

|  |  |
| --- | --- |
| **Review Sheet** | |
| Last Reviewed Last Amended Next Planned Review in 12 months, or  14 May '19 14 May '19 sooner as required. | |
| Business impact | Changes are important, but urgent implementation is not required, incorporate into your existing workflow.  **MEDIUM IMPACT** |
| Reason for this review | Scheduled review |
| Were changes made? | Yes |
| Summary: | Policy reviewed and updated. This policy contains details relating to ordering and receipt of medication within the home and provides the framework for effective medication reconciliation. Some of the procedures have been modified for increased  readability. Content reviewed to ensure it reflects the new recommendations from the Royal Pharmaceutical society, reference added relating to CQC recommendations in relation to medication reconciliation. Please note that this policy reference has changed - it was previously CM06. |
| Relevant legislation: | * The Care Act 2014 * The Controlled Drugs (Supervision of Management and Use) Regulations 2013 * The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 * Medicines Act 1968 * The Human Medicines Regulations 2012 * Misuse of Drugs Act 1971 * The Misuse of Drugs (Safe Custody) Regulations 1973 * The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007 |
| Underpinning knowledge - What have we used to ensure that the policy is current: | * Author: NICE, (2014), *Managing medicines in care homes*. [Online] Available from: <https://www.nice.org.uk/guidance/SC1>[Accessed: 14/5/2019] * Author: Royal pharmaceutical society, (2018), *Professional guidance on the safe and secure handling of medicines*. [Online] Available from: [https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure- handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of- medicines](https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of-medicines) [Accessed: 14/5/2019] * Author: NICE, (2017), *Managing medicines for adults receiving social care in the community*. [Online] Available from: <https://www.nice.org.uk/guidance/ng67>[Accessed: 14/5/2019] * Author: CQC, (2018), *Medicines reconciliation and medication review*. [Online] Available from: [https://www.cqc.org.uk/guidance-providers/adult-social-care/medicines- reconciliation-medication-review](https://www.cqc.org.uk/guidance-providers/adult-social-care/medicines-reconciliation-medication-review) [Accessed: 14/5/2019] |
| Suggested action: | * Read the policy |



**1. Purpose**

* 1. To ensure that Service Users receive their medications correctly and in a timely manner and to reduce the unnecessary waste of medication. This policy should be read and be used alongside any locally required policies and procedures.
  2. To support Holbeach Hospital & Nursing Home in meeting the following Key Lines of Enquiry:

# Key Question Key Lines of Enquiry

|  |  |
| --- | --- |
| EFFECTIVE | E4: How well do staff, teams and services within and across organisations work together to deliver effective care, support and treatment? |
| SAFE | S4: How does the provider ensure the proper and safe use of medicines? |
| WELL-LED | W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed? |

* 1. To meet the legal requirements of the regulated activities that Holbeach Hospital & Nursing Home is registered to provide:
     + The Care Act 2014
     + The Controlled Drugs (Supervision of Management and Use) Regulations 2013
     + The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
     + Medicines Act 1968
     + The Human Medicines Regulations 2012
     + Misuse of Drugs Act 1971
     + The Misuse of Drugs (Safe Custody) Regulations 1973
     + The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007



**2. Scope**

* 1. The following roles may be affected by this policy:
     + Registered Manager
     + Other management
     + Nurse
     + Care staff
  2. The following Service Users may be affected by this policy:
     + Residential Service Users
  3. The following stakeholders may be affected by this policy:
     + External health professionals
     + NHS



**3. Objectives**

**3.1** Procedures are in place for effective and safe, ordering, receipt and review of Service User medication.



**4. Policy**

* 1. Holbeach Hospital & Nursing Home understands the importance of having accurate and up to date information about a Service User's medication at all times and will ensure that all staff responsible for medication management understand the procedures that are in place to make sure the process is safe and effective. Holbeach Hospital & Nursing Home uses a reputable pharmacy provider and raises any concerns in the quality of service provision in a timely manner to reduce any impact on the Service User. Only staff trained, competent and skilled to do so will be responsible for the ordering and receipt of

medication. Deputy manager does a monthly order for all long term residents. Responsibilities will be clear in relation to medication, ordering, and receipt when partnership working with both Service Users and other organisations.



**5. Procedure**

# Information Necessary for Ordering of Medication

Below is a list of the information that needs be made available to support effective medicine ordering:

* + - Service User details; including full name, date of birth, NHS number.
    - GP surgery details,
    - Current list of medicines, including name, strength, form, dose and frequency,

# Roles and Responsibilities with Medicines Reconciliation

Holbeach Hospital & Nursing Home understands that medicines reconciliation can be carried out by any healthcare professional as long as they are competent to undertake reconciliation and have the skills and information they need to carry out the task. Holbeach Hospital & Nursing Home will ensure that the following people are involved in medicine reconciliation:

* + - A pharmacist, other health and social care practitioners involved in managing medicines for the Service User

Holbeach Hospital & Nursing Home should retain responsibility for ordering medicines from the GP Practice and should not delegate this

Staff responsible will document the medicine reconciliation to ensure there is a clear audit trail.

# Ordering

A medication ordering system for Service Users will ensure that the correct medicines are supplied in a timely manner to meet their needs with minimum waste. All staff, including the wider multidisciplinary team, have their part to play in ensuring a smooth process and, ultimately, the best care for Service Users. Good communication and co-operation between GP practices, pharmacies and Holbeach Hospital & Nursing Home is essential.

