

Care About Medicine

Medicines information for staff in a social care setting

Welcome to the fourth issue of **Care About Medicine** newsletter, including a special edition on fentanyl patches. This newsletter aims to provide useful information and guidance about medicines that may be helpful to anyone working within a social care setting.

Please contact us if you have any problems or issues concerning medication including safe storage, handling and administration, as well as advice on documentation, policies and procedures. We can also offer advice on medicine training issues and competency assessments.

You can get in touch by any of the following ways:

Email: CAM@nottspct.nhs.uk or contact

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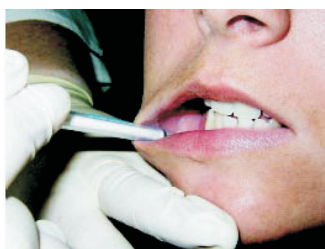


Administration of Buccal Midazolam

Midazolam belongs to a group of medicines called benzodiazepines.

Buccal midazolam is used as an alternative to rectal diazepam in the emergency treatment of prolonged epileptic seizures.

The buccal route is where the medicine is placed between the lower gum and cheek where it will be



absorbed directly into the bloodstream.

For patients prescribed buccal midazolam it must clearly state on their MAR chart and in their care plan the treatment dose and direction should treatment be unsuccessful i.e. a seizure continues. All care workers should also

be trained in how to administer it by a Health Care Professional.

What to do if no response?

If no response is seen following administration of a first dose of buccal midazolam a second dose should be given after 10 minutes and the paramedics called due to a risk of respiratory depression.

Storage

Midazolam is classed as a schedule 3 Controlled Drug (CD). Legally it does not have to be kept in the CD cupboard but it is good practice to do so.

Please refer to Area Prescribing Committee (APC) guideline for further information http://www.nottspct.nhs.uk/images/stories/My_PCT/How_we_work/areaprescribing/buccal%20midazolam%202012.pdf

The Common Sense Approach

It is recommended good practice that medicine cups, spoons and oral syringes are washed, rinsed, dried with paper towels and put away immediately after each medicine round.

Bacteria proliferate in warm moist environments so it is not advised to wash and leave medicine pots to dry.



MAR Chart Front Sheet Reminder

Care homes are reminded that in front of each residents MAR chart there should be a sheet that contains the following:

- Up to date photograph of resident/service user
- Their name (including the name that they like to be called)
- Date of birth,
- GP's name,
- Allergies
- Personal preferences and helpful information e.g. prefers to take medicine with squash instead of water.

Continence Formulary

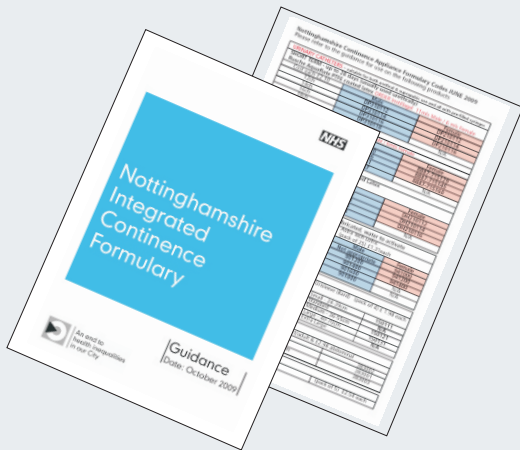
A reminder to Care homes when arranging a supply of continence products directly through an appliance contractor

Whilst we agree that every patient has a choice to have their prescriptions dispensed by any pharmacy or appliance contractor, the choice of contractor should not influence the product choices for the patient.

There is a robust continence formulary from which the majority of products used should be selected and changes should not be made to products unless there is a documented rationale to do so.

The Continence Formulary can be accessed via:

<http://www.nottspct.nhs.uk/my-pct/napc/476-formularies.html>



Helpful links

The following website's can provide information for carer's and service users:

For what's happening within the county, visit the NHS Nottinghamshire County website:

www.nottspct.nhs.uk

For information on medication issues, a dedicated website for Community Pharmacies with specific area for carers and patients:

www.nottscommunitypharmacy.nhs.uk

For advice on specific conditions visit:

www.nhsdirect.nhs.uk

For the latest information and guidance for care issues:

www.cqc.org.uk

Are there administration gaps on your MAR charts?

Recent visits to care homes and home care providers have highlighted administration gaps on MAR charts particularly for medicines that are taken on a when required (PRN) basis e.g. pain relief medicines.

It is important to remember that MAR charts are a formal record of administration and may be required as evidence in determining whether someone has been given medicines as the prescriber instructed.

All PRN medication must be offered and if refused coded accordingly as per MAR chart coding system with an explanation written on the back of the MAR chart as to why it was not given.

If it isn't documented it may be assumed that it wasn't given or even offered!



Interesting Reading

The Joseph Rowntree Foundation has published '**My Home Life: promoting quality of life in care homes**'. This study found that positive relationships in care homes enable staff to listen to older people, gain insights into individual needs and facilitate greater voice, choice and control. Care home managers play a pivotal role in promoting relationships between older people, staff and relatives. Care home providers and statutory

agencies should consider how their attitudes, practices and policies can create pressure and unnecessary paperwork which ultimately reduce the capacity of care homes to respond to the needs of older people, and negative stereotypes of care homes have an impact on the confidence of staff and managers. Further reading can be found at: <http://www.jrf.org.uk/publications/my-home-life>

Useful Resources

Hospital 2 Home Resource Pack

A resource pack designed to support older patients returning from hospital has been launched. The Hospital 2 Home resource is designed to support older patients in returning home safely after a hospital stay and reduce the risk of readmission to hospital. It contains information, advice, case studies and checklists to help health, housing and social care professionals provide the right care for older patients. The resource aims to improve the experience of staying in hospital and returning home for both older patients and their carers. More information can be found at:

<http://www.dh.gov.uk/health/2012/10/hospital-2-home/>