NHS
Cambridgeshire and Peterborough
Clinical Commissioning Group

# Virtual Support Tool Kit

Name of Home …… Date of Assessment…….

| 1) Person-Centred Care (Regulation 9). The care and treatment of service users must be appropriate, meet their needs and reflect their preferences | |
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| Section | Feedback and actions for consideration |
| **Knowledge of your medication policies**<br>Are there a range of medication policies/SOPs within the home?<br>Where do you store them?<br>Who reviews them?<br>Do staff, including agency staff, know how to access the policies and how are updates communicated? | |
| **If a resident self-medicates**<br>Is there an assessment protocol for self-medication?<br>How often are they assessed?<br>How are residents supported to enable them to manage some/all their medicines (e.g. Inhaler techniques, packaging, formulation)<br>How do you record self-medication NICE QS3 | |
| **How are a resident's medicines reviewed?**<br>Do you record the GP/CP visit/ Med review?<br>Do you work with the GP/CP to reduce the number of inappropriate medicines?<br>Do you work with the GP/CP to reduce medicines in the morning (morning tablet burden) | |
| **How do you monitor patient outcomes for pain relief?**<br>Do they use regular pain score charts with analgesia? | |
| **As required (PRN) medicines**<br>Are they clear/comprehensive? Not – "as directed". PRN directions should state dose, frequency, reason and maximum in 24 hours NICE QS4<br>Where Is the administration of 'PRN' medicines recorded? –- on the MAR or other location? | |

| 2) Training | |
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| Section | Feedback and actions for consideration |
| Are staff trained on the use of equipment required to administer medication (e.g. Advanced Inhaler Technique, inhaler spacer devices or the use of measuring cylinders for liquids) and how to clean such equipment? – procedure/check list/training available? | |

Appendix 1

| **3) Regulation 12: - Safe Care and Treatment. This regulation is to prevent people from receiving unsafe care and treatment and prevent avoidable harm or risk of harm** | |
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| Section | Feedback and actions for consideration |
| **3. 1. Administration (including MAR CHART)** | |
| What is your process when the prescription does not match with the current MAR chart?<br>Are all instructions clear and comprehensive for all prescribed medicines with appropriate timings? NICE QS4 | |
| Do you record every medicine taken/applied at the time of administration? – on the MAR chart If a medicine is not taken, how do you record it? e.g. the reverse of the MAR/other area of the chart? | |
| How do you record mid-cycle changes? MAR? E.g. meds stopped, started, dose changes.<br>Is it endorsed by GP, if necessary, or is there another process? | |
| Are PRN medicines assessed as fit for purpose and to be continued each cycle? Are quantities carried forward onto the new MAR?<br>Are PRNs dispensed in original packs? | |
| If a multi-dose MDS is in use, can you easily identify all the tablets? NICE SC1 | |
| Do you have a process for medicated patches? (e.g. fentanyl), which includes documenting: -<br>◊ site of application ◊ frequency of change ◊ check to ensure patch is still in-situ between changes<br>◊ prompts to rotate the application area ◊ removal of patch? | |
| Do you have a list of homely remedies that has been agreed with the GP? | |
| **3.2 Medicines Entering and Leaving the Care Home** | |
| How do you manage medicines brought into the home via the service user**?** e.g. Prescribed prior to admission or purchased by service user?<br>Do you have a procedure for transcribing on a MAR chart? E.g. from a hospital discharge prescription, respite<br>Doe the Care Home verify a service user's medication **on the day** when entering the home with the current prescription before administration? NICE QS1<br>When transferring to the home from secondary care does the home have access to the discharge summary? NICE QS2. | |
| How do you organise a service user's medication when leaving the Care Home? (recording)<br>Holidays - Are records maintained for medicines given to a resident going on holiday? NICE QS2<br>How are medicines which leave the home for social leave, packed? Are they in suitable containers and labelled appropriately? NICE QS2 | |

| **4) Ordering and Storage** | |
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| Section | Feedback and actions for consideration |
| **4.1 Ordering and Receipt** | |
| Who orders medicines? What happens if this person is absent?<br>Does anyone check the prescriptions received from GP prior to going to the dispensing pharmacy (if applicable)? Who does this?<br>Do you record/have receipts of medicines received?<br>Do you have proxy ordering in place? | |
| **4.2 Safe Storage** | |
| **Where do you store your medicines**?<br>◊Trolley ◊ Locker ◊ Cupboard ◊ Locked area in residents' room ◊ Fridge ◊Other (Tick all applicable)<br>Is the medicine storage room/cupboard/trolley/fridge locked? What is the process for key security?<br>Is the trolley secured to a wall in the room, or stored in a locked room when not in use?<br>Is the temperature of the room monitored (frequency) and suitable for a storage area (max 25C)?<br>Do you have a process if the storage area goes above max 25C? | |
| **Fridge**<br>Is there a separate, lockable fridge for drug storage?<br>If there is only a domestic fridge are medicines stored in a separate lockable container within that fridge?<br>Are the minimum and maximum temperatures recorded daily (min 2 C max 8 C)?<br>Can you tell me how to reset the temperature monitor?<br>If the temperature is out of range, what would you do? SOP? | |
| **Expiry Dates**<br>Who checks the medicines expiry dates?<br>How often are they checked?<br>What do you do with medicines that have a short shelf life when opened? E.g. GTN, Insulin, eye drops etc? | |
| **Transporting medicines**<br>How do you transport medicines around the home (E.g. Using a tray for carrying multiples medicines to residents) | |
| Are external/internal medicines stored separately, to prevent picking error? | |
| **4.3 Disposal** | |
| How do you remove and dispose of unwanted and/or expired medicines?<br>How do you dispose of hazardous medication? (e.g. Purple bin)<br>How do you record medicines returned to the dispensing pharmacy/disposal company?<br>What details are recorded e.g. date, service username, medicine, quantity, reason for disposal<br>How long do you keep copies for the audit trail? | |

