

MEDICINES MATTER

MOSCCH TEAM NEWSLETTER – JANUARY 2025

MOSCCH INBOX

frimleyicb.moscch@nhs.net

MOSCCH PHARMACISTS

Sundus Jawad- 07909 505658

sundus.jawad@nhs.net

Sally Clarke – 07747 007934

sally.clarke6@nhs.net

Simi Mudhar – 07425 634218

s.mudhar@nhs.net

(currently on maternity leave)

MOSCCH PHARMACY TECHNICIANS

Dhara Thacker – 07776 244842

dhara.thacker2@nhs.net

Zoe Lewis - 07920 703118

zoe.lewis9@nhs.net

NEW TEAM MEMBER!!

Sween Dubb is our maternity cover Pharmacist. Look out for her introduction next time! Her email is sween.dubb@nhs.net

Marvellous Medicines Dates

Next sessions are -

**Tuesday 4th March 2-3pm &
Wednesday 12th March 2-3pm**

Covering covert administration, including case studies. Invites will be going out shortly via the generic MOSCCH email so please contact us if you don't receive then soon!

Covert Administration

We all have a right to refuse medication. When medication is refused, it is important to explore how often it is refused and the reasons of refusal.

Reasons for refusal could include:

- The resident does not like the taste or texture of the medication.
- The resident may not be able to swallow the medication.
- The resident may have a side effect from the medication.
- The resident may not understand what the medication is prescribed for.
- The time of day the medication is administered may not be suitable for the resident, e.g. they may want to sleep early, therefore they may refuse night-time medication.
- The resident may have certain beliefs about the medication or the indication it is prescribed for.

Residents should be supported to take their medication in a person-centred way.

If a medication is refused this does not mean care home staff should administer the medication covertly in the first instance.

Covert administration is when medicines are administered in a way in which they are *hidden* in food or drink **without the knowledge or consent of the resident receiving them.**

Covert administration should be considered as a **LAST RESORT** after a Mental Capacity Assessment (MCA) and best interests meeting which should involve care home staff, the prescriber, multi-disciplinary healthcare professionals, the resident Lasting Power of Attorney for health and welfare, family and/or next of kin.

A Structured Medication Review (SMR) should be undertaken **BEFORE** medicines are considered for administration covertly. Good Practice Guidance for SMRs can be found [here](#).

The suitability, safety and efficacy of each medication must be considered for covert administration (the community pharmacist can provide advice on how to do this) and care homes should keep records of this. A best interest decision to administer a medication covertly applies each time a new medication is added, or a change is made to current medications.

The Covert Administration GPG can be found [here](#).



Medicines Optimisation in Social Care and Care Homes Team

Frimley

frimleyicb.moscch@nhs.net

Link to Good Practice Guidelines for Care Homes [HERE](#)

Frimley Health and Care



Medicines Safety Corner- Parkinson's medication

Parkinson's is a condition whereby the brain does not make enough dopamine to control movement. Symptoms of Parkinson's include slow movements, rigidity and shaking. It is important that medication prescribed for Parkinson's is administered at the time prescribed so that symptoms are controlled.

Many medicines used to treat Parkinson's contain Levodopa. Levodopa containing products (e.g. Madopar®, Sinemet®, Half-Sinemet®) must be administered within 30 minutes of the prescribed time. Serious complications can develop if Levodopa is not taken on time. If you want to know a bit more, [Parkinson's UK](#) contains a lot of useful information about Parkinson's and associated medications.

Have you made sure:

- The timings of Parkinson's medication are stated clearly on the MAR chart. Remember- the timings may not be the same as the medication rounds.
- Staff are aware of the timings specific to the resident. An alarm can be used.
- Details of the resident's Parkinson's is included in the resident's care plan, including what to do if symptoms worsen, if medication is missed or not administered on time.
- Details of the Parkinson's specialist is recorded.

Medicines Reconciliation

Medicines reconciliation is the process of identifying an accurate list of the actual medicines a person is taking on admission to the care home, and at each transfer of care and comparing it with the current list in use to identify any potential discrepancies. For example, checking a resident's discharge summary against current medication.

When carrying out medicines reconciliation, it is important to be mindful of the following:

- Brand and generic names: It is important not to duplicate entries on the MAR chart of medication that has both brand and generic names, e.g. Co-Beneldopa and Madopar®. This could lead to a risk of an overdose. If you are using an eMAR system, check if this is automatically highlighted.
- Medications that sound alike: Ensure staff are aware of any similar sounding medication e.g. Atenolol and Amlodipine, to avoid the incorrect medication being administered.
- Medication that contains the same ingredients: e.g. Co-Codamol 30mg/500mg and Paracetamol 500mg. It is important that this is highlighted on the PRN protocol if they are PRN medication.
- Packaging that looks alike.

The MOSCCH Team have produced a Medicines Reconciliation form which you can use during the medicines reconciliation process to record residents' medication so that changes can be identified. The form also allows you to record details of lifestyle considerations and communication concerns. This can be accessed [here](#).

Learning from Patient Safety Events (LFPSE)

LFPSE is a centralised system to record information and offer information and analysis about patient safety events to support learning and safety improvement across **all** care settings in England.

All healthcare staff in England, including those working in primary care (such as care homes) are encouraged to use the system to record safety events.

Before you register make sure that you are familiar with your care homes 'ODS' code, you can find this information [here](#). Ensure that you select your care home as your organisation.

Register for an account here [LFPSE Incident Recording - Set up an account to continue](#)



Medicines Optimisation in Social Care and Care Homes Team

Frimley

frimleyicb.moscch@nhs.net

Link to Good Practice Guidelines for Care Homes [HERE](#)

Frimley Health and Care

