

MEDICINES MANAGEMENT
Aspects of Independent Inquiries into
Collin Norris Incident, Airdale and Devon
Mental Health and Learning Disabilities

1. Introduction

Medicines Management encompasses all aspects of the way medicines are procured, prescribed, administered and reviewed to optimise outcomes of patient care. The overarching principles of medicines management incorporate strategic pharmaceutical leadership, professional advice, clinical engagement, risk management, performance management, and operational support in order to ensure safe and effective pharmacy arrangements. Audits of inpatient wards have suggested 98% of care plans in mental health services involve medication.¹

The importance of medicines management within mental health has been highlighted to mental health trust boards in reports from both the Audit Commission and HCC.

There are three key components needed to produce a safe, quality assured service:

1. Safe staffing (covering strategic direction, policy development, performance management, corporate risk management, and professional leadership).
2. Safe systems (operation governance, standard operating procedures, and incident reporting).
3. Effective practice (audit, education, training, and supervision).

Controlled drugs are prescribed medicines usually used to treat severe pain, induce anaesthesia or treat drug dependence. They have an important role in treating a range of clinical conditions and are valuable therapeutic agents. Due to the potential for abuse these are subject to special legislative controls. Controlled drugs are those defined in the Misuse of Drugs Regulations (2001). This classifies the drugs into five schedules according to the different level of control required, depending on the perceived risk of abuse of the particular drug or preparation.

2. Background

This report has been written for the Patient Safety Committee. Medicines Management has been included within the terms of reference of each of these inquiries. The final recommendations of the reports have not always included the recommendations made around medicines management within the report itself. This means that some of the learning points are lost.

This demonstrates a serious weakness in the reports as some of the findings reflect themes common to each of these and earlier reports, eg. inadequate/lack of pain management guidance, which was also found to be a problem within the CHI report on Gosport, reappears in Colin Norris and was found to be a problem at Airdale. Inadequate staffing levels of medicines management team is a common feature in Colin Norris, Portsmouth and Airdale Reports. The Devon report includes an appendix dedicated to the Trust's provision of pharmacy services, clinical pharmacy support and the extent of clinical supervision in relation to Controlled Drugs, but the detail is again not reflected in the report.

¹ Healthcare Commission (June 2007) *Talking about medicines: The management of medicines in trusts providing mental health services.*

