

CareHomesNews

Medicines Management Team

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In this issue:

- Award winning team
- Flu Immunisation Programme 2019/20 - reminder
- PrescQIPP e-learning training - reminder and how to register
- Blood glucose test strips, lancets and insulin needles in Residential Homes
- SCIE Social Care Institute for Excellence - Giving Medicines Covertly webinar
- Brexit and supply of medicines
- Minimising medication waste in care homes
- Topical steroid preparations, Emollients and Shower gels



Award winning team

We are very pleased to announce that our care home team received a runners up award at the NHS Bedfordshire CCG Staff Awards held last month. Our team have been recognised for delivering high quality care, positive working relationships with key stakeholders and collaborative working across integrated care systems. We hope to continue to offer all of our care homes a 'gold standard' medicines management service.

Flu Immunisation Programme 2019/20 - reminder

It is that time of year again when we would like to remind all of our care homes of the importance of ensuring that your residents and care home staff are vaccinated in this year's Flu immunisation programme.

As you know those eligible for the vaccine include:

- Those aged 65 years and over
- Those in long stay residential care homes
- Carers
- Close contacts of immunocompromised individuals

In our last newsletter we mentioned that all health and social care staff, employed by a registered residential care/nursing home or registered domiciliary care provider, who are directly involved in the care of vulnerable patients/clients who are at increased risk from exposure to influenza are eligible for a free flu jab as part of the programme. To gain access to your free flu vaccination you should ideally take with you some form of identification that includes your name and the name of your employer. This could be an ID badge, a letter from your employer or a recent payslip. You can access the flu jab at most GP surgeries or most pharmacies.

PrescQIPP C.I.C. Medicines use in care homes course 1 - registration

A gentle reminder of our free online e-learning training package available to all care homes across Bedfordshire (see attached flyer). To access e-learning materials please register by clicking on the link that has been circled in the screenshot below. If you do have an individual NHS.net email account please use this as your preferred email for registration.

PrescQIPP
Community Interest Company

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Important notice

To ensure you get access to the resources you need as quickly as possible, please [read the following carefully](#):

- If you're just here to access e-learning materials, then please do not register or login here. Instead, please [register or login to e-learning directly](#).
- If you need to access website materials, such as bulletins, webkits and data resources, then please register or login below.

Blood glucose test strips, lancets and insulin needles in Residential Homes

District nurses who attend Residential Homes to administer insulin to residents and to monitor their blood glucose will take their own supplies of insulin needles, lancets and blood glucose test strips. **In this case GPs should not be asked to prescribe these items.**

Exceptions to this rule would be for the below points. In these instances, the GP should provide prescriptions for the required items:

- Residents in a residential home who self-administer their insulin or self-monitor their blood glucose levels.
- Residents in a residential home who may be on diabetic medication likely to cause 'hypo's (e.g. gliclazide) or on a combination of diabetic medication that may lead to 'hypos'.
- Residents in a Nursing home setting

If you have any questions or concerns regarding the above please do not hesitate to contact us. Our contact details can be found at the end of this newsletter.

SCIE Social Care Institute for Excellence - Giving Medicines Covertly webinar

The Social Care Institute for Excellence (also known as SCIE) together with the National Institute for Health and Care Excellence (NICE) recently conducted a webinar entitled '**Giving medicines covertly: overcoming the challenges**'. A recording of this webinar can be accessed via the link below:

<https://www.scie.org.uk/home-care/medicine/giving-medicines-covertly/webinar>

As you are aware covert administration is a complex process which requires a good understanding of the legal requirements. However, as care home staff you may still face challenges when making decisions about achieving the best outcomes for people.

We would like to encourage our homes to watch this webinar to find out about evidence-based practical solutions for overcoming challenges to giving medicines covertly.

SCIE have a number of useful resources that are free to download once you register for a MySCIE account. Please take a look at their website for further information: <https://www.scie.org.uk/about/>

Brexit - medicines supply issues

The Department of Health and Social Care has provided guidance on '**Actions for adult social care providers to prepare for Brexit**'. The government is working directly with suppliers and pharmaceutical companies to make sure there is continued supply of medicines, medical devices and clinical consumables when the UK leaves the EU.

It is important that care homes do not stockpile any medicines (e.g. PRN medicines), medical devices or clinical consumables, as this could cause shortages in other areas and put service users at risk.

