Nursing and Residential home service

The service is designed on the results and conclusions of the Care Home Use of Medicines Study (CHUMS) which was funded by the department of health in establishing the prevalence, types and underlying cause of medication errors, estimating the harm to develop solutions to reduce the prevalence of error.

The study was not only based on the service provided by the home but also the GP and Pharmacy.

Recommendations and Key messages:

- **Homes need to simplify the act of medicine administration, they need ensure staff are appropriately trained and their knowledge of medicines are up to date.**

- **Research should be carried out into the use of MDS, also the ways in which medicines could be administered more safely and accurately in the care home.**

- **Pharmacists should perform a medicine usage review with all the residents at least every six months to ensure their treatments are safe and appropriate. GP should also review their process of patient monitoring and identify those patients who require more frequent reviews.**

- **A Pharmacist should have responsibility for the safe running of the entire system, involving all the interested parties**

- Better communications are required between the care homes, GP and pharmacies, with accurate and easily accessible information such as an electronic summary record.

- Each home should have a preferred GP surgery, with the ability to prescribe electronically from the home.
1. Ceredigion Medicines Administration Scheme

*Prescription To Your Door Step*, the pharmacy Borth has successfully introduced a system of safe medication administration known as CMAS into the care home setting. It is developed by the Local health board and social services to aid the administration of medication by domiciliary care workers, helping them to comply to all legal and non-legal requirements. This service is designed with greater clinical involvement from the pharmacy, emphasising on staff training and reducing of time involved with checking medication in and out of the homes.

2. Medication storage. New trolley design

The medicines are delivered to patient in an individually sealed bags which enable accurate and rapid checking of medication against a MAR chart. The medication is then stored in individually lockable boxes which can then be securely attached onto a trolley. All medications are stored in one place, without the need of a separate medication room.

3. Medication re-ordering on yourpeats.co.uk

This is an online ordering facility that provides an electronic trail access able on any computer with internet access. All your patient’s details will be entered onto the system and you will be able to re-order medication with a click of a button. No more chasing bits of paper. On average, it takes less than one hour to order for thirty patients.

4. Training

**Part one:**
- Advice on home medication records, Pharmacy PMR system and GP prescribing record.
- Advice on ordering and receiving of medicines
- Advice on storage of medicines
- The safe and appropriate methods of medicine administration
- Advice on the safe disposal of medicines
- Question and answer issues raised by the home

**Part two:**

Medicine usage review will be carried out on each patient. This involves checking whether the treatment is appropriate for the patient; ensure compliance and adherence to treatment. Any adverse drug effects will be monitored and reported. Appropriate monitoring intervals and advice will be given. This can be done as a training module with the staff.
5. Monthly check of administered medication.

On the Monday, third week of the cycle the current MAR charts are faxed to the pharmacy. These are cross checked with the new MAR chart and prescriptions before the new month is send out to the home.

6. Discharge Medicines Service.

If you have a patient discharged from hospital, then contact us. We will contact the Hospital pharmacy and carry out a discharge medicines service this ensures that you receive the correct medication with a MAR chart.

7. Pharmacy Intervention Service, Respite patients.

If a patient is admitted to the home with a large amount of medication and it is not clear what the medication regime is. The home can fill in the (FormR1A11 as used in the community) and faxes to the Pharmacy. The Pharmacy then carries out a secondary medicine reconciliation with the GP surgery. A new MUR chart will be sent to the home to be used with the patient’s current medication. The Pharmacy will then request a prescription to supply the home with up to date medication.

8. Backing sheet Mid-month alterations to medication

When any alterations are required on the MAR chart or change in medication mid cycle, the backing sheet should have the alterations written and countersigned by the GP. If the GP will not countersign then fax the backing sheet to the pharmacy. The Pharmacy will then contact the surgery to double check the changes made by the GP. The pharmacy will not provide a new MAR chart until they have made a second reconciliation with the surgery.

This can help minimise any potential errors arising from multiple information sources on recent changes. Clear directions will be given to the home to ensure new medications are given timely and correctly to the residents.

9. Stoma supply with Annual usage Review

We provide a full stoma and urostomy cutting service on all products.
1. Ceredigion Medicines Administration Scheme

When the Monitored Dosage System was originally introduced to Nursing/Residential Homes and the community three decades ago medication was provided in unmarked containers with no corresponding MAR charts and/or adequate storage facilities. Today 97% of medications are dispensed in manufacture labelled boxes in original blister packs with Patient Information Leaflets (PILs).

