmacist for Medicines Information,
Glynis Dublin, Matron for Clinical Support Division.

1. Introduction

The Clinical Support Division is focusing on patient information, for the 'Caring at its Best' Trust wide action plan.

Information is an important part of the patient journey and is central to the overall quality of each patient's experience of the NHS. By providing good quality information, we can help to ensure that patients have greater power, protection and choice in key aspects of their healthcare (Audit Commission 1993)

Outcome 9 of the CQC standard (2009) focuses on the management of medicines and states that...

'Wherever possible, patients will have information about the medicines being prescribed made available to them or other acting on their behalf'.

As a result this report demonstrates how the Division is working towards achieving this standard, through the introduction of Medicines Information cards.

2. Background

Results from patient polling continually demonstrate that patients do not receive all the information they would like on medicines. A Trust group reporting to the Medicines Management Board was set up specifically to review provision of medicines information to patients. An initial questionnaire to 48 patients demonstrated that patients would ideally like information directly from a healthcare professional but supplemented with written information.

As part of this work stream a simple stand alone database was obtained from Sheffield Hospitals which produces a very simple medicines reminder and information card. The following information is generated; medicine name, indication, dosing instruction, basic side effects and length of course. (Appendix 1). The production of the card is by ward based clinical teams, who know why the medicine has been prescribed because for some medicines there may be more than one indication. In an ideal situation and to obtain the most from the card the patient should then be counselled using the card prior to discharge.

3. Indicator

C-QUIN target for UHL:

- >91% of patients counselled about why they are taking their medicines
- >59 % patients counselled about potential side effects.

4. Progress

Medicines cards were originally devised for use by pharmacy staff but it has been acknowledged that the inclusion of nursing staff with access to the database would provide a greater distribution to patients.

Initial feedback from pharmacy staff has enabled the database to be improved so that it is easier and faster to use.

The Discharge Lounge at the Leicester Royal Infirmary was identified as being a suitable pilot area. Nursing staff were trained on the use of the database and the pilot then ran for 1 month.

The evaluation of this pilot was very positive, with nursing staff expressing comments such as:

- 'This is such a quick and easy tool to use'
- 'It allows us to provide clear, written information for our patients'

Patients and carers also provided feedback to the nursing staff, after they were given a medicines card. Common comments were:

- 'This will be very useful for me at home as I often forget what tablets I am taking'.
- 'It will allow me to know what medicines I need to give to my partner and when. It seems easier to read off the card than from the boxes or the Discharge letter'.

The Discharge Lounge are now out of the pilot stage and are producing cards for their patients, along with ensuring that verbal counselling occurs at the same time.

The cards have been rolled out to other areas with training provided to:

- Nurse specialists – cardiac rehabilitation, gastroenterology and pain care sisters
- Nursing staff on ward 8 LGH and ward 30 LRI

Wards implementing Self Administration of Medicines also plan to utilise the medicines cards, as written information is a prerequisite for patients planning to self administer their own medicines.

Ward 17 LGH is currently allowing patients to self administer, and the medicine information cards are reviewed daily.

Ward 30, IDU and YDU plan to go-live with self-administration towards the end of the year.

5. Monitoring and Compliance

The quality of cards and numbers produced are monitored monthly.

- number of cards produced by CBU
- Audit of accuracy and quality of the cards produced by spot checks
- Feedback from nursing and pharmacy staff to improve the database

6. Future Developments

A six month secondment of a pharmacy technician to support the implementation and provision of medicine cards initially at LRI is about to commence. The Project will include:

- Medicines Management Technician working with the pharmacy discharge teams to counsel patients on their medicines and offer a medicines card prior to discharge (not all patients would like or need a card)
- Assist the Senior Nurse Medicines Management in training nursing staff on the use of the database
- Increase and standardise medicines related patient information leaflets available – identification of key medicines/ therapeutic groups where patients would like further information.
- Create a web area for access to all leaflets - a student has gathered together all medicine related leaflets in use across the Trust.
- Develop other resources and tools to assist patients knowledge and adherence to medicines

Further work being explored at present is:

- The use of Braille and other language labels
- Pictograms – currently in development e.g.



- Variable dosing cards for steroids and loading dose regimens.
- Use of technology to sign post patients to reliable medicines information websites
- Simple adherence checklist

7. Conclusion

The implementation of the medicines information card is indeed a positive development which clearly demonstrates it's usefulness in enabling patients to understand their medications. It is envisaged that training of nurses and pharmacists

will continue so that all patients who require the service will have access to a card when and if appropriate.

The success of the improvements of the project will be monitored and measured through the monthly UHL patient polling survey.

The Clinical Support Division is committed to ensuring that providing Information as part of the Trust Wide Action plan continues and the delivery of key simple but effective initiatives, such as this, are developed to improve and give added value to UHL patient's experience.

8. Recommendations

The Trust Board is asked to note and support the content of this report.


References

Audit Commission. What seems to be the matter: Communication between Hospital and Patients. London. HMSO, 1993

CQC Standards(2009) Available:
www.cqc.org.uk/summary_of_regulations_outcomes_and_judgement_framework_081209.pdf

APPENDIX 1

EXAMPLE OF A MEDICINES INFORMATION CARD

University Hospitals of Leicester 		NHS Trust				Special Instructions	Possible side-effects	How long for?
Medication	Why am I taking it?	Breakfast time	Lunch time	Tea time	Bed time			
Aspirin 75mg dispersible tablet	To thin the blood	1				Dissolve in water before taking and take after food.	Stomach upset, wheezing - contact GP	Long term
Gliclazide 80mg Tablets	Diabetes	1		1		Take with food	Stomach upset, headache	Long term
Amlodipine 10mg Tablets	Blood pressure	1					Headache, fluid retention, fatigue, nausea, flushing, dizziness	Long term
Lisinopril 2.5mg Tablets	Blood pressure	1					Dizziness, headache, dry cough	Long term
Prednisolone 5mg Soluble Tablets-reducing dose	Suppression of inflammatory and allergic disorders	Reduce the number of tablets as directed on your printed instructions.				Take with food. Follow the printed instructions you have been given with this medication	Stomach-upset, fluid retention, bruising, osteoporosis	Variable

Date prepared 31/09/2011 **Pink Panther**
Date Printed: 31/08/2011 GH Ward 15

Affix Patient Label Here

Prepared by Checked by Medicines explained to patient

Page 1 of 2