The following principles will be followed to ensure that an effective ordering system is in place:

# Ordering Process

* + - Holbeach Hospital & Nursing Home will have a designated, named person(s) and a deputy who process the regular repeat medication order. Deputy manager does the monthly order but the manager will do it in their absence.
    - Protected time will be available to order medicines and check medicines delivered to Holbeach Hospital & Nursing Home
    - If a Service User is refusing/having difficulties with swallowing medication, this should be highlighted to the prescriber in advance of re-ordering
    - Medication should be ordered at 28-day intervals with sufficient time available for prescriptions to be issued, checked, dispensed and delivered
    - Requests for repeat medication should be submitted using the custom order sheets which acts as a record of what has been ordered

# Receipt of Medication

* + - A suitably competent and trained member of staff must check that medicines received are correct by comparing them to the custom order sheets which reflects the Service User’s current prescription
    - If the medicines do not match the copy of the prescription, staff must not administer and must contact the supplying pharmacy immediately to rectify the mistake
    - Trained staff must record on the custom order sheet, the quantity received, date of receipt and the initials of the person receiving the medicine. This must be double checked and signed by a second person who is suitably trained in the case of controlled drugs.
    - Where a further supply or balance is received, staff must record this in the same way

# Delay Management

* + - If a medication supply for a Service User does not arrive as expected, always check with the dispenser whether they have received the prescription.
    - Communicate any information about expected prescriptions or delays to supply at each shift change
    - Let other staff know when you have contacted the GP practice or pharmacy.

about a prescription query so that multiple calls are not made about the same query.

Shortfalls in medication will be chased with the dispensary in a timely fashion until the order is complete. If the shortfall remains this issue should be escalated to the manager of the place who is at fault.

# Medication Waste reduction

* + - Under no circumstances will Service Users' 'no longer required' medications be used to supply other Service Users
    - Check quantities remaining and if there is enough left for the next 28-days before reordering
    - Do not reorder ‘when required' or topical medication if there is an adequate supply.
    - Ensure a stock count is performed before ordering any medication.

# Urgent Prescriptions

Exceptions to the regular ordering process may include orders for acute medication, such as:

* + - When a Service User is acutely unwell
    - If the Service User has recently moved into Holbeach Hospital & Nursing Home
    - When a patient has been discharged back from hospital and does not have a sufficient supply of medication

# General Best Practice

* + - 'PRN’ medication should be dispensed in original packs
    - MDS packs only have an 8-week shelf-life and should be discarded after this time
    - Always consult the label and do not use the medicine past its expiry date or “use within xx days of opening” date
    - The Custom order form is updated monthly and cross checked with the MAR chart to ensure that only current medications are ordered.
    - If a medicine is ordered in error or the service user has passed away, contact the community pharmacy as soon as possible to advise them not to supply.

# Medication Review

* + - Medication reviews will be requested at least annually by nursing staff if not already instigated by GP.



**6. Definitions**

# MAR

* + - Medication Administration Record

# Medication Review

* + - Medication review has been defined as a structured, critical examination of a Service User's medicines with the objective of reaching an agreement with the Service User about treatment, optimising the impact of medicines, minimising the number of medication-related problems and reducing waste

# Reconciliation

* + - Medicines reconciliation is the process of identifying an accurate list of a person's current medicines and comparing them with the current list in use, recognising any discrepancies, and documenting any changes. It includes the 3 C's

# 3 Cs to Medicines Reconciliation

* + - **Collection** of the medication history from a variety of sources
    - **Checking** that medicines prescribed on admission for the Service User are appropriate for the current status of the Service User. The ‘checking’ step involves ensuring that the medicines and doses that are now prescribed for the Service User accurately reflect the sources consulted. Discrepancies may be identified at this stage and these may be intentional or unintentional
    - **Communicating** any changes in medicines so that they are readily available to the next person(s) caring for the Service User. Communication must include reasons for the change(s) and any follow-up requirements. Although the process and outcomes may be verbally discussed with other members of the healthcare team, there must also be a written record in the Service User's notes record and/or on their prescription chart



**Key Facts - Professionals**

Professionals providing this service should be aware of the following:

* + - GP Practices and Dispensing Pharmacies should work with Holbeach Hospital & Nursing Home to develop robust timelines for the procedure of the ordering, receipt and reconciliation of medication
    - Health and social care practitioners should ensure that Service Users have the same opportunities to be involved in decisions about their treatment and care as people who do not live in nursing homes, and that Service Users get the support they need to help them to take a full part in making decisions
    - There must be a clear reconciliation process for all medications held at Holbeach Hospital & Nursing Home



**Key Facts - People affected by the service**

People affected by this service should be aware of the following:

* + - You have the right to be involved in any decisions about your medication
    - You should be supported, as necessary, to ensure that you have sufficient quantities of the right medication to meet your needs



**Further Reading**

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

**Improving the Quality of Medicines Reconciliation: A Best Practice Resource and Toolkit**: <https://www.sps.nhs.uk/articles/medicines-reconciliation-best-practice-resource-and-toolkit/>

# Royal Pharmaceutical Society: Keeping patients safe when they transfer between care providers – getting the medicines right:

<https://www.rpharms.com/resources/reports/getting-the-medicines-right>



**Outstanding Practice**

To be ‘ outstanding ’ in this policy area you could provide evidence that:

* + - Stock balances are recorded daily on the MAR
    - An audit process is in place to ensure that correct ordering, reconciliation and reviews take place and that any errors are highlighted and investigated, with findings disseminated
    - Service Users are involved in decisions about their medication and there is evidence of partnership working with other members of the multidisciplinary team
    - Stakeholders such as GPs and Pharmacies report that they are extremely satisfied with the way in which the service manages the ordering and management of medication



**Forms**

Currently there is no form accompanied to this policy.