

## Frequently Asked Questions (FAQ)

### Medicines management in Care Homes

#### 1. What are the uses of a MAR chart and are my staff filling them out accurately?

A MAR (Medication Administration Record) chart is the standard system used in care homes for managing medication administration; these can be paper or electronic records. Principles and good practice when completing a MAR can be accessed via this link – <https://www.cqc.org.uk/guidance-providers/adult-social-care/administering-medicines-home-care-agencies>

#### 2. Should my staff be requesting monitored dosage systems (MDS) for the residents?

Dosette boxes or blister packs are forms of MDS. They are plastic boxes/ packs with small compartments that clearly show which pills need to be taken at what time of day their aim is to aid medication compliance.

- Pharmacies can provide MDS for patients if they have assessed a patient and the patient qualifies under the Equality Act 2010 for reasonable adjustments
- Pharmacies have the right to charge for MDS if a patient has been assessed and does not qualify for reasonable adjustments under Equality Act 2010
  - More information on charging for MDS can be found here: <https://psnc.org.uk/wp-content/uploads/2016/01/PSNC-Briefing-001.16-Equality-Act-2010.pdf>
  - Use of MDS for residents who do not administer their own medication is not recommended see link – <https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Suport/toolkit/rps-mca-july-2013.pdf>
  - Additional guidance on MDS can be found via this link – <https://www.derbyshire.gov.uk/site-elements/documents/pdf/social-health/care-and-health-service-providers/safety-medication/care-home-medication-and-health-related-activities.pdf>

#### 3. How do I make sure my residents are receiving their when required (PRN) medications appropriately?

This can be achieved by having an up-to-date PRN Protocol. A PRN protocol template (Appendix 14) and guidance on appropriate management of PRN medications can be found within the Derbyshire Care Home Medication and health related activities policy: <https://www.derbyshire.gov.uk/site-elements/documents/pdf/social-health/care-and-health-service-providers/safety-medication/care-home-medication-and-health-related-activities.pdf>

In order to administer PRN medications, the appropriate care home staff must be adequately trained to recognise the needs of the resident and when it is appropriate to administer the medication.

- The CQC guidance on how to support staff to administer PRN medications can be accessed via this link – <https://www.cqc.org.uk/guidance-providers/adult-social-care/when-required-prn-medicines>

#### 4. What is transcribing and how can it be done appropriately?

Transcribing can be defined as the act of making an exact copy, usually in writing. In the context of medicines management it is the copying of previously prescribed medicines details to enable their administration. Care homes this will largely do this on with MAR charts. In clinical circumstances where transcribing occurs it must be underpinned by training, risk assessment, an audit trail, and have processes in place to limit errors.

- More information and best practice can be accessed via links below, this is not an exhaustive list and other training may be available;
  - The Royal College of Nursing detailed guidance on transcribing can be accessed via link- <https://www.rcn.org.uk/professional-development/publications/pub-009018>
  - The Royal College of Nursing have also produced 'Medicines Management, An overview for nursing' which contains information on how to transcribe safely and can be found via link- [https://www.sps.nhs.uk/wpcontent/uploads/2019/02/Transcribing\\_and\\_verbal\\_agreements\\_May\\_2019\\_HR.pdf](https://www.sps.nhs.uk/wpcontent/uploads/2019/02/Transcribing_and_verbal_agreements_May_2019_HR.pdf)
  - Information for care home managers on training staff to transcribe safely can be found via link (This training is free to access but an account will need to be set up.) - <https://opuspharmserve.com/managers-guide-to-transcribing-download/#wpcf7-f10577-p10580-o1>

#### 5. What is covert administration?

Covert administration is when medicines are administered in a disguised format. The medicines can be hidden in food, drink or through a feeding tube without the knowledge or consent of the person receiving them. Therefore, the person is unknowingly taking a medicine. Every person has the right to refuse their medicine, even if that refusal appears ill-judged to staff who are caring for them.

Covert administration of medicines should be a last resort and reasonable efforts must be made to give medicines in the normal manner. Crushing or dispersing a resident's medication to allow easier administration is not covert administration if the resident is aware and has consented to this.

Before considering covert administration, a multi-disciplinary team should be involved in a mental capacity assessment against the five key principles under the Mental Capacity Act 2005. A resident's capacity should be regularly reviewed as mental capacity can fluctuate.

- Further comprehensive guidance can accessed via these links – <https://www.cqc.org.uk/guidance-providers/adult-social-care/covert-administration-medicines> and [http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Non\\_Clinical\\_Guidelines/Social\\_care\\_care\\_homes/Covert\\_administration\\_of\\_medicines.pdf](http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Non_Clinical_Guidelines/Social_care_care_homes/Covert_administration_of_medicines.pdf)

## 6. What can I do to potentially reduce the pill burden and the amount of unnecessary administration of medicines during med rounds in my care home?

This can be achieved by reducing inappropriate polypharmacy for care home residents. Among other things inappropriate polypharmacy can result in adverse drug effects, greater health care costs, drug-interactions and reduced functional capacity. Resources and recommendations to reduce polypharmacy are detailed below;

- During regular ward rounds staff members are actively encouraged to discuss these worries with the resident's GP. These concerns should lead to a medicines review.
- Derby and Derbyshire CCG have produced Deprescribing Guidelines for primary care staff which are available here –  
[http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical\\_Guidelines/clinical\\_guidelines\\_front\\_page/Deprescribing.pdf](http://www.derbyshiremedicinesmanagement.nhs.uk/assets/Clinical_Guidelines/clinical_guidelines_front_page/Deprescribing.pdf)

## 7. How do I identify and accurately administer homely remedies?

A homely remedy is a medicinal preparation used to treat minor ailments; it is purchased over the counter and does not require a prescription. Homely remedies are kept as stock in the care home to allow access to products that would commonly be available in any household. A risk assessment for each resident should be completed before administration. Resources to support appropriate management of homely remedies can be accessed via links below;

- Regional Medicines Optimisation Committee (Midlands) policy template –  
<https://www.sps.nhs.uk/articles/rmoc-guidance-homely-remedies/>
- Derby City Council Medication Policy Statement Procedures and Guidelines –  
<https://www.derby.gov.uk/media/derbycitycouncil/contentassets/documents/adultsocialcare/derbycitycouncil-medication-policy-statement-procedures-guidelines-aug15.pdf>

## 8. Where can I access training for my staff?

Derbyshire County Council provide medication administration training free of charge to those who provide a service within Derbyshire, excluding Derby city and this is also for non-council adult carers. Details on how to access training are below; Contact [ssdtraining@derbyshire.gov.uk](mailto:ssdtraining@derbyshire.gov.uk) for more information on courses and timetables.