

**Care Home Guidance for Checking Medication on Admission,
Social Leave and Hospital Discharge
- Medicines Reconciliation**

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Care Home Guidance for Checking Medication on Admission, Social Leave and Hospital Discharge - Medicines Reconciliation

What is medicines reconciliation?

When patients move from one care setting to another, e.g. own home to a care home, or from their home into hospital and vice versa, there is potential for medication errors. Medicines reconciliation is a process of obtaining an up to date and accurate medication list that has been compared with the most recently available information and has documented:

- discrepancies
- changes
- deletions
- additions

resulting in a **“complete list of medicines accurately communicated”**

Why was this guidance produced?

The prescriber has the responsibility for ensuring the continuity of care and minimising potential risk to a patient when they are being transferred from one care setting to another. Care home staff are able to assist in medicines reconciliation to reduce the risk of errors. Each care home should have a process in place to enable accurate verification of service users' medication.

Not all service users are able to give an accurate medication history and therefore care home staff often rely on information from other sources. This guidance was produced to offer support to care home staff to:

- reduce the risk of medication errors occurring when the care of the service user moves from one care setting to another
- make sure the right service user gets the right drug, in the right dose and at the right time
- provide ongoing personalised medicines management care for each service user
- reduce confusion about each service user's medication regime
- improve service efficiency and make the best use of staff skills and time

Overall this helps ensure that the service user receives all intended and no unintended medicines following transitions between care settings.

Medicines reconciliation has the potential to reduce medication errors

What is the guidance about?

The guidance highlights the importance of obtaining accurate and timely information about service users' medicines, and the role each team member plays to ensure that every service user receives their personalised medication service.

The guidance contains

- a suggested care home framework for medicines reconciliation
- a table suggesting sources of information for medicines reconciliation
- three sample checklists for care staff to use when reconciling service users medication
- a checklist for family and friends who may temporarily look after the service user's medication.

Role of the Prescriber in medicines reconciliation

The prescriber is expected to accurately process information in relation to a patient's medication when:

- the patient is discharged following a hospital admission back into primary care
- the patient is admitted to hospital, or transferred to another care setting, whether this is planned or unplanned
- a care home patient is newly registered

Care homes are encouraged to verify with the prescriber the information they receive, if in doubt as to its accuracy, see Table 1. Prescribers should communicate with the care home any changes implemented following a hospital discharge.

If the service user is going on regular short spells of leave the prescriber may be requested to review the medication to consider, if possible, reducing the frequency or change the timing of the doses to avoid administration while out.

Role of the Community Pharmacist in medicines reconciliation

The community pharmacist can be consulted if requiring advice on

- supplying leave medication in separate containers
- reviewing dosing regime with prescriber e.g. change to once daily if possible to minimise medication administration while on leave
- advising the care home on secondary dispensing

Sample check lists

Care homes may want to use or adapt the sample check lists to help verify service users' medication when entering or leaving their care home. The checklists act as a prompt to help care home staff assess the information they have been provided with when service users enter the home and to assure accurate onward information is given when service users leave the home.

Care home staff may decide verification is required and involve other health care professionals to confirm details.

The sample checklists included in this guidance are:

- Service user coming into care home –
 - from another care home or resource centre (appendix 1)
 - from own home (appendix 2)
 - from hospital (inpatient or outpatient) (appendix 3)
- Service user leaving care home e.g. for social leave (appendix 4)
- Medicines reminder card for friends and family (appendix 5)

Resources

1. Medicines Reconciliation: A guide to implementation. National Prescribing Centre 2008
http://www.npci.org.uk/medicines_management/safety/reconcil/library/library_good_practice_guide1.php
2. NHS Sheffield Medicine Management Team Quality and Outcomes Framework 2009/2010 Process pack for Medicines Management 6 and 10: Practice procedure for medicines reconciliation.
3. NICE/NPSA/2007/PSG001 Technical patient safety solutions for medicines reconciliation on admission of adults to hospital
<http://guidance.nice.org.uk/PSG001>

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Medicines Reconciliation - Good Practice Framework For Care Homes

Part A: Incoming information – checking medication when a service user enters the home

Each care home should have a process in place to enable accurate verification of service users' medication.

A useful way of remembering the steps in the reconciliation process is to adopt the **3Cs** approach – collecting, checking, and communicating.

