



Medicine Administration Support in the Domiciliary Setting Project Development Report - January 2005

Project Aim

To promote independence and facilitate the care of people by providing a joint person-centred medicines support service through the use of common policy, guidance and an assessment tool as part of the single assessment process and the development of a more generic approach to the community care assistant role.

Objectives

- To support people in managing/taking their prescribed medicines where they need assistance to do so, through a shared approach between health and social services.
- To enable service users to manage their own medication with as little intervention as possible.
- To meet the needs of people regardless of age, gender, ethnic group, culture, religion, disability and personal relationships.
- To assist people to leave hospital in a timely and safe way.
- To reduce medicines waste and hoarding and impact positively on prescribing costs.
- To provide a specialist assessment linked to the Single Assessment Process.
- To ensure the service complements National Care Standards for Domiciliary Care and Care Homes.
- To improve the medicines management process by providing help and guidance on the correct use of medicines and facilitate the early identification and resolution of medicines related problems.
- Increasing the number of people helped to live at home through maintaining their independence including the percentage in receipt of intensive domiciliary care.

Benchmarking

Similar service delivery projects have been implemented in Norfolk, Derby, Southampton and elsewhere in England, however, we are not aware of any other project linking SAP, concordance, workforce development and avoiding admissions as a single project.

Project History

Report 'Assisting People with Prescribed Medication in the Domiciliary Setting' presented to ASMB	.....June 2003
Decision to move forward with project	.....November 2003
Medicines Administration Support Steering Group formed	.....December 2003
Concordance Assessment Tool ratified	.....December 2003
Business Case presented to ASMB	.....January 2004
Legal aspects of project defined	.....March/June 2004
Project update at ASMB	.....May 2004
Project presented to DSS SMG	.....May 2004
JCC briefed	.....October 2004
Project pilot commenced in Teignbridge PCT	.....January 2005
Training for pilot commenced	.....January 2005
Pilot evaluation initiated	.....January 2005

Significant Work

- 'Categories' of Medicine Administration Support Defined
- Development of Business Case
- Development of DSS Policy Document
- Development of DSS Procedural Guidance Document
- Review of DSS Invasive Procedures (draft) Policy Document
- Development of Medication Review Guidance Document
- Training Programme for Category 1, 2 and 3 Support
- Training Competences and Standards for Category 1, 2 and 3 Support
- Training Programme for use of Concordance Assessment Tool
- Training Competences and Standards for use of Concordance Assessment Tool
- Pocket Guidance for Care Workers
- Project Evaluation Criteria Defined
- Development of Nurse Accountability and Delegation of Tasks Paper
- Compliance Aid Standards (Exeter PCT)

Associated Projects and Work

- Devon Single Assessment Process (SAP)
- Devon Falls Register
- Use of Concordance Assessment Tool outside of SAP
- The Accelerated Development Programme

Website:

<http://www.devon.gov.uk/medicines-support>

Project Lead:

Del Cathery
Modernisation and Best Value Development
Officer
dcathery@devon.gov.uk