MEDICINES MANAGEMENT IN DOMICILIARY CARE

FEBRUARY 2016
FOCUS ON…..
Over the Counter Medicines (OTCs)

Not all medicines need to be prescribed, and many can be bought from a shop, pharmacy or via the internet. Such medicines are commonly known as Over The Counter medicines, or OTCs.

OTC medicines may be appropriate, but should be used with care as they can cause problems. For example, a service user may be prescribed co-codamol (a painkiller that contains codeine and paracetamol) by the doctor and then buy some paracetamol. This would mean they could accidentally be taking too much paracetamol (overdosing), which can be very dangerous.

Service Users may prefer to use OTCs in addition to those they may be prescribed. We have to balance a person’s human right to make their own decisions with the need to ensure everyone is aware of any potential problems and we are working to our policy and procedures. So what does this mean for us in practice?

IT IS ESSENTIAL YOU UNDERSTAND THE DIFFERENT LEVELS OF SUPPORT WITH REGARDS TO HOW WE MAY OR MAY NOT SUPPORT WITH OTC MEDICINES:

LEVEL C = NO
LEVEL B = YES, BUT...

Level C Support: With level C support it is quite clear cut as the law states care workers may only administer medicines following the prescriber’s directions, i.e. only prescribed medicines can be given. When providing level C support you must not administer any medicines that have not been prescribed and are not included on the MAR chart. You should always inform your line manager if a request has been made for support with OTC medicines though. Then we can look into other solutions for the service user’s preferences to be respected which will never involve care workers administering OTCs.

Meds Q&A

Question:
‘If a service user’s husband can tell me what medicines she has to take, is that still a level B?’

Answer:
Level B requires the person taking the medication to be aware of what medicines they are to take and tell you exactly what you need to do to help. If relying on a family member to do this on their behalf they are clearly level C.
Care workers may only administer medicines according to the prescriber’s direction, so a MAR chart is needed (which has this direction) and instructions from family alone are not sufficient.
See January’s newsletter for more detailed information about level B support.
Level B Support: With level B support it can seem a little less clear, as technically the service user is ‘administering’ their medicines, not you. However we know public awareness about problems you can have with OTCs and prescribed medicines being incompatible is often poor, so we like to make sure this will be ok for them. So if a service user has level B support and wishes to take OTCs and/or herbal remedies in addition to their prescribed medicine, ask your supervisor to first check with the pharmacist first that it is ok, and document the outcome in the medication record book. You can then go ahead and assist the service user under their directions as usual.

HOT OFF THE PRESS
The NPTCBC Medication Policy for Domiciliary Care has been updated and approved by the NPTCBC Committee. We have streamlined the actual policy and transferred all the detailed operational and procedural guidance to our new Medication Management Handbook. The handbook is jam-packed with useful and practical information and we hope it will be a valuable resource to you. Both documents are now available online via the links provided below.

We’d love to have your feedback about the Handbook, and do let us know if you think something should be added to it in future.

ALL MEDICINES MANAGEMENT RELATED FORMS & DOCUMENTATION
Including the updated Medication Policy for Domiciliary Care & Medication Management Handbook
CAN NOW BE ACCESSED ONLINE HERE:

Accessible externally by service providers and health care professionals at
www.npt.gov.uk/domiciliarycare

Also accessible internally by NPTCBC staff at

Previous copies of this newsletter are now available to view here:

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