The process can be considered in 2 stages

Stage 1 - *collecting initial information*

- **Collect** and accurately identify service user's medication using the most recent and reliable source available – *NB records may be kept in a variety of formats – see table 1 for sources of information.* This information should be collected as soon as possible by a suitably trained member of staff.
- Clearly document in service user's records the sources used and the date it was obtained.

Stage 2 - *verifying information (builds on stage 1)*

- **Check** – Identify and record any discrepancies between the most recently supplied medication and other sources.
- Act on any discrepancies accordingly, for example contact the GP for confirmation. This should be completed as soon as possible after stage 1 and documented.
- **Communicate** – any changes that are made to the service user's prescription are documented and dated.

Suggested information required when exchanging from one care setting to another includes;

- service user's details e.g. full name, date of birth, NHS number
- presenting conditions plus any other relevant medical conditions including those currently not requiring medication
- a list of all the medicines currently prescribed for the service user, those bought over the counter and any herbal remedies
- dose, frequency, formulation and route for all medicines listed
- a clear indication of the intended duration of each medication, if known
- allergies and previous drug interactions (if known)
- any medicines stopped and started with reasons

This information should be clear, legible and should be readily available.
In each case the information source should be
documented, dated and verified

Table 1 Sources of Incoming Information for Medicines Reconciliation

There are many possible sources of information about service user's medication.

Source of information	Check	Further verification required?
<p>Service Users Own Drugs</p>	<ul style="list-style-type: none"> • the service user has brought all current medication – <ul style="list-style-type: none"> ❖ check dates on boxes are current ❖ there are clear instructions on how and when the medication should be taken ❖ Ask for Right Hand Side (prescription counterfoil) from GP computer system (see below) • Monitored Dosage Systems (MDS) and other compliance aids 	<p>Sometimes creams, inhalers, fridge or bulky items may be forgotten and left behind</p> <p>If MDS is assembled by relative request the original boxes to allow medication to be administered.</p> <p>MDS is only suitable for use in the care home setting if supplied by a pharmacist.</p> <p>MDS should not be used if the printed record detailing medicines contained has become detached or there is any doubt regarding the condition of the packaging or medication contained.</p> <p>Not all medication is suitable for inclusion in MDS – have you received all their medication? If unsure verify with pharmacist / prescriber</p>
<p>Right hand side of prescription from GP computer system</p>	<ul style="list-style-type: none"> • date is current • there are clear instructions on how and when the medication should be taken • the service user is currently taking all of the medicines on the prescription print out – the date of last issue for each item may be shown • if the service user is taking other medication not on print out e.g. 'over the counter', herbal remedies, medication currently prescribed by specialist at the hospital or seasonal medications e.g. for hayfever 	<p>Any recorded list will only be as accurate as the day it was last updated and even then it may not present a complete picture of what is actually taken</p> <p>Short term therapy or newly prescribed medication may not be on the right hand side of the prescription -confirm indication for short term treatment and guidance if symptoms persist</p> <p>There may be ambiguous direction on some medication due to the dose changing dependent on blood test results e.g. warfarin – ensure you have anticoagulant book or sheet stating current dose. If unsure verify with prescriber</p>
<p>Service users or family members</p>	<ul style="list-style-type: none"> • correct drug names and medical terms. 	<p>Sometimes drug names are difficult to pronounce and therefore may not be accurate. This could lead to confusion. Always ask for written verification If unsure verify with prescriber</p>
<p>Patient Discharge Note (TTO)</p>	<ul style="list-style-type: none"> • if service user has recently been in hospital then a copy of the hospital prescription (patient discharge note) may be a reliable source of information. • check the date of the patient discharge note. 	<p>Please ensure you verify the TTO with the prescriber</p> <p>Be aware that medication can be changed soon after discharge and subsequent amendments may have been made</p> <p>The hospital discharge may not contain all the service users routine medicines or usual doses. The service user may be discharged on medication only to be dispensed at the hospital.</p>

Source of information	Check	Further verification required?
Outpatient Prescription	<ul style="list-style-type: none"> if the service user has recently attended an outpatient appointment and a new medicine has been supplied then a copy of the hospital prescription should be available. 	Verify with the GP whether this is to be continued and if it replaces any current medicines. The service user may be prescribed medication only to be dispensed or administered at the hospital. Note that the outpatient prescription will not be a comprehensive list of all service users medication.
Message in a Bottle The Lions Message in a Bottle scheme supplies plastic containers where information is stored about the service user's personal and medical details. It is suggested that this is kept in the fridge. 	<ul style="list-style-type: none"> the date is current 	It may not contain information on all medicines taken If unsure verify with prescriber
MAR charts (Medication Administration Records) These are official documents held at the care home or if service user has been receiving domiciliary care.	<ul style="list-style-type: none"> they have been reconciled with service users medication records at GP surgery if the information is current and all MAR charts have been received, e.g. 5 of 5 are present. 	If unsure verify with prescriber
Clinical trial medicines	<ul style="list-style-type: none"> if a service user is currently taking part in a clinical trial. The medication may not be labelled with the name of the medication. 	The issuing hospital or investigator would need to be contacted for further information If unsure verify with prescriber

Note: this is not an exhaustive list and other sources may be available.

