

## PSI PRACTICE NOTICE 1/2010

### Supply by Pharmacists of Medicines to Patients in Residential Care Settings/Nursing Homes

#### Introduction

The purpose of this Notice is to remind all registered pharmacists involved in the sale or supply of medicines (including prescription-only medicines) to patients who are living in residential care settings/nursing homes of certain requirements which must be fulfilled in order to meet their professional obligations to those patients and to ensure compliance with legal and professional requirements.

The provision of pharmacy services to these patients must ensure that they receive the same level of professional care as those patients who attend personally at the pharmacy practice.

#### Regulatory Environment

The sale and supply of medicinal products in respect of persons in residential homes is regulated under the Pharmacy Act 2007 and may only be carried out by a registered retail pharmacy business and by or under the personal supervision of a registered pharmacist.

In addition, the pharmacist must be satisfied that he or she complies fully with the requirements of:

- Pharmacy Act 2007
- Regulation of Retail Pharmacy Businesses Regulations 2008 (S.I. No. 488 of 2008)
- Guidance issued by the regulator to facilitate compliance with these regulations and/or other legislation
- Medicinal Products (Prescription and Control of Supply) Regulations 2003 to 2009
- Misuse of Drugs Acts 1977 to 2006 and the Orders and Regulations made thereunder.

Pharmacists should also ensure that their professional practice in relation to these patients and their arrangements with the owners, managers and staff of the residential home are in compliance with the Code of Conduct for pharmacists.

## Basis of Supply of Prescription-Only Medicines

Prescription-only medicines must only be supplied on foot of and in accordance with the following:

- 1. An original and legally valid prescription for a named patient.**  
The original prescription must be physically present and reviewed by a pharmacist before the medicine is dispensed and/or supplied from the retail pharmacy business.
- 2. By way of a signed requisition from a registered doctor or a registered dentist.**  
Where it is considered that the medicines requisitioned are intended for a residential home, the registered doctor/registered dentist must accept full responsibility, in writing, for the medicines supplied and for their subsequent use. Where controlled drugs are requisitioned in such circumstances, the pharmacist must be satisfied that the home concerned has the authority to be in lawful possession of those medicines i.e. the facility holds an appropriate licence, to hold such controlled drugs, granted by the Minister for Health and Children under the Misuse of Drugs Acts 1977 to 2006.
- 3. By way of emergency supply (at the request of a doctor/at the request of a patient).**  
The supply of any controlled drug is not permitted by way of emergency supply.

The supply of prescription-only medicines on foot of the following is **not** permitted:

1. Faxed copy/photocopy of a prescription (other than by way of emergency supply as provided for under regulation 8(1) of the prescription regulations (S.I. 540 of 2003);
2. Kardex /medication chart/prescription list or copies thereof;
3. In the case of a CD2 or CD3 controlled drug, where the supply is to a doctor/dentist and a prescription issued in the name of a patient is offered as the authority to supply to the doctor or dentist. (Such supplies may only be made on the basis of a properly completed requisition.)

## Review of Prescribed Medicine Therapy

Prior to the dispensing of each prescription, and prior to the supply of any medicinal product concerned, a registered pharmacist must review the prescription having regard to the pharmaceutical and therapeutic appropriateness of the medicine therapy for the patient and the use by the patient of any other medicines etc that the pharmacist is, or ought reasonably be, aware of.

## Patient Counselling

Following completion of the above review, the registered pharmacist must ensure that the patient has sufficient information and advice for the proper use and storage of their prescribed medicines. In doing so, the pharmacist must offer to provide individual counselling to each patient or their carer in respect of each individual supply of medicines carried out. The pharmacist must offer to discuss with each individual patient or their carer all such matters as the pharmacist, in the exercise of his or her professional judgement, deems significant.

In order to properly exercise his or her professional obligations with respect to patient counselling and overall patient care, it is essential that the pharmacist personally physically attends on the patient in the home, on a frequency appropriate to each individual patient's needs. Records of these visits to patients by the pharmacist should be retained and be available for review in the pharmacy and in the residential home.

While educational talks and health related lectures to care staff and patients within a home are welcome and instructive, they are not a substitute for the individual counselling of each patient and/or their carer in respect of their prescribed medicines. Furthermore, it is not sufficient to suggest that the patient or carer should read the enclosed leaflet or instructions as a substitute for receiving the appropriate information and advice from a pharmacist.

### **Delivery of Medicines**

The pharmacist's responsibility towards patients extends to the delivery of medicines. Medicines must be delivered safely and with appropriate directions for use. When delivering medicines to a patient, the pharmacist must ensure that:

1. The delivery method used is secure i.e. medicines are sealed in tamper evident/tamperproof containers.
2. The delivery method safeguards confidential information about the patient and their medication.
3. The medicines are delivered to the patient or their carer promptly, safely and in a condition appropriate for use. They must be packed, transported and delivered in such a way that their integrity, quality, safety and efficacy are preserved. Care must be exercised with thermolabile products.
4. The delivery method used should incorporate a verifiable audit trail for the medicine from the point at which it leaves the pharmacy to the point at which it is handed to the patient or carer. A signature should be obtained to indicate receipt of the medicines by the patient, his or her carer or other designated person. This documentation must be retained for review at the pharmacy premises.
5. Delivery to a person other than the patient or carer should only be undertaken where the arrangements have been specifically designated by the patient or their carer.

The pharmacist should also ensure that appropriate arrangements are in place regarding the segregation and safe disposal of unused, out-of-date or other waste medicines.

### **Standard Operating Procedures**

Standard operating procedures must be developed to outline the manner in which the sale and supply of medicines to patients in residential homes is carried out.

The standard operating procedures must include at a minimum:

1. The basis for supplying prescription only medicines;
2. The arrangements for review of medicines therapy;
3. The arrangements for individual patient counselling and record keeping around counselling;
4. The arrangements for the transfer of medicines to patients and/or carers. This includes delivery of medicines.

All standard operating procedures, together with training records, must be retained and available for review.

### **Medication Monitoring and Review**

In line with the HIQA National Quality Standards for Residential Care Settings for Older People in Ireland, the pharmacist should participate in the review of each patient on long-term medication, at least on a three-monthly basis. These reviews should give special consideration to the specific medicines as mentioned in the HIQA standard, including antipsychotic medication, sleeping tablets and other sedating medication, analgesic medications, medication for the management of constipation, and potential interactions.

The pharmacist should actively participate in the development of medicines management policies in the residential home and advise prescribers and other members of the care team on the safe and rational use of medicines.

### **Responsibility**

While this Notice is directed mainly at registered pharmacists, it remains the responsibility of all pharmacy owners and superintendent and supervising pharmacists to ensure, on an on-going basis, that the legal, professional and other requirements are being appropriately and adequately met in the course of carrying on their retail pharmacy business(es).

*Pharmaceutical Society of Ireland*

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