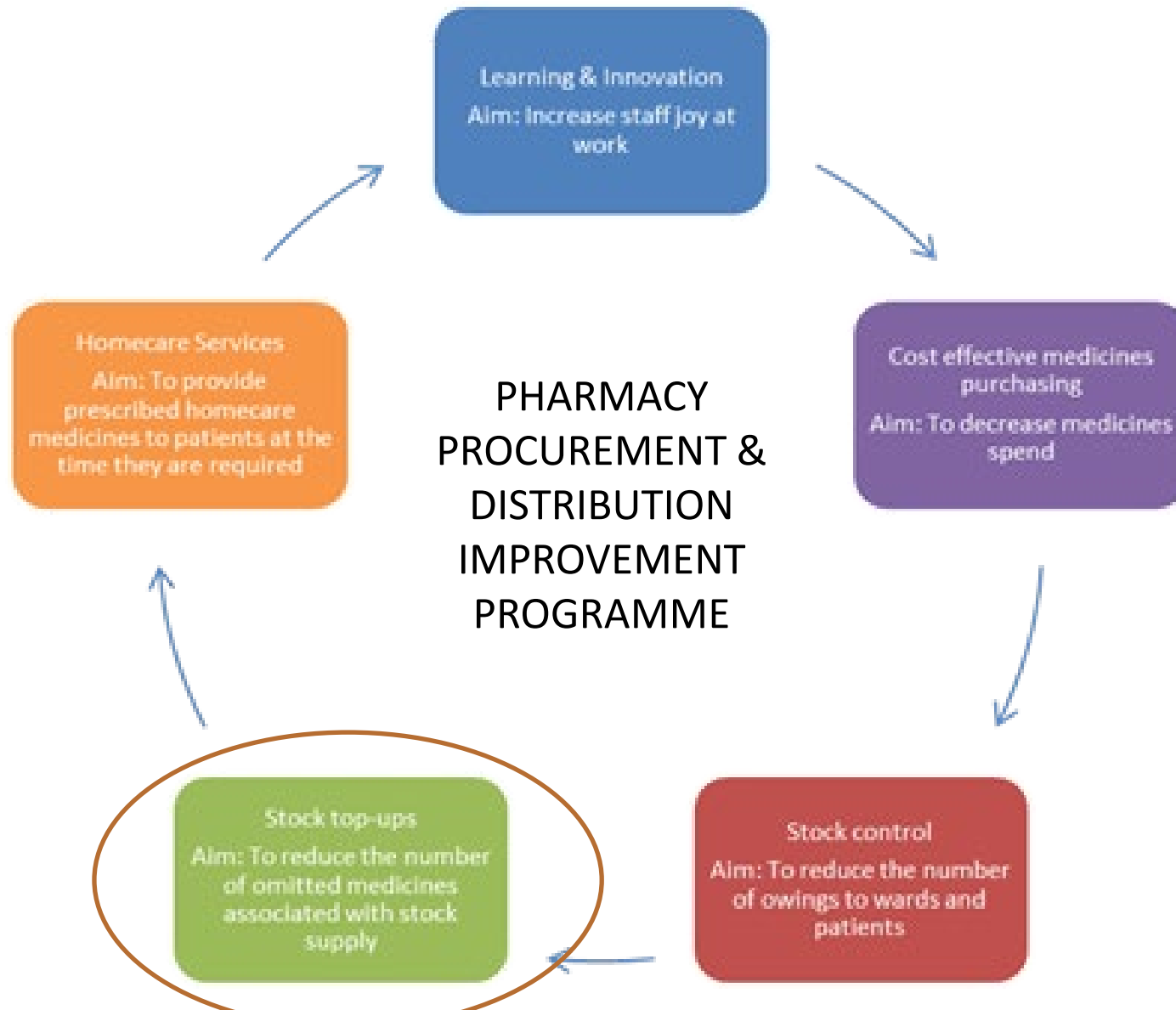


Stores Improvement Programme

Danny Norfolk – Senior Pharmacy Assistant

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Overview of Programme



Project Principles

- Stock top-ups are conducted on every appropriate ward/department by an appropriately skilled pharmacy team.
- Regular reviews of ward stock lists are conducted to ensure that they meet the ward/department requirements.
- The picking of stock is completed accurately ensuring that identified errors are managed in line with internal procedures.
- Use of emergency cupboards are maximised to ensure adequate supplies of emergency medicines outside pharmacy operating hours.
- The use of IT systems are maximised to ensure that they support processes for the distribution of medicines.
- Storage and distribution of controlled drugs is maintained in line with legal and regulatory requirements.
- Medication delivered and stowed away by pharmacy team.

Goals and Aspirations

Aim: Reduce the number of omitted medicines associated with ward stock supplies (including CDs) by X% by X

- **IMPROVED EFFICIENCY:** To have a faster/more effective way of working allowing the ward stock and/or patients medications to be delivered to the ward in a timely manner.
- **IMPROVED MORALE:** To improve the morale of nursing/clinical staff throughout the Trust. Working in a hospital can be strenuous and stressful in a “non Covid” normal world. The extra pressure of Covid has knocked morale and impacted staffs mental health significantly. If we make changes to alleviate the pressure placed on staff then it would be a huge success.
- **IMPROVED COST EFFECTIVENESS:** Ultimately we would like to save the Trust and the wards money, allowing us to spend money more efficiently in the most required areas.

