

Raising awareness of STOMP through regulation

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Care Quality Commission

Medicines Optimisation Team

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We support

STOMP

Stopping over-medication of people
with a learning disability, autism or both

Count me in!

Our purpose

- We are the Care Quality Commission (CQC). We check how good health and social care services are in places like:
 - care homes
 - hospitals
 - GP surgeries
 - care in your home



People have a right to expect safe, good care from their health and social care services

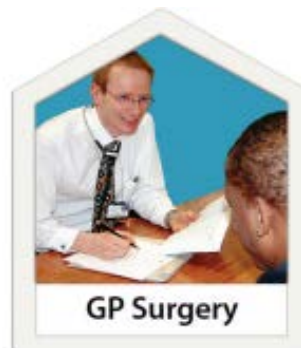
State of care

- People got the same quality of care in England as the year before.
- Most people told us that the care was good.
- Some people told us about different types of care they got. Some care services were good and some were not so good.



What stops you getting good quality care?

1. Access to care
2. Quality of care
3. Care workers
4. What people need
5. Money



- The Care Quality Commission has a medicines team because:
 - medicines are used most often to improve health
 - medicines can cause problems for some people
 - medicines are used in every service we visit
- We work with all inspectors in CQC to make sure that people have access to safe and effective treatment



3rd WHO Global Patient Safety Challenge

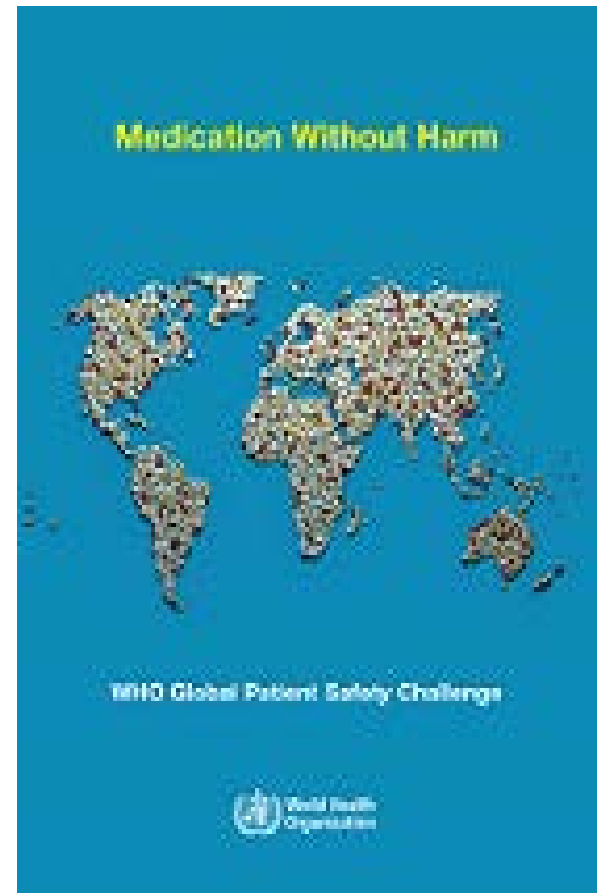


Aim:

To reduce the level of severe, avoidable harm related to medicines by half over 5 years

Priorities:

- People taking lots of medicines
- High risk situations
- Transfer of care – moving between services



The burden of medicines errors

Medicines errors can include prescribing, dispensing, administration and monitoring errors.

237 million
medicines
errors occur
in the NHS in
England
every year



68.3 million
errors (28%
of total)
cause
moderate or
serious harm

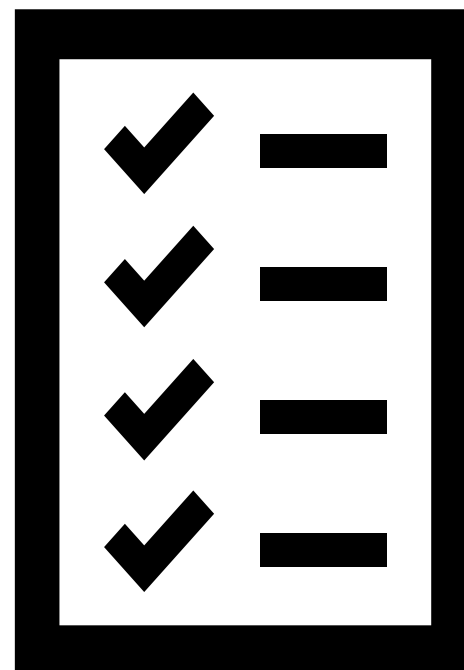


Causing 712
deaths, and
contributing
to 1,708
deaths



How do we look at this when we inspect?

- We ask five key questions
- Our questions are also called key lines of enquiry or KLOEs
- KLOEs are supported by guidance on the key things to consider as part of the assessment; these are called prompts
- Each KLOE has a defined set of ratings characteristics – what does ‘good’ look like?



How does the social care provider ensure the proper and safe use of medicines?

