

Medicines Re-Use in Care Homes FAQs

Local Guidance: <https://www.cambridgeshireandpeterboroughccg.nhs.uk/health-professionals/prescribing-information/formulary-and-drug-classification/prescribing-guidelines-and-policies/> (under care home section)

- 1. When do we need to implement a re-use scheme for medicines and use the documents?**
In the event of an urgently required medication not being available through usual channels. It is to be used as a last resort, and it is anticipated that it will mainly be used for end of life medicine.
- 2. What if a patient no longer needs their medication, should I have it assessed for re-use?**
Yes, a registered healthcare professional e.g. doctor, nurse, pharmacist, pharmacy technician, paramedic should assess the medication if it is possible that the situation above could arise.
- 3. If there is no registered healthcare professional in the home, how should the medication be assessed?**
A virtual check of the medication can be done, using a video link, if there is no registered healthcare professional in the home. Care must be taken around patient confidentiality, familiarity of the HCP with the product, any records around the storage of the medicine. The [risk assessment table](#) should be used for each medicine. If needed the CCG Medicines Optimisation Team can support: CAPCCG.prescribingpartnership@nhs.net
- 4. Can controlled drugs be reused?**
Controlled drugs can only be held as stock under certain circumstances. There needs to be a prescription for the CD in order for it to be lawfully possessed, so transfer to another patient can only happen when there is a new prescription, although it can be assessed for reuse in advance. [See example for creating appropriate CD records.](#)
- 5. What records need to be kept?**
In addition to any usual records, [a log](#) needs to be kept of any medicines assessed for re-use and any re-use of medicines. An [example template](#) is available, and if the assessment is done virtually, the details of the HCP should be recorded.
- 6. How should medicines assessed as suitable for re-use be prepared and stored?**
See flow chart for details of preparation, store in a separate sealed container marked “patient returns/reuse”
- 7. What do I need to communicate to the patient(s) / family (s) involved?**
[See letter for residents.](#) This might involve difficult conversations, and this should be taken into account when asking these questions. The letter should be kept in the care plan.
- 8. If a medicine is to be reused what documents do I need?**
The prescription or a copy of the prescription is required as the direction for administration (the medication will not be labelled for the new patient) to check the directions and reduce medication errors. The MAR chart needs to be updated with the new medication and directions by one member of staff and checked for accuracy and signed by a second trained staff member. A new MAR chart may be provided by the community pharmacy if they have been involved in the process.
- 9. What are my next steps?**
[Complete the checklist](#) and discuss with your staff to see whether you wish to reuse medicines in your care home and whether the community pharmacy who dispenses to the care home is willing to participate.

