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Conotrane cream is back!

Conotrane Cream is the ICS first line barrier cream [ICS wound care products formulary](#). Due to a change in manufacturer and following availability issues Conotrane cream was removed from GP prescribing systems and could not be prescribed for several months, resulting in more expensive second line alternatives being prescribed. Conotrane cream (500g) is now readily available and listed again (the 100g pack size has been discontinued). GPs are being asked to please revert back to prescribing Conotrane cream where possible.



New HWEICB website

Did you know that all good practice guidance, support documents and policies for care homes can be found on the new Hertfordshire and West Essex Integrated Care Board website? Go to: [Prescribing, Policies and Pathways \(hweclinicalguidance.nhs.uk\)](https://www.hweclinicalguidance.nhs.uk). Our website is easy to use, and you can search for a guidance or document by typing in key words into the search engine:

Find clinical documents

For clinical area you can choose 'Care Homes' to narrow down the search.

Alternatively you can find all our care homes related documents by clicking on 'All Clinical Areas and Documents'



Then select 'Care Homes' for clinical area:

Clinical area	Documents
Cancer & Immunosuppression	45
Cardiovascular	56
Care Homes	21

This takes you to all the documents available and the 'indication' column will help you to identify what the document relates to:

Medicine / Guideline	Indication	RAG rating	Document type	Place
Care home malnutrition management pathway	Nutrition support - Malnutrition	n/a	Clinical pathways	Hertfordshire and West Essex ICB
Care homes - Fortifying food	Nutrition support - Malnutrition	n/a	Patient information	Hertfordshire and West Essex ICB
Care Homes - Good practice guideline	Medicines reconciliation	n/a	Prescribing guideline	Hertfordshire and West Essex ICB

Remember to bookmark or favourite this page on your internet browser. If there is a guidance you require that is not available, or have any questions, comments or feedback relating to this website please contact us at hweicbenh.pharmacycarehomes@nhs.net

Reducing Medicines Waste in Care Homes

General Information

The NHS is estimated to waste £300m each year on medicines wastage, at least half of which is avoidable. All staff involved in the management of medication in care homes have a responsibility to ensure medication resources are allocated responsibly. Care home residents often require multiple medications, therefore robust procedures should be in place for ordering, storing, administering and reviewing medication. The picture on the right represents a small amount of waste from a care home that adds up to £950.



Topical Preparation Tips

Medication waste is common with a variety of medications but this is particularly notable with topical preparations. Please note the points below:

1. CQC require specific directions to be added to topical preparations, these should be clear and indicate the area of the body where this is to be applied and how often. This will also influence the quantity required on prescription.
2. Note the quantity of medication to be applied as detailed in the dosage instruction, as this may also influence the pack size prescribed.
3. Remember the date of opening should be written on the dispensing label for all topical and liquid preparations.
4. To reduce wastage, some items may safely be retained for use during the following month.



General Hints and Tips

1. Before you request prescriptions for the coming month, check the current stock levels of medication, such as PRN medication and inhalers which may not need to be ordered every month.
2. Highlight to the prescriber any quantities that appear excessive (particularly PRN medication) and request that this is adjusted so a smaller quantity can be supplied the following month.
3. Medication must be stored as recommended by the manufacturer, this ensures the medication remains stable for use and the expiry date is reliable. For example storage at room temperature means below 25°C. For items requiring refrigeration, the fridge temperature should be monitored - and action taken if this falls outside the 2-8°C range.
4. Most medication including topical preparations (creams and ointments), liquid medication and inhalers can be retained for use if not used over the monthly ordering period.
5. Do not dispose of unused medicines at the end of the month unless the GP has removed them from the prescription list, or they are unsuitable for continued use.
6. Medicines supplied by the community pharmacy cannot be reused, even if returned unused and in pristine condition, so only order what you need.
7. Ask the community pharmacist to remove discontinued medicines from the MAR chart and the GP to remove any discontinued medicines from the repeat side of the prescription. This will help to prevent discontinued medicines being ordered or administered in error.
8. If residents continually refuse to take medicines discuss with the GP before reordering.
9. Ensure residents' medications are reviewed regularly.

