

Empowerment of MDT and importance of defining roles – Bradford Pharmacy Team

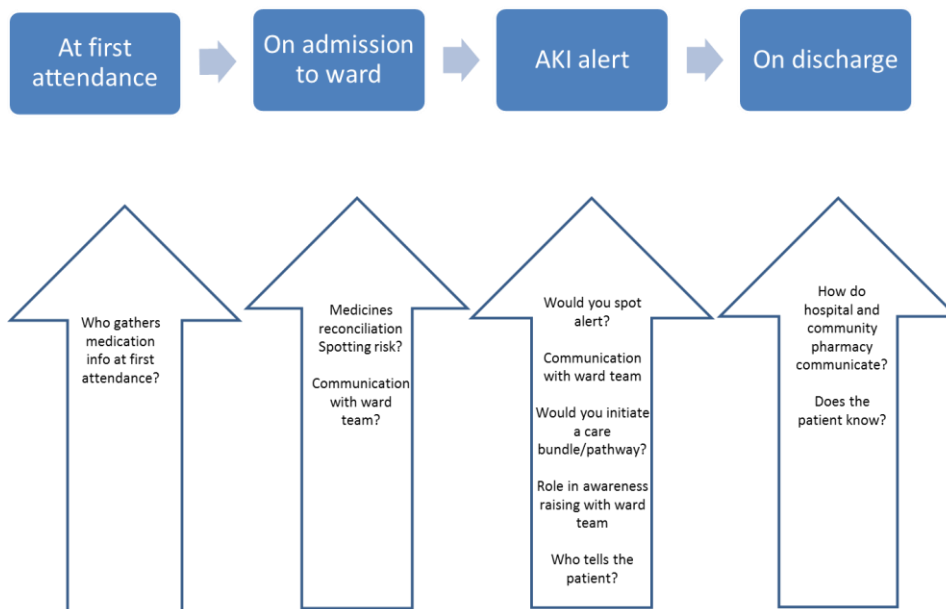


Victoria Hill – lead Pharmacist unscheduled care

Victoria (pictured) is the lead pharmacist on the medical admission unit at Bradford hospitals, she was a key member of the implementation team at the Trust and her input and that of her team was invaluable in making the project a success.

Although at first glance AKI care bundles appear to show medicines as just one action considering the process of treating a patient with an AKI illustrates that there are actually several places where the pharmacy team can play a crucial role.

The following diagram illustrates where pharmacy can play a crucial role.



Enablers

The pharmacy team felt they would like to increase their knowledge around AKI and so a teaching session was arranged and delivered by the clinical leads, this session was attended by both Pharmacists and pharmacy technicians acknowledging the role both had to play.

“The teaching really helped engagement in the team, it made them feel supported, the fact that a senior consultant took the time to deliver this was valued.”

The pharmacy team aim to see all new patients as a priority and this provides them with good opportunity to review the medications and highlight any that could pose issues and communicate this to the rest of the team.