Medicines Reconciliation - Good Practice Framework For Care Homes

Part B: Outgoing information - Checking medication when service users leave the home

Short term and extended leave

When a service user is leaving the home either for a short period of time e.g. the afternoon, or for a holiday, details of all medication to be administered during this period should be accurately communicated to ensure the service user receives their medication as prescribed while away from the home.

- Information regarding leave should be documented and include
 - where the service user is going
 - if the leave was planned / unplanned
 - how long the service user will be away from the home
 - name of escort responsible for service user

- If the service user is going on regular short spells of leave it may be beneficial to ask the prescriber to review their medication to consider, if possible, reducing the frequency or changing the timing of the doses to avoid administration while out.

- If the leave is planned for a longer duration, the community pharmacist should be asked to provide a separate supply of medication for the full period of leave. This will require an additional prescription from the prescriber.

- In exceptional circumstances it may be necessary to “secondary dispense”, although this is not ideal. Secondary dispensing is when medication is transferred from the container supplied by the pharmacy into another suitable receptacle. **If secondary dispensing is performed there needs to be a care home procedure including a robust risk assessment. Ensure the care home’s procedure includes a robust checking process for transcribing and transferring medication between containers.** Care homes are advised to discuss an appropriate container with their community pharmacists. It should be labelled with specific instruction to enable administration as prescribed.
The medication label should contain:
 - Service users name
 - Date of dispensing
 - Name, strength, dose and quantity
 - Formulation of medication e.g. tabs/caps/liquid
 - Specific instructionFor ‘when required’ (prn) medication the label should also contain:
 - Frequency of the ‘when required’ medication
 - Maximum daily dose
 - What the medication is given for

- The care home should have procedure in place to ensure the service user and/or carer is competent to manage the medication while away.

- You may wish to consider whether a MAR chart, a copy of the current prescription or other information e.g. patient information leaflet may be

required to accompany the service user.

- On leaving the care home, relevant information should be given to the carer e.g. time of last 'when required' dose and any aids etc as above. The carer is informed of any recording required while the service user is on leave from home.
 - Ensure appropriate medicine administration aids are provided if required e.g. medicine spoon, measuring pot, spacer for inhaler.
 - Ensure any alert cards accompany the service user (even if this drug is not being administered during this period) e.g. lithium, anticoagulant.
 - Ensure medication reminder card (appendix 5 family and friends check list for looking after medication) is issued where appropriate.
 - If a **controlled drug** is prescribed and the service user is due to take a dose(s) while on leave, this should be supplied along with their other medication ensuring:
 - An entry is made and witnessed, in the care home's Controlled Drug Register indicating the appropriate number of doses being taken from the home.
 - The carer responsible for the service user while away from the home is made aware that administration of a controlled drug is required. They should be informed of the dose(s)/quantity(ies) and time(s) to be administered, that a record should be made of the quantity administered and time of administration and reported to staff on return to the home.
 - On return to the home any controlled drugs not administered must be returned to the Controlled Drugs Cupboard and an entry made (and witnessed) in the Controlled Drugs Register indicating the number of doses being returned.
 - The running balance should be checked – any unexplained discrepancies must be reported to the Accountable Officer at NHS Sheffield.
 - Transportation and storage
 - The community pharmacy will be able to advise if there are any special requirements for transporting medication e.g. a cool bag to maintain temperature.
 - Consider appropriate lockable facility for controlled drugs or if there are a number of service users travelling together supervised.
 - Is sunscreen required?
 - Does any medication make the skin sensitive to the sun?
 - Recording medication
- The following details about medication should be documented in the service user's records:
- The medication, the strength and quantity being taken from the home
 - Information given to carer regarding administration
 - Information received from carer on service user's return regarding administration while out of the home. Include details of administration, omission or refusal and outcomes.

