

For queries contact Medicines Optimisation in Care Homes teams via:
BaNES- BSWCCG.banes.moch@nhs.net
Swindon- BSWCCG.swindon.moch@nhs.net or 01793 987667
Wiltshire- BSWCCG.wiltshire.moch@nhs.net

Care Home Newsletter

Summer 2021

Welcome to the Summer 2021 edition of our Care Home newsletter!

Administration of the Government Vitamin D Supplements



We continue to receive enquiries about the DHSC supply of Provitavit vitamin D supplements.

This supply was intended as a short-term supply of vitamin D for vulnerable residents during the COVID pandemic. Once you have used up your supply, if residents or their families wish to continue vitamin D supplementation, this can be purchased ‘over the counter’ from a pharmacy or supermarket and can be continued to be administered as a non-prescription medicine, following the home’s normal process. Residents with a diagnosed vitamin D deficiency, or with a clinical condition which requires supplementation, will continue to have this prescribed.

Any unused supplies should be disposed of via your usual route.



The links below are to available national guidance:

[Vitamin D and care homes guidance - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

[Vitamin D supplements - supporting people who receive adult social care | Care Quality Commission \(cqc.org.uk\)](http://cqc.org.uk)

Topical Medication Administration Record (MAR) Chart

The recording of the administration of topical medicines in line with CQC & NICE guidance has often been a tricky one to master. To help with this we have developed an all-in-one Topical MAR chart.

It covers:

- how liberally (thick) to apply the medication
- body map
- record of administration
- start and review dates
- good practice



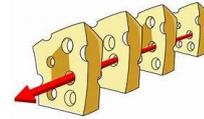
The Topical MAR should be used in conjunction with the “Expiry Date Guidelines for Care Homes” to help reduce the amount of topical medicine waste – and to also save you time with reordering these medicines.

The Topical MAR chart can be accessed on the Medicines optimisation website [here](#) and the Expiry Date Guidelines can be accessed [here](#).

Please note: Care homes may have their own topical MAR chart paperwork, and this is available as an alternative, should it be required.



Learning from incidents



Background

Vitamin D deficiency is a common problem worldwide, >50% of the adult population have levels classed as insufficient, and 16% of the adult population have severe deficiency.

Vitamin D deficiency may contribute to the development of osteoporosis and to falls and fractures.

For patients with severe vitamin D deficiency, they are usually prescribed a course of high strength vitamin D, before being switched to a lower maintenance dose.

Incident

An incident occurred in a care home whereby a resident received 3 extra doses of Stexerol-D3 50,000 units a week (high strength vitamin D).

The discharge summary stated that Stexerol-D3 50,000 units was to be given weekly for 6 weeks, and should then be stopped and switched to a maintenance dose.

However, the review date was not documented on the MAR chart, and further doses of the medication were ordered and administered for a further 3 weeks before the error was identified. This resulted in the resident receiving an overdose of 150,000 units.

If the medication was continued to be administered long term this could cause high calcium levels which can result in symptoms such as nausea and vomiting, constipation, fatigue, confusion, and kidney damage.

Learning and reflections

When reconciling medication during the transfer of care it is important that MAR charts clearly document when medication is to be reviewed.

At the end of the cycle if the resident is still on the course of high strength vitamin D, make sure that the review date is transferred correctly onto the new MAR chart.

Always check the review date for high dose vitamin D before administering.

If you notice that a review date is not recorded on the MAR chart, check the most recent discharge summary (if initiated in hospital). If initiated by the GP surgery contact them to confirm the course duration. If unsure or in doubt contact your GP surgery/NHS 111 for advice.

It is good practice when transcribing medicines onto the MAR chart to request a double check by another competent member of staff.

Focus on medication – anti-coagulants

The CQC website is a useful reference tool for information on high-risk medications. One of these is anticoagulants; these are a group of medicines which are used to prevent the blood from clotting as normal. They both prevent and treat blood clots.

For further information on types of anticoagulants and safety in using them, please see the CQC website:

[High risk medicines: anticoagulants | Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/high-risk-medicines-anticoagulants)

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SPS swallowing difficulties resources

SPS (Specialist Pharmacy Service) has a variety of useful resources for every stage of the medication administration process for patients with swallowing difficulties.

Visit the website for more information: [Swallowing difficulties – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](#)

Digital Eagles Scheme – free digital training for care homes

The Digital Eagles scheme is run by Barclays to help people in care homes learn important digital skills. To sign up for free training sessions email: digitaleagleshq@barclays.com

Further information can be found at: [Start learning today | Digital Wings \(uk.barclays\)](#)



Feedback on the COVID Vaccination programme

A note from Fabia Howard-Smith, part of the Service Design Team in the NHS Vaccinations Programme:

The NHS Coronavirus Vaccines Programme needs your help to improve the vaccination experience at care homes. We'd like to talk with clinicians who work in care home settings and are involved in the vaccination programme. Your help will allow us to learn about the needs of people using the service and how it can be improved.

About our research: We're interested in finding out about the experiences of people working on the coronavirus vaccine rollout in care home settings.

We want to learn about:

- Your role in vaccine rollout in care home settings
- The steps involved in your work
- Details about any issues you encounter

What's involved? You will be asked to speak with a user researcher for around 45 minutes on Microsoft Teams or over the phone. You don't need to be good with computers or the internet to participate.

How is my information used? Taking part in our research is optional, our research is anonymous and we will never share your name or personal details.

Interested in taking part? To take part please complete this [short survey](#). We will contact you to arrange a date and time for you to take part in our research.

Please reach out to me if you have any questions at all.

Thanks, Fabia

Fabia Howard-Smith

User Research | Service Design Team

NHS Vaccinations programme

fabia.howard-smith1@nhs.net