

## Pharmacy tip: Leave medication

The following only applies to care homes. It does not apply to domiciliary care services.

### What issues need to be considered?

- How are the medicines provided?
- Who can prepare the medicines?
- Who administers the medicines?
- What records are required?
- How should the medicines be transported?
- What storage is required?

### Guidance

When a resident has leave from a care home, care staff are required to provide the medicines to be administered while the resident is away. This can be particularly problematic in homes for younger adults with learning disabilities.

The period of leave can range from attendance at a Day Care Centre or short excursions with their family, to a longer holiday that may often be together with other residents from the home.

It may be possible for the resident's pharmacist and GP to review the dosing regime to reduce the frequency or change the timing of dosing. This avoids the need for medication to be given whilst the resident is away, for example, by prescribing longer-acting medicines that only require dosing morning and evening, or just in the morning, or even only once a week.

When leave is planned, such as for a **longer holiday**, the home's supplying pharmacist should be asked for help. This would normally be met by providing a separate supply of medicines for the full period of a holiday. The administration of the medicines in this case would be undertaken by either, a carer from the home accompanying the party, or by the person taking responsibility for the resident whilst away. In the case of a party of residents, transportation and storage is usually provided by means of a lockable facility such as a case, whereas for a single resident you would expect the same arrangements as for domiciliary care, i.e. out of the reach/sight of children, protected from light, heat and excessive moisture.

**Shorter periods of planned leave**, such as regular attendance at a Day Care Centre, may be provided by a separate container of medicines specific to the time of day, usually lunchtime. Again the home's supplying pharmacist may be able to help with this. Storage of medication at the Day Care Centre is expected to meet the standard of the care home although this is outside of regulation. Transportation of the medicines can again be met with a lockable facility such as a case.

For **short periods of unplanned leave**, such as a resident taken for an excursion with their family, it is difficult to predict the demand. The re-packaging of medicines into another container for the administration to the resident at a later time is regarded as secondary dispensing (see Pharmacy Tip on secondary dispensing). To avoid secondary dispensing it may be acceptable, or even necessary, for the home's staff to allow the original dispensed container to accompany the resident, particularly when the medicine is contained in a device such as an inhaler or when the relative is familiar with the procedure and the container is small or dispensed in a manufacturer's special pack to maintain the shelf-life of the medicine.

On the resident's return to the home it should be ascertained if the dose(s) of medication was taken, and any unused medication should be returned to the home and appropriate records made. Individual doses of returned medication should be disposed of by the homes documented procedure for disposal of medicines.