With this in place it is safer to dispense and administer from original packaging, resolving issues with drug stability, distribution of patients medication, space requirement and more importantly time saved for both the home (checking in) and the pharmacy. It has been shown the checking in of medication has been reduced from six hours to two hours in a thirty bed home.

In 2008 Ceredigion Social Services and Ceredigion Local Health Board introduced a working policy on the safe administration of medication by domiciliary care staff. The service has been designed not only to ensure safe delivery of medication but also to ensure that set out guidelines are followed thus protecting domiciliary care staff.

- Embody the principles of the NHS and community care act 1990
- Care standards act 2000
- The NHS plan 2000
- The domiciliary care agencies (Wales) regulations 2004
- National minimum standards for domiciliary care agencies in Wales

Prescriptions To Your Doorstep, The Pharmacy Borth has been successfully providing this service to Domiciliary care staff over the past four years in the community and in a care home setting.

- A 28 day cycle of medication in their original packs will be delivered with two corresponding MAR charts and backing sheet in a sealed bag.
- The medication in the sealed bag will be checked against the MAR chart (including quantity) and placed in the patients marked container in the medicine trolley.

Advantages:

1. Time saved on checking medication in. All the medications are in front of you and easily recognised. This can reduce the checking in from six hours to two hours for a thirty bed home.
2. All the patients’ medication will be stored in one container and not kept in different places.
3. Huge reduction in the space required
4. Medication administered is correct since it is dispensed from original packaging and not re-dispensed into a monitored dosage system.
• Each patient under your care will commence the 28 day cycle at the same date through the year.

• A calendar will be given to show the date the medication will commence each month.

• The medication required will need to be ordered ten days before the commencing date. This will allow time for the medication to be requested, dispensed and delivered the Wednesday before to allow a period of three days to resolve any possible queries.

• The medication can be ordered through yourrepeats.com where an e-mail reminder can be set up. If the patient requires extra medication (i.e. When Required Medication) during the month it can be ordered in the same way or by using one of six methods we have for reordering. All the patients medication are pre-set on to yourrepeats.com. The set up allows a paperless, simple and quick method of reordering medication anywhere in the country. It also enables you to check what and when you have ordered since it keeps a record of all requests.

• If the patient is to start the scheme before the 28 day cycle date (i.e. discharged from hospital), the required quantity of medication will be dispensed to reach that date along with a MAR chart.

• On patient discharge from hospital the home will notify the Pharmacy so we can contact the hospital to obtain medication discharge information. The pharmacy will then provide a MAR chart to correspond with the discharge medication. The pharmacy will then request a prescription from the surgery ensuring that all information is up to date.

• If a patient is prescribed with a new medication it will be delivered with a new MAR sheet. This also includes short term medication such as antibiotics.

• When patients are prescribed a once weekly dose of medication e.g. weekly bisphosphonates, the day of the week it is to be administered will be clearly indicated in the MAR chart and label on the box.

• When producing the MAR, the pharmacist will provide a logical order in which the client’s medication is listed (e.g. oral medication at the top followed by topical preparations).

• If more than one chart is required, the charts will be stapled together in order to avoid confusion or dose omissions.

• For acute or new repeat medication prescribed during a period covered by an existing MAR chart, a separate MAR chart will be provided. Repeat medication will then be added to the existing MAR chart on the next time it is produced.

• All medication will be labelled with the same information as the MAR chart, including time of day, e.g. 07:00, 09:00, 12:00, 18:00 etc.

• All ‘when required’ medication will be labelled with the indication, maximum dosage and instructions on when/how frequently to administer.
• ‘When required’ medication included on the patients repeat prescription list will be printed on subsequent MAR charts, even if not dispensed that month, in order to discourage over-ordering and waste. On the MAR chart it will be clearly stamped with **Not Dispensed**.

• Two copies of the MAR charts and backing sheets will be sent each month. One as a source of record if the patient is admitted to hospital and the other is to record drug administration. The backing sheet gives a quick form of drug reference to the visiting GP and to allow easy alterations to be faxed to the pharmacy.

• Acute courses of treatment, e.g. antibiotics, short steroid courses, will include the duration of treatment.

• Where a half tablet dose is required, (and no alternative preparation is available) the tablet will be split during the dispensing process.
2. Drug & Medicine Trolleys - Ward Distribution, Boxes

Features

- Provides secure drug delivery to wards using boxes which when locked are securely fastened to the trolley
- Single-point locking using CAM locks (each supplied with 2 keys)
- Master keys are available
- High level bumper bar which also acts as a push handle
- Laminate work surface
- 150mm braking swivel castors
- 30, 18 or 15 Boxes per trolley

Dimension (w x d x h)

- Box - 250 x 200 x 180mm (internal)
- Trolley 1447 x 448 x 1000mm

Standard Colours

- Paint - Grey
- Laminate - Spearmint
- Edging - Grey ABS

Key Advantage’s.

