

Kent and Medway CCG

Medication Disposal and Waste Management in Care Homes

Best Practice Guidance

Introduction

All care homes should have a written policy for the safe disposal of surplus, unwanted, or expired medicines.

It is the responsibility of the care home to dispose of unwanted medicines appropriately to avoid placing people who use the service at risk.

Process

The medication policy should include the process for disposing of medicines within the home.

NICE SC1 says “Medicines for disposal should be stored securely in a tamper-proof container within a cupboard until they are collected or taken to the pharmacy.”

Access to these medicines should be controlled until collected.

Medicines should not be disposed of onsite through the sewage system.

Nursing homes – must only return medicines to a licensed company which may include community pharmacies.

Care homes without nursing – medicines for disposal should be returned to the supplier (usually community pharmacy or dispensing doctor).

Controlled drug disposal

Any controlled drugs awaiting destruction or collection for destruction should be separated from in use stock. E.g. placed in a basket within the CD cupboard and clearly labelled for destruction.

Nursing homes

- Agreements for the collection of medication waste should be made with a Waste Management Regulations licensed waste disposal company.
- CDs must be denatured before being handed to the waste disposal company, e.g. in specially designed denaturing kits.
- A T28 exemption will be needed in order to comply with the legislation that is overseen by the Environment Agency.

Care home WITHOUT nursing

- CDs should be returned to the relevant pharmacist or dispensing doctor at the earliest opportunity for appropriate destruction.

Documentation

Records must be kept within the home of all medications disposed of or waiting for disposal.

Records should include:

- Date of disposal/return to pharmacy
- Name of person the medicine belonged to
- Name and strength of medicine
- Quantity destroyed/returned
- Signature of member of staff who arranges the disposal

- Signature of person collecting the medicines
- Reason for disposal – to monitor if medicines are being wasted unnecessarily

Records should be maintained for 8 years as treated as part of a person's care records.

Waste management

An investigation into medication waste highlighted that residential and care home sector are significant contributors to medicines waste in the NHS, accounting for around **£50 million of the estimated total medicines waste annually**.

To reduce waste care homes, **GP practices and community pharmacies must work together** and ensure effective communication systems and appropriate training for staff involved.

Some medication waste in care homes is unavoidable for reasons such as:

- A resident dies
- Changes are made to a resident's treatment or the medicine is stopped
- The medicine expires
- The resident transfers to another care setting and medicines have not been transferred with the resident. Please note medicines should be transferred where possible between care settings.

How to reduce waste when ordering medication:

Implement a robust ordering process:

- ✓ Care home retain responsibility for ordering
- ✓ A minimum of 2 members of staff trained
- ✓ Stock check before ordering medications
- ✓ Only order medications that are required
- ✓ Surplus medications are carried forward to the next month
- ✓ Discontinued medications are communicated to the GP and community pharmacy and are not re ordered
- ✓ Use the current MAR chart to complete ordering
- ✓ Keep a record of the order within the home to check for any discrepancies

Top tips for reducing waste

- ✓ A robust ordering process
- ✓ Medication quantities aligned to a 28 day cycle – communicate with GP if not
- ✓ Interim prescriptions request amount to align you with the 28 day cycle (plus next month's supply if monthly order has already been submitted)
- ✓ Carrying forward surplus medications
- ✓ If there is a lot of excess at the end of the month ask GP to review the quantity prescribed – especially for creams, liquids, inhalers and insulin pens/cartridges
- ✓ Request a review for medication that is regularly refused by residents
- ✓ Request a Structured medication review (SMR) for medications that are not used/administered (This can be done by PCN Pharmacist or GP)
- ✓ Use of homely remedies where appropriate
- ✓ Do not destroy medications that are still within the expiry date, these can be transferred over to the next cycle
- ✓ Review policies and procedures to ensure they do not contribute to waste. Ensure staff are trained to reduced waste of medications
- ✓ Follow manufacturer's guidance for expiry dates
- ✓ Record 'date opened' or new expiry date once opened on liquids, creams and ointments
- ✓ Regular expiry date checks
- ✓ Stock rotation to ensure shorter expiry dated items are used first
- ✓ Maintain temperature of room below 25°C
- ✓ Maintain fridge temperature between 2°C and 8°C
- ✓ Gain consent before preparing medication for administration
- ✓ Use the correct measuring equipment when administering medications
- ✓ Record reason for disposing of medication
- ✓ Audit waste records to identify avoidable waste and trends.

Medication Disposal Record Sheet

BEFORE disposing of or returning any medication is this avoidable? Can the medication be carried forward and used in the next cycle.

Date	Name of resident	Name of medication, strength, and form (E.g tablet/capsule/patch)	Quantity	Reason for disposal/return	Signature of staff

Date collected for disposal.....Signature of collector.....

Expiry Dates Best Practice			
Medication	Unopened: store following manufacturers guidance	Expiry date once opened – refer to patient information leaflet	Comments
Tablets & capsules in original blister strips or container with printed expiry date	Manufacturer expiry date	Manufacturer expiry date, check patient information leaflet (PIL)	When required (PRN) medication, wherever possible, should be used from manufacturers original date. The expiry date is printed on each strip. Medicines kept for use in next month should be recorded in the 'carried forward' section of MAR chart
Loose tablets and capsules re-dispensed from an original pack without printed expiry	6 months after dispensing unless dispenser/manufacturer advises otherwise	6 months after dispensing unless dispenser/manufacturer advises otherwise	
Tablets and capsules re-dispensed into monitored dosage system (MDS)	4 weeks unless pharmacy advises otherwise	4 weeks unless pharmacy advises otherwise	Note: some pharmacies may have longer expiries for popular items. This will be printed on the back of the blister pack
Oral liquids in original container	Manufacturer expiry date	Follow guidance in PIL	Estimate the amount of any liquids carried over. Medicines retained for use should be recorded in the 'carried forward' section on the MAR chart
Oral liquids re-dispensed into amber bottles	6 months after dispensing, unless dispenser manufacturer advises otherwise	6 months after dispensing, unless dispenser or PIL advises otherwise	Write the DATE when opened on the dispensing label.
Creams/ointments	Manufacturer expiry date	Follow guidance in PIL. If there is obvious damage to the container or contamination please destroy.	If the product lasts longer than 3 months you may be able to request a smaller pack size.
Eye drops/ointments	Manufacturer expiry date	Usually 28 days but some preparations are stable for much longer, always check PIL	It is not normal practice in care homes to have one bottle of eye drops for each eye unless advised by the GP.
External liquids (e.g. shampoos, bath oils, lotions)	Manufacturer expiry date	Follow guidance in PIL	
Ear drops	Manufacturer expiry date	Usually 3 months unless otherwise advised in PIL	
Nose drops/sprays	Manufacturer expiry date		
Inhalers	Manufacturer expiry date	Follow guidance in PIL	If inhalers/sprays are used on PRN basis, keep for on-going use; do not re-order each month. Write details on current MAR chart
Glyceryl trinitrate spray/ Blood glucose monitoring strips	Manufacturer expiry date	Follow guidance in PIL	
Insulins	Manufacturer expiry date when stored in fridge (+2°C and +8°C)	When in use insulin can be kept at normal room temperature (i.e. not exceeding 25°C) for 1 month	Ask the GP to prescribe the nearest number of pens/cartridges needed per month to reduce stock piling.