

# Caring for Care Homes

Issue 27, December 2018

Newsletter for Care Home staff, General Practitioners and Community Pharmacists

## Top Tips for Winter



The risk of hospital admission in the elderly population is particularly high during the winter period. Care home staff can support residents by being extra vigilant for any decline in health and contact the appropriate healthcare professional to seek advice as required.

**Respiratory illness:** ensure staff are vigilant for warning signs of decline. Some residents may have a Chronic Obstructive Pulmonary Disease (COPD) management plan in place with the details of the symptoms to look out for.

**Flu Vaccines:** it is important that all care home staff and residents have been vaccinated to protect against flu.

**Antibiotics:** ensure they are started as soon as possible and the full course is completed.

**Urinary Tract Infections:** ensure adequate fluid intake is maintained as this lowers the risk of developing urine infections; keep offering residents a variety of drinks with appropriate assistance and encouragement.

**Urgent prescriptions:** to ensure medication reaches a resident without delay, remember to inform the pharmacy that the prescription is urgent. (see article below)

**Homely remedies:** remember your homely remedies list! Medicines such as paracetamol can be purchased and stored for residents to use for up to 48hrs without the need to contact the doctor.

## Urgent medication prescriptions and delivery expectations

On occasions care homes may need a medication dispensed urgently for a resident (e.g. antibiotics) as the GP has highlighted the need of starting it as soon as possible. A prescription may be left with the care home to take to a pharmacy or may be sent directly to a nominated pharmacy. If it is sent directly to the pharmacy then it is the care home's responsibility to contact the pharmacy to let them know an urgent prescription is on its way. This contact is vital as the pharmacy has no way of knowing the urgency of the prescription. This enables the pharmacy to locate the prescription and dispense it, providing the item is in stock.

Where an item is urgent and not in stock, other pharmacies can be contacted to establish if stock is available or, if necessary, the GP can be contacted to prescribe an alternative.

The care home will need to ensure arrangements are made to collect the dispensed item promptly to ensure the resident receives their medication without delay. Where a pharmacy delivery service is used, it is the care home's responsibility to ensure that the urgent prescription can be delivered in a timely manner via this route. If this is not possible, alternative arrangements will need to be made by the care home to ensure the resident's treatment is not delayed.

Merry Christmas and Happy New Year!  
from the Caring for Care Homes Team



## No-one wants to have flu at Christmas: Have all your staff and residents had their flu jab?



Flu can be serious, particularly for older people or those with other health conditions. Care workers are looking after some of the most vulnerable people in our communities, so it is important that they help protect themselves and those receiving care and support against flu. Flu spreads easily and can be passed from staff to residents even when the staff member has mild or no symptoms.

**We would like to encourage all residents and care home staff to get vaccinated. See our September flu special for detail on how to get vaccinated.**

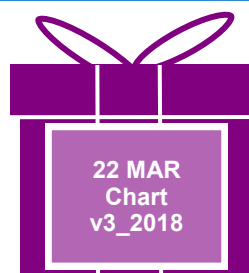
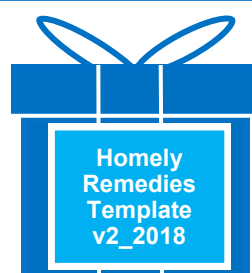
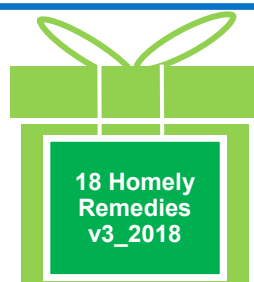
## Potential changes to a resident's prescribed medication

The Medicines Optimisation Team works closely with GP practices to review areas of prescribing where potential savings can be made with minimal effect on residents. It is important as a care home that you are aware of these potential changes. With all changes it is important existing stock is finished before starting the new one as this helps to prevent waste. Patients should not notice any difference in the effect of the new medication, but please inform the resident's GP practice if they do. Below is a list of the recent changes:

- **AirFluSal<sup>®</sup> MDI to Seretide<sup>®</sup> MDI** - There is currently a significant stock shortage of AirFluSal<sup>®</sup> MDI inhalers. As a result of this, prescriptions for AirFluSal<sup>®</sup> MDI have been changed to Seretide Evohaler to ensure a continued supply. These inhalers contain the same ingredients, in the same strength, and the daily dose has not changed.
- **Sinemet<sup>®</sup> Plus tablets to co-careldopa 25/100mg tablets** - Co-careldopa 25/100mg tablets is the generic name for Sinemet<sup>®</sup> Plus; it is taken at the same dose and strength and the daily dose or number of tablets taken each day does not change.
- **Procyclidine 5mg tablets to Kemadrin<sup>®</sup> 5mg tablets** - Kemadrin<sup>®</sup> is the original brand of procyclidine 5mg tablets. It is possible that this product is already received against prescriptions written for procyclidine.
- **Aveeno<sup>®</sup> cream to Zeroveen<sup>®</sup> cream** - Aveeno<sup>®</sup> is a cream for dry skin conditions which contains 'colloidal oatmeal'. A new colloidal oatmeal product called 'Zeroveen<sup>®</sup>' cream is available and is as effective as Aveeno<sup>®</sup> Cream
- **Lidocaine 5% plasters (Versatis<sup>®</sup>) to Ralvo<sup>®</sup> 5% plasters** - Ralvo<sup>®</sup> 5% medicated plasters contain exactly the same medication as the Lidocaine 5% medicated plasters (Versatis<sup>®</sup>). The plasters are the same strength and are applied in the same way.
- **Solifenacin 10mg tablets to darifenacin 15mg tablets** - Darifenacin is preferred to solifenacin by the National Institute for Health and Care Excellence (NICE). It is a very similar drug and patients should not notice any difference.
- **Eye drops changed to Evolve<sup>®</sup> eye drops** - Evolve<sup>®</sup> has been chosen as the brand of preservative free eye drops to simplify formulary options. Evolve<sup>®</sup> bottles have 'blue administration tip' which is designed to improve accuracy and have 3 months use after opening.
  - Carmize<sup>®</sup>, Lumecare<sup>®</sup> Advance Carmellose<sup>®</sup>, Optive<sup>®</sup> and Optive<sup>®</sup> plus have been changed to **Evolve<sup>®</sup> Carmellose**.
  - Hy-Opti<sup>®</sup>, Hyabak<sup>®</sup>, Hylo-Forte<sup>®</sup>, Hylo-Tear<sup>®</sup>, Optive<sup>®</sup> Fusion and Xailin<sup>®</sup> HA have been changed to **Evolve<sup>®</sup> HA**
  - Hydromoor<sup>®</sup>, Hypromol<sup>®</sup>, Ocu-Lube<sup>®</sup>, Tear-Lac<sup>®</sup>, Xailin<sup>®</sup> hydrate, Artelac<sup>®</sup> and Alissa<sup>®</sup> have been changed to **Evolve<sup>®</sup> Hypromellose**.

**Coming Soon:  
updated guidance  
sheets**

**Please remember  
to replace your old  
copies**



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