



- Upcoming webinar dates
- Time Specific Medication
- Website reminder
- CD series Part 2 - Storage

Upcoming webinars with HCPA

Please find below the links to book our upcoming webinar sessions in conjunction with HCPA:

- **07/04/2025** (10.00-11.00) - [Administration of medication webinar for care homes](#)
- **15/05/2025** (10.00-11.00) - [Medications at end of life & covert medication webinar for care homes](#)
- **19/06/2025** (10.00-11.00) - [Managing behavioural & psychological symptoms of dementia \(BPSD\) webinar for care](#)

Time Specific Medication

Giving medicines at the right time is crucial for safety and effectiveness. Some medicines must be taken at specific times due to their absorption, interactions, or how they work in the body. Here are some examples:



Before or after food: Some medicines need an empty stomach for absorption, while others require food to prevent irritation. Labels provide instructions like: Take with or just after food, Take 30 to 60 minutes before food or Take on an empty stomach (this means take an hour before or two hours after food).

Antibiotics (e.g., amoxicillin, azithromycin, ciprofloxacin): Must be taken at regular intervals to maintain infection-fighting levels in the body. Missing doses can reduce effectiveness.

Insulin (e.g., Humalog, Lantus): Given at specific times around meals to control blood sugar. Delayed or missed doses can lead to serious complications.

Bisphosphonates (e.g., alendronic acid, risedronate, ibandronic acid): Administer these medicines according to the manufacturer's instructions and refer to the patient information leaflet. Used for osteoporosis, these must be taken with plain water at least 30 minutes before the first food or drink of the day. Patients must remain upright and avoid eating for 30 minutes after taking them.

Medicines containing paracetamol: Always check the ingredients of painkillers like co-codamol and cold remedies. Ensure at least a 4-hour gap between doses and monitor the total intake over 24 hours to prevent overdose (maximum 8 tablets in 24 hours). Dosage may need to be reduced for those under 50kg.

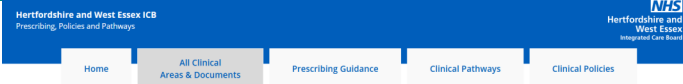
Parkinson's disease medication (e.g., levodopa): Timing is crucial to prevent worsening symptoms such as pain, rigidity and tremor's. Medicines should be taken within 30 minutes of the prescribed time. Stopping suddenly can cause severe side effects, so always consult a specialist before making changes.

Managing Time-Sensitive Medicines

- **Follow clear schedules** to ensure medicines are given at the right time.
- **Use reminders and records** to track administration times and doses.
- **Train staff** on medicine timing and what to do if a dose is missed.
- **Support residents** with tailored medicine care plans that align with their mealtimes and routines.

By managing medication timing effectively, we can improve residents' health, safety, and quality of life.

Website reminder



Go to our website [Hertfordshire and West Essex ICB Prescribing, Policies and Pathways](#).

Home > All Clinical Areas & Documents

Find clinical documents

The image shows a search interface with a text input field containing the word 'Good', a search button, and a 'Browse' button. Below the search bar is a dropdown menu labeled 'Choose clinical area...'. A green arrow points from the text 'Type in 'Good'' to the search input field.

Type in 'Good' into the search bar and all the current Good Practice Guidance's for care homes will be listed.

You can now find all our template forms all in one place. These include our covert plan and review form, Homely remedy authorisation form, PRN protocol template and self-administration risk assessment.

[Good Practice Guidance - Template Forms](#)

The image shows a webpage titled 'Good Practice Guidance - Template Forms'. It includes a table with the following information:

Indication	Care homes
RAG rating	n/a
Document type	Prescribing support document
Place	Hertfordshire and West Essex ICB
Output type	Pharmacy / Prescribing

Good Practice Guidance - Template Forms

Here you will find all good practice guidance related template forms, which can be easily edited for individual residents.

