

Report Title	Controlled Drugs Assurance Update
Author (name and title)	Dr Julian Mark, Executive Medical Director
Accountable Director	Dr Julian Mark, Executive Medical Director
Previous committees/groups	N/A
Recommended action(s) Approval, Assurance, Information	Information and Assurance
Purpose of the paper	To update on Controlled Drug assurance across the Trust and any future actions
Recommendation(s)	Provide assurance and information around the Trust's compliance against the Controlled Drugs Standard Operating Procedures.

Executive summary (overview of main points)

It was identified that there was a lack of compliance and adherence to certain parts of the Controlled Drugs Standard Operating Procedures. The Area Clinical Governance Leads have been working with senior and local operations teams to improve education and compliance against the standards and provide assurance to the Trust Pharmacist (Controlled Drugs Accountable Officer) that understanding, compliance and adherence is improving. The use of updated and improved audit documentations and clear actions when non-compliance occurs have been used to improve compliance and embed individual responsibility where Controlled Drugs are used.

Trust Strategy Bold Ambitions Select the most relevant points from the bold ambitions.	Our Patients	Deliver high-quality patient care and achieve the Ambulance Clinical Outcome measures. Achieve the highest possible rating of 'outstanding' by the health and social care regulator (CQC).
	Our People	Invest in developing our people (staff and volunteers), ensuring they have the skills, support and resources they need to deliver high-quality care and services, now and in the future. Invest in leadership development to ensure that our people are well supported by their exceptional leaders. Develop the paramedic profession in YAS.
	Our Partners	Work in partnership to maximise the benefit of our collective knowledge, with academic and education partners and be a leading service provider in partnership with the voluntary, community and social enterprise (VCSE) partners.
	Our Planet and Pounds	Use our resources wisely and ensure value for money. Ensure decisions are informed by evidence, research, data and intelligence. Develop and deliver improvement, through learning and adoption of best practice.

<p>Link to Board Assurance Framework Risks (board and level 2 committees only)</p>	<p>4. Strengthen quality governance and medicines management to develop a culture of improvement, safety, and learning.</p> <p>13. Deliver safe and effective digital technology developments and cyber security arrangements.</p>
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CONTROLLED DRUGS 30 January 2025

Highlights		Lowlights	
<p>Generally improved compliance with policy requirements across all areas, with notable exceptions relating to the failure to return assurance reports.</p> <p>Project plan for the Trust-wide implementation of the Medicines Management app for Controlled Drugs has been finalised, with completion by the end of June 2025 (see Appendix).</p> <p>Publishing of the Medicines Policy on the Electronic Staff Record (ESR) to record acknowledgement that staff have read the policy.</p>		<p>Different audit processes continue to be employed in NY, EY, WY and SY despite requests to the Consultant Paramedics to align the processes.</p> <p>No consistency in the individual management of non-compliance with the Medicines Management policy.</p> <p>The remaining Area Clinical Governance Leads (the SY post has been vacant for some time), who are responsible for providing Controlled Drugs assurance, have recently been subject to a reorganisation resulting in gaps in assurance at a local level. The newly appointed Quality Governance Assurance Managers will need to provide assurance going forward.</p> <p>Despite implementation of the Medicines Management app in three stations in WY there has been a drop in the reporting of errors during the winter period.</p>	
Key Issues to Address	Action Implemented	Further Actions to be Made	
<p>Lack of consistency in the reporting of Controlled Drug policy compliance.</p> <p>Reduction in compliance, and subsequent lack of assurance, related to escalation in winter periods.</p> <p>Failure to return audit reports from several stations.</p>	<p>Engagement with Clinical Audit to implement a consistent and auditable process across all areas</p>	<p>Engagement with the newly created Quality Governance Assurance Managers' posts to ensure consistent high-quality reporting.</p> <p>To build medicines management assurance requirements into winter planning.</p> <p>For operational teams, emphasise and embed the legislative importance of ensuring that Controlled Drug audits are completed and returned.</p>	

Appendix