- The medication, strength and quantity being returned to the home.
(See above for controlled drugs).

The MAR chart should be endorsed according to care home procedure on service user's return.

Any unused medicines should be handled and recorded according to care home procedure.

- **Ordering medication**

Following extended leave, ensure the medication regime is still current before ordering ongoing medication.

Transferring service user to another permanent care setting

- Ensure transfer of patient medication is in accordance with care home procedure.
- Ensure arrangements are in place for medication not to be omitted during transfer.
- Accurate and clear information is communicated to transferring home to reduce the risk of medication errors and to maintain a personalised medication regime.

Service user going into hospital as an inpatient

- The front page of the care home communication form is completed, attaching a copy of the MAR stating number of pages attached. If unable to copy the MAR, attach a written list of current medication the service user is prescribed. It is good practice for the written list to be checked by a competent member of staff.
- Medicines dispensed in their original packs are sent to the hospital with the service user.
- Medicines in monitored dosage system should not accompany the service user as this system cannot be used in the hospital setting.

When service user is discharged from hospital:

- Ensure the completed care home communication form is received indicating any change to medication during their stay
- Verification of the patient discharge note is required by the GP.
- Sufficient supplies of medicines should be issued by the hospital on discharge so that there is no urgent need for prescriptions to be requested from the GP.
- Where the discharge medicines are presented in a format that can be managed by the care home staff e.g. if dispensed in original packs, these should be used. Where further supplies are required, ensure a prescription is requested from GP in a timely manner, according to the normal ordering procedure.
- A note is made of any new allergies discovered while in hospital
- Contact hospital if any clarification is required regarding discharge medication e.g. when last 'when required' medication dose was administered

SAMPLE CHECK LIST - Service user coming into care home – from another care home or resource centre

Name of Service User..... Date of birth.....NHS number.....

Source of information: Have you received a MAR chart and medication from other care home or resource centre? **Yes/No**

If NO contact prescriber / previous care home

If YES check the following:	checked	If NO further verification is required	Tick when checked
Is the MAR chart for this service user?	Yes/No		
Is the MAR chart current and complete?	Yes/No		
Does the medication supplied match what is on the MAR chart?	Yes/No		
Has the medication been dispensed and labelled by a pharmacy?	Yes/No		
If any of the medication is packaged in a box, does the medication name and strength of the contents match that on the label?	Yes/No		
Is the expiry date of the medication visible and in date?	Yes/No		
The label on each medication contains:			
Correct service users name	Yes/No		
Date of dispensing that is current	Yes/No		
Name, strength, dose, formulation of medication e.g. tablets/capsules/liquid	Yes/No		
Specific instruction on how and when to administer medication	Yes/No		
If medication is supplied in Monitored Dosage System (MDS) are all medications identifiable	Yes/No		

Source of information: Have you received the right hand side of service user's prescription? **Yes/No**

If YES check the following:	checked	If NO further verification is required	Tick when checked
Is the date on right hand side of prescription current	Yes/No		
Is the service user currently taking all of the medicines on the right hand side of prescription (noting, if evident, date of last issue for each item)?	Yes/No		
Is the service user only taking medication that is on the right hand side of the repeat prescription?	Yes/No		
Is the service user taking any 'over the counter' medicines or herbal remedies	Yes/No	If YES , verify with prescriber or pharmacy that this is compatible with current prescribed medication	

Do any of the medicines need specific storage requirements? Yes/No

If YES check the following	checked		Tick when checked
Do any medicines need to be kept in the fridge?	Yes/No		
Are any of the medicines controlled drugs?	Yes/No		
Are any medicines to be stored in the service user's room in a lockable facility?	Yes/No		

Any ambiguous instruction from family, carer, hospital or pharmacy regarding medication must be verified by the prescriber as soon as possible

Check list completed by(print name) Date.....

SAMPLE CHECK LIST - Service user coming into care home from own home

Name of Service User..... Date of birth..... NHS number.....