- Policy and training
- Records and administration
- Storage and security
- Medicines and the Mental Capacity Act
- Using medicines to help people with their behaviour
- Medicines support needs
- Medicines reviews
- Transfer of care



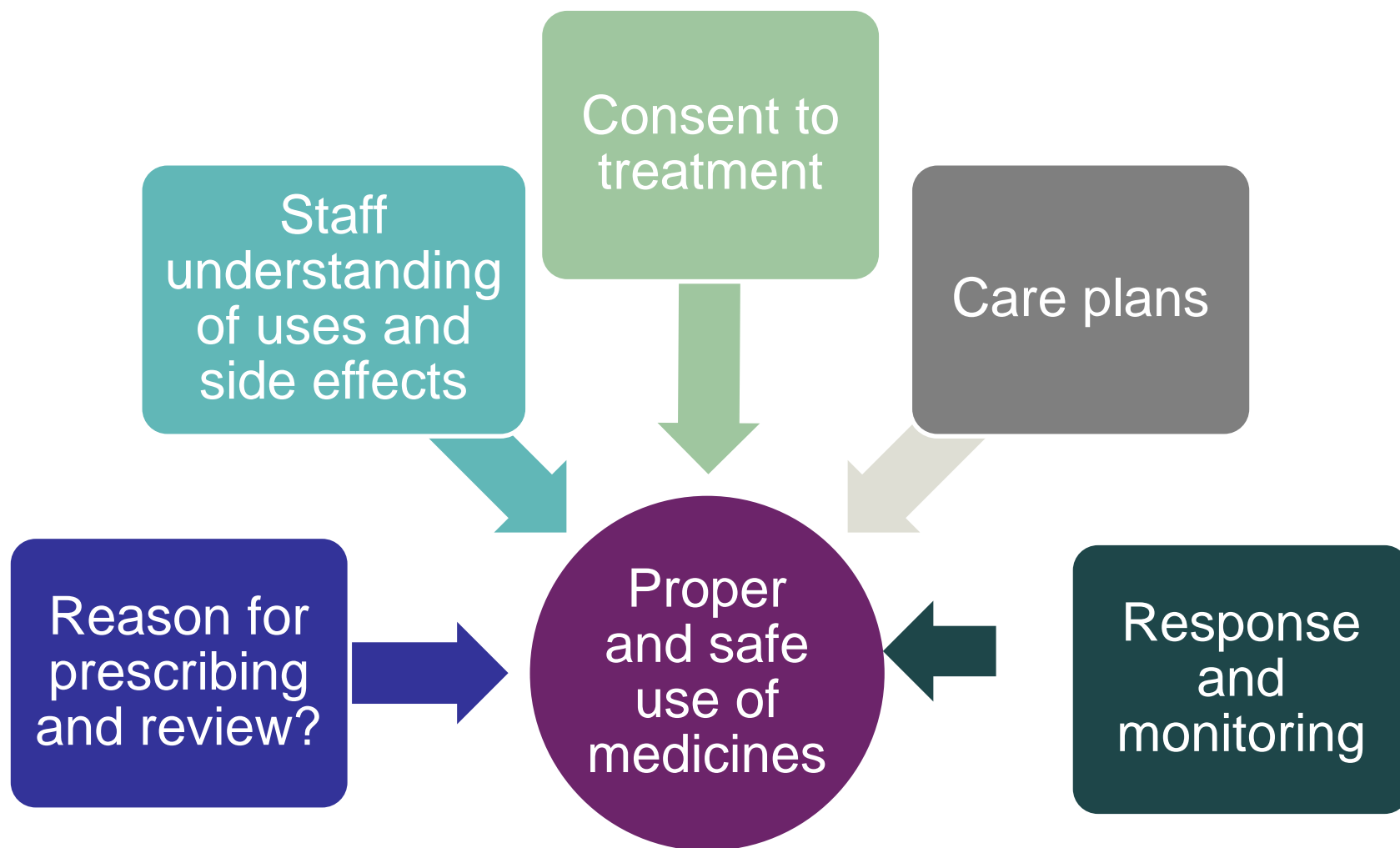
Is it safe?

