







# Homely Remedies & Self-Care in Adult Social Care

#### **Sharon Tansley**

Care Home Pharmacy Technician – Central Bedfordshire

#### **Courtenay Amos**

Care Home Pharmacist – Central Bedfordshire





- Introduction & Housekeeping
- Homely Remedies
- Self-Care
- Mock Scenario
- Questions



# Housekeeping

Please remain on mute when not speaking

Please use the chat function

 Q&A section at the end – please use the "raise hand" function

#### Meet the Team - NHS BLMK ICB Care Home Medicines Optimisation Pharmacists & Pharmacy Technicians

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Please send details of your query/referral to the relevant area's team email address (no proforma required). Individual contacts can be used if needed.

Emails are monitored Monday—Friday, 9am—5pm (excluding Bank Holidays) and will be triaged to the most appropriate member of the team.

Patient identifiable details should ONLY be sent from and to secure email addresses (e.g. NHS.net to NHS.net).

More information, quidance documents & newsletters can be found on the BLMK ICB Care Home Medicines Optimisation (MO) team website.





# Bedfordshire, Luton and Milton Keynes Integrated Care Board

### **Our Role**

- Supportive the ICB is not a care home regulatory body.
- The team provides support to a number of key stakeholders including:
  - Care homes / Learning Disability Homes
  - Primary Care Networks (PCNs) / Practices
  - The ICB Quality Team
  - Local Authorities
  - Other community services
  - Secondary care



# **Homely Remedies**



### **Our Toolkit**



- The BLMK ICB Homely Remedy Toolkit can be found on our website:
   <u>Care Homes Homely Remedies BLMKICB Medicines Management</u>
- The BLMK ICB First Dressings scheme for use within Nursing homes —
  enables a nurse in a care home setting to safely cover a wound as a first
  aid measure using an appropriate dressing. The same principles for
  homely remedies apply: <u>First-Dressings-scheme-for-use-within-Nursing-Homes-April-2023.pdf</u> (icb.nhs.uk)

These documents can be directly adopted by care homes.

# **Homely Remedies**



### What is a Homely Remedy?

 A homely remedy is a medicinal preparation used to treat minor ailments, which can be bought over the counter and does not require a prescription. These "homely remedy" products are kept in a Care Home to allow access to products which would commonly be available in any household, to treat short-term conditions.

### Why Stock Homely Remedies?

- In a Care Home environment a resident may develop a minor illness which in their own home would be easily treatable by accessing a local pharmacy/store for an OTC product.
- Prevents unnecessary contact with GP practice/NHS 111 and use of NHS resources
- Provides access to treatment without delay Scenario: Mary has a headache, it's
  Saturday evening, no pain relief prescribed, no homely remedies, have to call NHS 111,
  have to find out of hours pharmacy etc



# **BLMK ICB Approved List**

AILMENT	MEDICINE
Indigestion	<ul> <li>Gaviscon® Advance (suspension or chewable tablets)</li> <li>Peptac®</li> </ul>
Pain (mild to moderate)	Paracetamol     NB: Other medicines containing paracetamol may have been prescribed for some residents and this must be carefully checked
Constipation	Senna tablets or syrup
Diarrhoea	Oral rehydration therapy, e.g., Dioralyte®
Dry Cough	Simple Linctus (Sugar-free)

### Process for Implementation of Homely Remedies Toolkit in the Care Home

Adopt	Inform	Train 🗖	Source	Record	Store	Access
Adopt the BLMK ICB Homely Remedies Toolkit	Inform your GP surgery that you will be implementing the toolkit	Ensure all medication trained staff read the toolkit are competent and authorised to administer to residents	Source the homely remedies as per toolkit	Record receipt of the homely remedies in a designated book or record sheet	Store the homely remedies in a designated secure location	Ensure authorised staff have access to the homely remedies toolkit, flowcharts and stock

It is not necessary for GPs to approve or 'sign off' homely remedies, provided the home has adopted the BLMK ICB Homely Remedies Toolkit.

