

## Recording of Medicines in Domiciliary Care

---

This briefing is being provided in response to a number of queries about the recording of medicines in Domiciliary Care settings. The main issue being when the medicines administration record (MAR) only states 'the contents of Blister Pack given' and there is no reference to or record of what medicines were in the 'blister pack'.

A record must be kept of all medicines administered to the person the Domiciliary Care Worker is caring for. This is supported by the Royal Pharmaceutical Society guidance published in 2007, [The Handling of medicines in social care](#). Pages 24 and 25 set out what needs to be recorded and states:

*From your records, anyone should be able to understand exactly what you, the care worker has done and be able to account for all of the medicines you have managed for an individual. The service provider needs to decide on the way in which a care service keeps records. Whatever format is chosen, the records must be complete, legible, up to date, written in ink, dated and signed to show who has made the record.*

*In every social care service where care workers give medicines, they must have a MAR chart to refer to. The MAR chart must detail:*

- Which medicines are prescribed for the person
- When they must be given
- What the dose is
- Any special information, such as giving the medicines with food.

The following is a slide taken from the Medicines Optimisation training session delivered at Induction and provides guidance for inspectors on how to look at this issue.

**Medicines are given as prescribed** 

- Can you tell from the records what should be given when?
- Do records include non prescribed as well as prescribed remedies?
- Can you tell from the records what has been given, when and by whom?
- Medicines are only given to the person for whom they are prescribed
- Medicines are available and records don't show them to be 'out of stock'
- Medicines are not frequently omitted or regularly refused

## Recording of Medicines in Domiciliary Care

---

It was agreed at a meeting between Brian Brown, National Medicines Manager, CQC and Colin Angel, Policy director at United Kingdom Homecare Association in November 2013 that it is not necessary for the actual MAR sheet to detail each individual medicine. Some providers use the phrase 'contents of the blister pack' on the MAR sheet as shown in the photograph (Fig 1). This is acceptable. However, if the MAR chart only records that the 'contents of a blister pack' are administered, then there must be a corresponding record to say what was contained in the 'blister pack' (as documented on the MAR chart) covering the administration dates of that chart.

One way to address this would be if a list of the medicines (such as in fig 2) was attached to the MAR chart, assuming all of those medicines were present in the blister pack during the period of time covered by the chart. Another example shows the medicines listed directly on the chart (fig 3)

These are just two examples of how the provider might meet the record keeping principle of safe and effective administration of medicines.

We cannot be prescriptive as to how the provider records administration and there is a significant variation across the sector around type/style of blister packs, time periods covered by MAR charts and information provided by the supplying pharmacies. However the important principle is that it is clear what medicines have been prescribed and are being administered to the person at any one time.

# Recording of Medicines in Domiciliary Care

Fig 1

Name: [Redacted]  
 Allergies: **PB7 Adhesive Plasters**  
 Address: [Redacted]

**Method of Administration:**  
 Observed (O) Given (G) Prompted (P) Refused (R)  
 Left out for later (L)

Medication	Day	Sunday	Monday	Tuesday	Wednesday	Thursday
5. Movicol	Date:	02/05/15	4/5/15	5/5/15	6/5/15	7/5/15
	Time:			8:00		07:00
	Medication			JH @		
	Hour:					
	Dose					
	M:	EP @ 8.15	MB @			
	L:					
	E:					
	N:					
6. Blister Pack	Day	Sunday	Monday	Tuesday	Wednesday	Thursday
Please give as on blister	Date:	4.5.15	5.5.15	6.5.15	7.5	
	Time:			13:00	12:45	12:30
	Medication			JH @	MSG	
	Hour:				16:45	
	Dose					
	M:	EP @ 13:00	MB @ 13:00	JH @ 13:00		
	L:					
	E:					
	N:					
	Day	Sunday	Monday	Tuesday	Wednesday	Thursday
	Date:			5.5.15		
	Time:					
	Medication					
	Hour:					
	Dose					
	M:	EP @ 8:10	MB @ 8:00	JH @		
	L:					
	E:					
	N:					
	Day	Sunday	Monday	Tuesday	Wednesday	Thursday
	Date:			5.5.15		
	Time:					
	Medication					
	Hour:					
	Dose					
	M:	EP @ 8:10	MB @	JH @		
	L:					
	E:					
	N:					

As / When needed (if required start with 1 sachet am and increase to 1 x am and 1 evening until movements are back to normal)

1. L. E

PLEASE CHECK ORDER (BREAST)

## Recording of Medicines in Domiciliary Care

Fig 2

<p>4 Metformin 850mg 1 tablet to be taken A.M, LUNCH AND EVE. For: type 2 diabetes</p>	<p>Feeling sick or being sick Diarrhoea Unusual taste, lack of appetite, abdominal pain</p>
<p>5. Digoxin 125mcg 1 tablet in the morning For: Fast and erratic heart rhythms such as atrial fibrillation and atrial flutter Heart failure</p>	<p>Feeling dizzy Blurred or yellow vision Feeling or being sick Diarrhoea Skin rash</p>
<p>6. Ferrous sulphate 200mg 1 tablet to be taken at A.M, LUNCH AND EVE For: Prevention and treatment of iron-deficiency anaemia</p>	<p>Feeling sick, stomach pain Constipation Diarrhoea</p>
<p>7. Paroxetine 20mg 1 tablet to be taken in the morning For: Depression Obsessive-compulsive disorder Panic disorder Anxiety disorders Post-traumatic stress disorder</p>	<p>Feeling or being sick, diarrhoea Sleepiness, dizziness, weakness Dry mouth Headache Feeling restless, shaky, nervous, anxious or agitated Constipation Increased sweating, yawning, blurred vision, difficulty sleeping, abnormal dreams, lack of appetite, weight changes, sexual difficulties</p>
<p>8. Docusate sodium 200mg 1 tablet to be taken @ am, lunch and eve For: Constipation</p>	<p>Stomach cramps, feeling sick Diarrhoea</p>
<p>9 Gabapentin 300mg 1 tablet to be taken at a.m, lunch and eve. For: Neuropathic pain (pain resulting from damage to nerves)</p>	<p>Infections, flu-like symptoms, an increased appetite, flushing, increased blood pressure, changes in weight, changes in emotions or mood, fits, movement difficulties, feeling shaky, difficulty sleeping, tingling feelings, vertigo, breathing difficulties, cough, gsm changes, bruises.</p>

July 2011

