

# Care About Medicine

## Medicines information for staff in a social care setting

Welcome to the ninth issue of **Care About Medicine** newsletter.

This newsletter aims to provide useful information and guidance about medicines that may be helpful to anyone working with in 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.

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### Why must some medicines be taken with or just after food or a meal?

There are six main reasons:

**Medicines may cause nausea or vomiting** e.g. allopurinol, bromocriptine, co-beneldopa. Taking with or after a meal will minimise this side effect.

**Medicines may be irritant** e.g. aspirin, Non-Steroidal Anti-Inflammatory Drugs (e.g. ibuprofen), steroids (e.g. prednisolone). These medicines may cause indigestion, inflammation or ulcers. Although it is preferable to take these medicines with a meal, a small amount of food such as some biscuits, a sandwich or a glass of milk is usually sufficient.

**Medicines being used to treat conditions in the mouth and/or throat** e.g. mouthwashes, preparations for oral thrush (e.g. liquid nystatin, miconazole oral gel) and treatments for mouth ulcers. If given before a meal the medicine will be washed away too quickly and may not work, so needs to be given after.

**Medicines that are better absorbed with food** e.g. HIV medicines (saquinavir, nelfinavir). These medicines need food in the stomach to be absorbed into the bloodstream.

**Antidiabetic Medicines** e.g. metformin. Taking around meal times helps to reduce the high blood glucose levels which can occur after meals and avoids the subsequent very low blood glucose levels.

**Patients taking antacids for mealtime symptoms** e.g. gaviscon. Relieves indigestion or heartburn at mealtimes which is caused by the stomach producing too much acid when food enters the stomach.

**Information on how medicines should be taken will be on the pharmacy dispensing label and in the Patient Information Leaflet. Remember to always read the directions.**

### Storage & recordkeeping requirements for Common Controlled Drugs

Schedule	Drug name (Common Brand Names)	Do we need legally to store in the CD cupboard?	Do we need legally to record in the CD register?
Schedule 2	<b>Morphine</b> (MST Continus, Sevredol, Morphesic SR, Zomorph)	✓	✓
	<b>Oramorph 20mg/ml CONCENTRATED</b> oral solution	✓	✓
	<b>Oxycodone</b> (Oxycontin, OxyNorm)	✓	✓
	<b>Diamorphine</b>	✓	✓
	<b>Fentanyl</b> (Durogesic, Matrifen)	✓	✓
	<b>Methylphenidate</b> (Equasym, Ritalin, Concerta XL)	✓	✓
	<b>Pethidine</b>	✓	✓
	<b>Methadone</b> (Physeptone)	✓	✓
	<b>Dexamphetamine</b> (Dexedrine) or	✓	✓
	<b>Buprenorphine</b> (Temgesic – tablets, Butrans - Patches)	✓	✗ ...but recording in CD register is good practice
Schedule 3	<b>Temazepam</b>	✓	✗ ...but recording in CD register is good practice
	<b>Midazolam</b> (Epistatus** (not a licenced medicine), Hypnovel)	✗ ...but storage in CD cupboard is good practice	✗ ...but recording in CD register is good practice
	<b>Phenobarbitone</b>	✗ ...but storage in CD cupboard is good practice	✗ ...but recording in CD register is good practice
	<b>Tramadol</b> (Zydol, Zamadol, Mabron, Tramquel, Maxitram, Tramacet)	✗ ...but storage in CD cupboard is good practice	✗ ...but recording in CD register is good practice
	<b>Oramorph oral solution 10mg/5ml</b>	✗ ...but storage in CD cupboard is good practice	✗ ...but recording in CD register is good practice

Where it is noted as good practice, homes may wish to consider how many residents they have on these medications or if they have had safety concerns with these medications in the past.

Please note this list is not exhaustive and so advice should always be sought if care home staff are unsure of the schedule of a controlled drug

Adapted from a Citicare Medicines Management Team article. If you would like an A4 copy of this for display purposes please email Lisa via contact details above.

