

# Use of the Community Administered Medication Record Pink Card - Procedure

## 1. Scope and exceptions

This procedure applies:

- to all organisations whose Clinicians and authorised Health Care Professionals (HCPs) transcribe currently prescribed patient medication onto the Community Administered Medication Record Pink Card.
- when Pink Cards are used in Domiciliary settings or Care Home settings where medications are administered to patients by community staff from Sheffield Teaching Hospitals NHS Foundation Trust (STHFT) or St Luke's Hospice.

This procedure must be used for completion of the Pink Card.

Other policies / protocols / procedures and checklists used when setting up a BD BodyGuard™ T Syringe Pump must be used alongside this procedure.

Pink Cards must only be used for patients prescribed pre-emptive medications with or without a subcutaneous infusion via a BD BodyGuard™ T Syringe Pump. This is primarily for patients receiving end of life care and for patients with complex symptom management requirements where parenteral medication is required, e.g. bowel obstruction. For other medicines administered, an appropriate medication administration record (MAR) should be used.

This card **MUST NOT** be used for patients on wards at STHFT or at St Luke's Hospice.

## 2. Objective

This procedure is intended to support STHFT Community Based Services by providing information on the completion and use of the Pink Card and to provide support for all Sheffield Health Care Organisations using it.

## 3. Overarching policy or guideline

[STHFT Medicine Code](#)

Other policies / protocols / procedures and checklists used when setting up the BD BodyGuard™ T Syringe Pump must be used alongside this procedure.

## 4. Procedure

### Responsibilities

- Health Care Professionals (HCPs) and Hospital doctors / GPs completing a Pink Card for patients must ensure that they are competent on the use of the Pink Card.
- Each organisation using the Pink Card must ensure HCPs are fully trained and have a record of completing a competency in transcribing. STHFT only accepts responsibility for HCPs employed by the STHFT.
- Managers of HCPs are required to ensure all staff producing or using the Pink Card are fully trained and competent.

### Community Administered Medication Record Pink Card

The Pink Card is:

- An instruction to administer a medicine that has been prescribed on a discharge note (TTO) or FP10 for a patient. The Pink Card is not a prescription.
- An instruction to administer a medicine that has been prescribed for the patient.
- Approved for use by STHFT, Sheffield GPs, St Luke's Hospice and Nursing Homes (under separate agreement).
- Hosted by STHFT who will manage periodical review of the card.
- Property of STHFT when in use as part of patient care where STHFT are providing care and other organisations prescribe medication.
- Subject to organisational training and governance; for use by STHFT and St Luke's Hospice for transcribing prescribed patients' medication for the recording of administered doses by both clinical and non-clinical staff.
- Used by Nursing Homes where provision of the card is agreed or when provided by the patient's GP. Nursing Homes are not part of the organisations covered by this procedure. Therefore, no responsibility is accepted for use in Nursing Homes, which is subject to the home's internal governance procedure.
- Ordered from the printing company by STHFT Community Services for STHFT Community Teams use. St Luke's Hospice Community Team will order their requirements directly from the printers. STHFT Pharmacy Procurement Team will order for STHFT dispensaries and St Luke's Hospice dispensary use on inpatient discharge.
- Available to GP practices for patients where care is provided by STHFT Community Services via Community Nursing Administration Team Leads based at Lightwood House and Firth Park Clinic.
- Available to care providers who wish to use the Pink Card. They can be obtained following agreement by the Head of Medicines Management for STHFT Community Services, from:

STHFT Community Nursing Administration Team  
Lightwood House, Lightwood Lane, Sheffield, S8 8BG.

## Organisational level procedural requirements

### I. **STHFT (Community)**

#### a) **Use of the Community Administered Medication Record Pink Card**

- Any Pink Card in use should remain with the patient whilst in use. This should ensure that patient care is not compromised.
- Community Nurses and HCPs who are trained and competent can transcribe all medications on to the Pink Card where clear prescriber instruction is available, as detailed in the STHFT [Medication Transcribing Procedure \(Community Services Care Group\)](#).
- Prescribers can complete the Pink Card as an authorisation to administer medication they have prescribed.
- Pink Cards must be used with the additional STHFT guidance as stated on pages 2 and 3 of the Pink Card and in line with the [Key Points Guide \(Community\)](#).
- When a new Pink Card is transcribed or completed for a patient, the previous card must be crossed through on each page with a single line. The line must not obscure the details of the doses administered. The front of the card must be annotated 'discontinued' and must be signed and dated.
- When one section of the Pink Card is full, a new Pink Card must be written. Multiple Pink Cards must not be used for a patient except when more than two syringe pumps are in use.
- All completed Pink Cards that are no longer in use must be returned to the Community Nursing base to be scanned into the patient's Community SystemOne records before being shredded or placed in confidential waste receptacles.