- Covert Administration of Medicines - Appendix 4 - Meds Management Plan
- Covert Administration of Medicines - Appendix 5 - Review Form
- Homely Remedies - Appendix 1 - Authorisation Form
- PRN Medicines - Appendix 1 - PRN Protocol Template
- Self-Administration - Appendix 2 - Risk Assessment Form

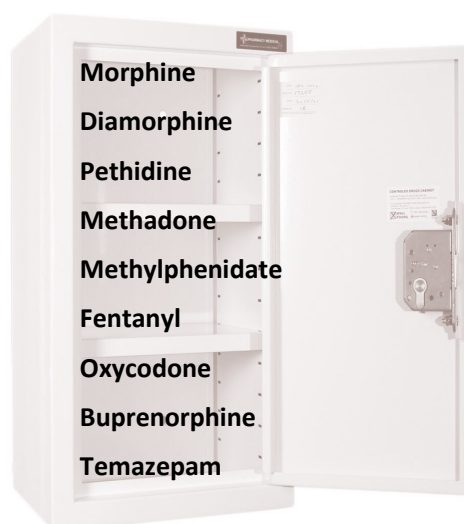
CD Series - Part 2 Storage

Controlled Drugs (CDs) are unlike other medicines in that there are additional safety and legal requirements for supply, receipt, storage, administration, and disposal. These additional requirements must be incorporated into the care homes' medicines policy.

- The CD cupboard must be made of steel, have a specified locking mechanism and be permanently fixed to a solid wall with rag or rawl bolts.
- CD cupboards must only be used for the storage of CDs and no other medication or valuables such as jewellery or money should be stored in the cupboard.
- If controlled drug medication is provided in a monitored dosage system (MDS), the MDS must be stored in the CD cabinet.
- Access to the CD cupboard must be restricted. The CD cupboard keys must be kept under the control of an authorised, designated person and there must be a clear audit trail of the holders of the key.
- If a person is self-administering controlled drugs, they can keep them in their possession provided the controlled drugs are kept safely and a risk assessment is in place.

Please go here to see our [Good Practice Guidance on Controlled Drugs](#)

Keep me in the CD cupboard



CD Series - part 2

CDs are divided into five schedules depending on their potential for abuse if misused. The schedule a CD is in determines the requirements for safe storage and recording. Some services may choose to store controlled drugs from other Schedules in the controlled drugs cupboard and record them in the controlled drugs register. Always follow your service's medicines policy.

<u>Controlled Drug</u>	<u>Brand Names (Examples)</u>	<u>Store in CD cupboard</u>	<u>Record in CD register</u>	<u>Additional Information</u>
Schedule 2				
Morphine	MST Continus, Zomorph, Sevredol, Oramorph concentrated oral solution 100mg/5ml	✓	✓	
Diamorphine		✓	✓	
Pethidine		✓	✓	
Methadone	Physeptone	✓	✓	
Methylpheni-date	Ritalin	✓	✓	
Fentanyl	Durogesic, Actiq Lozenges, Fencino	✓	✓	
Oxycodone	Oxypro, Longtec, Oxy-norm, Oxycontin, Shortec	✓	✓	
Schedule 3				
Buprenorphine	Temgesic, Bupeaze, Butec	✓		None of the controlled drugs in this schedule need to be recorded in the CD register but this is a good practice recommendation.
Temazepam		✓		
Phenobarbital				
Midazolam	Hypnovel, Buccolam, Epi-status			
Tramadol	Marol			
Pregabalin	Alzain, Lyrica, Axalid, Lecaent			
Gabapentin	Neurontin			
Schedule 4				
Diazepam, Lorazepam, Nitrazepam, Zopiclone & Zolpidem		No Legal Requirements		
Schedule 5				
Morphine sulfate 10mg/5ml oral solution (Oramorph)		Morphine sulfate 10mg/5ml oral solution is not a schedule 2 controlled drug. However, CD storage and CD records are a good practice recommendation. We would recommend storing the different strengths separately so they do not get mixed up.		

Please send details of any queries /requests for support to the team e-mail address hweicbenh.pharmacycarehomes@nhs.net Emails are monitored Monday-Friday, 9am-5pm (exc Bank Holidays) and you will receive a response within three working days. Patient identifiable details should ONLY be sent from and to secure email addresses (NHS.net to NHS.net). More information, guidance documents & newsletters can be found at our new website [Prescribing, Policies and Pathways \(hweclinicalguidance\)](#)

