GHP Guild of Healthcare Pharmacists

18th November 2016

Royal Pharmaceutical Society

Consultation on Professional Standards for optimising medicines for people in secure environments

Response from the Guild of Healthcare Pharmacists

Thank you for the opportunity to respond to this consultation. The Guild of Healthcare Pharmacists represents UK wide around 4,500 pharmacists including the majority of hospital pharmacists, pharmacists employed by NHS Primary Care organisations and pharmacists employed by other public bodies such as Prisons and the Care Quality Commission. The Guild is part of the health sector of the union Unite.

Our answers to the questions are as follows:

Question 1. Do the standards in Domains 1-3 describe the patient journey from admission into the secure setting, optimising medicines during their stay and preparing for release into the community (in the UK or abroad) or transfer into another secure environment? If no, can you provide details on how this can be improved?

We agree with and are supportive of the domains and underpinning standards. We do however have the following comments to make:

- Standard 1 should contain a reference to the full medicines reconciliation definition for clarity
- Section 2 should contain a reference to risk assessments relating to safe storage of medicines associated with an in-possession policy e.g. ligature risks of storage vessels, safe access to medicines, risks of diversion etc.
- Box 1 refers to 'provision of monitored dosage systems to encourage self-administration'. This point needs to be amended to ensure it is clear that MDS are not suitable for all patients at all times, require a full assessment and should only be used where appropriate.
- Standard 4.3 refers to safe storage, but as with the reference made above it may be useful to highlight some 'good practice points' on how this can be achieved, including reference to storage, access, temperature monitoring etc.
- Standard 6 disallows the use of private prescriptions, however we believe this may be setting dependant? The document may usefully discourage this, rather than outright disallow.
- Section 6.14 should make reference to appropriate use of shared care guidelines e.g. where a medicine may be initiated by a secondary care prescriber and continued in primary care under set circumstances. People in a secure environment should not be excluded from this so it may be beneficial to have a specific reference.

- We are pleased to see the reference in Standard 8.3 to appropriately trained pharmacy technicians being able to provide certain services
- Section 10 should refer to pharmacy staff providing clinical services needing to have appropriate knowledge, training and experience. For example many people cared for in these settings will have mental health problems (either pre-existing or developed during their stay) and it is important that clinical pharmacy staff are able to manage these.
- Standard 12 should refer to an assessment of clinical risk when medicines are supplied for people when they leave. For example it may only be appropriate for a 7 day supply of medicines if the patient is at risk of suicide. This should also be referred to in Box 2, along with an indication of how much medicine has been supplied and the reasons for this

Question 2. Do the standards in Domains 4 and 5 describe the governance and workforce elements that are needed? If no, can you provide details on how this can be improved?

Standard 16.2 refers to SOPs needing to be ratified by the MMC. We would suggest that an internal governance structure should provide MMC with the assurance that such SOPs exist and are managed, but that individual procedures need not require the direct approval of MMC itself.

Question 3. Are there any standards which are placed in the wrong domain? If yes, which standards and where do you think they should they be placed?
No

Question 4. How would you/organisation use the standards once it's published?
N/A

Question 5. What might be the financial and/or organisational barriers to using these standards in practice?
N/A

Question 6. Any other comments or feedback you would like to provide?
No

We hope these comments are of assistance. Our reply may be made freely available.

Yours faithfully

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