#### b) **Training and Competency**

- Each service must hold evidence that all authorised staff have received training and are competent to transcribe on to the Pink Card.
- Each service must hold evidence that all authorised staff are trained and are competent to administer medications using the Pink Card.

#### c) **Governance**

- Pink Cards in use for patient administration by STHFT remain the property of STHFT. Copies should be taken and provided if requested by GPs, St Luke's Hospice, the patient, the patient's relatives (with patient consent), or as part of an appropriate freedom of information request.
- Datix reports **MUST** be completed for all errors identified due to the use of the Pink Card.
- The approved STHFT audit of Pink Card / transcribing errors should be undertaken annually to reduce long term risk to patients.
- An audit will be conducted by community nursing teams of Pink Cards either in use or those used in the 6 weeks prior to audit, using the audit pack registered with the STHFT audit group.

- A copy of the Pink Card is available on the STHFT Intranet for reference purposes. A copy **must not** be printed from the intranet for use.
- STHFT has no responsibility for training and competency for other NHS or private organisations using the Pink Card.

## II. **STHFT (Hospital)**

### a) **Use of the Community Administered Medication Record Pink Card**

- All medical staff and non-medical prescribers who are competent to use the Pink Card can complete the Pink Card.
- Pink Cards that are brought into hospital by the patient on admission should be discontinued by crossing through each page of the Pink Card with a single line without obscuring the details of any doses administered. Page 1 of the Pink Card must be annotated 'discontinued' and must be signed and dated. File the Pink Card in the patient's STHFT medical records. A new Pink Card should be issued on discharge.
- Pink Cards should be completed for patients being discharged with pre-emptive medications with or without a subcutaneous infusion via a syringe pump.
- Multiple Pink Cards must not be used for a patient except when more than two syringe pumps are in use.
- Pink Cards must be used in accordance with the [Key Points Guide \(Hospital\)](#).

### b) **Training and Competency**

- All Health Care Professionals in the hospital who are involved in prescribing palliative care medicines should ensure that they are familiar with the Pink Card and the guidelines for its completion (see pages 2 and 3 of the Pink Card and the appendices to this document).
- A training video is available via PALMS (use search term 'Pink Card'). Support is also available from the Hospital Specialist Palliative Care Team by request on bleep 4223 for NGH and bleep 3277 for Central Site (RHH/WPH).

### c) **Governance**

- Datix reports **MUST** be completed for all errors identified due to use of the Pink Card.
- A copy of the Pink Card is available on the STHFT Intranet for reference purposes. A copy **must not** be printed from the intranet for use.
- STHFT has no responsibility for training and competency for other NHS or private organisations using the Pink Card.

## III. **St Luke's Hospice**

### a) **Use of the Community Administered Medication Record Pink Card**

- All medical staff and non-medical prescribers who have a prescribing relationship with the patient and are competent to use the Pink Card can complete the card as an authorisation to administer medication that has been prescribed on a St Luke's Hospice discharge note or FP10 prescription.

- Pink Cards **must not be used for inpatients** at St Luke's Hospice. However, when a patient is admitted to St Luke's Hospice inpatient service, the patient should be asked to bring in their Pink Card with them, if they have one, to help with medicines reconciliation on admission and continuity of care.
- Pink Cards should be completed (in the community and on discharge from the inpatient service) for patients with pre-emptive medications with or without a subcutaneous infusion via a syringe pump. Note when a patient is discharged from St Luke's Hospice inpatient service any Pink Card that has been discontinued or is still appropriate for use in the community should be returned with the patient for the attention of the community nursing team who are providing care.
- When a new Pink Card is transcribed or completed for a patient, the previous card must be crossed through on each page with a single line. The line must not obscure the details of the doses administered. The front of the card must be annotated 'discontinued' and must be signed and dated.
- When one section of the Pink Card is full, a new Pink Card must be written. Multiple Pink Cards must not be used for a patient except when more than two syringe pumps are in use.
- Pink Cards must be used with the additional STHFT guidance as stated on pages 2 and 3 of the Pink Card and in line with the [Key Points Guide \(Community\)](#).

