



**West Midlands Academic Health Service
Network (WM-AHSN)**

**Safe Transfer of Medicines Stakeholder's
Event**

Held on the 16th April 2015

A Safe Transfer of Medicines Stakeholder's event, based on the principles of Experience Based Design, was conducted by the WM-AHSN Drug Safety Priority team. The aim of the event was to ensure regional involvement and engagement with the new 'Green Bag' scheme that is due to be initiated by WM-AHSN in Autumn 2015.

The vision for WM-AHSN is to develop an innovative 'Green Bag' package that will help support the 4 following objectives as set out in the Department of Health Action Plan (2012):

- To encourage patients in bringing their medications to the hospital
- To improve the transfer of patient's medications between different care sectors
- To increase the use of Patient's Own Medications (POMs)
- To help patients to use their own medications at home

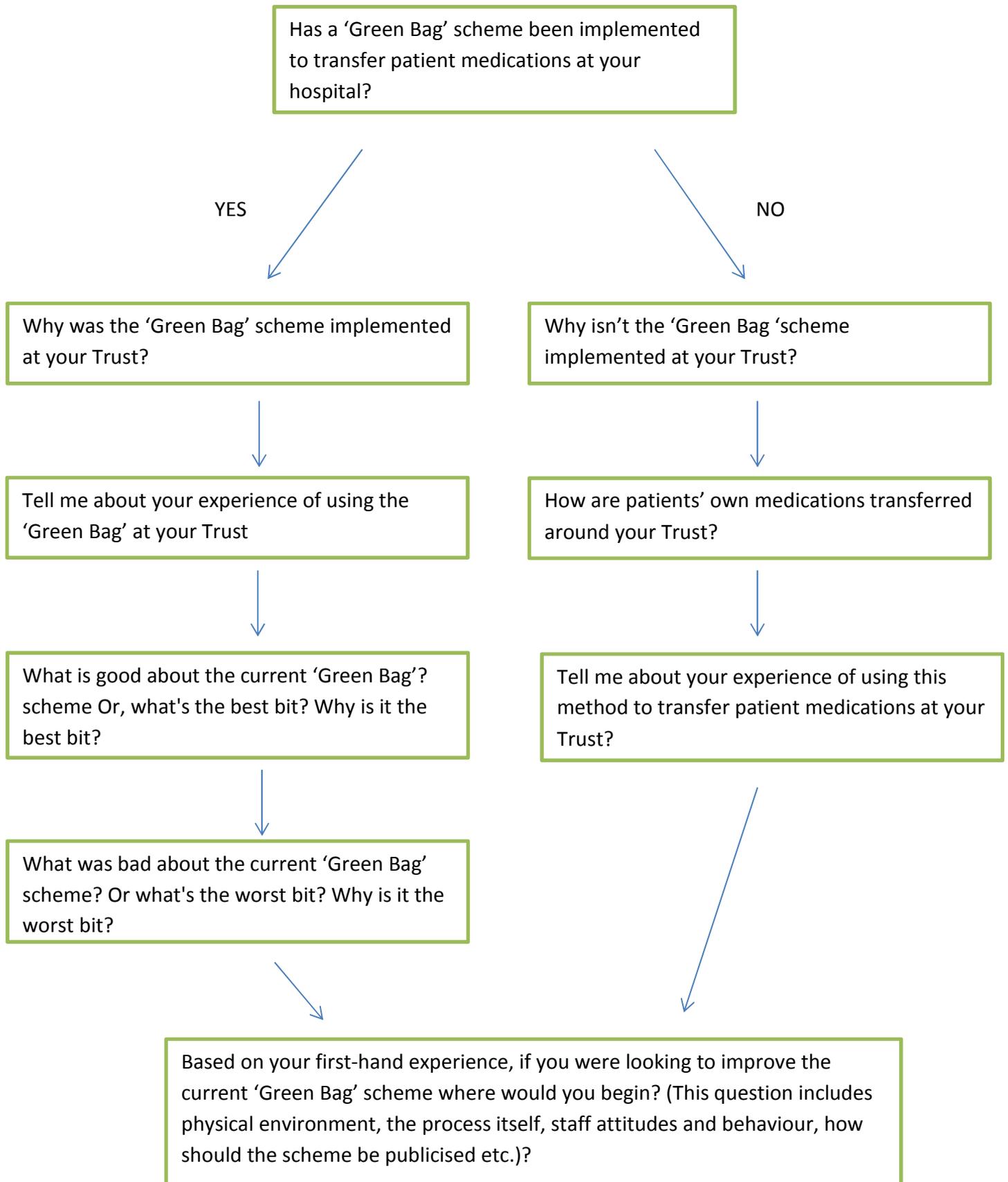
The focus of the 'Green Bag' package is to create (i) an innovative 'Green Bag', (ii) resources for healthcare professionals and patients i.e. leaflets and posters and (iii) template SOPs and guidance documents that will inform policy.