Source of information: Has the service user brought in the right hand side of their prescription - issued from service users GP? Yes/No

If NO - contact service user's GP If YES check the following:	checked	If NO further verification is required	Tick when Checked
Is date on right hand side of their prescription current?	Yes/No		
Is the service user currently taking all of the medicines on right hand side of the prescription (noting, if evident, date of last issue for each item)?	Yes/No		
Is the service user only taking medication that is on the right hand side of the repeat prescription?	Yes/No		
Is there a MAR chart accompanying the service user from domiciliary care?	Yes/No		
Is this MAR chart current and complete?	Yes/No/NA		

Source of information: Has the service user brought in medication from home? Yes/No

If YES check the following:	checked	Is further verification required?	Tick when Checked
Does the medication match the right hand side of prescription?	Yes/No		
Does the medication match the MAR chart from domiciliary care?	Yes/No/NA		
Have all current medications been brought in with the service user?	Yes/No		
Is the medication presented in its original container?	Yes/No		
If any of the medication is packaged in a box, does the medication name and strength of the contents match that on the label?	Yes/No		
Is the expiry date of the medication visible and in date?	Yes/No		
The label on the medication contains:			
Correct service users name	Yes/No		
Date of dispensing that is current	Yes/No		
Name, strength, dose, formulation of medication e.g. tablets/capsules/liquid	Yes/No		
Specific instruction on how and when to administer medication	Yes/No		
If medication is supplied in Monitored Dosage System (MDS) are all medications identifiable?	Yes/No		
Is the service user taking any 'over the counter' medicines or herbal remedies?	Yes/No	If YES , verify with prescriber or pharmacy that this is compatible with current prescribed medication	
Are all 'over the counter'/herbal remedies in their original containers with visible expiry dates that are valid.	Yes/No		
Are any medicines for short term treatment only e.g. antibiotics?	Yes/No		
If YES do you know how long this short term treatment should be taken for?	Yes/No		
Check list – service user coming into care home from own home			Continued overleaf

Do any of the medicines need specific storage requirements?

	checked	Is further verification required?	Tick when Checked
Do any medicines need to be kept in the fridge? Do any of the medicines require storage in controlled drugs cupboard?	Yes/No Yes/No	Check with community pharmacy If 'yes' ensure appropriate documentation in CD register	
Are any medicines to be stored in the service user's room in a lockable facility?	Yes/No		

Source of information: Have service user or family members given any information on the medication? Yes/No

If YES please state information below. E.g. Patient information leaflet, anticoagulant monitoring book		Is further verification required?	Tick when Checked

Source of information: Message In A Bottle - has this been brought in with the service user? Yes/No

If YES Is the information current? 	Yes/No	Verify with prescriber	
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Any additional information

Any ambiguous instruction from family, carer, hospital or pharmacy regarding medication must be verified by the prescriber as soon as possible

Checklist completed by(print name) Date.....

Check list – service user coming into care home from own home

SAMPLE CHECK LIST - Service user coming into care home – from hospital (inpatient or outpatient)

Name of Service User..... Date of birth NHS Number.....

Source of information: Have you received a copy of a discharge or outpatient prescription? **Yes/No****If NO contact prescriber / hospital department or ward**

If YES check the following:	checked	If NO further verification is required	Tick when checked
Is the date on the prescription current? Have you received the medication stated on the discharge/ outpatient prescription (if requested)?	Yes/No Yes/No/NA		
Is the medication presented in the original container? If applicable, the label on the medication contains: Correct service users name Date of dispensing that is current Name, strength, dose, formulation of medication e.g. tablets/capsules/liquid Specific instruction on how and when to administer medication	Yes/No Yes/No Yes/No Yes/No		
If any of the medication is packaged in a box, does the medication name and strength of the contents match that on the label? Is the expiry date of the medication visible and in date	Yes/No Yes/No		
Have any changes been made to medication? • Any medication started /stopped/ dose changed • Dose, frequency and indication for 'when required' medicines	Yes/No	Always verify the medication on the TTO with the GP	
Confirmed with ward when last doses were administered	Yes/No		

Source of information: Return of communication form/ folder sent to hospital with service user? Yes/No/NA

If YES check the following:	Checked	If NO further verification is required	Tick when checked
The communication form/ folder is current and completed by hospital	Yes/No	If NO complete a concern form	

Do any of the medicines need specific storage requirements?

	Checked	If NO further verification is required	Tick when checked
Do any medicines need to be kept in the fridge? Are any of the medicines controlled drugs?	Yes/No Yes/No	Check with community pharmacy If 'yes' ensure appropriate documentation in CD register	
Are any medicines to be stored in the service user's room, in a lockable facility?	Yes/No		

Any ambiguous instruction from family, carer, hospital or pharmacy regarding medication must be verified by the prescriber as soon as possible

Checklist completed by(print name) Date.....

Check list – service user coming to care home from hospital

SAMPLE CHECK LIST - Service User leaving Care Home

Name of Service User Date of birth.....NHS Number.....