However, it would be useful for your GP Practice to know which homely remedies are available for their patients.

The purchase of homely remedies, including funding, is the responsibility of the care home.

- Clearly identifiable as a "homely remedy"
- In a lockable cupboard or trolley
- Separate to prescribed medications
- Original packaging
- No excessive quantities
- Below 25°C and away from damp and strong light
- Access restricted to staff with medicines management responsibilities

#### **Process for Administration of Homely Remedies in the Care Home**

#### This process can only be followed if:

- The care home has adopted the Homely Remedy Toolkit
- > The member of staff has read, signed and is authorised to use the Homely Remedies Toolkit
- > The member of staff checks that administration is appropriate using the Toolkit flowcharts and product information

IF THERE ARE ANY DOUBTS OR CONCERNS REGARDING THE ADMINISTRATION OF A HOMELY REMEDY. **DO NOT ADMINISTER** - CONTACT THE GP SURGERY, PHARMACY OR NHS 111 FOR ADVICE



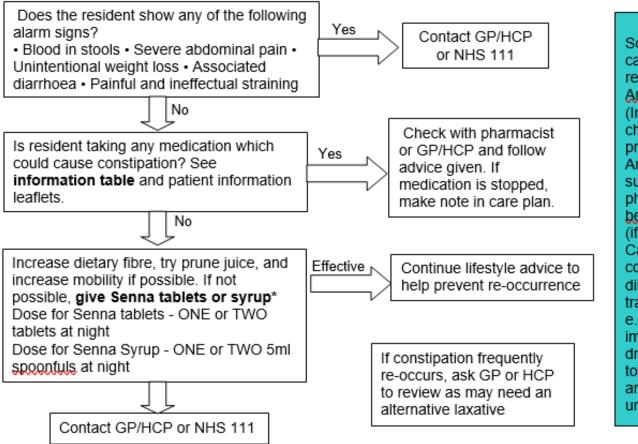
#### Step by step process for administration

a minor ailment	Check if the minor ailment is listed in the Homely Remedies Toolkit:	Locate the correct homely remedy flowchart and product	Follow the flowchart to check if the homely remedy is appropriate	If appropriate, administer correct dose
	<ul> <li>Pain (mild to moderate)</li> <li>Indigestion</li> <li>Constipation</li> <li>Diarrhoea</li> </ul>	information for the minor ailment	to administer on this occasion If not, do not proceed - contact the GP surgery or NHS 111 for advice	as per flowchart and product table
	Dry cough		Example	Flowchart on next

#### Chart 3 - Constipation



Initial changes in bowel habits should be reported to GP/HCP. Bowel charts should be kept in care plans for monitoring purposes. Constipation in the elderly is often due to insufficient fluid intake. Avoid large glasses of fluid - little and often is more effective.



#### Information table

Some common drugs which can cause constipation: Indigestion remedies containing Aluminium; Antidiarrhoeals e.g. loperamide (Imodium®); antihistamines e.g. chlorphenamine (Piriton®), promethazine (Phenergan®); Antipsychotics; Cough suppressants e.g. codeine & pholcodine; Diuretics e.g. bendroflumethiazide, furosemide (if dehydration occurs); Iron and Calcium supplements; Pain killers containing opiates e.g. codeine, dihydrocodeine, morphine, tramadol; Some antidepressants e.g. amitriptyline, dosulepin, imipramine; Some Parkinson's drugs e.g. levodopa; Some drugs to treat high blood pressure e.g. amlodipine; anticholinergic for urinary frequency e.g. oxybutynin

#### \*HOMELY REMEDY

Remember that treatment with homely remedies must be recorded according to the care home policy and procedures (e.g., MAR chart) and must be for NO MORE THAN 48 hours without contacting the resident's GP or HCP. Ensure the next shift is informed about any homely remedies that have been given