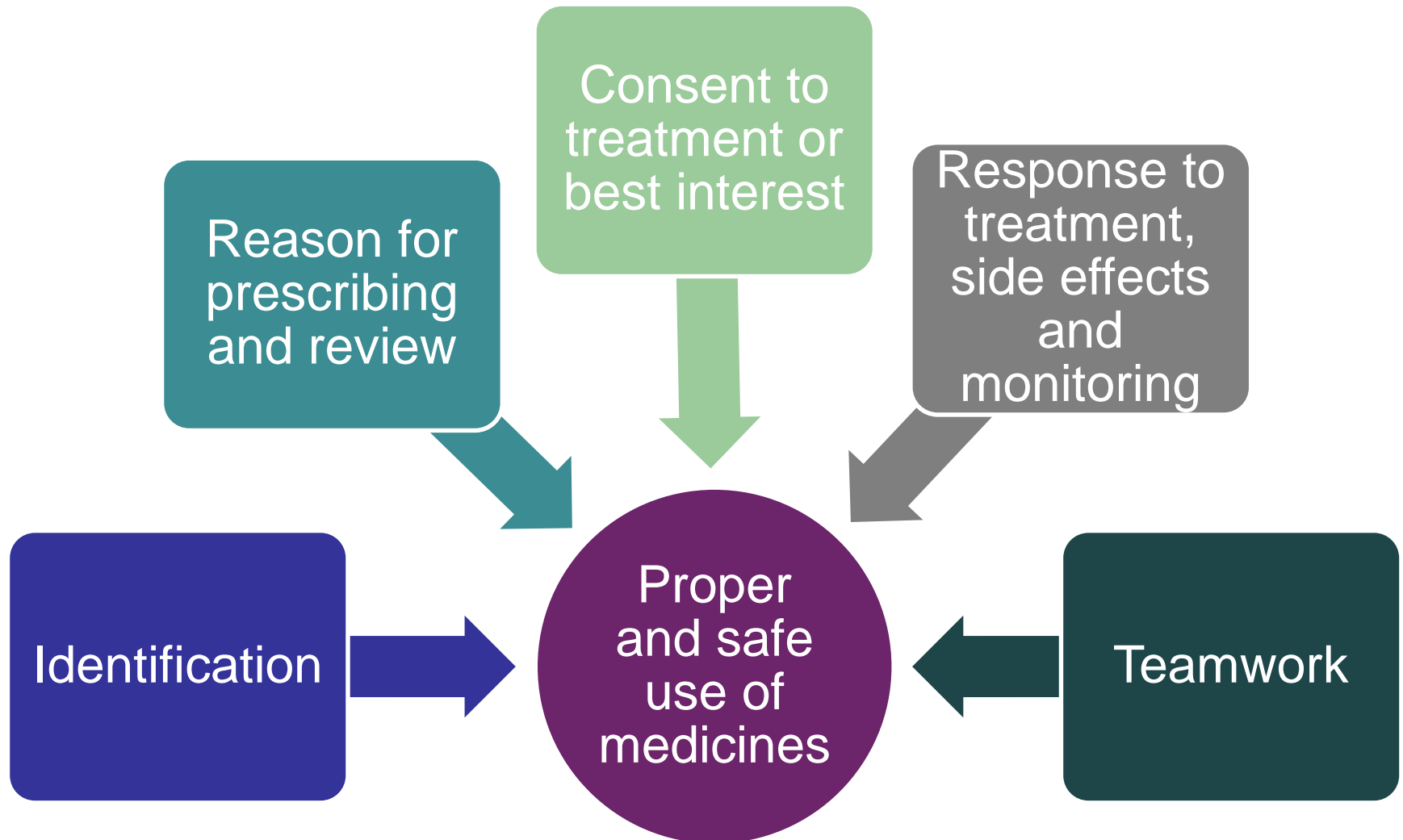
How does the healthcare provider ensure the proper and safe use of medicines?

- Medicines management
- Prescribing, administration and supply
- Medicines advice
- Optimising medicines
- Transfer of care
- Monitoring
- Using medicines to help people with their behaviour
- Medicines support needs
- Medicines reviews



Is it safe?





Examples from published reports



Cocklebury Farmhouse

provides accommodation and care for up to ten people with learning disabilities.

People using the service had complex needs that often included aggressive and challenging behaviour.

Staff had been trained to identify causes and triggers and to better manage people's needs.

Behaviour support plans had been written which had led to a reduction in physical intervention and use of when required medicines.

Examples from published reports



Hillcrest House provides accommodation and care for up to 5 people with autism or mental health needs.

The provider had been involved with the STOMP initiative.

The registered manager told us, "I have been asked to go in to the hospital and explain the way in which we work with people, the systems we use, and how much it has benefitted people with autism and mental health conditions."

"The consistent way in which we support people enables them to come off a lot of medication that had been given in the past."

Examples from published reports



30 Old Church Lane

provides care for adults with a learning disability and is registered to provide care and accommodation for up to 10 people.

Staff were trained to proactively identify and respond to, the causes of people's behaviour that challenged the service.

Positive behaviour intervention meant that no-one was taking medicines for behaviour management.

One person had been supported to take their own medicines independently.

Examples from published reports



Tillingham Medical Centre
is a GP practice in Essex

The practice had planned, implemented and monitored innovative and creative methods of treating patients with learning disabilities.

Health checks were completed and medicines reviewed.

Reasonable adjustments were made so patient could attend suitable appointment.

Communication aids and easy read materials were available.

Examples from published reports



Berkshire Healthcare NHS Foundation Trust is a NHS community and mental health trust supporting people in the community and as inpatients.

Clinical staff demonstrated a commitment to ensuring that patients were not over-medicated.

For example, a patient receiving a long term high dose of antipsychotic medicine had their medicine gradually reduced and adjusted in response to their changing symptoms over the course of their admission.

Thank you



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www.england.nhs.uk/STOMP

www.cqc.org.uk/ascmedicinesfaq