Mental Health Services

Protocol for managing medication for extended pre-discharge passes

The purpose of this document is to provide a protocol to follow if an extended pass is required for a patient. There have been incidents where patients have been discharged on extended pass and drug errors have occurred. To reduce the risk of this happening, the guidance in this document must be followed.

Scope

The guidance in this document applies to all mental health hospital settings across NHS Greater Glasgow & Clyde. It relates to circumstances where patients go for a trial pass period to a formal care setting (e.g. care home, supported accommodation) prior to discharge.

Protocol

1. Multi-disciplinary team discuss and agree necessity for extended pass.

Careful planning and co-ordination between the ward MDT and the new care provider will be key to the successful implementation of the extended pass. Points to consider during the planning of the pass will include

- Duration
- Format of the supply i.e. original packs or compliance device required
- Should all medication for full period be supplied at once or in weekly instalments? If instalments, ensure arrangements are in place to deliver medication at appropriate intervals
- Patient support during the pass
- Registration with a GP
- Plans for discharge if the trial pass goes well

2. Discuss with pharmacy regarding supply of medication.

Ideally pharmacy will be involved in the planning for any extended pass.

The maximum quantity of medication supplied for an extended pass will be 4 weeks.

Pharmacy will require notice of at least 48 hours of the need for an extended pass.

- 3. Ensure pass meds ordered from pharmacy for agreed duration of pass.
- Passes should be ordered using the normal pass request form
- The request form should specify all medication the patient will need for the duration of the pass including insulin, inhalers, creams etc.
- Only order those as required medicines the patient still needs/uses and specify clearly the number of doses required for each
- If the pass is to be supplied in weekly instalments make sure this is clearly stated on the pass request form.

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- If the patient is prescribed controlled drugs (CD) always ensure the appropriate, legally compliant CD prescription is sent to pharmacy along with the pass request form. If instalment dispensing is request, a separate CD prescription will be required for each weekly instalment
- Before patient leaves the ward, ensure patient has ALL medication including inhalers, creams etc. that they may self-administer.
- Please note that methadone and other forms of opioid replacement therapy will not be supplied
 for extended passes. Patients must either return to the ward for supervised administration or
 arrangements must be made with ADRS teams to establish community based treatment prior to
 the pass commencing.

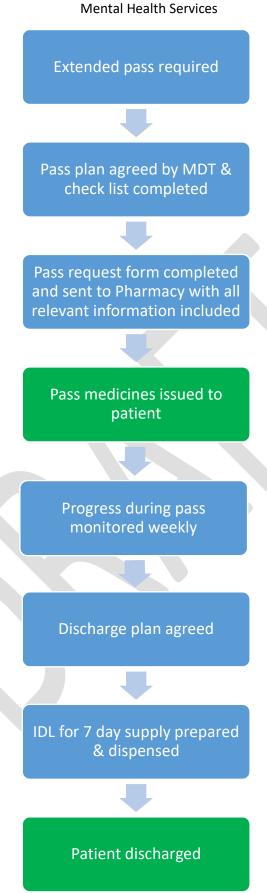
A checklist in appendix 1 may help co-ordinate the planning of extended passes

- 4. Ensure there is a clear plan for supervising/ dispensing medication in place.
- Within first week of pass, staff should contact patient/ carer/ support staff/ care home to ensure <u>all</u> medication is being dispensed as per prescription.

5. Discharge planning

- Staff should ensure that where a patient is not registered with a GP in the local area, arrangements are made for the patient to register with a local GP before discharge, preferably as early as possible during the trial pass
- Ensure that, if discharge going ahead, an IDL is completed in time for discharge medication to be dispensed and appropriate arrangements are in place to deliver to the patient
- The IDL should be ordered from pharmacy at least 48 hours in advance of the discharge date
- The IDL should request all the medication the patient will routinely need including insulin, inhalers, creams etc.
- A 7 day supply will be made as standard on the IDL.

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Extended pass checklist

Planning phase			
Issue considered and action agreed	Yes	No	N/A
Duration agreed?			
Is a compliance device required?			
Single supply or weekly instalments?			
Patient support/follow up during pass agreed? E.g. delivery of weekly instalments			
If methadone is required a plan for supply has been discussed and agreed with ADRS before the pass is ordered?			
GP identified for ongoing care if pass goes well?			
Process to register patient with new GP begun if necessary?			
Pharmacy involved in planning of extended pass?			
Ordering pass medication			
Pass request form sent to pharmacy 48 hours in advance of pass?		T	
All non-standards items clearly requested on pass form e.g. creams, eye drops, inhalers, insulins etc?			
If as required medicines are needed, the number of doses required are clearly specified?			
If weekly instalments are required this is clearly specified?			
If CDs are needed a correctly written CD prescription has been sent with the pass request?			
All necessary medicines have been correctly dispensed and the patient or carers know how to take/use them before leaving the ward?			
Discharge			
Is registration with a local GP complete?			
Has the IDL been submitted 48 hours ahead of discharge?			
Has a 7 day supply been requests?			
Have all necessary medicines been ordered on the IDL?			

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