



Care Homes Newsletter

Issue 2, February 2018 Pharmacy Newsletter for Care Home Staff, General Practitioners and Community Pharmacists

New Guidance

Bulk prescribing guidance

The Care Home Improvement Team Pharmacists have recently developed guidance on bulk prescribing for care homes.

There are many residents taking medicines 'when required' which may present problems for care home staff and prescribers in determining the quantity to prescribe each month, as care homes work on a 28 day medication cycle.

A bulk prescription allows care home staff to use the same supply of a medication for all residents who are clinically identified as suitable for the prescribed medication. This could potentially **save time** for care home staff and GPs, and also has the potential to **reduce waste**.

The guidance includes a list of medicines suitable for bulk prescribing. It also includes a summary table which outlines the differences between bulk prescribing and homely remedies and the benefits of each process.

The guidance documents can be found at <http://hertsvalleysccg.nhs.uk/publications/pharmacy-and-medicines-optimisation/care-homes>.

When implementing a bulk prescribing process, the GP and care home should discuss and agree on a list of medicines to be bulk prescribed in the care home, and agree on which residents fit the criteria for bulk prescribing. The community pharmacist should be informed and ideally be part of the discussion process.

Fast facts

Homely remedies

Following the launch of the homely remedies guidance, we have received a number of queries relating to the guidance.

Examples of medicines

- Paracetamol, senna, peptac liquid and oral rehydration sachets.

Examples of conditions and minor ailments

- Cold symptoms, headache, occasional pain, indigestion.

Benefits for care home staff, residents and GP's

- Reduce the need to contact GPs.
- Respond to a residents' minor ailment in a timely way.

Reminder

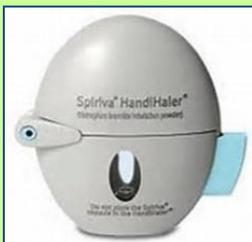
- * It is the responsibility of the care home to purchase homely remedies.
- * Homely remedies should only be given for a **maximum of 48 hours** before referring to the GP if symptoms persist.
- * If required for longer than 48 hours, GPs will be required to prescribe.
- * Not applicable for long-term conditions.

The homely remedies guidance can be found at <http://hertsvalleysccg.nhs.uk/publications/pharmacy-and-medicines-optimisation/care-homes>.



Inhaler Switch

As part of recent HVCCG changes, the current recommendation is to switch Spiriva® HandiHaler® and tiotropium inhaler to Braltus Zonda® (if appropriate).



Note:

Braltus Zonda® and Spiriva® HandiHaler® are:

- ⇒ licensed for the same clinical indications
- ⇒ deliver the same dose of active ingredient
- ⇒ have the same inhalation technique as Spiriva® HandiHaler®

Residents who are affected by the change should be advised by their GP and appropriate guidance provided. Once the repeat prescription is changed, the home should continue using any old medication until it has finished and then new inhaler started.

More information about the inhaler is available on the HVCCG website and an easy guide on how to use the new inhaler can be found here <https://www.youtube.com/watch?v=7SkBtdc-2II>