

NHS England & NHS Improvement - Midlands CONTROLLED DRUGS CARE HOMES NEWSLETTER

This bulletin contains local and national CD information to support safe use and handling of controlled drugs in care homes

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Safe use of Transdermal Patches

A transdermal patch is a medicated adhesive patch that is placed on the skin to deliver a specific dose of medication through the skin and into the bloodstream.

There are several types of patches. The directions for use vary with each patch. There have been several reported safeguarding errors related to transdermal patch use. For this reason it is very important to read the Patient Information Leaflet before a patch is used.

It is good practice for residents who are prescribed a transdermal patch to have a body map kept with their MAR chart that indicates where the patch has been applied. Body maps

help to ensure that it is clearly identifiable to Care Home staff as to where the patch has been applied, and supports rotation of application. They are also a useful aide should a resident require treatment or admission to another care setting such as hospital, so that the clinicians can easily identify where the patch is located.

There have been a number of reports where patients have been admitted to another healthcare setting with multiple patches applied or clinical staff are unable to locate the patch on the patient upon admission.

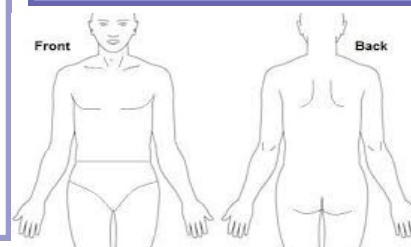


Care Homes' Compliance

PLEASE NOTE that all Care Homes must comply with the Misuse of Drugs Act 1971 and associated regulations when storing Controlled Drugs. Strict legal controls apply:

- on storage
- on supply and prescribing
- on administration
- on the destruction / disposal of CDs
- to prevent, misuse & potential harm
- to the classification into Schedules – 1, 2, 3 & 4

For further information please refer to the CQC guidance on [Controlled Drugs in Care Homes](#)



Reporting Controlled Drug Incidents or Concerns

If there is a medication administration error involving a CD this should be reported in accordance with your Care Home's Policy (which should include informing the resident's GP) and local commissioning arrangements. It should also be reported to the CQC if the medication error met the notification criteria; as outlined in regulations 16, 17, 18, and 20 of the CQC Guidance for providers on meeting the Regulations.

Controlled Drug incidents **must also be reported to the Controlled Drugs Accountable Officer at NHS England and NHS Improvement**. Controlled Drug Incidents **must** be reported online at www.cdreporting.co.uk using the online reporting form.

Importance of Clarity in MAR Sheets

To ensure safe administration of patients’ medication it is important that at all times a clear MAR chart is in place. We were notified recently of an incident whereby a patient suffered a seizure and was administered 10mg of Midazolam. The MAR stated that a further dose could be administered after 10 minutes, however, the nurse administered a second dose after 5 minutes in error, resulting in a hospital admission.

The learning from this event highlighted that the MAR sheet was open to misinterpretation. As it could be read that a second dose could be administered during the same seizure, and not when the first seizure has stopped, and a second starts.

Following this event, the actions taken to minimize the risk of a similar incident occurring again included medication training to be revisited, and competencies reassessed. Epilepsy training was also to be completed, and the clarity of Care Plans reviewed to ensure that time between administration of medication was clear.

Learning from Administration Error

The wrong medication was administered to a care home patient, 5ml Lorazepam oral solution was administered instead of the intended 5ml lactulose solution. The patient required emergency treatment and was admitted into hospital.

Learning from this incident identified that both medications were stored on the same shelf in the medication cabinet.

Although Lorazepam is not always treated as a CD in Care Homes, the learning from this incident was to store Lorazepam in a separate CD cupboard going forwards. Relevant staff revisited medication training and meds administration competencies were re-assessed.

Guidelines on the Management of Controlled Drugs in Care Homes

PrescQIPP have a useful resource available on-line for Care Homes, entitled: ‘[Guidelines on the management of controlled drugs \(CD\) in care homes.](#)’ It can be adapted by Care Home staff to form a policy for use in individual care home residences.

Safe Storage of Controlled Drugs

In accordance with the regulations **all** Schedule 2 Controlled Drugs (CDs) are **legally required** to be stored in a locked CD cabinet. Learning can be taken from a recent CD incident where a Care Home patient was discharged from hospital on new medication, including controlled drugs, their new medication had been found stored in the Home’s regular medicines trolley.



This incident has highlighted the importance of checking discharge summaries and ensuring that any Schedule 2 medication is stored appropriately.

Reuse of Medicines in a Care Home

The medicines [re-use SOP](#) for Care Homes and Hospices is a time-limited SOP and **only applies during this period of national emergency**. It applies to medicines that have been supplied to patients while in a Care Home or Hospice, which have not been removed from that setting (other than for short periods of up to 24 hours), and have been stored in accordance with safe storage of medicines guidance. It is important that care homes regularly review any items that are being stored under this arrangement.

Safe Management of CD Resources

NHS England and NHS Improvement have a national on-line portal for reporting CD incidents which can be accessed at www.cdreporting.co.uk

The online portal contains a number of useful resources aimed to support Care Homes in the management of Controlled Drugs.

This resources include protocols such as “*When Required PRN Medicine Protocols*” including a worked sample for Zopiclone.

Care Home Controlled Drug (CD) Audit

The resources also include a CD Audit. It is **recommended that this audit is completed every six months**. In order to complete the audit, the CD register and residents MAR charts need to be reviewed for compliance.