#### Step by step process after administration

Record	Monitor	Reporting concerns	Additional doses	Time limits
Record administration on the MAR chart/care plan AND on the homely remedy record sheet	Monitor the condition of the resident after administration	If the condition of the resident deteriorates or if there are any concerns regarding the resident, contact the GP surgery or NHS 111	Further homely remedies may be given if required and appropriate for the product UP TO A MAXIMUM OF 48 HOURS	If the condition is still not resolved after 48 hours, contact the GP surgery or NHS 111



The entry should be annotated 'homely remedy' and should state the following:

- Name of homely remedy given
- Date and time of administration
- Dose given
- Why the homely remedy was given
- Name of carer/nurse who administered the medicine
- Effect of the homely remedy



# **PRN** vs Homely Remedies

	PRN	Homely Remedy
Prescribed (or bought, if self-care) for a specific indication for a specific resident	✓	×
'Just in case'	×	✓
For use by any resident	×	✓
Treatment limited to 48 hours	×	✓
Suitable for long-term conditions	✓	×



### **Audit**

- Keep a running balance and check on a regular basis e.g. monthly.
- Date check regularly good practice is monthly, but at least every six months.
- Mark liquids with date of opening (and replace six months after opening or in accordance with manufacturer's guidance).

#### Appendix 2: Record of homely remedies and audit sheet

Name and strength of homely remedy
Please use one sheet per product

Date obtained	Quantity obtained	Date administered to resident	Name of resident homely remedy administered to	Dose administered to resident	Administered by	Balance	Date, quantity and expiry date checked by



## **Disposal**

- Expired stock should be disposed of in line with the care home's 'disposal of medication' policy.
- We advise that homely remedies should be kept until they expire (see manufacturers expiry date on individual items).







- Nursing homes only
- A list of stock dressings to be used as a 'first dressing', until a clinical assessment can take place.
- Purchased and stocked by the home in the same way as homely remedies.

Wound type	Dressing type (wound formulary section)	Formulary choice
First aid		Adaptic Touch®
Burns	Low adherence (A5.1.1)	Atrauman® (primary dressing)
Exudating	Absorbent dressing (A5.1.2)	Zetuvit Plus®
Sloughy (yellow)	Hydrofibre (A5.2.4)	Aquacel® Extra
Epithelialising (pink) Granulating (red)	Foam dressing (A5.2.5)	Allevyn Gentle Border® foam
	Surgical tape (A5.7.3)	Clinipore®
	Light weight conforming bandage (A5.8)	K-band®



# **Self-Care**



### **Self-Care**



- Self-care is a term used to include all the actions taken by people to recognise, treat and manage their own health – including pharmacological (e.g., using medication) and non-pharmacological (e.g., having good sleep hygiene)
- BLMK ICB have developed a Self Care Tool kit as a guide for care homes to support residents with self-care for selective conditions by buying OTC treatments: <u>Care Homes – Self Care Tool Kit –</u> <u>BLMKICB Medicines Management</u>

# Bedfordshire, Luton and Milton Keynes Integrated Care Board

## **Importance**

 Huge amounts of NHS funds are spent on prescriptions for medicines which can be purchased.

- These prescriptions included:
  - Products for a condition that is considered to be self-limiting
  - Items for a condition easily manageable with OTC products
  - Products for which there is little evidence of clinical effectiveness



### **Self-Care in Care Homes**

- CQC has produced guidance for Adult social care providers on 'Over the counter medicines and homely remedies'.
- People who receive social care should be supported to access OTC products to enable them to self-care.
- Access to OTC medicines to self-care is an issue of equality and care homes should have policies in place to support residents who wish to access OTC products in a timely manner.
- On admission to the care home health needs and medicines should be discussed with the resident and/or their relatives or representatives.