The event included 17 individuals, comprising a mixture of healthcare staff and a patient, all of which had previous experiences of either using the 'Green Bag' or medicines-related experiences. Participants had the opportunity to discuss and feedback suggestions and comments to members of the WM-AHSN drug safety priority team.

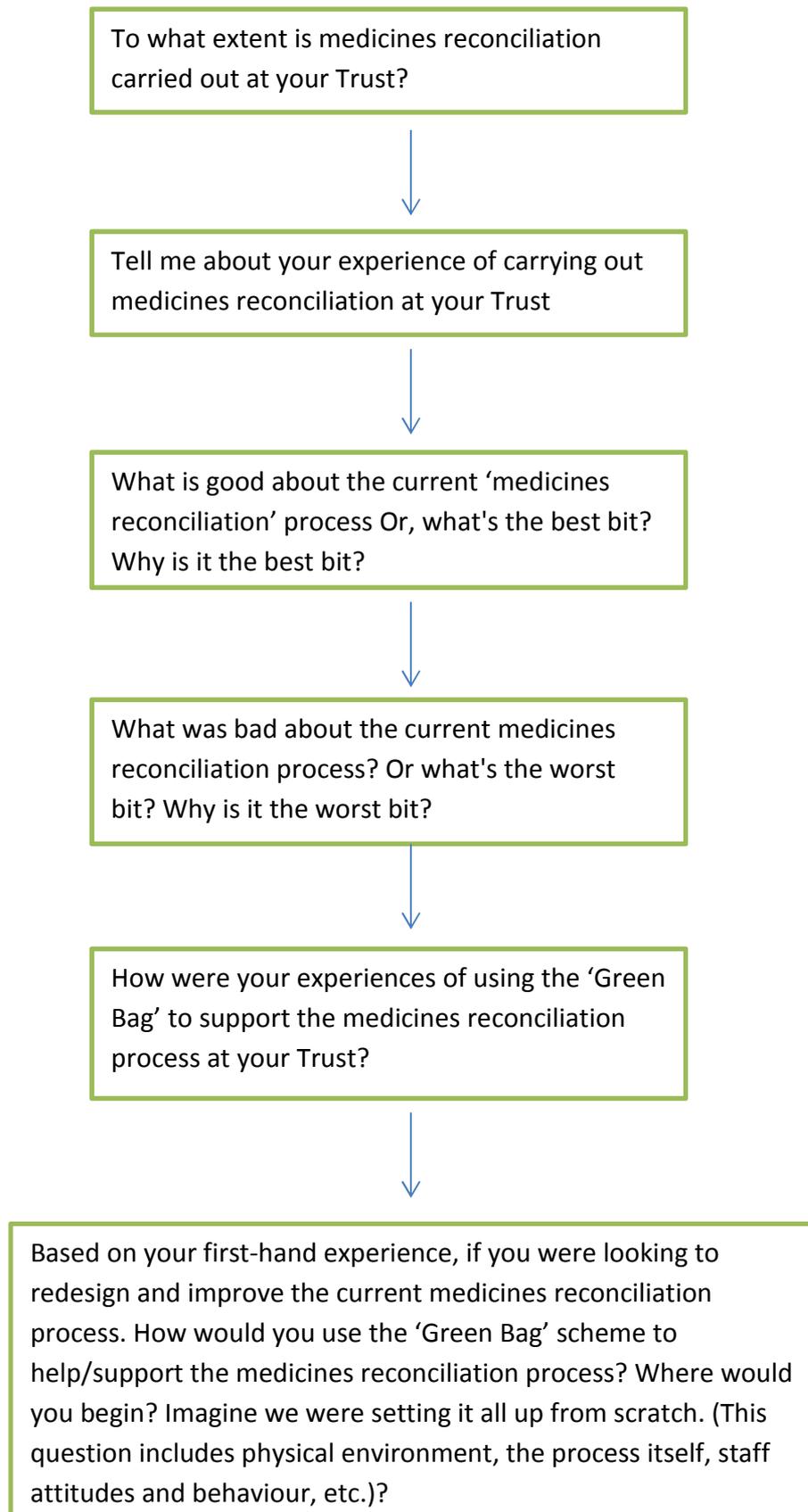
To facilitate the discussions, a framework of questions for each theme was used to prompt conversations by the facilitators. The themes at this event were the following:

