





Care About Medicine

Providing information, support & Guidance on managing medicines safely and effectively in a social care setting

Issue 35 - December 2023

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Avoiding calls to 111 for medicines supplies to care homes

A few months ago, we were made aware of data that showed that care homes were calling 111 for repeat prescriptions. 'Repeat prescriptions required within two hours' accounted for a significant number of the 111 calls. As part of the actions to avoid this happening please be aware that:

- Patients will be supplied with a minimum of 10-14 days of regular medicines on discharge from hospital.
- Within this time it is important to ensure a new supply of medicines is ordered from the GP as soon as possible.
- This supply should be added to existing supplies at the home and the MAR sheet annotated to show this
- For all care home patients that are returning to the same care home the hospital will call them at the
 point of discharge to confirm the quantity available at the care home and ensure that this is enough to
 last them.
- A reduced supply will usually be made for medicines which have a specific course length or no supply will be made if Pharmacy have confirmed supplies at the care home.

Controlled Drug (CD) Stock Checks

Regular checks must be made by two trained staff members to ensure that what is in the CD cupboard matches what is in the CD register and that there are no discrepancies. This should be done at each administration. In addition, the care home manager/deputy should audit the register (including a balance check) on a weekly basis, to ensure all entries have been completed correctly, this should be documented in the CD register to indicate an audit has been undertaken.

Thickeners

It is recommended that thickeners are locked away when not in use including any open tubs kept in the kitchen. Just so you are aware if you have residents prescribed the Nutilis clear brand this has specific storage requirements and needs to be stored at a temperature of between 5-25°C - it may be advisable to keep a thermometer and check the temperatures daily if stored in the kitchen so you can evidence that it is being stored correctly.

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 the device 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.

It is recommended that the cleaning of spacer devices and tablet cutters/crushers be added to the care homes cleaning log. They should also be labelled with the residents name.

Dressings Request Form for Nursing Homes in Nottinghamshire County

To help you request dressings that are included in the wound care formulary a request form has been developed (here). Please use this form from January 2024 to request prescriptions from the GP for your residents, for up to 2 weeks supply at a time.

Please note: this form is only for use by nursing homes where trained staff are changing the dressings. District Nurses will continue to provide dressings for residents under their care.

A form for nursing homes in Nottingham City will be available soon.

Safety Pen Needles & Safety Lancet Devices

Going forward safety pen needles and safety lancet devices will not routinely be prescribed on an FP10 and it will be the employers responsibility to provide them.

employers must substitute traditional, unprotected medical sharps with a 'safer sharp' where it is reasonably practicable to do so. One of the requirements for employers under these regulations is to 'have effective arrangements for the safe use and disposal (including using 'safer sharps' where reasonably practicable, restricting the practice of recapping of needles and placing sharps bins close to the point of use)'. What this means in practice, is that healthcare workers who are required to administer injectables (e.g. District Nurses, and nurses working in residential and nursing homes) to patients, especially outside the clinical setting with no direct access to sharps bins, must use 'safer sharps'. Safer sharps are not required for use by patients who self-administer insulin or carers unless the patient has a known blood born virus.

Please ensure that in the New Year you have systems and processes in place as practices will no longer be supplying.

Reminder

Urinary Tract Infections (UTI's) - To Dip or Not to Dip

Dipsticks become more unreliable with increasing age over 65 years so undertaking a dipstick test is not always the best way to diagnose a UTI. Using signs and



symptoms can help determine the most appropriate course of action.

There are lots of resources available to improve your knowledge and help you to

- prevent dehydration and UTI's in your residents
- avoid the risks of unnecessary antibiotics (which can lead to antibiotic resistance)
- improve the care residents receive.

Resources available include:

- YouTube training video for staff on UTI's
- To Dip or Not to Dip training handbook
- <u>UTI quick reference guide to diagnosis of UTI in adults in primary care</u>
- TARGET antibiotics toolkit hub includes leaflets to discuss with residents and diagnostic tools

Refrigerated medicines stability tool

The Specialist Pharmacy Service (SPS) have launched a refrigerated stability tool to help users find information on whether refrigerated medicines can or can't be used after exposure to out of range temperatures, such as a refrigerator failure.

The stability tool can be accessed here.

This tool does not replace your local pharmacy who is available for guidance and advice on medicines stability but may help provide useful information outside of their normal working hours.

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 here 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.



Every effort has been made to ensure the information contained in this newsletter is accurate at the time of publication

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