

Good Practice Guidance 4: Use of liquid medicines in Care Homes

Key Points

- Liquid medicines are often prescribed in care homes; however a [study in older peoples care homes](#) has shown that the risk of administration errors with liquid was four times higher than for tablets and capsules.
- Ensure the National Patient Safety [Patient Safety Alert 19: Promoting safer measurement and administration of liquid medicines via oral and other enteral routes](#) has been reviewed and the required actions implemented within the care home.
- Only use labelled oral/enteral syringes that cannot be connected to intravenous catheters or ports to measure and administer oral liquid medicines.
- Do not use intravenous syringes to measure and administer oral liquid medicines.
- Make sure stocks of oral/enteral syringes are available in all clinical areas that may need to measure and administer oral liquid medicines in a syringe.
- Ensure the care home has appropriate policies and procedures covering the administration of liquid medicines.
- Avoid the use of unlicensed 'liquid specials' (specially prepared medicines) where possible

Safer administration of liquid medicines

Liquid medicines are often prescribed in care homes; however a [study in older peoples care homes](#) has shown that the risk of administration errors with liquid was four times higher than for tablets and capsules. It is therefore essential that liquid medicines are prescribed and requested appropriately and that care home staff are trained in their safe administration.

Liquid medicines are often used in residents with swallowing difficulties that cannot swallow capsules and tablets. However as medicines are often supplied to care homes in a monitored dosage system (MDS) this can mean the care home has to have two medicines systems; one for those preparations that can go into an MDS system and one for those that cannot e.g. liquids, creams, insulin, eye drops etc.

Specially prepared medicines

Some medicines are not commercially available as liquids and so have to be made up especially by manufacturers; these products are described as 'specially prepared medicines'. They are often liquid preparations (termed liquid specials) but can also include creams, tablets and capsules.

Specially prepared medicines are unlicensed medicines and are not required to meet the same standards as licensed preparations. GPs and community pharmacists also assume greater liability when using them. The cost for many of these medicines can vary hugely and they are usually considerably more expensive than licensed medicines.

Specially prepared medicines often take longer to be manufactured and have short expiry dates so it is important if these medicines are needed the quantity ordered is not more than will be used before the expiry date. Care home also need to ensure they leave plenty of time for ordering these medicines.

It is important that specially prepared medicines are only used in residents unable to swallow solid medicines such as tablets and capsules and after the suggested stepwise approach below has been considered to choose a suitable alternative:

1. If possible, a licensed medicine is used in a suitable formulation to meet the resident's needs e.g. a dispersible tablet or licensed liquid medicine.
2. In order to use a licensed medicine, consideration should also be given to switching to a different medicine within the same group of medicines, or to a different route of administration e.g. changing the resident's medicine to one that is available as a liquid / dispersible tablet. In most cases a suitable licensed preparation will be available to meet the resident's needs.
3. If there is no suitable licensed formulation, then consideration is given to using a licensed medicine in an unlicensed manner, for example by crushing tablets or opening capsules – care home staff should always seek advice from the resident's GP and community pharmacist and this should be documented in the care plan before crushing tablets or opening capsules.
4. In the few situations where the resident's needs cannot be met by licensed medicines, the use of a special-order product ('special') may be considered.

This will not only ensure the most appropriate medicine for your resident but will also help to ensure the best use of NHS resources.

National Patient Safety Agency

In 2007, the National Patient Safety issued [Patient Safety Alert 19: Promoting safer measurement and administration of liquid medicines via oral and other enteral routes](#). This stated:

- only use labelled oral/enteral syringes that cannot be connected to intravenous catheters or ports to measure and administer oral liquid medicines;
- do not use intravenous syringes to measure and administer oral liquid medicines;
- make sure stocks of oral/enteral syringes are available in all clinical areas that may need to measure and administer oral liquid medicines in a syringe;
- when patients or carers need to administer oral liquid medicines with a syringe, supply them with oral or enteral syringes.

Care homes should ensure they have read and actioned the above Patient Safety Alert.

What errors can occur with liquid medicines?

Liquid medicines should always be measured out and given to residents using an approved measure (not a metal teaspoon). This can either be via an oral syringe that meets the requirements of the above Patient Safety Alert, via a graduated medicines cup or via an official 5ml medicine spoon. An appropriate measure should always be supplied by the community pharmacist or dispensing doctor for a liquid medicine for a resident.

Common errors that can occur with medicines include:

- Omitting to give the medicine.
- Inaccurately measuring the volume of the medicines so the resident receives too much or too little.
- Not shaking the bottle; some medicines separate out when left and so need to be shaken before they are used.

What should medicines policies and procedures cover?

It is important that the care home has appropriate policies and procedures covering the administration of liquid medicines which considers the following aspects:

- Ensure that the liquid medicines are included on the MAR chart as a prompt that they require administration.
- Ensure that only an approved measure is used and that care home staff have been trained on how to use it to ensure that accurate volumes are administered
- The need to shake some medicines before administration should be included to ensure that residents receive the correct dose – if a member of staff is unsure advice should be sought from the community pharmacist.

- Some liquid medicines should be stored in the fridge – if this is necessary it should be stated on the medicine label but if a member of staff is unsure advice should be obtained from the community pharmacist.
- If a resident takes multiple liquid medicines these should not be mixed together but should be administered separately using a separate measure.
- If measures are re-used it is important to follow cleaning processes. The measure should only be re-used for the same resident.
- If the appearance of the liquid medicine changes e.g. it changes colour, smell etc then this should not be used and a fresh supply ordered.
- Liquid medicines can usually be used up to the manufacturers expiry date but some have short expiry dates e.g. antibiotics, oramorph etc. The label should always be consulted and the medicine not used past its expiry date.
- If a liquid medicine is lasting a resident more than 3 months, discuss with their GP to see if smaller quantities can be prescribed.
- Any medicine that requires disposal should be disposed of in line with the care homes disposal of waste medicines procedure and should not be poured down the sink or toilet.

If a resident is taking both liquid and solid medicines (e.g. tablets and capsules), it is useful to discuss this with the residents GP as the resident may be able to have all solid medicines prescribed.

Further Information

- Further information on managing medicines in care homes is available in Outcome 9 of the [CQC Essential Standards of Quality and Safety](#).
- Further information on ['The handling of medicines in Social Care'](#) can also be found on the Royal Pharmaceutical Society website: www.rpharms.com
- The Nursing and Midwifery Council (NMC) provides guidance and [advice on a number of topics](#) which is available on their website; www.nmc-uk.org including;
 - [The code: Standards of conduct, performance and ethics for nurses and midwives](#)
 - [Standards for medicines management](#)
- The National Patient Safety Agency also contains safety alerts related to medicines; <http://npsa.nhs.uk/>
- Information on medicines in swallowing difficulties is available via www.swallowingdifficulties.com

The above links are made available solely to indicate their potential usefulness to users. The user must use their own judgment to determine the accuracy and relevance of the information they contain.

Oxfordshire CHUMS Working Group & Medicines Management Team