- a) Current use of the 'Green Bag Scheme' at hospitals/Trusts
- b) Use of POMs at hospitals/Trusts
- c) Medicines reconciliation
- d) 'Green Bag' design

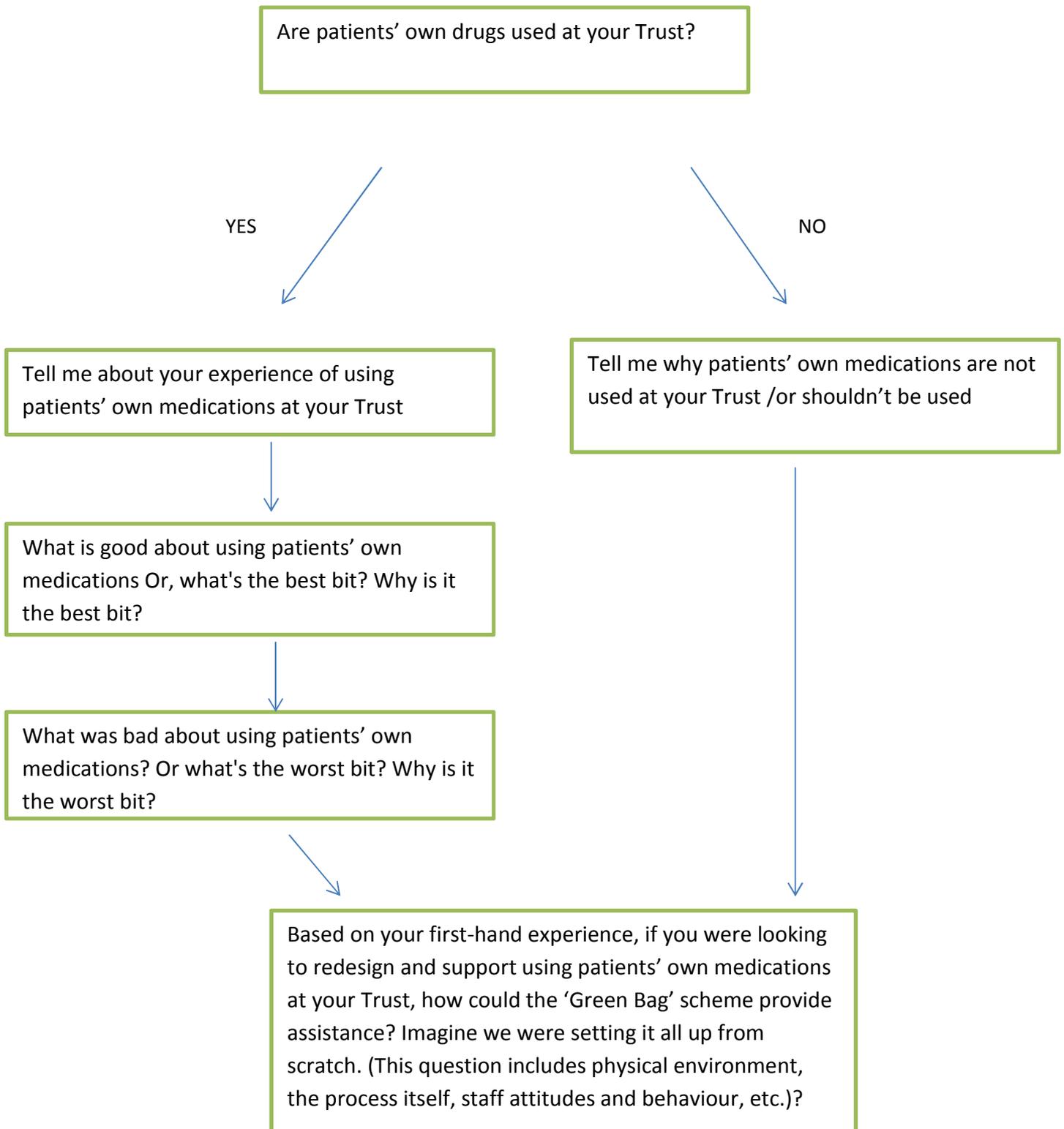
Theme a) Current use of the 'Green Bag' scheme in regional hospital Trusts and ways to improve implementation