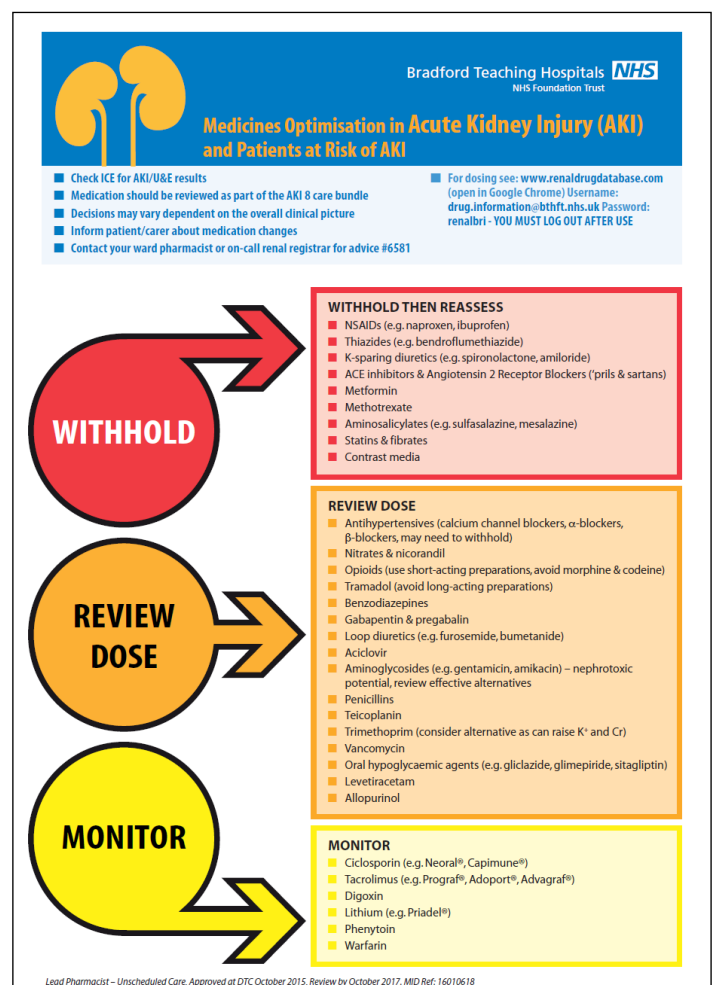
“patients often tell the pharmacists different information than to the medical and nursing teams about their medications, sometimes this can lead to non-prescription medication being identified such as NSAID’s that would not be spotted simply by checking on System 1.”

On the MAU the pharmacy technicians also developed an extra supporting process, when checking the drug history they looked to see if an AKI had been documented and if so if a care bundle had been commenced. If not they started one and communicated this to the rest of the clinical team. This was in response to the teaching and heightened awareness around AKI.

The pharmacy team also play a key role in communicating with patients and offering advice re medication changes after an AKI, this can be in response to specific request or when counselling for discharge. The team found that the extra knowledge around AKI gained from being involved with the project aided this communication.

Patent information is another area where the pharmacy team play a key role, although patients information leaflets were developed they still need to be given to the patients and explained on discharge or sooner particularly in relation to any changes to medications. The pharmacy team on acute wards can find themselves in the position of explaining to patents why medicines have changed and offering advice and therefore play a key role in the crucial interaction.

Knowledge around drugs that can cause harm to the kidneys (particularly this not directly renal toxic) was also found to be lacking in the clinical team generally, comprehensive guidelines and medication advice was available on the ward but was not often consulted. In In response to this need Victoria developed a traffic light poster ([Link](#)) to highlight key medication to aware of.



“The key message that this has reinforced is if you are not sure withhold and review, the ward teams have reported that they feel more confident in taking action with something easy to refer to”

Barriers

Although the team aim to see all new patients as quickly as possible staffing does make this a challenge, it is important therefore to ensure the whole team are aware of the project and actions to take. Patient who develop AKI in hospital are not routinely picked up by the pharmacy team quickly and ensuring actions are taken in a timely manner is the re of the whole MDT. Involving the pharmacy team in the design of the project from the start is one way if trying to improve MDT communication at all stages of the process and ensuring that the roles and worked out and defined.

“Awareness and involvement in the project from the start really helped as you could influence its design and know who to contact with any queries. It has also helped to get the message out that this is wider than just a renal team project.”

There are competing priorities for the pharmacist time and it can be a struggle to ensure key messages are not lost - for example the trust also has an ongoing campaign to improve Sepsis care so you have to be careful not to overload with information and focus on what is really important.

Key Messages

- Instigating the care bundle when alerts are spotted is a useful way of ensuring it is communicated across the team then advice on medications can be given in a timely manner, all team members can play a role in this.
- Senior clinician leading is the key due to junior doctor turnover
- Involving the pharmacy team from the start of your project ensure they are engaged and have the opportunity to help shape the design. They can then challenge and supports as part of their ware role and ensure key links are made between processes.
- The team will feel more empowered to challenge if they are supported in this by senior clinicians and have the necessary knowledge around AKI.