

High risk medicines:

A number of local high risk medicines prescribing improvement projects were shared, including warfarin and anxiolytics, as well as high risk prescribing in primary care.

There was a lot of interest in warfarin resources being developed.

Novel approaches used within these projects include:

- Peer review to change prescribing behaviour
- Qualitative feedback from patients and staff
- Prescribing data to measure change
- An improvement framework which actively engages patients and staff
- Exploring the 'why', and
- Tailoring of care bundles based on care settings.



Engaging Patients:

Fran Benison (above) reminded delegates of the importance of making decisions with patients regarding their medicines.

Working with patients in improvement can range from informing, engaging, involving and collaborating to empowering.



Twitter on the day:

355,080 Impressions

720 Tweets

107 Participants

1 Avg Tweets/Hour

7 Avg Tweets/Participant



#SPSPMeds2016

Next steps:

Reducing medicines harm across transitions and high risk medicines remain national priorities.

Delegates were challenged to continue collaborating and sharing data across the whole system.

We need to ensure that patients / service users are involved in improvement activity.

Presentations are now available on the SPSP Medicines website (link below).

Contact us - E: spsp-medicines.hcis@nhs.net W: www.scottishpatientsafetyprogramme.scot.nhs.uk/programmes/medicines