#### **b) Training and Competency**

The induction / training will be undertaken by St Luke's Hospice pharmacy staff for doctors working within St Luke's Hospice. The St Luke's Hospice Head of Integrated Community Team will manage training for St Luke's Hospice Community Nursing Team. Each area within St Luke's Hospice will hold training records.

#### **c) Governance**

- Any Pink Cards in use for patient administration remain the property of STHFT.
- Discontinued Pink Cards should be returned to the community nursing team that provided care for the patient.
- St Luke's Hospice incident procedures and drug incident form **MUST** be completed for all errors identified due to the use of the Pink Card. The Community or Integrated Care Team Nurse Lead must be informed at the earliest opportunity of any incidents so an investigation can be conducted.
- Incidents involving STHFT staff will be entered onto Datix via St Luke's Hospice pharmacy staff.

### **IV. Sheffield Place South Yorkshire ICB**

#### **a) Use of the Community Administered Medication Record Pink Card**

- Pink Cards are used to facilitate the accurate administration and recording of palliative care medications by STHFT Community Nursing and St Luke's Hospice staff.

- STHFT and St Luke's Hospice Community Nurses receive training to transcribe onto the Pink Card to reduce delays with administration of medicines and the workload for GP practices. However, not all nurses (e.g. bank nurses) have undergone this training. Prescribers in primary care will be requested to complete the card where there is no trained nurse to transcribe or where there is uncertainty regarding the prescription.
- When requested by STHFT Community Nursing or St Luke's Hospice staff or as deemed clinically appropriate by the prescriber, Sheffield Area Prescribing Group (APG) recommends that primary care prescribers complete a Pink Card if they have issued the FP10. This is important where the dosage on the prescription is not stated explicitly and is likely to change as the patient's condition alters.
- Pink Cards must be used with the additional STHFT guidance as stated on pages 2 and 3 of the Pink Card and in line with the [Key Points Guide \(Community\)](#).
- A Pink Card may be put in place for pre-emptive medications ahead of need to ensure that prompt access to treatment is available when required. There should be regular symptom assessment and review of the appropriateness and doses of the medications on the Pink Card. The date / time period for the next review should be clearly documented in the patient's medical records and communicated to those involved in the care of the patient. The review boxes at the bottom of page 1 of the Pink Card should be used to record when a review has been undertaken.
- Where prescribed doses need to be changed on the Pink Card this may be undertaken by community nurses who are trained and competent to transcribe on to MAR charts. To undertake this task there MUST BE a written change of dose provided by the prescriber either within the patient's SystemOne electronic record or via signed instruction received by the service via secure nhs.net to nhs.net email.

#### **b) Training and Competency**

- All Health Care Professionals in primary care who are involved in prescribing palliative care medicines should ensure that they are familiar with the Pink Card and the guidelines for its completion (see pages 2 and 3 of the Pink Card and the appendices to this document).
- Any queries or concerns may be addressed to the STHFT Community Nursing Service or to the ICB Medicines Governance Pharmacist.

#### **c) Governance**

- Any Pink Cards in use for patient administration remain the property of STHFT where STHFT are administering medication.
- If the GP practice requires a copy for their records, this may be requested from STHFT Community Services, St Luke's Hospice or the Nursing Home depending on the organisation administering medication.
- Any errors in completion of the Pink Card by Health Care Professionals in primary care should be investigated and reported according to the procedures in the practice.



## V. Care Homes

### a) Residential

Patients receiving care within a residential Care Home setting, where STHFT Community Nursing staff are administering medications, will have a Pink Card provided by their GP or the STHFT Community Nursing Service or STHFT Hospital on discharge if the patient is prescribed pre-emptive medications with or without a subcutaneous infusion via a syringe pump.

### b) Nursing

- The Pink Card is approved for use by STHFT, Sheffield GPs, St Luke's Hospice and Nursing Homes (where provision of the card is agreed or when it is provided by the patient's GP).
- Nursing Homes are not part of the organisations covered by this procedure. Therefore, the use of the Pink Card in Nursing Homes is subject to the home's internal governance procedure.

## VI. Training

Key Points documents for completing a Pink Card in either the Community or Hospital setting are provided in the appendices to this document.

## 5. Associated Trust and external documents

[BD BodyGuard™ T Syringe Pump Protocol](#)

[Guidance for Medicines Management of Adult Patients in the Last Few Days of Life](#)

## 6. Appendices

[Example of Community Administered Medication Record Pink Card](#)

[Key Points Guide for Completing a Pink Card in Community](#)

[Key Points Guide for Completing a Pink Card in Hospital](#)

## 7. Document control

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