Any service users who manage their own medicines should also be advised not to store any additional medicines, medical devices or consumables in the home.

For any further information or to view the full guidance please access via the link below:

<https://www.gov.uk/guidance/actions-for-adult-social-care-providers-to-prepare-for-brexit#supply-of-medicines-medical-devices-and-clinical-consumables>

Minimising medication waste in care homes

It is estimated that £30million of medicines from care homes are destroyed annually, with up to half of this being preventable (NHS England).

Unfortunately, medication that has been returned to the pharmacy cannot be re-used, even if un-opened. The millions of pounds wasted each year could be invested to improve patient care.



Our team would like to support and encourage all care homes across Bedfordshire to try and minimise medication waste by following the key messages below:

- All care homes should retain responsibility for ordering medication, not delegate to the pharmacy
- Ensure that your care home has a robust monthly ordering system in place - ideally two staff members should be trained and skilled to order medication.
- Only request items that are needed after checking stock levels first.
- Ensure discontinued medicines are not re-ordered - ask pharmacy to remove from MAR chart and ask surgery to remove from repeat list (if not already removed).
- Check for discrepancies before prescriptions are dispensed. If your prescriptions are issued electronically - ask your pharmacy to provide a dispensing token so you can check the order.
- Medicines such as inhalers (e.g. salbutamol), GTN sprays, insulin can be '**carried forward**' to the next cycle if not needed. Always check the manufacturers expiry dates before carrying forward medication on to the next cycles MAR chart.
- For 'when required' or 'PRN' medicines it can be difficult to predict how much will be required for the next cycle - care should be taken when ordering, do not order if there is an adequate amount.
- 'PRN' medicines should be dispensed in their original packaging to allow them to be 'carried forward' to the manufacturers expiry date on the pack/strip (e.g. CosmoCol®, Lorazepam tablets).
- On liquids, creams and ointments - record dates of opening to allow you to 'carry forward' were appropriate. Liaise with the surgery if smaller quantities would suffice.
- Ensure residents have a regular medication reviews, at least annually.
- If a resident continually refuses medication, discuss this with the prescriber before re-ordering.

Remember - if you don't need it....DON'T ORDER IT!

Topical steroids preparations, Emollients and Shower gels

Topical corticosteroid (steroid) preparations

Topical steroid preparations are available in different formulations such as creams, ointments and lotions. They are used to treat inflammatory skin conditions such as eczema, dermatitis and insect stings. They may also be used to treat psoriasis.

Topical steroids have different levels of potency: Mild, Moderate, Potent and Very potent. The choice (including the potency and formulation) depends on the condition being treated (its stage), the area of body that is affected and age of the person. Topical steroids should be used short term or intermittently wherever possible. This is to minimise potential side effects such as thinning of the skin, worsening or spreading untreated infections etc.

Important points to ensure appropriate use of topical steroids:

- Should be spread thinly on the skin, but in sufficient quantity to cover the affected area.
- Duration of use - confirm how long the preparation is to be applied for.
- Frequency of application - confirm how many times a day it should be applied (e.g. twice daily).
- Site of application - confirm where it should be applied.

It is important to continue using any emollients whilst using a topical steroid. The best order of application has not yet been determined, but some recommend using the emollient first. There should be a gap between application (e.g. 30 minutes) to avoid diluting the topical steroid or spreading it to areas that do not need treatment.

Please clarify with the prescriber if you are unsure on how to apply the topical steroid

Emollients

Emollients are commonly prescribed in a care home setting for dry skin conditions such as eczema, or dermatitis. Across Bedfordshire CCG our preferred choice of emollients is from the Zeroderma® range (e.g. Zerobase®, Zerocream® etc). Please can we remind homes that emollients are only prescribed if there is a diagnosed skin condition. Directions for use, including frequency of application should be included on the prescription. Emollients may be 'carried forward' to prevent waste, but please ensure that a date of opening is recorded on the pack.

We have attached for your reference our 'Expiry dates poster for emollients'

Shower gels

This is to inform all care homes that shower gels will no longer be prescribed on the NHS across Bedfordshire CCG. This is due to the limited clinical evidence for their use.

Reference used: PrescQIPP Bulletin 116/November 2015 - Topical Corticosteroids

Contact us:

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