

# Supporting Care Homes

## REDUCING MEDICINE WASTE

## GUIDANCE SHEET

**It has been estimated that £300 million of NHS prescribed medicines are wasted each year**

**The most expensive medicine is the medicine that is never taken.**

**We all have a responsibility to ensure that we make the use of NHS resources and so should have robust process for ordering, prescribing and dispensing medication.**

<sup>1</sup> <https://www.england.nhs.uk/wp-content/uploads/2015/06/pharmaceutical-waste-reduction.pdf>

### Key messages

- Ensure you have a robust monthly ordering system in place for medicines
- Have more than one person trained and competent in ordering medicines.
- Check quantities/stock level before reordering.
- Do not over order or order just in case.
- Medicines that have not been used and returned to the pharmacy/dispensing practice cannot be reused – they are destroyed and at an extra cost.
- All prescriptions should be reviewed by the care home before they are dispensed to ensure:
  - ✓ Missing medicines, anomalies and medicines on prescription that are not required can be raised with the GP practice in good time before the next cycle starts.
  - ✓ You can request the community pharmacy/dispensing practice to remove discontinued medicines from the MAR chart to avoid them being ordered in error.
  - ✓ You can request the GP practice to remove discontinued medicines from the repeat portion of the prescription to avoid them being ordered in error.
- If medication/preparation is still being prescribed for a resident and is in date – do not return for disposal at the end of the month, carry it over (making a record on the MAR) and use it the following month\*
- Make sure correct amounts of creams and ointments are ordered for the area being treated and only change dressings as per directions\*\*
- Communication is key – get to know the people that are involved at each point of ordering/prescribing/generating prescriptions/dispensing. Work with all those involved in the ordering and supply of medicines to ensure good lines of communication and timely supplies.
- Meet regularly with the community pharmacist and GP practice team to ensure clarity of the ordering process.
- If a resident's medicine needs synchronising speak to the GP practice pharmacy team to get quantities re-aligned.
- If the resident chooses not to take their meds repeatedly discuss this with the prescriber before reordering.
- Ensure the resident's medicines are reviewed regularly by their GP/Practice pharmacist.
- If you don't need it, don't order it!

\*This does not apply to part used Monitored Dosage Systems. These should be disposed of at the end of the month.

\*\*This is likely to vary from product to product

The NICE Guideline for managing medicines in care homes [NICE SC1](#) includes advice that will impact on reducing waste. Here are some recommendations:

### **Top tips for care homes:**

- Care homes should retain responsibility for ordering medicines from the GP practice and should not delegate this to the supplying pharmacy.
- There should be a robust ordering system and checking process to ensure that only the items needed for the next cycle are ordered.
- When preparing the order for a new cycle consider how much is needed:
  - Ensure you are not over ordering; check all storage areas before requesting. This is especially important for items not stored in the main medicines cupboard/trolley eg dressings, catheters, nutritional supplements.
  - Not all unused medicines have to be returned at the end of each monthly cycle. They can be used if they are still prescribed and in date. Do not return to your pharmacy as they cannot reuse. Check on individual items or with your supplying pharmacy for guidance on this and see Guidance Sheet 12: Storage and expiry dates.
  - 'As required' or 'prn' medicines will often last more than a month, check whether additional stock is required or whether existing supplies can be used and marked as carried forward on the Medication Administration Record (MAR) chart. Ensure there is sufficient stock to last until the next monthly order is made.
  - Blistered prepacks usually have an expiry: check with your supplying pharmacy.
- Clearly mark with a tick the items which are required. Only tick the repeat slip if an item is needed.
- If 'as required or 'prn' medication is in a monthly blister pack consider requesting this type of medication in boxes so it can easily be used into the next cycle.
- If a resident is not using the quantity of medications prescribed on a monthly basis, consider asking their GP to review the medication and adjust the quantities to an appropriate amount. Examples include 'as required/prn' medications, eg laxatives, creams
- If a resident is not taking their medication refer to their GP for advice.
- Warfarin: Only order the strengths of warfarin that are required for the current dose, eg very few people need 5mg tablets. Annotate what strengths are required on the MAR chart so that the pharmacy can verify the strengths needed.
- If you receive a supply of medication in original packs (eg following an admission to hospital) and you usually use blister packs, do not discard the original packs; these must be used.
- Before returning medicines to the pharmacy or waste disposal company, it may be worth making a note of the reasons for their return. A compiled list may identify if there is a trend evolving where action can be taken to avoid waste in the future.
- When a resident has died, returned home or moved to another care home, advise the GP surgery and pharmacy as soon as possible to prevent a whole month's worth of medication being issued when no longer required.
- Remember the Homely Remedy policy: is the requested item something which is, or could be, covered under this?

If you are concerned about waste in your home or would like to be part of an audit to help reduce waste in the area please contact West Hampshire CCG Medicines Optimisation Team for advice.



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Please visit our website for more information: <https://www.westhampshireccg.nhs.uk/medicines-in-care-homes>

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*Quality services, better health*