| ***5)* Reporting Errors & Adverse Drug Reactions** | |
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| Section | Feedback and actions for consideration |
| How do you report errors including near misses?<br>What happens after near misses or errors have be identified? (e.g. discussed at team meetings and used as learning tool?)<br>Do you record dispensing/prescribing errors for medicines received by the care home?<br>How do you report an adverse drug reaction? | |

| **6. Patient Medication Safety Information** | |
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| **6.1 Monitoring and review** | |
| Section | Feedback and actions for consideration |
| How do staff monitor the effects of medicines?<br>How does the home, work with the GP/Pharmacy to reduce the number of inappropriate medicines, high risk medicines, antipsychotics, falls?<br>Do they try to reduce tablets administered in the morning? (tablet overload) | |
| What up to date medicines information resources are available within the home e.g. BNF | |
| Is there a process in the care home for managing high risk medicine?<br>e.g. Warfarin/Lithium/Methotrexate?<br>How often does the home send their recording book (e.g. yellow book) to the dispensing pharmacy?<br>Is the date of the next blood tests clearly recorded?<br>How do you record the warfarin dose on the MAR chart? | |
| **6.2 Safety Information** | |
| Does the Care Home receive medicines alerts from the MHRA/CAS?<br>How do they deal with the alerts? | |

| **7) Management of Controlled Drugs** | |
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| Section | Feedback and actions for consideration |
| **Storage**<br>Are controlled drugs stored in a separate, locked cupboard, which complies with the Misuse of Drugs (Safe Custody) regulations?<br>Do you have any CDs packed in an MDS? Where do you store the MDS? | |
| **Register**<br>Is a CD register a separate bound book?<br>Is there a separate page for each controlled drug, formulation, strength, patient?<br>How do you complete your entries? See below<br>Are all entries fully completed?<br>Are all administration entries supported by two signatories? | |

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| (NB might only be 1 member on at night-time).<br>How do you deal with an amendment? (annotated with footnotes rather than crossing out) | |
| **Destruction and Returns**<br>Are CD's collected for return, signed for by the pharmacist or their delegated staff member?<br>In a nursing home, is the destruction of CDs witnessed and supported by two signatories? | |
| Where do you report CD errors (CQC, Local accountable officer?) | |

| **8) Specialist Management of Groups of Medicines** | |
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| Section | Feedback and actions for consideration |
| **Controlled Drugs**<br>Who administers CD's? (designated and trained staff only)?<br>In Nursing Homes, CDs administered by qualified nurses, in Residential Homes CDs administered by senior carers, witnessed by 2nd person? | |
| **Antipsychotics**<br>Can the Care Home staff member identify a drug that is an antipsychotic? Medicines for BPSD should be reviewed every 3 months, but if for a psychiatric condition they should continue unless advised by specialist?<br>Did a multi-disciplinary team (MDT) meeting take place to determine the appropriateness of this treatment?<br>Is the patient's condition monitored /recorded and side effects monitored/recorded? | |
| **Antibiotics and other acute medicines**<br>How does the care home manage these medicines appropriately for the residents?<br>• Are the timings of administration appropriate?<br>• Are the antibiotics given appropriately e.g. 30 mins before food, avoiding milk or indigestion products etc.?<br>• Is the course length adhered to?<br>• Start and finish dates visible on MAR? | |
| **Covert Administration**<br>Are set policies and procedures in place should covert administration prove necessary? NICE QS6<br>Does the Care Home hold Best Interest Meetings if covert administration is being considered? NICE QS6 | |

| **9) Management of Nutrition and Hydration** | |
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| Section | Feedback and actions for consideration |
| **Does the Dietician advise the use of ONS?**<br>Does the home have a food first process? Has a dietitian provided any recent training to the home on recipes to support food first?<br>If they were prescribed on discharge is there any evidence of involvement of the dietitian?<br>Are the requirements for ONS regularly reviewed?<br>Are ONS given in-between meals rather than as a meal substitute?<br>Once opened, are ONS labelled and stored appropriately or are they discarded? | |
| Are staff familiar with the MUST tool and are weights and MUST scores recorded? | |

| **10) Managing Allergies and Sensitivities** | |
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| Section | Feedback and actions for consideration |
| Does the home have a process for managing allergies and intolerances to medication to ensure that the same data is held by prescriber and care home? This includes non-medicine allergies such as latex allergies? | |
| Does the pharmacy routinely identify allergies on the MAR chart? | |
| Does the Care Home have access to medicines required for resuscitation or other medical emergencies in tamper evident packaging to allow administration as quickly as possible e.g. adrenaline if Service User has known allergy, adrenaline for nurses in Nursing Home when administering flu vaccine? | |
| Where applicable, for adrenaline pens is there a process for ensuring competency in administration and to check expiry? | |
| Where nurses in nursing homes administer seasonal flu vaccine, is their anaphylaxis training current? | |