

Good Practice Statement

Use of multi-dose compliance devices

Patient compliance with prescribed medication regimes can be variable. This can be compounded when patients have mental health issues or impaired cognition. Compliance devices can be useful for some patients but their use is not without issue. This statement provides some advice to support clinical staff to make appropriate decisions when considering the use of compliance devices.

Exclusion criteria

Requests for compliance devices are inappropriate in the following circumstances

- For any patient without a full assessment of their compliance capability
- Without confirmation that a community pharmacy is able to continue their supply in the community
- Where family members or care staff are able to administer or prompt patients to take medicine from original containers
- On discharge to a nursing home or care home setting where registered nurses administer medicines

Inclusion criteria

Requests for compliance devices are appropriate in the following circumstances

- When an assessment of compliance capability identifies them as the only practical solution to ensure treatment adherence
- As part of a planned self-medication programme
- In preparation for discharge where use of a compliance device will be required after discharge from hospital
- Where a compliance device was in use prior to admission
- Discharge to a care home or residential home with no access to registered staff to administer medicines
- On discharge to a care setting where care services supervise patients taking medicines
- On discharge home to support a relative to safely administer medicines to the patient where the relative is unable to administer medicines from standard containers or original packs

Practical points to consider

- Before requesting a compliance device speak to your ward clinical pharmacist with regards to alternatives and compliance assessment
- Can medication regimes be simplified to support compliance without resorting to a compliance device?
- Remember not all medication is suitable for inclusion in a compliance device and therefore patients may end up trying to take medicines from original packing, bottles and compliance devices at the same time. This may cause confusion and additional compliance problems.
- Give pharmacy at least 24 hour notice before requesting discharge medication in a compliance device

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- Indicate clearly on immediate discharge letter (IDL) that a compliance device is required. It is good practice to record the name of the community pharmacy who will take on dispensing on the IDL.
- It is the responsibility of the multi-disciplinary team to identify the community pharmacy that will fill the compliance device after discharge.

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Sample compliance assessment form.

Patient's Name:..... CHI:.....

	<i>COMPLIANCE ASSESSMENT CHECKLIST</i>	<i>YES / NO</i>
1	Is the patient stable on their current medication (i.e. the medication is not subject to continual change)?	
2	Can the currently prescribed medication be simplified?	
3	Can the patient read, understand and carry out instructions on medication labels?	
4	Can the patient open medication bottles / remove medication successfully from foil packs?	
5	Does the patient have poor eyesight, difficulties with literacy or unable to comprehend standard labels?	
6	Does the patient have support at home to administer/prompt medication from standard packs?	
7	Have you identified a community pharmacy to take over dispensing after discharge?	

If the answer to question 1 is no, do not request a compliance device until treatment is stable.

If the answer to question 2 is yes, simplify medication regime before requesting a compliance device.

If the answer to questions 3 & 4 is yes a compliance device is not required.

If the answer question 5 is yes a compliance device may be appropriate but if the answer to question 6 is yes it may not be.

A community pharmacy to take over dispensing must be identified.

Compliance device assessment flowchart