### Mental Capacity Act (MCA): easy read version

The Government has published an easy read version of '[Valuing every voice, respecting every right: making the case for the Mental Capacity Act](#)', first published in June 2014. This aims to improve the implementation of the MCA

[www.gov.uk/government/publications/mental-capacity-act-government-response-to-the-house-of-lords-select-committee-report](http://www.gov.uk/government/publications/mental-capacity-act-government-response-to-the-house-of-lords-select-committee-report)

## Warfarin

Having visited numerous care homes over the past year we have noticed that there are many residents on warfarin. Warfarin is an anticoagulant that is used to thin the blood in those people at risk of blood clots. Whilst on warfarin residents will need to be monitored more closely and will require regular blood tests. All care providers must ensure that they have good systems and processes in place for dealing with residents on warfarin. It is important that the following points are adhered to:



- Ensure information on when residents blood tests are due are recorded and actioned (particularly important for new residents on admission)
- Ensure whose responsibility it is to perform the blood tests is documented in the care plan
- Ensure that all communication received regarding warfarin, including the yellow book, are read in a timely manner and on a regular basis. The most recent communication regarding doses should be stored in the MAR chart folder
- Ensure that the resident takes their yellow book with them to all appointments and on days out. This is to ensure that in any emergency situation information is available that they are taking warfarin and at what dose
- Ensure that there is a written procedure regarding warfarin in place within the care home, this should include how warfarin doses are documented on the MAR chart.
- Ensure staff have received adequate training regarding warfarin to enable them to administer safely
- Homes may wish to state in their medication procedures that 2 members of medicines trained staff check that the right residents INR results have been received. The doses on the INR report should then be written on the MAR chart and then countersigned. The date of the next INR could also be documented on the MAR chart.

## CQC - new model for inspecting adult social care



The Care Quality Commission has changed the way it will regulate, inspect and rate care homes and community adult social care in England. Following extensive joint development, consultation and testing over the last eighteen months, CQC has issued documents called 'handbooks', which will help care providers to understand how they will be assessed and rated from now on. Specialist teams, including trained members of the public (called Experts by Experience) will inspect services, unannounced, against what matters most to the people who use them – are they safe, caring, effective, responsive to their needs, and well-led. The CQC will then rate these services as Outstanding, Good, Requires Improvement and Inadequate so that the public has clear information to help them make choices about their care.

For further information please visit: [www.cqc.org.uk/content/adult-social-care](http://www.cqc.org.uk/content/adult-social-care)

## Crushing tablets or opening capsules in a social care setting

Some patients may experience problems swallowing and be unable to take the tablets or capsules in their whole solid form. As a carer you may think that crushing the tablets or opening the capsules would solve this.

It is important to understand though that medicines should only be taken according to the directions of a prescriber or their Patient Information Leaflet. Medicines used in a different way from what the manufacturers have stated are being used 'off-licence' which means the manufacturer does not accept responsibility for any harm caused as a result of this.

A person giving crushed tablets or opened capsules to a patient without directions from the prescriber and without making the appropriate checks could be held liable for any harm caused.

Some tablets and capsules may be harmful if crushed or opened:

- **Modified release (slow or extended release) tablets or capsules.** These can be identified by the abbreviation such as LA (long acting), SA (sustained acting), CR (controlled release), XL (extended release), SR (sustained release) or m/r (modified release) after the brand name on the medicine box/label. Words such as 'Retard', 'Slow release' or 'Continus' are also sometimes used. It is essential that these medicines are swallowed whole. If these medicines were crushed the dose could be released much quicker than intended and would result in the release of a much higher dose which could be dangerous.
- **Enteric coated tablets or capsules.** These can be identified by the abbreviation EN or EC at the end of the medicine name on the medicine box/label. These tablets/capsules have a special coating and if crushed or opened the medicine may be destroyed in the stomach or cause side effects such as indigestion or ulcers.
- **Hormone, steroid, antibiotic or cytotoxic medicines.** Crushing or opening any of these may cause some of the medicine to go into the air as dust. The dust may cause side effects to the person crushing the tablets or anybody else nearby.

### So what should you do?

Speak to the prescriber...

- There may be a different formulation available e.g. soluble tablet, liquid preparation etc.
- A different medicine may be prescribed that does not need to be swallowed whole or is available as an alternative formulation.
- Before crushing or opening medication a pharmacist should always be consulted to find out if this is possible and this should be approved by the prescriber.

## British National Formulary (BNF)

# BNF

The BNF is a useful reference tool for staff to use to find out more information about individual medicines. The BNF and BNF for children are now free to view via the NICE Evidence website at <http://www.evidence.nhs.uk/>

Apps are also available from NICE - although an Open Athens account is needed for these.