### **Conditions**



- Acute sore throat
- Infrequent cold sores of lip
- Conjunctivitis
- Coughs, colds & nasal congestion
- Haemorrhoids
- Mild cystitis
- Mild irritant dermatitis
- Dandruff
- Diarrhoea
- Dry eyes/sore, tired eyes
- Earwax
- Excessive sweating
- Head lice
- Indigestion & heartburn (if no homely remedies)
- Infrequent constipation (if no homely remedies)

- Insect bites/stings
- Mild acne
- Mild dry skin
- Sunburn
- Sun protection
- Mild-Mod hay fever/allergic rhinitis
- Minor burns & scalds
- Mild pain (if no homely remedies)
- Oral thrush
- Prevention of dental caries
- Ringworm/athletes foot
- Threadworm
- Travel sickness
- Warts & verruca
- Probiotics
- Vitamins & minerals



### **Process**

Depending on the circumstances, a self-care product to treat the minor ailment could be:

- Purchased by or on behalf of the resident without GP or Healthcare Professional (HCP) advice
- Recommended by a GP or other HCP to purchase a specific product for a minor ailment
- Recommended by a community pharmacist following an OTC consultation
- Recommended following a referral into the Community Pharmacist Consultation Service (CPCS)



## Responsibilities of Care Home Staff

- Monitor and report any ailments the resident may present to a GP or healthcare professional.
- Report the ailment to a GP or HCP within an appropriate timeframe.
- Ensure all products purchased by the residents/relatives/representatives are safe to be taken with any other medicines by checking with an appropriate HCP.
- Contact the GP/HCP if symptoms worsen or there is a change in condition whilst using a selfcare product. Care staff should let the GP/HCP know what products are currently being taken/used or what has already been tried.

# **Recommendations by GP/HCP**



- If a GP/HCP makes a recommendation of a product or treatment to be bought over the counter, instructions should be communicated by the GP/HCP and written into the individual care plan by the care staff.
- Ideally communication should be in writing the GP/HCP may choose to use the "self-care advice pad"
- The completed advice pad can be sent via secure email on SystmOne (e.g., NHSmail). Alternatively, the GP/HCP may confirm the above in a written communication via secure NHS email if the advice pad is not used.

# Sourcing



- Following recommendation from the GP, HCP or pharmacist, the care home could source from the usual supplying pharmacy OR from a local supermarket/shop or pharmacy.
- Residents or relatives can purchase the product directly themselves.
- Residents, their relatives, or representatives will be responsible to fund the cost of the OTC product.
- It is good practice for the care home staff to retain receipts for purchases of selfcare products made on behalf of residents.

# **Storage**



- Self-care products are the property of an individual resident and should be clearly identifiable with the resident's name.
- Store in original packaging together with any information supplied with the product about the medicine use.
- Store securely in a lockable cupboard or trolley as stated in the care home medicine policy.
- If the self-care product is kept in a resident's room (e.g., if the resident is selfadministering) then it should be stored in a lockable cupboard or drawer



# **Exemptions**

- Long term conditions
- Complex minor illness
- Conditions that are not minor
- Complex patients
- Prescription-only-medicines
- Treatment of an adverse effect
- Product license restrictions
- Not responding to OTC treatment
- Exceptional circumstances
- Ability to self-manage is compromised





Our GP has suggested purchasing some olive oil drops to soften ear wax for one of our residents.

What do we do next?

- **Initiation** Ensure there is appropriate documentation to support the use of the olive oil drops.
- In this case the GP has suggested the drops the care home should document the advice in the resident's care plan/similar. The GP may provide written confirmation using the ICB self-care advice pad or instructions via NHS mail.
- **Purchase** the olive oil drops bought by relatives or representatives or by care home staff. If staff have purchased for the resident, then the receipt should be retained by the care home.

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- **Purchase** the olive oil drops bought by relatives or representatives or by care home staff. If staff have purchased for the resident, then the receipt should be retained by the care home.
- MAR Chart Add the olive oil drops as a handwritten entry on to the MAR chart indicating that it is a 'self-care/OTC product', with clear dosage instructions and treatment duration as per instruction.
- The handwritten entry should be counter-signed by a second person.

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- Administration of the drops should be recorded on the MAR chart.
- **Disposal** Once treatment has been completed for the suggested duration, any remaining drops can be disposed of as per care home policy or carried forward if this is appropriate.
- Monitoring Contact the GP if symptoms worsen or there is a change in condition whilst using a self-care
  product.

