





Care About Medicine

Providing Domiciliary Care Staff with information, support & guidance on managing medicines safely & effectively

Issue 9 - December 2023

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Cleaning of spacer devices

Staff commonly forget to clean spacers, which can affect their efficiency and infection control. Spacers should be cleaned regularly (check individual manufacturers instructions as this varies depending on which device is used).

They should be washed in warm water with a small amount of mild detergent (washing up liquid). The spacer device MUST NOT be rinsed and must be allowed to air dry. Staff should then wipe the mouthpiece clean. Spacers should be replaced every 6-12 months.



Medicines Reconciliation

Medicines reconciliation is the process of accurately listing a person's current medicines. This could be when they are admitted into a service or when their treatment changes.

It is recommended that when taking on new service users that their GP is contacted to

- Inform them that you are providing support to one of their patients
- Obtain an up to date list of medication

Information can also be obtained from the person, their family, their regular community pharmacy and by checking any recent hospital discharge letters. It is also important to ensure any ambiguous doses are queried.



Sharing Medicines Administration Responsibilities

If a family member is sharing responsibility with the homecare service for the administration of any part of the medication regime i.e. family administering lunchtime medicines, all responsibilities **MUST** be recorded clearly in the care plan.

Similarly if a family member gives medicines support that is usually provided by a carer e.g. administering a PRN medicine outside the carers visiting times, it is important that it is agreed with the person and their family how they will inform the homecare service of this and the recording of it. This is important because it may affect whether the carer visiting next can offer the medicine to the service user e.g. paracetamol given by daughter, and then carer goes in on a scheduled call 2 hours later.

Interesting Reading

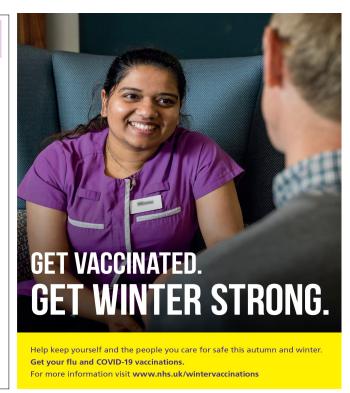
How to identify dementia in people with hearing loss

An article that discusses how researchers have developed a reliable test for dementia in people with hearing loss.

Click <u>here</u> for more information.

Adrenaline Auto-Injectors (AAI) - Accidental injections

Recent research has highlighted that 79% of problems that occurred when using AAIs were due to accidental injections. It is essential that AAIs are handled with care and instructions followed carefully when using. To read more on this click here.



Reminder

Patch Administration & Recording

When recording the administration of a patch it is important that carers document the specific location on the body where it has been applied e.g. front, right, chest. This could be recorded on a body map or in the daily log.

Carers should regularly check that patches are still in place (especially important for those patches that are applied every 3 -7 days) and it is best practice that this check is documented.

Old patches are occasionally left in place when applying a new patch, therefore staff need to record that the old patch has been removed in a similar way to recording when the patch is applied.

For those patches that are not applied everyday it is important that the MAR chart/eMAR is clear as to which days they need to be changed/applied.

	M	Т	W	Т	F	S	S	M	Т	W	Т	F	S	S
Butec 10 microgram/														
hour transdermal patch	X	X	X	Χ		Х	X	Χ	Χ	Χ	Χ		Χ	X
One patch to be applied once a week (Friday)														

Don't forget we are here to help. If you need any support or guidance on the management of medicines within your service please get in touch (details below).

Our 'medication guidance for home based care & support providers' is also available here.



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