

Medicines Safety Improvement Programme (MedSIP)

Project: Helping people with a learning disability, at risk of behaviour that challenges, to avoid harm from psychotropic medicines.

Aim

Phase 4 of the MedSIP programme aims to support systems to refine their shared ambition, explore areas of focus and begin shaping the actions that feel most meaningful for their local population.

A whole system action planning workshop was held on Thursday 5 February as part of the local Medicines Safety Improvement Programme (MedSIP) in Coventry and Warwickshire.

The purpose of the day was to refine our shared vision, review our system picture and identify the actions that will help avoid harm from psychotropic medicines while also strengthening the wider health, social and environmental factors that influence behaviour and wellbeing.

To close the day, each individual in attendance wrote their own set of pledges that they would commit to. They reflect a shared commitment to reducing harm from psychotropic medicines and improving quality of life for people with a learning disability. Together, they show how different parts of the system can play a role.

REVIEWING AND MONITORING MEDICATION

To question why people with a learning disability remain on psychotropic medication and look for opportunities to deprescribe.

Audit where people are prescribed psychotropic medication, identifying where non-pharmacological approaches are not in place.

To always find out what medication a person is on, and when it was last reviewed, and the reasons for prescribing.

Regular review and monitoring of psychotropic medication, including codes in these reviews.

SUPPORTING GPs AND PRIMARY CARE

Support GPs to better understand behavioural support that can help reduce reliance on medication.

Share information within primary care networks (PCNs) with GPs, nurses and pharmacists.

Proactively understand and explore learning disability-friendly practice schemes.

Promote improvement to learning disability register with GP primary care networks (PCNs)



IMPROVING LINKS WITH SOCIAL CARE

Support conversations with providers to align health and social care approaches.

Connect pharmacists and the Integrated Neighbourhood Team into integrated local multidisciplinary team working.

Share social care contacts to establish and strengthen working relationships.

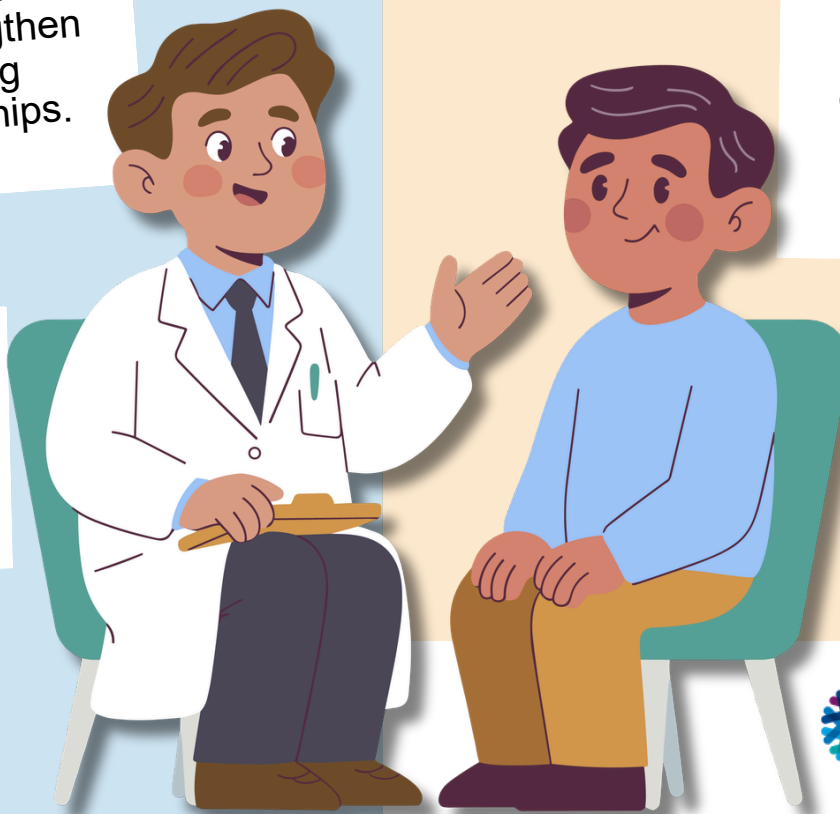
Improve links with social care.

COMMUNITY AND FAITH BASED SUPPORT

Continue to support local communities to address challenges faced by people with a learning disability.

Identify the community services available to support people outside of clinical care.

Think broadly about including community groups who can support people and families.



RAISING AWARENESS AND EDUCATION

Highlight and discuss the importance of holistic support for people with a learning disability with colleagues.

Include safer use of psychotropic medicines in system level planning and strategy.

Share learning and information across organisations and networks. Support Stopping over medication of people with a learning disability and autistic people (STOMP) awareness with Voluntary, Community, Faith, and Social Enterprise sector (VCFSE) organisations, patients and carers.



IMPROVING RESPONSES BEFORE CRISIS

Put support services in place before a crisis occurs.

Change referral criteria for intensive support so it can be proactive and intense.

Improve responses when behaviours that challenge begin to escalate.