Embedding Medicines Optimisation in Acute Elderly Care

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Introduction

Medicines optimisation is defined by NICE as "a person-centred approach to safe and effective medicines use, to ensure people obtain the best possible outcomes from their medicines". This should a be a core aspect of clinical pharmacy services.

The challenge

How to embed medicines optimisation as standard clinical practice across four acute elderly care wards.

Methods



CYCLE 1

Collation & review of medicines optimisation references/tools & local SET guidance. Information distilled to an A4 summary Medication Review Guide & reviewed by senior pharmacists in all clinical specialties.





CYCLE 2

Clinical Pharmacy Record adapted to incorporate medicines review section covering key aspects of medicines optimisation.



Introduction of A4 Medication Review Guide and revised Clinical Pharmacy Record into daily practice in one acute elderly care ward. Guide & Clinical Pharmacy Record refined.

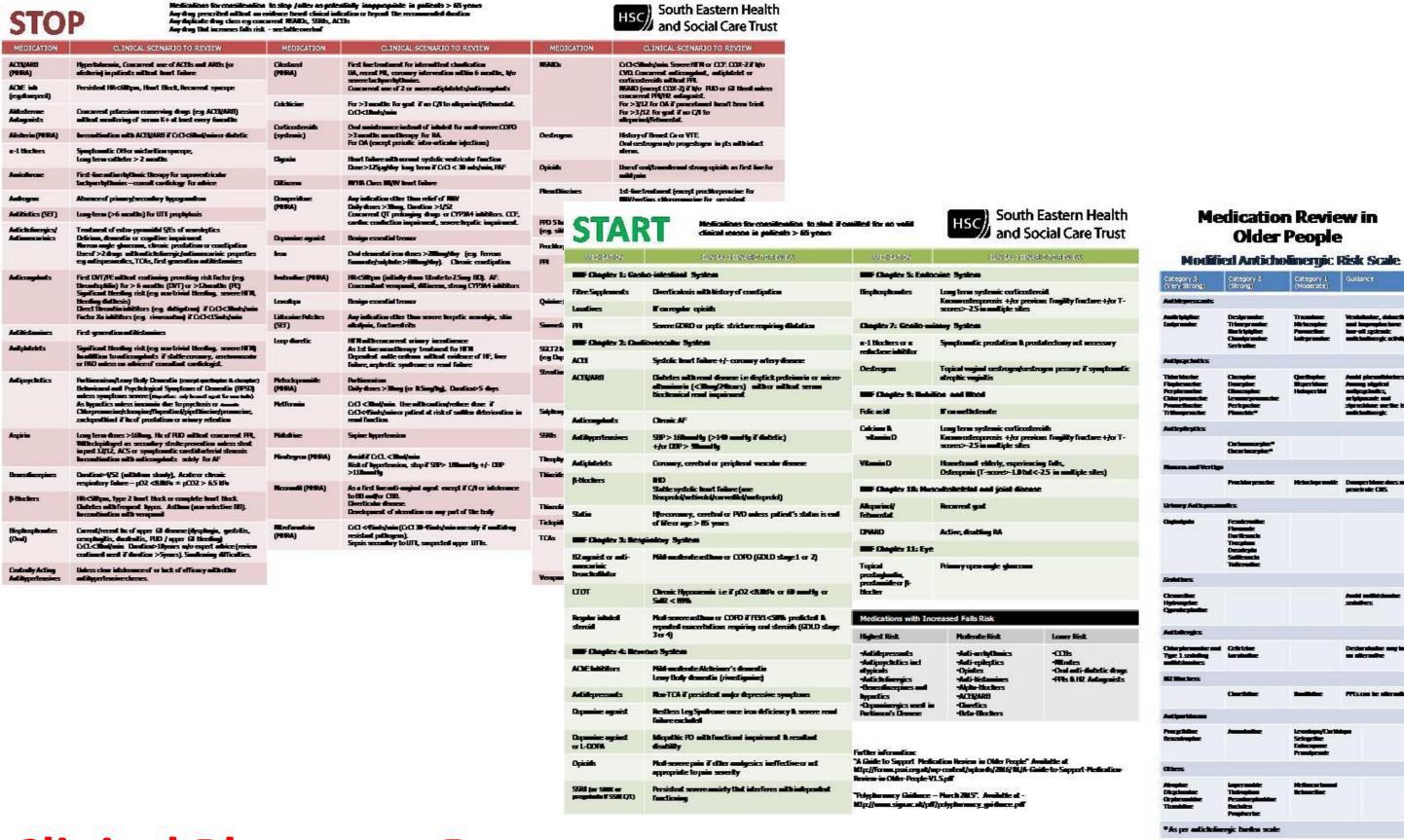




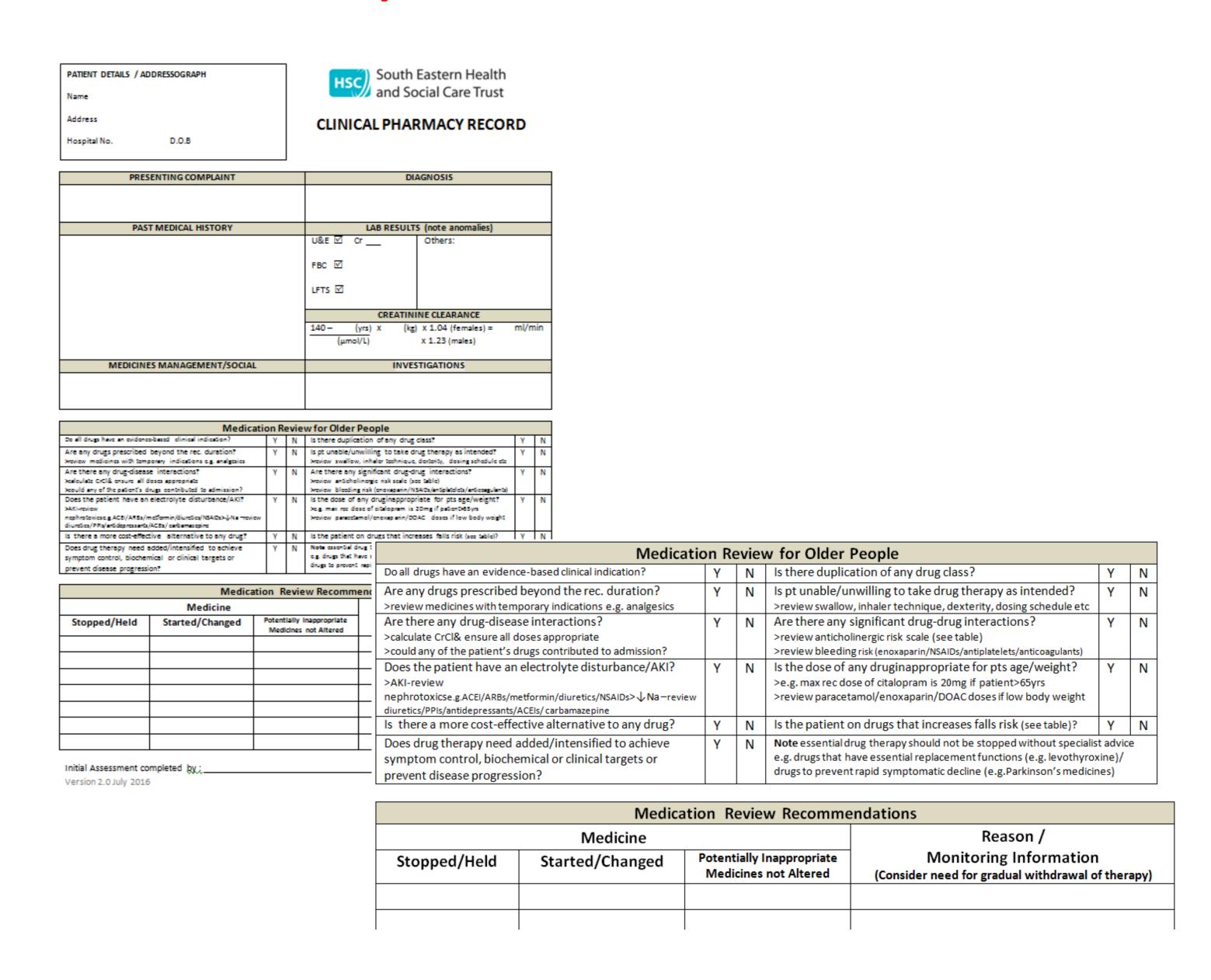
CYCLE 4

Roll out of Medication Review Guide & Clinical Pharmacy Record to other acute elderly wards.

A4 Guide



Clinical Pharmacy Record



Next steps

- Medication Review Guide & Clinical Pharmacy Record under ongoing review. Currently in consultation with gastroenterology consultants regarding PPI advice.
- Multidisciplinary implementation and measure of impact of guide on medicines optimisation.
- Spread to other clinical areas.
- Audit use of guide in acute elderly care & potential cost savings.

Conclusions

Medication Review Guide and Clinical Pharmacy Record:

- embed medicines optimisation into daily clinical pharmacy practice.
- provide useful training materials for staff rotating through the area.
- ensure consistency of approach to medicines optimisation in acute elderly care using latest evidence base.
- provide detail to facilitate clear communication with primary care on discharge.