

Supplemental information B: Additional patients and midwives' feedback

Patients' positive feedback on SAM
Pain control was similar as I would at home.
Really liked the independence so I can do other things
As my baby was on NNU it took away the stress to rush back
Feel more prepared for home
First day I felt under pressure to do SAM but on the next day I felt it was a positive experience
First day I felt unsure but then it was better as the midwife helped her
Found helpful
Gave me some control back which was nice
Patient thought this was a good service.
Patient said system is easy to use, easy access and good service
Patient felt it was helpful to take own medicine and would do again
Patient felt more in control. Midwife was unsure as she is used to giving patients their medicines
Patient felt she would wish to do the SAM again. Midwife also thought it released her time.
Patient thought that it helped to manage her pain. Midwife was unsure as she had not done before
Patient said she would recommend to a friend
Patient will do again as found helpful. Midwife felt it released time
Patient felt that SAM can release time for other patients
Patient would recommend to a friend
Patient would wish to do SAM again
Patient said she didn't have to ask for medicines and felt positive about this.
Saves time for everyone
Yes, much easier and no need to buzz and wait to get meds
More independence - helps 'training' for when at home
Preparation for SAM at home
Teaches you about what to do when you get home
Very useful to do as gave me independence
More independence
More flexible. Allowed me to continue my normal routine of taking meds and I knew why and what I was taking rather than a midwife just giving me my medicines
More efficient use of midwives' time tending to other needs of patients rather than dispensing routine analgesia to me
I think it is a good way to help understand how to take medication when you have to go home. Made me more aware of how and what I should take
Good to know more about medicines, delay on waking & whether they are actually needed (when you forget to take them and get sore)
Didn't need to wait for my pain relief from MW. Felt more in control. Learned more about medication and how to use them properly
A better understanding of medicines I would be discharged with
Able to control pain relief without hassling staff
Already knowledgeable about meds as I'm a pharmacist
Did not have to bother people if I need pain meds
Very satisfied and would encourage others. Midwife not clear about the SAM process.
Very satisfied. Midwife tried to give me her medicines as well and she was confused why I refused
Would bring in medicines if was told what I needed
Would participate again if I was well enough
It worked for me but would not work for older patients
Would participate in SAM in a future admission if available and I did not have my own medicines available
Felt I had a sense of autonomy in my recovery. Felt I wasn't 'pestering' busy midwives.
Felt more in control of pain relief. Could take PRN medicine as soon as I felt I needed it without having to buzz midwives. Freed up midwives' valuable time for other roles
It is very useful to have further information and also saves time being able to manage your own meds

Patients' negative comments about SAM
Although I thought I was capable in hindsight I should not have done it
Patient felt if many medicines then could be confusing. Medicine chart not easy to use.
Patient would have liked this info on painkiller earlier from midwife as it was helpful
Too many things to think about. Found stressful
Midwife signed 'self' on kardex inappropriately even though I was self-administering my medicines
Would prefer a simpler/bigger form to sign. Would make it much easier
Found process added stress at first and was happier just to ask midwife for pain relief as much easier when tired
I became unwell and I decided to stop SAM. It was good when I was well
The timing was bad. I was emotional as baby was in NNU. It took too long to explain. I found explanation patronising.
I haven't needed medication out with standard times and was tired when I had to take them - hassle of having to get up for meds post c section / risk of getting dose wrong
Patient felt she didn't realise it was optional to do SAM as she misunderstood and consented to do
Sometime because patient is self-medicating then midwives did not check on them very often
Midwives' negative comments about SAM
MW felt less involved with woman's care - ie pain management
Not sure about SAM. I'm old school and missed my medicine trolley
Not sure how it works and concerned about patients not administering correctly
Midwife has to do BP before meds anyway so better if she did meds.
Going round with medications for others at same time anyway so see no point of SAM
Patient asked me to give her drugs each time
Had to prompt patient to take regular meds. Kardex missing from bedside so unable to give ibuprofen until found. Still required dalteparin and nifedipine to be given by midwives at specified times.
Patient not remembering to fill in Kardex
Patient forgot to sign one dose taken but quantity was correct
Patient required prompting to remember
Patient was not well so had to stop SAM
Patient weepy and tired and felt she had so many things to concentrate on during night
Midwife felt happier to give patient drugs rather than patient taking themselves
Midwife was not familiar with SAM and not sure what to do
Patient felt overlooked as I was not at bedside often as patient was doing her own drugs
Midwife was unsure regarding SAM process. Some patients took medicines late (no definition of late?)
Patient left locker open with key
Pt left key in locker – midwife conscious regarding safety of medicines and other people accessing locker
Patient found lockers awkward to use. Midwife said she is unsure of the SAM programme.
Locker key not working and no pens for patients
Had to give meds as locker key was sticking
Key for locker sticking so midwife had to give patient medicine
Patient was not remembering to fill in Kardex
Patient was tired and have a baby to look after
Lock on medicine locker difficult to lock and unlock again so needed help from staff to do so
Faulty lockers/key so took longer for pharmacist to set up.
Patient forgot to log dose but count correct and next day was good
Midwife unsure of SAM process so not sure how useful.
Patient felt that it was good to have added support when needed.
Midwife use medicines from this patient locker to give to another patient's dose so count was wrong
Midwife would prefer a shorter logging paperwork
Checking that patient has correctly filled in on kardex and taken them effectively
As midwives we are taking on lots of extra roles. I feel that I would not have the time to assess and monitor the patients with regards to SA as well as all the other things I have to do
Dalteparin was missed as patient was SAM and midwife thought patient was also administering her dalteparin but she was not trained (Note: all SAM patients on ward cumulative log sheet)
Midwife at night not aware of SAM and gave medicines from her stock medicines whilst she did her rounds
Wrong amounts in medicine counts as night midwife gave medicines from own stock and not from patients' locker

Midwives' positive comments about SAM
Working well with support in place at present. Makes mum independent
Allows me more time with women for midwifery/feeding care
Patient said process was easy to use and help her take her medicines
Patient said she preferred this system of taking her medicines
Both patient and MW happy with SAM
Found it very beneficial for this woman
Patient said she would do again as good system. Midwife said set up by pharmacy make it helpful.
Great for mums to be independent. Needs pharmacy technician and pharmacist support to be viable.
Great system and worked well for this individual
Patient had baby on NNU so felt it gave her freedom and did not have to wait to get her medicines
Patient very at ease with her medicines at discharge
Patients who are taking meds at home should be allowed to SA when in hospital
Patient can manage own pain better
Empowering to patients to remain in control of own meds
Patient very happy no waiting for pain relief and good pain control. Patient felt more control and more aware of what they are taking. overall good scheme and glad I took part
Gives patient independence especially if was already taking regular medicines before admission
Gives patients more independence with medicines
Gives patient control over analgesia. Own decision making.
Good system for women with good awareness and without complex issues
Keeps patient up to date and informed. Pharmacy technician helped midwives with discharge drugs
Mum able to have analgesia as soon as possible
Midwife felt that this SAM release time to look after other patients
Midwife felt that this SAM release time to look after other patients
Midwife felt that SAM is positive and empowering for mums
Midwife found SAM useful. Patient said it is same as she manages medicines at home.
Midwife said SAM good for mums with baby on NNU
All midwives must be made aware if her patient is SAM (Note this is logged on ward sheet)