For each service user complete the following:

Leave is planned unplanned

Reason for leave:

Holiday Day centre Appointment Regular leave Other
 Please state.....

Duration of leave

Consider any confidentiality issues you need to be aware of prior to service user leaving the care home

Check – Medication

tick when checked

Check if medicines are due to be administered while service user is away.

Check how leave medication is being supplied

- By community pharmacy in separate labelled container(s)
- By using service user’s supply from care home. If secondary dispensing, ensure you are following your written procedure which will include a robust risk assessment e.g. stability of medication outside original container
- Check quantity of medication is sufficient to last duration of leave

Check if copy of right hand side of prescription or MAR chart needs to accompany the service user.

If expiry date of medication is visible, ensure the expiry date is not reached while on leave.

Check if appropriate measuring facility is needed e.g. medicine spoon or oral syringe

‘When required’ medication

Check the specific instruction on ‘when required’ medicines

- Frequency of the ‘when required’ medication
- Maximum daily dose
- What the medication is given for
- When the last dose was given and that this information has been provided to the appropriate person to allow the correct dosage interval.

Controlled Drugs (CD)

If CDs are prescribed and dose(s) due while on leave, ensure

- Entry is made (and witnessed) in Controlled Drugs Register detailing quantity being taken out of the CD cupboard.
- Carer is aware that administration of a controlled drug is necessary and required dose and administration time.
- Appropriate documentation is made in service user’s records regarding medication taken from care home and information given to carer.

Transportation and Storage

Check if a cool bag is required to transport medicines requiring refrigeration.

Check if an appropriate lockable facility is required

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<p>Recording medication Check details about medication are documented in the service user's records:</p> <ul style="list-style-type: none"> ○ The medication, the strength and quantity being taken from the home ○ Information given to carer regarding administration <p>Is sunscreen required? Check if any medication makes the skin sensitive to the sun requiring sunscreen.</p>	
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Check – with person accompanying service user	tick when checked
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<p>Name the carer accompanying the service user:(print name)</p> <p>Check if the service user self administers any of their medication Check if the service user needs assistance administering their medicines</p> <p>Will the above carer be responsible for administering any medicine to the service user? If NO who will be responsible (print name)</p> <p>Information for carer regarding service users medication Check all essential information has been given regarding their medicines management,</p> <ul style="list-style-type: none"> • how service user takes medicine including specific instructions • method of recording medication administered • Medication Reminder Card <p>And, if appropriate, additional information</p> <ul style="list-style-type: none"> • anticoagulation alert card, lithium book , insulin passport • PIL (patient information leaflet) 	
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The above medication checks for service user to go on social leave was performed by (print name):..... date.....

On return of service user to care home

Check – with person accompanying service user	tick when checked
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<p>Check –in (reconcile) any medication brought back with the service user Check details about medication are documented in the service user's records Check any discrepancy between the medication that was sent and what has been returned</p> <p>If a Controlled Drug is being returned, ensure medication is returned to CD cupboard and an entry is made in the CD Register (what was administered, quantity being returned and running balance updated). This should be witnessed.</p> <p>Verify any discrepancy with the person accompanying service user, if applicable, the service user, or other appropriate staff. Verify with the prescriber the consequence if any medications have not been administered as prescribed.</p>	
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Checklist completed by (print name):.....date.....

Medication reminder card – family and friends check list for looking after medication

You are taking responsibility for ensuring the medication is taken as prescribed

Please check

- You have all the medication required
- The medication is stored appropriately - out of the sight and reach of children – is refrigeration required?
- When administering the medication
 - Check the container
 - is labelled with your family member or friend's name
 - has the name and strength of medication
 - has clear instruction regarding when and how to give the medication
 - states maximum number of doses in 24 hours if it is to be given 'when required'
 - When was the last dose given, when is the next dose due?
 - Check you have enough medication for the duration of the trip
 - Do you have to record
 - when your family member or friend has taken the medicine?
 - when your family member or friend has not taken a medicine?
- Is sunscreen required?
- If appropriate, do you need to carry an alert card about a medication your family member or friend is prescribed?
- Do you need to test your family member or friend's blood or urine regularly?
- Do you have emergency numbers if you have a concern about the medication?



Emergency contact numbers

Care home

Community pharmacy

GP practice

Other

Comments

NB If the care home resident requires the services of the community pharmacy, GP, emergency doctor or hospital please ensure you take all medicines and information supplied to you by the care home