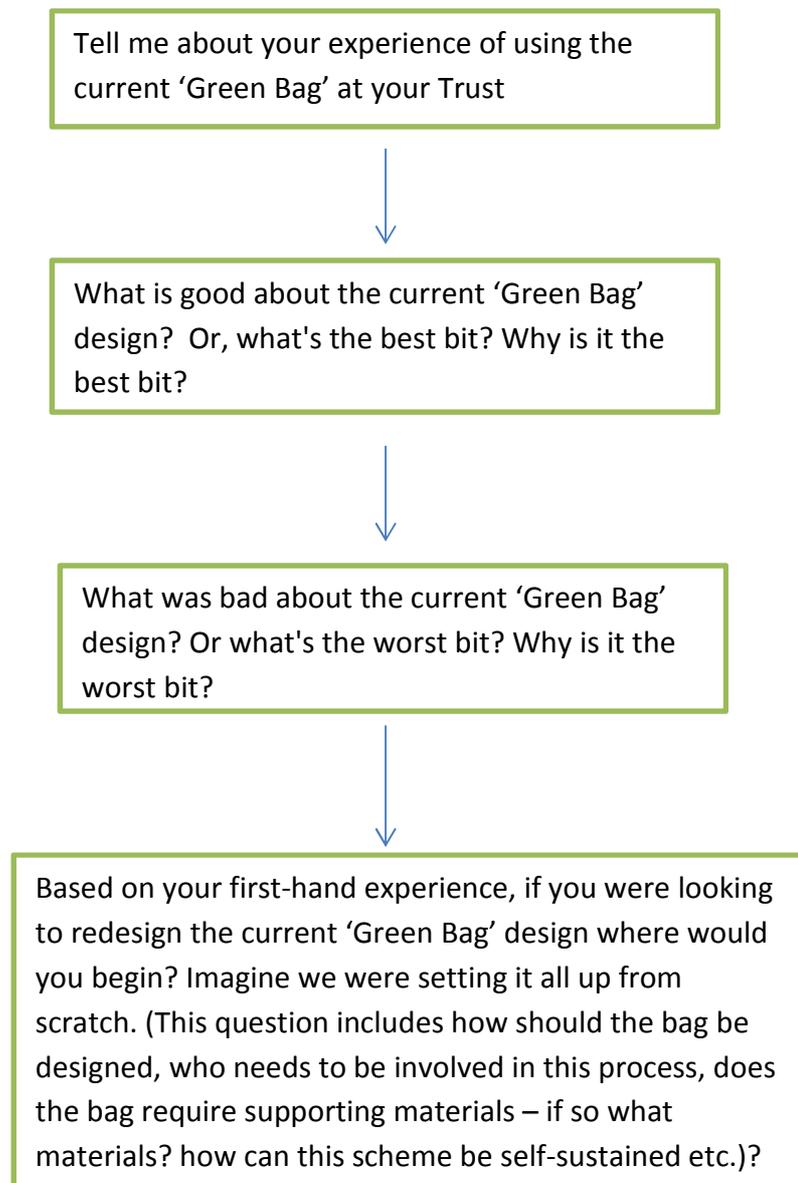
Theme b) Medicines reconciliation



Theme c) Use of Patients Own Medicines (POMs)



