

# **SINGLE PRESCRIPTION AND ADMINISTRATION RECORD FOR SCOTLAND (SPARS) WORKING GROUP**

**13 September 2011, 2:00 – 3:30 pm**

**Sir John Crofton Room, Royal College of Physicians of Edinburgh**

## **MINUTES OF MEETING**

### **Attendance:**

Michelle Caldwell (by telephone conference) – Director of Pharmacy, NHS Ayrshire & Arran  
Beccy Hale, FY Doctor, NHS Fife  
Korina Leoncio – Administrative Assistant, Education, Training and Standards  
Simon Maxwell – Professor of Clinical Pharmacology, Edinburgh University (Chairperson)  
Rose Marie Parr - Director of Pharmacy, NES  
Ruth Miller - Medicine Management Nurse, NHS Highland  
Brian Robson – Medical Director, NHS QIS  
Vicky Tallentire – Fellow in Medical Education, Edinburgh University  
Angela Timoney (by telephone conference) – Chair, Directors of Pharmacy  
Alice Wilson - Associate Nurse Director

### **Apologies:**

Neil Dewhurst – President, Royal College of Physicians of Edinburgh  
Alister Maclaren – Lead Pharmacist, Clinical Governance, NHS Greater Glasgow & Clyde  
Laura McIver – Chief Pharmacist, NHS QIS  
Charles Sinclair – Scottish Government/Nursing officer: Acute Care Department, Royal College of Physicians of Edinburgh  
Charles Swainson – Chair, Scottish Patient Safety Programme

---

### **1. Welcome and introductions**

Those attending the SPARS meeting introduced themselves. Simon Maxwell welcomed Alice Wilson to the SPARS working group.

### **2. Apologies**

Apologies were noted.

### **3. Minutes of previous meeting**

The group reviewed and approved the minutes from the last meeting held on 6 July 2011. No changes were made.

### **4. Matters arising for SPARS process**

The group reviewed the action points arising from the last meeting minutes dated 6 July 2011 and the following comments were made:

- Simon Maxwell mentioned that he had not yet met with Angela Timoney to discuss how to involve SMC.
- Angela Timoney referred to page 5 of the draft minutes from the 6 July 2011 meeting where she said that Ayrshire and Arran and Lanarkshire may be using the same chart as Greater Glasgow and Clyde. She said that Lanarkshire was using a similar chart. However she said that Ayrshire and Arran were using the old Aberdeen chart.
- Further to action point 23, Simon Maxwell said it did not appear possible to retrieve specific errors related to charts within the PROTECT study.
- It was noted that the consultees for the AoMRC consultation had been contacted and their responses collated.
- MDDUS and the Procurator-Fiscal were contacted but had not yet provided any further information.

### **5. AoMRC Report Consultation Responses**

Simon Maxwell identified the following main issues arising from the consultation responses and the group engaged in some general discussions:

- Use of CHI numbers as a patient identifier
- Antimicrobial prompts
- Medicine reconciliation
- Community planning contact
- It was noted that Grampian did not enter in the patient's address on the drug chart on the grounds of confidentiality. There was general agreement

that confidentiality did not seem like reason enough to exclude the patient's address.

Alice Wilson said that it was not unusual not to write the patient address if an addressograph label is used. In this instance, the CHI number would be the main identifier. Simon Maxwell said that the CHI number is not so easily recognisable and would be more time consuming to match it up with the patient.

Michelle Caldwell said that staff would usually refer to 2 identifiers including name, date of birth and/or CHI number.

- It was suggested that the prescriber should print his/her name. There was no disagreement from the group regarding this point.
- It was highlighted that there seemed to be some divergence amongst the consultees regarding the recording of pregnancy. Beccy Hale said she supported the idea of having a mandated option to check pregnancy.

Brian Robson drew from Donald Farquhar's suggestion that the SPARS group identify the essential elements of an optimal chart rather than accommodating for all 'good ideas'.

