

SECTION 1

GOOD PRACTICE GUIDELINES FOR CONTRACTORS PROVIDING ADVICE TO RESIDENTIAL AND NURSING HOMES

1. INTRODUCTION

- 1.1 The memorandum to NHS Circular 1989(PCS)26 provided the initial guidance on the services to be provided by contractors to residential care and nursing homes. The standards presented here provide an update on this guidance.

2. PROFESSIONAL ADVICE

- 2.1 Residential and Nursing Homes entering into an agreement with a community pharmacist and the Health Board, will receive professional advice from the specified community pharmacist. There will be an initial visit with subsequent visits at intervals of not more than three months.
- 2.2 By regular visits at intervals not greater than three months the pharmacist will, in addition to dispensing and supplying prescriptions in accordance with current legislation and national and local policy:
- 2.2.1 check the home's medicine records, and liaise with the general practitioner to ensure, as far as possible, that the information is correct, that the medication is appropriate, e.g. there are no overdoses or drug interactions and that the information can be correctly and safely interpreted by the staff administering medicines. This will be particularly important with respect to residents new to the home.
 - 2.2.2 liaise with other community pharmacists, hospital pharmacists or other health care professionals, as appropriate, when residents are transferred from the home to another care setting, in order to ensure smooth transfer of pharmaceutical care.
 - 2.2.3 be available to provide advice and information to individual residents about their medication
 - 2.2.4 provide advice and help in storage of medicines.
 - 2.2.5 ensure appropriate security of the medicines chain.
 - 2.2.6 examine completed medication profiles and administration records, with the responsible person in charge, and advise on their removal and storage for record purposes.

2.2.7 assist the responsible person in charge by checking the records against the medicines held, to ensure that the system is running correctly. If the system appears, in any way, to be unsatisfactory, it is the pharmacist's responsibility to take adequate steps to rectify the situation promptly

2.2.8 advise on removal of any unwanted medicines from the home for disposal. Assist the officer in charge with the record keeping for the removal of medicines.

3. CARE STAFF TRAINING

3.1 Pharmacists are encouraged to contribute to staff training on aspects of medicines management.

4. TRAINING

4.1 The pharmacist providing the advisory role (including any locum tenens) will have completed the education and training requirements approved by the PQE Board for Scotland. Copies of certificates of completion of courses will be provided to the Health Board at the beginning of the contract.

4.2 The pharmacist will attend any relevant local training as specified by the Health Board

5. RECORDS

5.1 The following records will be maintained by the contractor. A Health Board representative has access at any time to these records.

- Patient medication records
- Record of times and dates of visits to the home. These should be signed, at the time of the visit, by the person in charge of the home.
- Record of advice given to home on each visit. This should be signed by the person in charge of the home.
- Records of training provided to home's staff.
- Details of training courses and dates attended by pharmacist and his/her staff.

5.2 Where more than one home is serviced the records should be maintained under the name of the home.

6. QUALITY ASSURANCE

- 6.1 The contractor will undertake an audit of the service using these standards at least once a year. The results will be available for inspection by the Health Board.
- 6.2 The pharmacist providing the advisory role (including locum tenens) will have completed the education and training requirements approved by the PQE Board for Scotland. Copies of certificates of completion of courses will be provided to the Health Board at the beginning of the contract.
- 6.3 A Health Board representative has access at any time to the following records
- Patient medication records
 - Record indicating times and dates of visits to the home. (Signed at the time of the visit by the person in charge of the home)
 - Record of advice given to home on each visit. (This should be signed by the person in charge of the home).
 - Records of training to provided to home's staff
 - Details of training courses and dates attended by the pharmacist and his/her staff
- 6.4 Where there is a change of pharmacist providing the advisory role the Health Board will be notified of the change immediately.