Theme d) Green Bag design

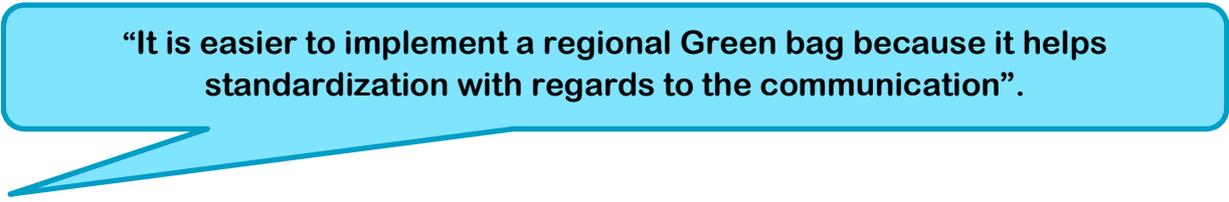


The conversations were recorded and the comments were divided into broad categories to identify key themes.

This report will concentrate on the participants' suggestions for developing a future 'Green Bag' package that is currently being created by the WM-AHSN. Overall, the participants' experiences of using the current 'Green Bag' at their Trusts generated a mixed response. However, many participants were very positive about the package which the WM-AHSN intends to implement. Many of the discussions included a variety of suggestions on how to ensure the success of the WM-AHSN 'Green Bag' scheme and how this 'Green Bag' can be used to achieve the 4 objectives set out by the Department of Health (2012).

Key Themes from the Stakeholder's Event

The strongest theme that ran through all the conversations was the need for a regional 'Green Bag'. The discussions stressed the importance of using a standardised process that will help support the transportation of patients' own medicines from a variety of settings. It was highlighted that standardization was key to communication.



“It is easier to implement a regional Green bag because it helps standardization with regards to the communication”.

Participants also expressed their need for support in implementing the 'Green Bag' scheme at their hospital/Trust. The participants felt that with the right support, they can gain the required 'buy-in' for the 'Green Bag' scheme from their colleagues and organisation.

Participants also expressed the need for 'catch-up' sessions regarding the implementation of the 'Green Bag' at their Trust/hospital. Many individuals believe this will provide them

the opportunity to feedback to other hospitals on the success of the scheme as well as to generate ideas on how to improve and sustain the 'Green Bag' usage at their hospital/Trust.

Theme A: Current use of the 'Green Bag' scheme

The response from the participants highlighted that the current 'Green Bag' has only been implemented to a limited extent regionally, whilst some Trusts do not support the scheme.

“The Green Bag scheme has never been implemented at our Trusts but we do see some 'Green Bags' coming into our hospital”.

The main barriers which participants felt with regards to implementing the 'Green Bag' scheme were the following:

- Lack of support for the scheme from colleagues
- Lack of encouragement of using the 'Green Bag'
- Shortage of time and energy to implement the scheme at their organisation
- The lack of regional implementation.

Participants also felt the need of re-launching a new 'Green Bag scheme' with the buy in from health care staff from a variety of areas including primary care, community pharmacy, ambulance service and secondary care. However, participants identified how this re-launch should also come with the emphasis on the role which the 'Green Bag' plays within the health care system and guidance on how this scheme should work across the many interfaces of care.

Furthermore, the participants acknowledged that by launching a fresh scheme with a regional green bag, a consistent approach to using a 'Green Bag' within the West Midlands

can be developed. This will reduce variation between the policies of different hospitals regarding the use of a 'Green Bag'.

“A regional Green Bag with a consistent approach to using a ‘Green Bag’, with consistent logistics and supply of ‘Green Bags’ will help reduce variation”.

The participants also agreed that the education must start with the gate-keepers of patient care i.e. the GPs and the community pharmacists who must support patients to take their medicines with them if they were admitted to the hospital.

The main barrier which the participants felt with regards to implementing the 'Green Bag' scheme is the practicalities regarding the 'Green Bag' within their organisations i.e. the storage of the 'Green Bag', removing POMs from the 'Green Bag', and the resources required for checking the contents of the 'Green Bag'. Participants identified the need of creating a clear system where healthcare staff understand their role and responsibility with regards to the 'Green Bag' at their Trust.

