

Caring for SAM in our older people's community

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Introduction

Self-Administration of Medicines (SAM) involves the service user looking after and taking their prescribed medication whilst staying in a healthcare facility. To enable service user confidence and autonomy in medicine taking and identification of medication adherence issues prior to discharge, a SAM scheme was piloted and evaluated in Chestnut Grove Older People's Intermediate Care(IC) facility (May 2019). Enabling service users to take their medicines safely and effectively has been a longstanding challenge for health and social care. The need to support people to remain independent and self-manage their medicines where possible is underpinned by NI Department of Health and national NICE Medicines Optimisation guidelines. Currently service users in Intermediate Care facilities have their medication administered by care staff, during prescribed medication rounds.

The consequences of this practice include:

- Service users lose independence and confidence.
- Service users become deskilled.
- Medicine adherence issues are not identified and no solutions/help provided.
- Increased requirement for care packages & compliance aids.

Outcome measure: % of service users self administering medication.

Process measure: No. of staff receiving SAM training, % compliance with SAM assessment/protocol, No. of staff who receive training reporting an increase in confidence in SAM.

Balance measure: Adverse incidents with patients who self administer e.g. wrong dose or poor compliance, Impact on staff workload.

Process measures

1. 40 service users were originally enrolled in the pilot with 34 successfully undertaking SAM
2. 100% of staff within Chestnut Grove completed the required SAM training
3. Staff were 100% compliant with completion of SAM assessment/protocol
4. All care home staff overseeing patients participating in SAM Strongly agreed/ Agreed that SAM:
 - Improved patient knowledge and familiarity with their medicines
 - Educated and empowered patients to take responsibility for their medicines
 - Increased patient independence

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Balance measures

1. During the SAM project there were no reported Adverse Incidents
2. Staff were neutral about the impact of SAM on their workload

Learning & impact on service users/staff

Medicines Adherence issues identified & addressed: Six service users had to withdraw from SAM. Engagement with SAM identified adherence issues of service users who previously required no assistance at home with medication. This enabled appropriate support to be put in place on discharge e.g. referral to adherence pharmacist for follow up in the Community.

Reduced necessity for initiating compliance aids: Positive service user feedback; 100% patients Strongly agreed/Agreed that:

1. SAM gave them the chance to become more familiar with their medicines
2. SAM made them feel more independent
3. They would want SAM as choice on admission to a healthcare facility

Challenges & learning

1. Low number of eligible service users in unit during pilot (No. of beds reduced due to staffing)
2. Storage/access to medications in safe (mobility/vision)
3. Staffing/resources limiting changes/project
4. Regular education/ communication is key to achieve change

Developments

1. SAM Protocol approved by BHSCT Standards and Guidelines Committee 2020
2. Engaging with regional Medicines Optimisation Older People(MOOP) pharmacy team to support SAM implementation

Future plans

1. Cascade the learning to other BHSCT service areas
2. Offer SAM as routine for all eligible patients in Chestnut Grove
3. Evaluate the financial impact of SAM

Biography

Clare Conroy is the Lead Case Management Pharmacist for Intermediate Care in Belfast Health & Social Care Trust and is an integral member of the Medicines Optimisation in Older People(MOOP) Pharmacy team. Her role involves reviewing medicines use in older people to address polypharmacy and ensure an evidence-based approach to prescribing. Clare links closely with multidisciplinary teams and primary care services and delivers education sessions on a range of topics pertinent to medicine use in older people.