

Policy Group: Clinical
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Approved by: MMOG/Executive Team

Medicines Policy

1. Policy Summary / Statement

St Andrew's Healthcare is committed to ensuring the optimal, safe and effective use of medicines in accordance with legislation, professional and good practice guidelines. This enables the best possible outcomes for service users within our services.

The term 'medicine' embraces all medicines and medicinal products that are administered by mouth, applied to the body or introduced to the body for the purpose of treating, managing or preventing disease, diagnosing or ascertaining the existence, degree or extent of a physiological condition, contraception, inducing anaesthesia, or otherwise preventing or interfering with the normal physiological function.

Medicines are the most common treatment intervention in healthcare and their use is increasing as more people live with a greater number of long term conditions. Using medicines optimally and getting the most from them is an essential component of value based healthcare.

Medicines optimisation is defined as 'a person centred approach to safe and effective medicines use, to ensure people obtain the best possible outcomes from their medicines'. This policy aims to ensure that medicines are used in accordance with the four guiding principles of medicines optimisation at all times thereby promoting physical and mental health and wellbeing.

The four guiding principles of Medicines Optimisation are:

- Aim to understand the service user's experience
- Evidence based choice of medicines
- Ensure medicines use is as safe as possible
- Make medicines optimisation part of routine practice

The St Andrew's Registered Pharmacy oversees medicines use within St Andrew's Healthcare. It supports legal and safe medicines procurement and management, value based supply and use of medication and governance and monitoring of medicines.

- The Executive Medical Director is the Board Member with responsibility for Pharmacy and is also the Controlled Drug Accountable Officer (CDAO) for the Charity
- The Head of Pharmacy is the Superintendent Pharmacist for the St Andrew's Registered Pharmacy and is also the Medicines Safety Officer (MSO) for the Charity
- Registered Pharmacy Professionals are members of the clinical multidisciplinary teams to support medicines optimisation and provide advice and guidance on medicines related issues to service users, staff and carers

The electronic Pharmacy, Prescribing and Administration system (ePMA) enables safer use of medicines across clinical areas.

This policy applies to all staff within St Andrew's hospital registered services who are involved in any aspect of medicines use. It must be read in conjunction with the medicines procedures. These provide detailed guidance on medicines use and the processes that must be followed to minimise risks and ensure compliance with legislation and good practice standards.

It is a professional and contractual responsibility for all staff involved in the handling of medicines to follow relevant policies and procedures relating to the use of medicines and to only undertake duties and tasks that they are competent and authorised to complete.

2. **Links to Procedures**

Prescribing of Medicines Procedure
Non-Medical Prescribing Procedure
The Administration of Medicines Procedure
Self Administration of Medicines Procedure
Controlled Drugs Procedure
Non Prescribed Psychoactive Substances Procedure
Medicines Reconciliation Procedure
Injection Procedure
High Dose Antipsychotic Medication Procedure
Treatment of Acutely Disturbed Behaviour by Rapid Tranquilisation Procedure
Use of Clozapine 25mg/ml Injection Procedure
Oxygen Procedure
Unlicensed Medicines Procedure
Critical and High Risk Medicines Procedure
Medication Care Plans Procedure
Obtaining Medicines Procedure
Storage of Medicines Procedure
Disposal of Medicines Procedure
Management of Medication Errors and Incidents Procedure
Medicines Formulary Procedure
Medicines Supplier Representative Visits Procedure
Drug Alerts Procedure

Policies and procedures available via the Policy A-Z:

[Policies - Policies - A-Z \(sharepoint.com\)](#)

3. **Monitoring and Oversight**

This Policy is the responsibility of the Executive Medical Director. Compliance with the Policy and assurance in relation to the implementation of the Policy sits with the Medicines Management Operational Group. This group feeds into the Quality and Safety Group, which reports to the Executive Team meeting and provides assurance to the Quality and Safety Committee.

4. **Diversity and Inclusion**

St Andrew's Healthcare is committed to *Inclusive Healthcare*. This means providing service user outcomes and employment opportunities that embrace diversity and promote equality of opportunity, and not tolerating discrimination for any reason

Our goal is to ensure that *Inclusive Healthcare* is reinforced by our values, and is embedded in our day-to-day working practices. All of our policies and procedures are analysed in line with these principles to ensure fairness and consistency for all those who use them. If you have any questions on inclusion and diversity please email the inclusion team at DiversityAndInclusion@standrew.co.uk.

5. Training

All registered healthcare professionals are personally and professionally responsible for ensuring that their knowledge, skills and performance in relation to medicines are of a high standard, up to date and relevant to their role and area of practice. Individuals must be aware of the limits of their professional competence and refer to others when necessary for advice and support.

Medicines related training is made available by St Andrew's for staff where medicines use is part of their role. This includes E Learning, face to face training sessions delivered by pharmacy staff and the provision of competency workbooks to support individual learning.

Medicines refresher training is available and must be completed every three years as part of revalidation.

For Nurses and other staff who administer medication the medicines competency assessment and calculation assessment must be completed and passed before independent administration and management of medication can take place.

6. References to Legislation and Best Practice

NICE Guidance NG5 – Medicines Optimisation: the safe and effective use of medicines to enable the best possible outcomes, March 2015 [Medicines optimisation: the safe and effective use of medicines to enable the best possible outcomes \(nice.org.uk\)](https://www.nice.org.uk/guidance/ng5)

RPS Medicines optimisation: helping patients get the most from their medicines May 2013 [Medicines Optimisation | RPS \(rpharms.com\)](https://www.rpharms.com/medicines-optimisation)

RPS Professional Standards [Professional Standards & Guidelines for Pharmacists | RPS \(rpharms.com\)](https://www.rpharms.com/professional-standards)

RPS Medicines Ethics and Practice Ed. 44 July 2021 www.rpharm.com

RPS Polypharmacy getting our medicines right Feb 2019 [Polypharmacy: Getting our medicines right \(rpharms.com\)](https://www.rpharms.com/polypharmacy)

GPhC Standards for Pharmacy Professionals May 2017 [standards for pharmacy professionals may 2017 0.pdf \(pharmacyregulation.org\)](https://www.pharmacyregulation.org/standards-for-pharmacy-professionals-may-2017)

GPhC Standards for registered Pharmacies June 2018 [standards for registered pharmacies june 2018 0.pdf \(pharmacyregulation.org\)](https://www.pharmacyregulation.org/standards-for-registered-pharmacies-june-2018)

CQC Medicines in health and adult social care Learning from risks and sharing good practice for better outcomes June 2019 [Medicines in health and social care - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications-reports/medicines-in-health-and-adult-social-care)

The Human Medicines Regulations 2012 www.gov.uk

The Medicines Act 1968 www.gov.uk

Misuse of Drugs Act 1971 (and its associated regulations) www.gov.uk

Misuse of Drugs Regulation 2012 www.gov.uk

Health and Social Care Act 2008 (Regulated Activities) Regulation 2014: Regulation 12 www.cqc.org.uk

7. How to request a Change or exception to this policy

Please refer to either the [Policy and Procedure Update Application Link](#)
Or the exception process [Policy and Procedure Exception Application Link](#)

8. Key changes

Version Number	Date	Revisions from previous issue
1	May 2019	Replaced MO1
1.1	Jan 2020	No material change – corrected faulty hyperlinks
2	July 2022	Reviewed and no significant changes required. Minor updates made to reflect the current list of procedures and changes to terminology since previous version