- There was general support amongst the SPARS group for VTE risk assessment to be a standard part of charts. Simon Maxwell noted that this is presently not routinely part of charts. He said he envisaged a generic format would be used for VTE.
- There was a divergence of opinion amongst the consultees regarding oxygen prescribing. Ruth Miller said that there had been debates in Highland regarding oxygen but no consensus had yet been reached. Beccy Hale said that oxygen is included in the Lothian chart. She said that she added oxygen in the allergies box if a patient was likely to retain carbon dioxide.
- Allowing some local discretion regarding certain matters.
- The layout and format of the chart - The Glasgow example was discussed, where the patient details are written on a single page that was visible at all times. Alice Wilson saw there were benefits to this kind of chart design as it enables the reader to more easily see the identity of the patient. She said that the general trend was that people do not tend to fill in the patient's details if required to do so on every single page.
- Simon Maxwell noted that responses indicated a general support of the SPARS project.

- GMC number to be used as prescriber identifier - Ruth Miller said there were some concerns that nurses would also be required to record their nursing numbers.
- Warfarin and anticoagulants - Michelle Caldwell said she was not sure whether it was possible to include these in the chart without overcomplicating them. Michelle Caldwell said that the number of patients that would be expected to require such daily monitoring would need to be weighed against the added costs and increased complication involved in including this in the standard chart.

Simon Maxwell raised a suggestion made by Ruth Paterson that the chart could include a generic page for any drugs which require daily monitoring.

There was general agreement that the standard chart should not include fluids and insulin.

- There was general agreement that there should be space to indicate why a medicine has been started, stopped or changed. Simon Maxwell pointed to the Fife chart as an example. Alice Wilson said that the Dumfries and Galloway chart also had such a space but thought the space provided was quite small. Some members of the SPARS working group on the other hand considered the size of the box to be quite generous.

Brian Robson said that embedding prompts into the chart for explaining why a medicine has been started or stopped would be useful for primary care.

- Standardised numeric codes.
- Double verification - Alice Wilson said that double verification may create a false sense of reassurance. Michelle Caldwell said that the chart could include a space which allows the prescriber to flag items requiring double verification, for example where students need authentication.

Alice Wilson said that double checking was routine only for some cases, for example for control drugs, paediatrics and IVs. However it was not relevant to a large proportion of cases.

- Standardised training.
- Audit tool.

There was general agreement that the standardised chart should be kept as simple as possible. Michelle Caldwell said that it was important to keep the chart

simple to enable it to be workable. There was general agreement that more complicated matters should be left to local planning.

Simon Maxwell agreed to consolidate the suggestions put forward by the consultees and to circulate it to the SPARS working group.

**ACTION:** Simon Maxwell to prepare a summary based on the AoMRC report consultation responses and to circulate to the rest of the SPARS group.

## 6. SPARS Business Case

Simon Maxwell said that he, Brian Robson, Neil Dewhurst and Laura McIver were to meet later in the month to discuss further.

## 7. Drug Chart Usability Study

Vicky Tallentire and Beccy Hale had prepared an updated version of the drug usability study proposal. Vicky Tallentire said the study aimed to look at the link between drug chart familiarity and error amongst junior doctors. She said the study was to include 5 groups located in Highland, Tayside, Grampian, Lothian and Greater Glasgow and Clyde. As part of the study, Vicky Tallentire said that they required 60 original drug charts from each of these health boards by the end of September. Vicky Tallentire requested for some assistance from the SPARS working group in collecting the charts.

Angela Timoney offered to gather and send drug charts from Tayside. Ruth Miller offered to collect drug charts for Highland.

Vicky Tallentire said she would contact Alister McLaren to request for copies of the Greater Glasgow and Clyde chart. Vicky Tallentire said she would contact David Pflieger regarding the Grampian chart.

**ACTION:** Angela Timoney to send Korina Leoncio 60 original Tayside drug charts by end of September.

**ACTION:** Ruth Miller to send Korina Leoncio 60 original Highland drug charts by end of September.

**ACTION:** Vicky Tallentire to contact Alister McLaren to request for Greater Glasgow and Clyde drug charts and David Pflieger for Grampian drug charts.

Vicky Tallentire said that the RCPE had granted enough funding for a qualified pharmacist to undertake 80 hours of work on the study. There was general agreement that a pharmacy student was not ideal and that an experienced person in practice would be more appropriate. Angela Timoney suggested appointing someone who was perhaps currently working part-time. Simon Maxwell suggested that Vicky Tallentire approach Moira Kinnear or Melinda Cuthbert to enquire about an appropriate person.

In the event that Vicky Tallentire is unable to find a relevant pharmacist to assist in the study, Angela Timoney offered to raise the matter at her next meeting. It was agreed that Vicky Tallentire and Beccy Hale would send Angela Timoney the one page summary of the study for Angela Timoney to circulate.