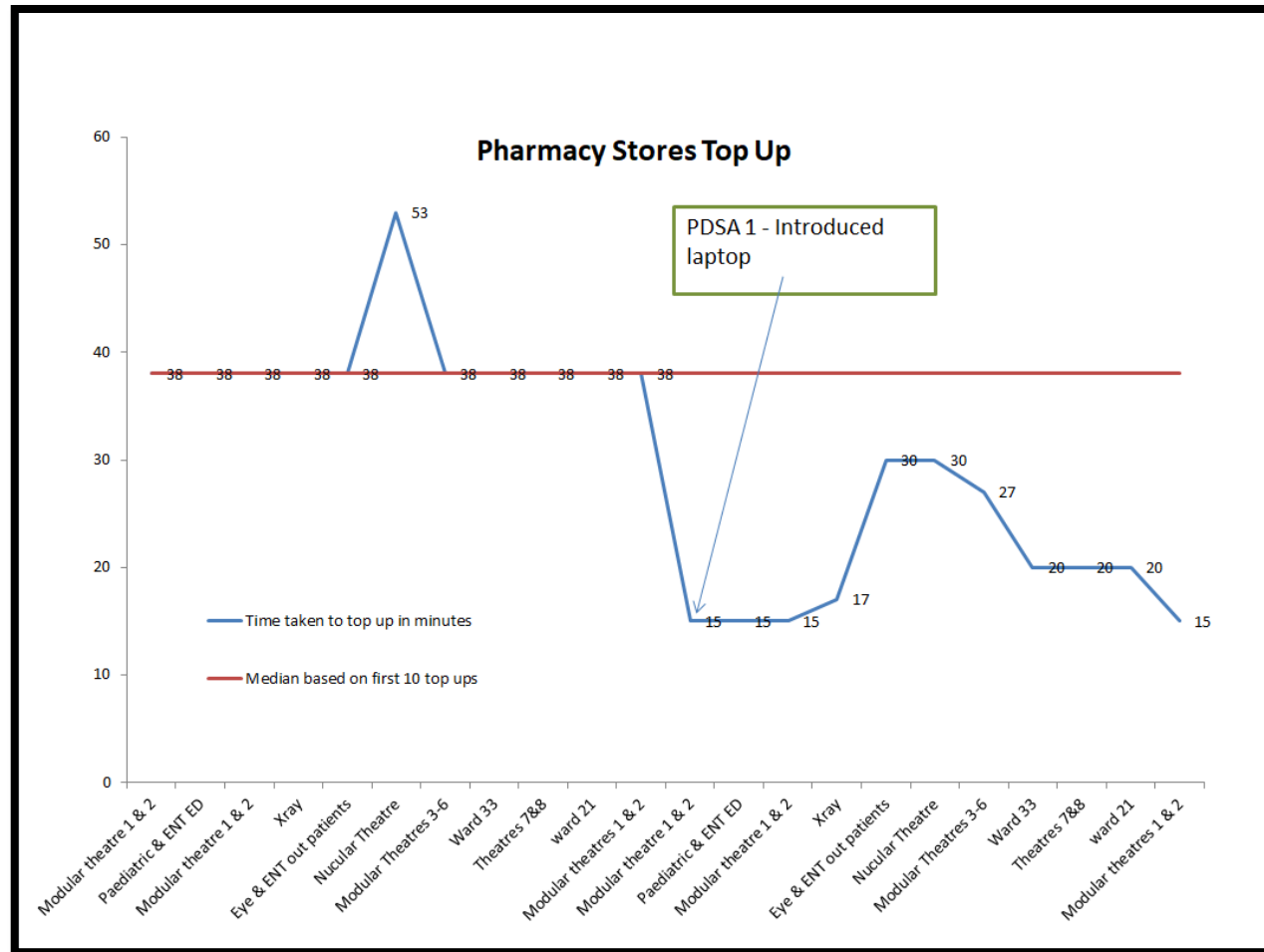
Benefits realisation

- Stock medicines available to patients at the time they are needed, in and out of usual pharmacy hours
- Storage and supply of medicines on wards are managed by suitably trained pharmacy staff reducing the time nursing staff take to obtain medicine supplies and contributing to high quality medicines management
- Efficient processes in place to support a reduction in medicines related errors/near misses

Progress

- Introduction of laptops to Pharmacy Stores meaning a faster Top Up process
- Relationship building with the Quality Improvement Team and ward staff
- Suggestions/feedback on processes from staff members engaging with changes
- Cost savings by altering stocklists, removing items from stocklists, removing overstock and expired medications Training ward staff to use stock lists correctly
- Holding project group meetings with other staff members and utilising their knowledge and experience effectively
- The changes we have made have had a knock on effect with other departments such as Pharmacy Dispensary. Patients having to wait a shorter time for medications as stocked correctly on the ward. Ward staff no longer having to wait a long time for medications to arrive via Pharmacy Dispensary
- Reintroducing and cementing the principle that across the Trust we are made up of many different Multi Disciplinary Teams (MDT's) but...we are ONE TEAM and can work in a more streamlined and uniform manner...**TOGETHER**