	Homely Remedy	Self-care
What is it?		
When would it be purchased?		
Who can it be given to?		
What products are included?		
Who pays for it?		
Does the GP need to approve before administration?		
How long can it be used for?		
Who can administer it?		
Whose property is it?		
Exceptions		

	Homely Remedy	Self-care
What is it?	Product used to treat a minor ailment which can be bought over the counter and does not require a prescription.	Action taken by people to recognise, treat and manage their own health – includes purchase of over the counter medicines
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Does the GP need to approve before administration?	Provided the care home follows the BLMK ICB Toolkit, care home can start without consulting a GP/HCP. GP/HCP sign off is not required if the BLMK ICB approved list of products and toolkit is used	Provided the guidance in the BLMK ICB Toolkit is followed, GP/HCP approval is not required BUT care home staff should seek advice from GPs or HCPs to check if the product is suitable for the individual resident where appropriate.
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How long can it be used for?	Used for limited period of time (usually 48 hours)	Duration of use dependent on condition and/or GP/HCP advice
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How long can it be used for?	Used for limited period of time (usually 48 hours)	Duration of use dependent on condition and/or GP/HCP advice
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Whose property is it?	It is care home property	It is the property of the individual resident
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Does the GP need to approve before administration?	Provided the care home follows the BLMK ICB Toolkit, care home can start without consulting a GP/HCP. GP/HCP sign off is not required if the BLMK ICB approved list of products and toolkit is used	Provided the guidance in the BLMK ICB Toolkit is followed, GP/HCP approval is not required BUT care home staff should seek advice from GPs or HCPs to check if the product is suitable for the individual resident where appropriate.
How long can it be used for?	Used for limited period of time (usually 48 hours)	Duration of use dependent on condition and/or GP/HCP advice
Who can administer it?	Care home staff who have been trained in how to use Homely Remedies	Care home staff in accordance with Self-care Toolkit and any appropriate GP or HCP advice
Whose property is it?	It is care home property	It is the property of the individual resident
Exceptions	Care home staff should follow the flowcharts in the Toolkit and seek further guidance as indicated	The self-care toolkit has a table listing exceptions to self-care



## Quiz



# Care Home Resources and Training





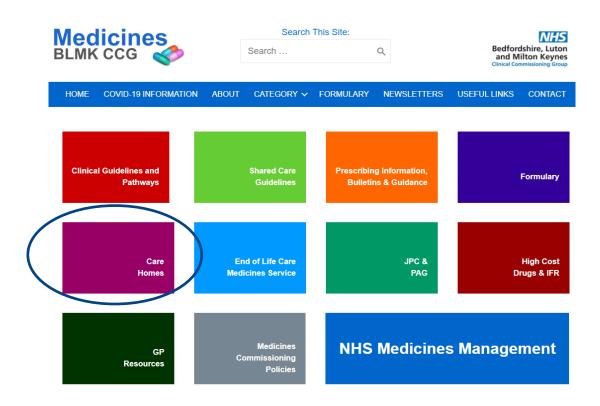
**BLMK ICB Medicines website - BLMKICB Medicines Management** 

#### Care Homes page (purple box):

**Care Homes – BLMKICB Medicines Management** 

#### **Key Documents:**

- Care Home team Service Referral Pathway
- Homely remedies toolkit and First Dressing scheme
- Covert Administration guidance
- "When Required" PRN Medication guidance
- Self Care Toolkit for Care Homes
- Expiry dates for medication guidance
- Meds room and Fridge temperature guide
- Falls documents leaflet and poster
- Care Home Newsletters





### Other resources

- British National Formulary (BNF)
  - Paper copy ensure using an up-to-date copy.
  - Online: <a href="https://www.medicinescomplete.com">https://www.medicinescomplete.com</a>
- Electronic Medicines Compendium (EMC)
  - https://www.medicines.org.uk/emc
- National Institute for Health & Care Excellence
  - <a href="https://www.nice.org.uk">https://www.nice.org.uk</a>
- CQC Website
  - <a href="https://www.cqc.org.uk">https://www.cqc.org.uk</a>