**ACTION:** Simon Maxwell to contact Moira Kinnear about an experienced pharmacist to conduct the drug usability study.

**ACTION:** Vicky Tallentire and Beccy Hale to send a one page summary of the drug usability study to Angela Timoney.

Alice Wilson queried whether appointing a pharmacist from a health board which was involved in the study could introduce bias. Vicky Tallentire said that she will have a second reviewer to minimise bias and that her main priority was to find a willing pharmacist to participate in the study.

## **8. Developing an educational package on good prescription writing**

Simon Maxwell briefly mentioned the e-learning package which the SPARS working group would develop later in the future. Simon Maxwell said that he would like to resolve the consultation by around November/January and have a proposed standard drug chart designed by the next Spring. Simon Maxwell confirmed that the e-learning package would prioritise use of the drug chart with the option for a further development to tackle wider prescribing issues.

There was general agreement that the SPARS working group should develop and audit tool.

Simon Maxwell and Rose Marie Parr agreed to discuss the e-learning package further.

**ACTION:** Korina Leoncio to add the development of an audit tool to the work programme.

**ACTION:** Simon Maxwell and Rose Marie Parr to discuss the e-learning package further.

## 9. Procurator-Fiscal – fatal accident inquiries

Korina Leoncio confirmed that she had not received any further information from the Procurator-Fiscal or MDDUS. Korina Leoncio will follow up their response.

**ACTION:** Korina Leoncio to follow up a response from the Procurator-Fiscal and MDDUS.

## 10. Any other business

Brian Robson said he would arrange for Simon Maxwell or another member of SPARS to receive an invitation to an event with Professor Bates on electronic safety.

**ACTION:** Brian Robson to arrange for invitation to be sent to Simon Maxwell to attend an event with Professor Bates.

**ACTION:** Korina Leoncio to set up another doodle poll for a meeting to be held in January/February.

## SUMMARY OF ACTION POINTS

No.	Action	To be actioned by:
1.	Contact QIS about developing a SPARS website.	Simon Maxwell
2.	Speak with Jill Collinson to discuss the legal obligations that my need to be accounted for in developing a chart.	Charles Swainson
3.	Research a relevant expert on the design of the chart.	Simon Maxwell
4.	Contact NHS DOTS regarding advertising to encourage junior doctors' interest in the project.	Simon Maxwell and Beccy Hale
5.	Consult Hazel Scott of DOTS regarding the project.	Rose Marie Parr
6.	Consult Steve Jackson of KCL.	Simon Maxwell
7.	Source information on how often prescribers and graduates move between health boards and locations.	Rose Marie Parr
8.	Review and retrieve relevant information from Datix, national adverse event reporting and the global trigger tool.	Laura McIver and Brian Robson
9.	Provide the group with a template to produce a driver diagram.	Brian Robson
10.	Discuss how to involve SMC prior to the next SMC meeting to be held on first Tuesday of August.	Simon Maxwell and Angela Timoney
11.	Conduct a pilot of the junior doctors study in Lothian.	Simon Maxwell, Vicky Tallentire and Beccy Hale
12.	Prepare a summary based on the AoMRC report consultation responses.	Simon Maxwell
13.	Send Korina Leoncio 60 original Tayside drug charts by end of September.	Angela Timoney

14.	Send Korina Leoncio 60 original Highland drug charts by end of September.	Ruth Miller
15.	Contact Alister McLaren to request for Greater Glasgow and Clyde drug charts and David Pflieger for Grampian drug charts.	Vicky Tallentire
16.	Contact Moira Kinnear about an experienced pharmacist to conduct the drug usability study.	Vicky Tallentire
17.	Send a one page summary of the drug usability study to Angela Timoney.	Vicky Tallentire and Beccy Hale
18.	Add the development of an audit tool to the work programme.	Korina Leoncio
19.	Discuss the e-learning package further.	Simon Maxell and Rose Marie Parr
20.	Follow up a response from the Procurator-Fiscal and MDDUS.	Korina Leoncio
21.	Arrange for invitation to be sent to Simon Maxwell to attend an event with Professor Bates.	Brian Robson
22.	Set up another doodle poll for a SPARS meeting to be held in January/February.	Korina Leoncio