PDSA Cycle 1- Introduction of Laptops



PDSA Cycle 2 – Removal of excess stock/ expired medicines

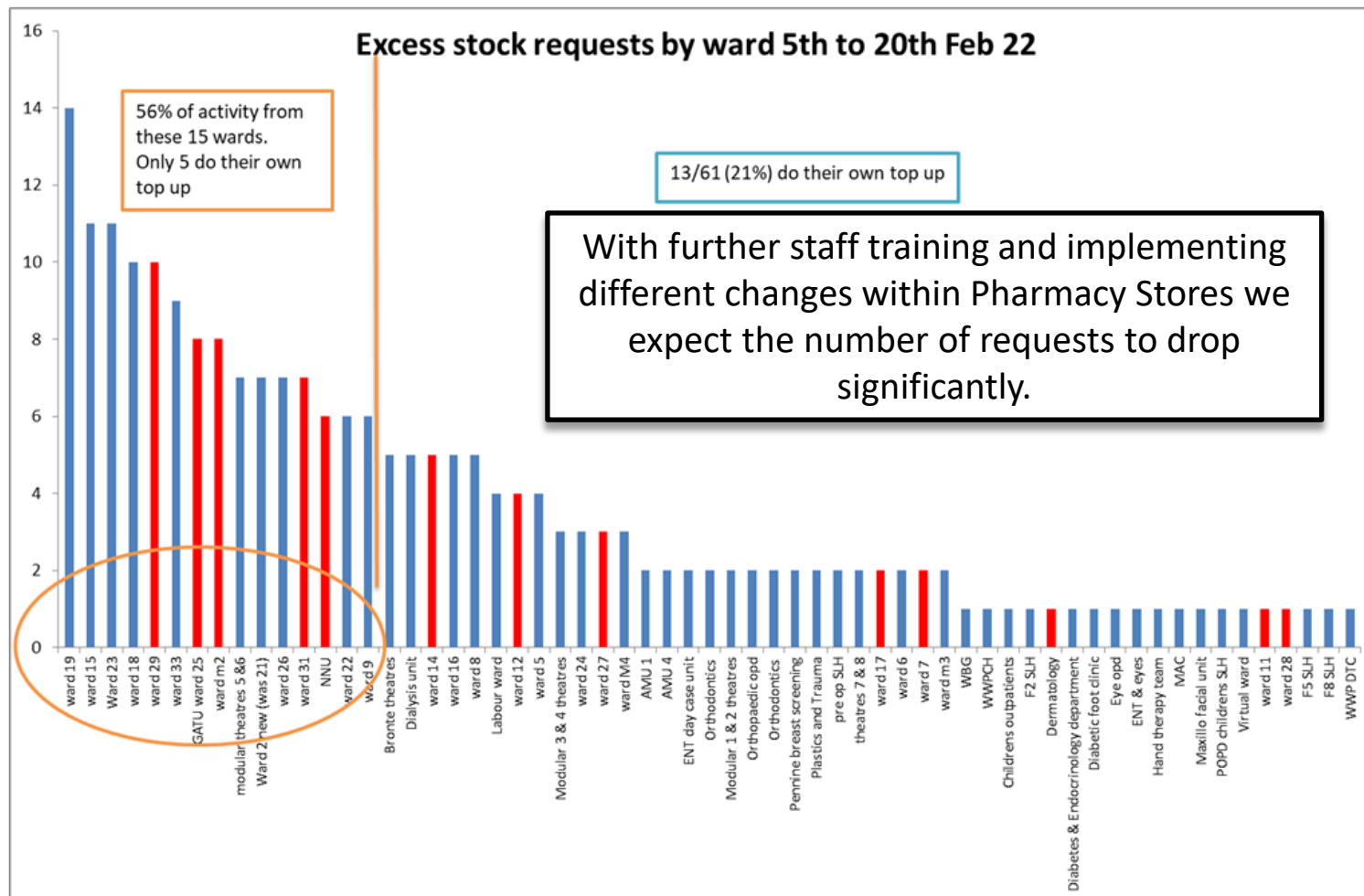
Savings made from amending a ward stock list (removing medications/changing quantities of medications)

- Cardiac Cath Lab = £2149.56 (30% saving)
- X-Ray = £650.15
- Ward 14 = £2376.58 (53% saving)
- Ward 19 = £856.12 (11.5% saving)

Total savings already made in the last few months =
£6032.41!

Barriers

- Technical issues (Laptops not charged/working correctly) - 2 mobile phones to be introduced to Stores alleviating some of the many phone calls received by Pharmacy Stores
- More protected time needed for the project to bloom
- Managing change within the workplace, staff skills in change management
- Ordering of medications from wards/incorrect use of stocklists
- The time to train ward staff on processes
- Night rota'd staff not trained correctly on processes
- Excess stock requests from different wards. Wards are exceeding stock levels of medications and therefore inappropriately storing medications. Insufficient space in Clinic rooms.
- Insufficient space in clinic rooms for the wards to safely and securely store their medicines.



Next Steps

- Increase the number of top-ups conducted by trained pharmacy staff
- Introduction of Omnicell cabinets onto the wards
- Test out the use of tablets to conduct ward top-ups (if interface allows)
- New trolleys (manual and electric)
- New computer terminals/printers
- More centralised/signposted areas on wards that Pharmacy Stores work in
- Access to staff forums/meetings to further communication and engagement with MDT's in the project