- All the patients’ medication is delivered in one sealed bag. Not several containers.
- All the patients’ medication easily checked and placed in an individual named lockable box on the trolley.
- Individual boxes are removable. One can easily take all of a patients` medication to the office for any queries or re-ordering.
- All medication kept in one place in their box. No need to keep medication anywhere else in the drug room, in fact no use for a drug room. Makes re-ordering easier, easy to maintain stock control.
3. Re-Ordering of Medication on line, yourrepeats.com

- With one email and one password you are able to have multiple patients on one account. This is ideal for care home settings. The pharmacy will set up the account with all the patient details installed after which the manager will be given a password.

- It enables you to order your medication on any computer anywhere in the country. You can check if medication has been ordered and deal with any discrepancies anywhere.

- You will receive an acknowledgement email of your order and an email on the date of delivery of your medication.

- The information is stored under encrypted code (Geotrust) which makes repeat ordering easy, quick and safe.

- It keeps a record of all your medication requests. This will stop any confusion on what was or wasn’t ordered.

- When ordering the medication extra information can be added on to the request. This information is printed on the request sheet which is sent to the surgery. This enables good communication.

Order Repeat Medication

**Patient: Gary Jones**

Your prescription details
Enter your medication as they appear on your repeat slip

<table>
<thead>
<tr>
<th>Drug Name</th>
<th>Strength</th>
<th>Quantity</th>
<th>Delete</th>
<th>Order</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ramipril Capsules</td>
<td>2.5mg</td>
<td>28</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Aspirin Dispersible</td>
<td>75mg</td>
<td>28</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Paracetamol tablets</td>
<td>500mg</td>
<td>60</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

+ add more lines

Patients in your account

Joyce Jones
Bodlondeb
Penparcau
Abaerystwyth
Tel: 01970612776
Surgery: Church

Edit + New order
View order history

Order selected items
4. Training: Two Parts

Part one:-

- Advice of home medication records, Pharmacy PMR system and GP prescribing record.
- Advice on ordering and receipt of medicines
- Advice on storage of medicines
- The safe and appropriate use and administration of medicines
- Advice on the safe disposal of medicines
- Question and answer session issues raised by the home

Part two: - Medicine Usage Review incorporating staff Training

This will be carried out once or twice every year. This is an enhanced service which enables the pharmacist to visit the home and carry out a medication usage review on the patients. It is designed to ensure that patients are able to take the form of medication they are prescribed and have no obvious side effects. Unlike the advice to homes training it is more drug based and covers the major problems and issues with specific drug administration. It will explain the importance of formulations and times of administration. Being an enhanced service (legally documented) the information is sent to the GP where any issues can be resolved.

5. Monthly check of administered and refused medication.

On the Monday, third week of the cycle the current MAR charts are faxed to the pharmacy. These are cross checked with the new MAR chart and prescriptions. This ensures that we have a clear picture on drug administration in the home. At the end of each month the home returns any refused or not required medication in a clear bag per patient with the MAR chart. The pharmacy will counter sign the returned medication (no need of returns book). We will then check the MAR charts to see if a more suitable form of medication is available and inform the GP about any suggestion. We will then return the MAR charts to the home.

This will ensure that recurrent medication refusal that could be damaging to the health of the patient is found and documented to the GP.

6. Discharge Medicines Service

- If a patient has been discharged from hospital the pharmacy will contact the hospital pharmacy to obtain a discharge sheet. We will then request the prescription and cross check the discharge sheet with the new prescribed medication. The pharmacy will then provide the home with new medication and corresponding MAR chart.
- This will ensure that the patient will receive the up to date prescribed medication
- This should also reduce the amount of workload to the home and pharmacy
- We can also provide a MAR chart for discharge medication dispensed from the hospital.
7. Pharmacy Intervention Service

If a patient is admitted to the home with a large amount of medication and it is not clear what the medication regime is. The home fills in the FormR1Al1 as used in the community) and faxes it to the Pharmacy. The Pharmacy will then carry out a secondary reconciliation with the GP surgery and faxes a MAR to the home to be used with the patient’s current medication. The Pharmacy will then request a prescription to supply the home with up to date labelled medications.