Theme B: Medicines Reconciliation

The participants described the whole medicines reconciliation experience, rather than just the procedure itself. They see the sources used for medicines reconciliation as a determining factor for accuracy. This includes physical sources such as GP referral letters, MAR sheets, clinic letters, summary care records, patients own medicines as well as the verbal account from the patient themselves.

“It is important to use a variety of sources because sometimes patients’ medication lists may not have been updated”.

As health care professionals, the participants understood the limitation of using particular sources when reconciling patients’ medications and the need of using a ‘Green Bag’ as a physical source of patient’s medication information.

How can the ‘Green Bag’ support the medicines reconciliation process?

The general consensus from the participants was that the ‘Green Bag’ scheme can be used as a tool for both patients and staff to advertise and educate the importance of bringing patients own medicines to the hospital and Trust.

Many participants would like to be able to view patient own medicines as they believe that it will ensure consistency that the medicines that are being prescribed for the patients corresponds to the medicines that have already been given to them.

Furthermore, the participants believe that patients bringing in their own medications to the hospital will not only save time but also support patients who get confused when asked medicines related questions.

“Patients are asked a lot about their medications and they can get confused and need to verify their own information by using a Green bag or another source”.

Theme C: Using POMs

Comments on the use of patient own medicines were both positive and negative. The general consensus was that POMs were not used at many of the hospitals/Trusts within the region however, in certain circumstances POMs were used, particularly if the patient's own medicines were non – formulary.

Many of the participants did identify the positives associated with using patients own medicines including quality, safety, cost-effectiveness and aiding communication.

Furthermore, many of the participants appreciated the positive affect of using patients own medicines at their Trust.

“Using patients own medicines will help patients to remain familiar with their own medicines and can help to reduce missed doses”.

Some participants shared their experiences with how the ‘Green Bag’ supported the use of patients own medicines at their Trusts. This includes the ‘Green Bag’ supporting the transfer of patients own medicines between different departments as well as improving the care given by the organisation.

“Other Trusts have shown that the ‘Green Bag’ worked well and shows the flow of patients own medicines. The scheme helped with regards to safety, cost and improves the care that is given”.

The main barrier which some participants felt using patient own medicines was centred on safety.

“In order to use patients own medicines, the medicines need to be labelled correctly. On admission the medicines might be appropriate to use but as the patient continues on their pathway that medication may not be”.

This barrier reflected the need of cohesive system which supports the changes associated with patient treatment.

Theme D: Green Bag design

Participants were generally complimentary about designing a regional ‘Green Bag’ and package. The feedback gained centred on producing a simple bag with a direct message of the key role of the ‘Green Bag’. The participants also recognised the need of producing resources for both patients and staff so they can understand how the ‘Green Bag’ is to be used.

Material

Participants identified the need of producing information leaflets and a checklist for patients regarding the ‘Green Bag’. Many felt the checklist should contain instruction on what medicines should be placed in the bag including prescribed and non –prescribed medicines as well as prescriptions, letters etc.

Next day option

Participants also recognized the option for patient's families to be able to bring in patients medicines the next day if the patient's medicines have not been brought to the hospital, particularly in emergency admissions.

Distribution of bags

The contributors acknowledged the important role which the West Midlands Ambulance Service plays with transporting patients own medicines to the Trust but the contributors also acknowledged that hospital staff should also give out 'Green Bags' within pre-admission screening, pre-op clinics and A&E

Education

Participants highlighted the need of educating both the patients and staff about the importance of the 'Green Bag' using many methods including through advertising, awareness campaigns but also at Trust inductions.

Studies

Many of the participants highlighted the need of producing studies where organisations have benefited from using a 'Green Bag' as they believe that this could help with the engagement with stakeholder's and also will generate interest in the scheme.

Policies and Procedures

The general consensus was that SOPs and guidelines should be produced for the healthcare professionals on how to use and transport the Green Bag between different organisations and wards.

Many individuals highlighted the importance of implementing a cohesive process where all health care staff from different organisations understood their role to transferring patient's medicines as the participants believed this would increase clarity between different organisations and the role that they play in the scheme as well as reducing errors.