











## **Ward Medicines Assistants** Everyone should have one . . .

Lesley Barnfather Ward Services Lead & WMA Project Lead





# The road to WMAs – a 10 year journey

- ATOs supporting medicines administration
  - Significant reduction in omitted doses (published)
  - Time saving for nurses (observed)
- Six ATOs on 6 wards initially recruited on trial basis
  - Safer medicines administration
  - Medicines stock control
- Role evolved from supporting medicines administration to include ward based medicines management
- Concept of "Ward Medicines Assistant" created





# Reducing unacceptable omitted doses Pharmacy Assistant supported medicine administration

David Campbell
On behalf of the Omitted Doses Project Steering Group







# WMAs quickly showed to be effective

- Improved medicines administration
  - Less omitted doses
  - Errors identified before they happened
- Release nursing capacity
  - Taking on ward based medicines roles e.g. stock, storage, transfer of medicines, second check of CDs
- Support ward based pharmacy team
  - Ordering medicines, reminder charts, locker checks

#### JOURNAL ARTICLE

Reducing unacceptable missed doses: pharmacy assistant-supported medicine administration •

Wasim Baqir ▼, Kate Jones, William Horsley, Scott Barrett, David Fisher, Richard Copeland, David Campbell, Rosemary Stephenson

International Journal of Pharmacy Practice, Volume 23, Issue 5, October 2015, Pages 327–332, https://doi.org/10.1111/ijpp.12172





# A case for change: developing the role of a pharmacy ward assistants: more than missed doses

- Increasing demand (time and complexity) on qualified nurses – opportunity for innovative solution for medicines-related support.
- ATOs have nationally recognised qualifications and a well-established role in supporting medicines-related tasks in dispensaries.
- ATOs on wards typically 'time-limited' or 'task-limited' activities such as ward stock ordering.
- Explored the role of ward-based pharmacy assistants, demonstrating improvements in quality of care as well as reducing pressure on members of nursing staff.





## **Evolution of the role**

- 6 assistants on 3 wards across two sites
- Trained in-house by nursing ward teams and pharmacy technicians
  - Iterative training programme developed as we learned
  - New training programme across pharmacy and nursing for all new WMAs
- Became part ward based team as well as the pharmacy team
  - Changed working times to reflect ward work
  - Consistent pharmacy presence on the ward
  - Became recognised by ward teams as part of their team



### What does a Ward Medicines Assistant do?

Order temporary stocks

Assess patients own drugs once training is completed Administration

Put away ward stock

Process pharmaceutical waste and returns
Complete Omnicell expiry checks monthly
Perform weekly TPS order and expiry check
Medication-refer to pharmacist/technician
Empty red bags and put medication in the patient's
lockers

Initial preparation of IVs

Perform 3 monthly ward stock reviews, order CDs via ward order book-Staff nurse will need to sign it Attend ward handover/MDT and update Nerve centre Prompt doctors/pharmacists to write discharge letters



Assist in prompting patients to take their medication

Counsel patients on new and existing medication

Retrieve O/L drugs to assist drug round

Act as a 2<sup>nd</sup> check for CDs & weekly CD checks

Perform the quarterly CD review with a Technician

Destroy Patients own CDs with a Technician

Help with the transfer of medication to other wards/sites

Medication reminder charts

Screen discharge letters

Dispense urgent medication (N/A at NSECH)
Collect urgent medication from dispensary(N/A at NSECH)

Nurse referral for supply on Emeds Perform a locker sweep

### **Outcomes:**

Releasing nursing staff time to care Supported/happier nursing staff Safer care e.g. reduction of omitted medicines



# Next steps for the WMA role

- Role continues to evolve e.g. 2<sup>nd</sup> check IV medicines
- Chemo medicines assistants funded by Macmillan
- Capacity released, enabling opportunities for pharmacy staff to work at top of licence:
  - Medicines reconciliation by technicians (target 70%)
  - % total inpatient prescribing done by pharmacists (target 25%)
  - Cannulation & administration of IV chemotherapy administration in ODUs
- Supporting others to adopt role (external to NHCFT)