Expiry Date Guidelines for Care Homes

FORMULATION	EXPIRY DETAILS	COMMENTS
Tablets & capsules - stored in manufacturer's original packaging	Foil strips: Manufacturer's expiry Bottles: Manufacturer's expiry - some products may have a shorter expiry after opening	Medicines kept for use in the next cycle should be recorded in the 'carried forward' section of MAR chart
Tablets & capsules - decanted from original packaging into bottles by pharmacy	6 months from dispensing date unless otherwise specified	Medicines kept for use in the next cycle should be recorded in the 'carried forward' section of MAR chart
Tablets & capsules - stored in Multi-Compartment Compliance Aid	8 weeks from dispensing date	
Oral liquids - stored in original container	6 months from date of opening <u>or</u> manufacturer's recommendation if shorter	Write DATE of opening on dispensing label. Medicines kept for use in the next cycle should be recorded in the 'carried forward' section of MAR chart
External liquids	6 months from date of opening <u>or</u> manufacturer's recommendation if shorter	Write DATE of opening on dispensing label
Emollients - in pump dispenser/tubes	6 months from date of opening <u>or</u> manufacturer's recommendation if shorter	All emollients should be for named residents. Write DATE of opening on dispensing label
Emollients - in tubs/jars	3 months from date of opening <u>or</u> manufacturer's recommendation if shorter	All emollients should be for named residents. Write DATE of opening on dispensing label
Ear/nose drops and sprays	3 months after opening unless manufacturer advises otherwise	Write DATE of opening on dispensing label on bottle
Eye drops/ointment	1 month after opening unless manufacturer advises otherwise	Write DATE of opening on dispensing label
Inhalers	Manufacturer's expiry	
Insulin	Unopened stored in fridge: Manufacturer's expiry when stored in a fridge at temperature between 2°C and 8°C. Opened stored at room temperature: 28 days	Write DATE of opening on pen/cartridge. One pen/cartridge will often be sufficient for 1 month

CD incident reporting

Do you know what to do if a Controlled Drug (CD) incident occurs in your home?

CD incidents should be reported using the [Sign in \(cdreporting.co.uk\)](https://cdreporting.co.uk), registration is required to report.

CD reporting guide can be found here: [Report an Incident How to Guide.pdf \(cdreporting.co.uk\)](https://cdreporting.co.uk/Report-an-Incident-How-to-Guide.pdf)

If queries regarding incidents do occur the local CD officer email contact is england.ea-cdao@nhs.net

CQC requires all care homes to have a policy or standing operating procedure for management of CD medications and what to do if incident occurs. More information from CQC can be found here: <https://www.cqc.org.uk/guidance-providers/adult-social-care/controlled-drugs-care-homes>

What is classed as a CD error:

- An incident regarding CD's can be actual error(s) or near misses
- Lost or theft of a CD
- An injury or harm concerning a CD - If injury or harm has come about then as per CQC, Regulation 18 needs to be followed too in addition to CD reporting. More information about Regulation 18 can be found here [Regulation 18: Notification of other incidents - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/regulation-18)
- If the integrity of safe and secure handling of a CD is disrupted, then this also must be reported as an incident. This is when there can be a risk of tampering or the controlled drug not ending up for the intended user.
- CD reporting needs to take place if a balance error has been recorded.

Updated wound care formulary

The ICS wound care formulary has been updated and is available here [ICS wound care formulary](https://www.nhs.uk/ics-wound-care-formulary). It aims to aid in the decision-making process to help clinicians choose the most appropriate product whilst ensuring value for money in the use of NHS resources. Adherence to the formulary will be audited and monitored. Deviation from recommended products will require clinical justification.



Codeine linctus reclassification

Following a public consultation the Medicines And Healthcare products Regulatory agency (MHRA) has decided to reclassify Codeine linctus to a Prescription-Only Medicine (POM) because of the risk of abuse and addiction. Please see the link below to the latest drug safety update <https://www.gov.uk/drug-safety-update/codeine-linctus-codeine-oral-solutions-reclassification-to-prescription-only-medicine>. Due to this new guidance Codeine Linctus is no longer suitable for use as a homely remedy.



New and updated Medicines use in care homes course 1 & 2



Course 1 & 2 of the Medicines use in care homes have been updated and launched as brand new courses. The courses are designed for care home staff involved in any aspect of medicines use. They include the following modules plus three case studies:

Course 1

1. Safe use of medicines
2. Medicines basics
3. The medicines Administration Record
4. General principles of medicines administration
5. The monthly medicines cycle
6. Self administration
7. Administration of PRN medicines
8. Administration of solid doses
9. Administration of liquids
10. Administration of inhalers
11. Application of topical products
12. Administration of transdermal patches

Course 2

1. Missed and delayed doses
2. Covert administration
3. The management of controlled drugs in care homes
4. Homely remedies and self-care
5. Medicines reconciliation
6. Effective management of medicine supplies in care homes

Please contact learning@prescqipp.info for further information or to purchase licences for your teams and care home staff.

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 will be triaged to the most appropriate member of the team. Please do not include any patient identifiable data in communications with the team. More information, guidance documents & newsletters can be found at our new website : [Prescribing, Policies and Pathways \(hweclinicalguidance.nhs.uk\)](https://www.prescribing-policies-and-pathways.nhs.uk)

