

Medicines Optimisation

Best Practice Guidance for care Homes – *Bulletin 26*

Care Homes – Medicines Reconciliation

Medication Reconciliation

The process of creating or checking that the list of medicines held in the care home for each resident is accurate. The medication list should be checked against any clinical letters received such as prescription repeat slips, discharge letters, SALT letters to ensure that it remains accurate at all times, especially following admission, discharge, or any transfer in care. Care homes should not request MAR charts to be issued on discharge from hospital, the MAR chart paper or Emar) in the home should be amended/written/updated following your care homes policy.

The Role of the Care Home in Medicines Reconciliation¹

It is very important that the care home has an accurate list of a resident's medicines. The care home manager or person responsible for transfer into the care home should co-ordinate this, details of the person completing the medicines reconciliation (name, job title) and date should be recorded. Care home providers should ensure that the following people are involved in medicines reconciliation: • the resident and/or their family members/carer • a pharmacist • other health and social care practitioners involved in managing medicines for the resident, as agreed locally. The following information should be available for medicines reconciliation on the day that a resident transfers into or from a care home: • resident's details, including full name, date of birth, NHS number, address and GP practice • details of relevant contacts defined by the resident and/or family members/carers (e.g. consultant, regular pharmacist, specialist nurse) • known allergies and reactions to medicines or ingredients, and type of reaction experienced • current list of medicines, including name, strength, form, dose, timing and frequency, route of administration, and indication, if known • recent changes to medicines, including medicines started, stopped or dosage changed, with reasons • date and time the last dose of any 'when required' medicine was taken or any medicine given less often than once a day (weekly or monthly medicines) • other information, including when the medicine should be reviewed or monitored, and any support the resident needs to carry on taking the medicine

Residents' own medication

Most care homes request that new residents bring their own supply of medication when they first move to the home. This means that they can go on receiving appropriate treatment during the transfer process, especially if there are delays in registering the resident with a local GP practice (two weeks' worth is ideal). It is very important that care home staff check the resident's medication before administration to make sure that it is appropriate to use and still indicated – see checklist overleaf. Medication should be checked against a recent prescription repeat slip, hospital discharge letter, medication administration record (MAR) chart from previous care home or domiciliary carers or another relevant clinical letter. If none of these are available, speak to GP practice and obtain further advice.

Checklist for reusing patients own medication when first entering the care home

Items to check	Yes	No	Suggested action
Is the medication on an up-to-date hospital letter or surgery prescription repeat list?			If the medication is not on a recent hospital letter or repeat list from the surgery, then advice from the GP should be sought. Short term items such as pain relief or antibiotic may not appear on the repeat list.
Has the medication been dispensed within a recent period?			If this is an item which should be taken every day then the date of dispensing should be within the previous 2 months. Patients may carry a stock of old medication which has since been stopped
Is the item within its printed expiry date?			Any medication found to be out of date would need to be disposed of. Refer this medication to the GP as it may have gone out of date due to not being used and may require a review.
Is the printed dispensary label in good readable condition and does it state: the supplier details (either pharmacy or dispensing GP) the patients name, the drug name form and strength, the dose, the quantity supplied and the date of dispensing.			If any of these are incorrect the medication must not be used. When patients or relatives bring medication into the care home, they may bring all of the medication they find in the patients home with them – this may include the medication of a partner.
Are the directions clear and unambiguous?			If the directions are not clear or state only “as directed” for medicated items advice from prescriber should be sought
Is the medication in the original packaging?			Medication cannot be given if it has been secondary dispensed. This includes in to a patients pill box or if it is in loose foils without boxes. A pharmacy filled (tamper evident) MDS pack are ok to administer from if they were dispensed within the last 8 weeks, the contents should still be checked against the repeat prescription / discharge summary.
Do the contents correspond with the packaging and label?			Patients can muddle their medication boxes up, putting the wrong foils into other boxes. If the number of tablets or capsules is more than is indicated on the dispensing label this would indicate that the patient has mixed up several supplies – this medication should not be used. Check the contents of all boxes and containers
Is the medication and container in good condition?			It should be clean and dry with no sign of damage of contamination.
Does the medication have specific storage instructions, e.g. refrigerated? Can it be confirmed without doubt that this has been adhered to?			If the medication has not been stored correctly it should be disposed of and replaced. If in doubt request new medication.
Does the medication have an expiry time once it is opened such as eye drops? If the item has been opened does it have an opening date on it?			If there is no date of opening, then it can only be assumed it was opened on the date of dispensing (as this was the earliest date it could have been opened)
Has the medication been taken by the patient as per the directions?			If it has not been taken as per the directions or if you suspect the patient hasn't been taking it then advice from the GP should be sought before using it.
Have all medications been checked for duplicate of a brand and generic?			Medication can be issued as generic (drug name) and also as a brand name. It is important to check when booking in medication to prevent overdose.

Remember: if you are not sure whether a medication a resident has brought in with them is to be used, then seek advice from the GP. DO NOT USE IT without confirmation.

Title	Best Practice Guidance – Care Homes-Medicines Reconciliation
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Scope	Information for Care Homes
Prepared by	Medicines Optimisation Team
Evidence base / Legislation	Level of Evidence: <i>A. based on national research-based evidence and is considered best evidence</i> B. mix of national and local consensus <i>C. based on local good practice and consensus in the absence of national research based information.</i>
Dissemination	Is there any reason why any part of this document should not be available on the public website? <input type="checkbox"/> Yes / No <input checked="" type="checkbox"/>
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1.0	October 2016	JC	Final	Agreed at SMT
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