We also provide a service in the community which has been recognised for an award where we monitor patient’s compliance. This is when we class patients as a yellow patient: this is the first step in patient monitoring. This is suitable for patient who has difficulty in ordering and synchronising their medication, confused with what they take but has no difficulty in remembering when to take their medication. A start date will be given to the patient where a month’s supply of all medication will be delivered. A reminder chart will be given to the patient. The pharmacy will contact the patient 10 days before they run out and check what medication they require. If there are any irregularities then this will be reported back to the GP. If the patient still has administration issues then they are tagged as red patients and given an Monitored Dosage System.

<table>
<thead>
<tr>
<th>Resitendial/Nursing Home R1/Al1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service user name</td>
</tr>
<tr>
<td>GP Surgery</td>
</tr>
<tr>
<td>Referral source</td>
</tr>
<tr>
<td>Hospital or Community</td>
</tr>
<tr>
<td>All Present Medication</td>
</tr>
<tr>
<td>General comments</td>
</tr>
<tr>
<td>Assessed by:</td>
</tr>
<tr>
<td>Signed:</td>
</tr>
<tr>
<td>Assessed by:</td>
</tr>
<tr>
<td>Signed:</td>
</tr>
</tbody>
</table>
8. Backing sheet Mid-month alterations to medication.

It is essential that the person who administers the medicine refers to the record chart at the time of administration. This is to ensure that the correct medication is administered by cross referencing to the original medication. The Mar Chart is an essential record and would be used in any legal conflict. It is therefore essential for the service user and care staff that the MAR chart is correct and up to date and any amendments have been authorised.

When any alterations are required on the MAR chart or change in medication, the backing sheet should have the alterations written and countersigned by the GP. If the GP will not countersign then still fax the backing sheet to the pharmacy. The Pharmacy will then contact the surgery to double check the changes made by the GP. The pharmacy will not provide a new MAR chart until they have made a second reconciliation with the surgery. On secondary reconciliation with the surgery a new MAR chart will be faxed to the home.

If there is a change in dosage, the GP is required to produce a new prescription and faxed to the pharmacy where a new supply of medication with correct label and MAR chart will be provided until the end of the cycle. If the GP requires the change to happen immediately, the GP should change the instructions on the MAR chart and label on medication and countersign. If no urgency then the change will be done by the pharmacy.

In the community, GP can simply instruct the patient directly to increase or decrease a dosage and the patient can self-administer. In a home setting the medication is administered by a second person which is responsible to ensure that a correct medication and dosage is administered, therefore it is essential if not legal to reduce verbal communication and handwritten changes to the MAR chart that was not done by the GP.

By informing the pharmacy of alterations this ensures that the pharmacy is made aware of all changes. This can protect not only the service users but the care staff.

It is not a perfect world and the aim of the new procedure is to reduce risk. In out of hour’s circumstances where of handwritten charts not checked by the GP, such entries must be checked and countersigned by a second competent person (Policy Point 3.7) and referenced back to the original prescription. There is no legal impediment to a care home constructing a hand-written MAR sheet but there is a potential for error when charts are regularly re-written by staff. At the first opportunity the changes should be faxed to the Pharmacy.

### Backing sheet

<table>
<thead>
<tr>
<th>Medication</th>
<th>Directions</th>
<th>Change</th>
<th>GP</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qty 28</td>
<td>Take one at 9:00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spironolactone 25mg tabs</td>
<td>(Blood Pressure)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qty 28</td>
<td>Take One at 9:00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lansoprazole 15mg caps</td>
<td>(Stomach)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qty 28</td>
<td>Take One at 9:00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aspirin dispersible 75mg tabs</td>
<td>(Blood)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qty 56</td>
<td>Take Two at 9:00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prednisolone 1mg tabs</td>
<td>(Steroid)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Doctor: Penry
Patient: G Jones
Care Home: Borth
Pharmacy: Borth
Commencement Date: 03/05/13
9. Stoma and continence supply

- A confidential and free home delivery service for all stoma, continence and medication supplies
- Free wipes and disposable bags provided
- Monthly reminder if products are regularly required
- Dedicated order line 01970 871786
- Online ordering service yourrepeats.com
- Post Box and collection points available
- A friendly Customer Service team ensuring a personal and efficient service
- A prescription collection service from your doctor
- Delivery within 24 hours of receiving your prescription.
- All medication will be delivered in sealed bags where the contents cannot be seen or tampered with. This would enable you to have the items delivered to an alternative address or one of our collection points if you are not home
- A free cut-to-fit flange customisation service
- Medication Usage Review of all medication available at your request.
- Medication reminder charts to help with medication compliance
- We stock a comprehensive range of products from all manufacturers.
- We can check expiry dates of products on a yearly basis
- Advice about managing your stoma or continence appliance by providing an annual Appliance Use Review in your home (only available from Pharmacies)