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The Medicines Optimisation Care Settings Team sits within the wider Medicines Optimisation Team and aims to:

- Promote cost effective prescribing and safe use of medicines in order to prevent harms related to medicines
- Deliver a diverse range of training and education to drive system wide improvements and prevent unnecessary hospital admissions
- Work collaboratively across the system supporting the enhancement of productivity and improvement in outcomes, experience and access

Please contact us if you would like any support with medicines management or have good practice examples to share: stw.carehomeenquiries@nhs.net

July 2025 Waste Campaign Launch

Think Twice, Order Right...
Only request the medicines you need

Did you know that medicine items worth approximately **£2.6 million** are wasted unnecessarily in Shropshire, Telford and Wrekin each year? Nearly 40% of this waste is avoidable and **we need your help to reduce this.**

We are planning to launch the **Think Twice, Order Right - Only request the medicines you need, Medicines Waste Campaign** in July 2025.

The campaign aims to promote and support the following key messages:

Stay well

- Unused medicines go out of date and might not work as intended, meaning care might be compromised
- Stockpiling medicines worsens drug shortages

Stay safe

- Stockpiles of medicines kept at home can be dangerous for children and pets
- Medicines are only prescribed for you, and it is not safe to share prescribed medicines with anyone

Stay green

- When you dispose of medicines properly, by handing them in to your pharmacy, you are helping to make sure that waste medicines do not pollute our rivers and seas
- Only ordering what you need means that you are helping the environment because once medicines have left the pharmacy, they cannot be recycled or used by anyone else

Together, we can protect patient safety, the NHS, and our environment. More information on how we can work together to do this will be shared in the coming weeks.

Non-Prescribed Medicines in Community Settings

This month sees the re-launch of the [non-prescribed medicines in community settings](#) guide and the supporting [position statement](#). Use of 'homely remedies' and the management of minor, self-limiting conditions for those receiving care in their own home, or in a care home.

Shropshire Telford and Wrekin ICB, Medicines Optimisation team, recommends that all care settings and care providers have arrangements in place to allow people to access a range of homely remedies and over the counter medicines for the management of self-limiting, minor conditions in a safe and timely manner.

This aligns with the CQC statement **"Giving people access to over-the-counter products and enabling them to choose is an issue of equality. You should therefore make adjustments to support all people to access them. You should have a policy to support people who wish to self-care or who need to manage their own care. This should include the necessary safeguards to support a person to get access to over-the-counter products, or to support their carer or relatives to provide them."**

In addition to the position statement and guidance document that supports care services to provide access to homely remedies and over the counter medicines for self-care, the medicines optimisation care setting team are offering a new 40-minute training session on self-care medicines. **Please note the term "self-care medicines" is different to the term "self-administration of medicines".**

If you're interested in this session or would like some further advice/support to implement a homely remedies and/or self-care policy within your care setting, please get in touch. **Let's work together to improve timely access to medicines for ALL across the region.**

Sterile Dressing Packs in Care Settings

Last year **5,569** Sterile dressing packs were prescribed in Shropshire, Telford & Wrekin with an associated cost of **£41,626**



This month sees the launch of a position statement explaining the prescribing and procurement of Sterile Dressing Packs. The statement has been written in collaboration with both the Tissue Viability & Wound Healing Service and the Infection, Prevention and Control Team.

Generally, sterile dressing packs should not be prescribed on FP10 prescription. Stockpiling and not using all the items contained within the pack can contribute to an increase in avoidable medicines waste.

Clinicians in any setting including care settings, community settings and Primary Care teams are advised to make an appropriate assessment of the individual patient and the surrounding environment to decide if an aseptic technique using a sterile dressing pack is required or if a non-touch technique (ANTT) in a clean environment is sufficient.

Further information to support considerations for which technique (clean or sterile) is best practice depending on the environment can be found within the [Sterile Dressing Pack position statement](#), along with details of how all settings can procure sterile dressings packs. For any further information please contact the Medicines Optimisation Care Settings team: stw.carehomeenquiries@nhs.net

Moisture-Associated Skin Damage (MASD) & Barrier Products – Education and Training Launch

Barrier preparations (e.g. sprays, creams & foams) help protect skin from moisture and irritants like urine, sweat and faeces. Used correctly, they prevent Moisture-Associated Skin Damage (MASD) and reduce unnecessary prescribing. As part of the upcoming launch of the Think Twice Order Right campaign, the Care Settings team is developing training and education to support GP Practices, Primary Care Networks and care settings in improving patient care and promoting appropriate prescribing of barrier products in line with the [Shropshire, Telford & Wrekin Woundcare Formulary](#).

Recent audits across both residential and nursing homes have highlighted knowledge gaps in the application of products and the prescribing of formulary items. These findings have enabled us to tailor our training content more effectively.

The key training objectives are to:

- Promote use of the [STW wound care formulary](#)
- Highlight the [Prevention & Management of Moisture-Associated Skin Damage \(MASD\) Pathway](#)
- Reduce medicines waste
- Provide information on correct product use and application

If you or your teams are interested in this training or would like some further advice/support to review the prescribing of barrier products within your care setting or GP Practice, please get in touch.

Exploring access to Controlled Drugs (CDs) for Palliative and End-of-Life Care in UK Care Homes



Many of our care home colleagues have mentioned the problems associated with waste end

of life medicines as well as occasional access issues. Marie Curie and Cambridge University are doing an important piece of work Exploring Access to Controlled Drugs for Palliative and End-of-Life Care in UK Care Homes. They are conducting a short survey study investigating how care home staff access controlled drugs (CDs) such as morphine and midazolam, for palliative and end-of-life care. **They would like to invite UK-based care home staff, including nurses, care assistants, and managers, to take part.** Taking part in the study involves completing a 20-minute anonymous survey. Your responses will contribute to shaping policy discussions and guiding future research aimed at improving timely access to CDs in care homes, thereby enhancing care for those in need. Contribute to the study by following this link: <https://bit.ly/cinch25> Find out more by watching a short video outlining the study: <https://youtu.be/ckCT8CzM7BA> Or contact Emyr Jones, Consultant Pharmacist, Emyr.Jones3@wales.nhs.uk for more information.

Diabetes Management and initiation of Continuous Glucose Monitoring (CGM) in care homes

As part of a Medicines Management project to improve access to Continuous Glucose Monitoring (CGM) devices for care home individuals.

This project aims to:

- Improve the wellbeing and outcomes for people living with diabetes in a care setting.
- Optimise treatment of diabetes to achieve three treatment targets: Blood glucose levels (HbA1c), Blood Pressure (BP) and Cholesterol.

- Improve, and where clinically appropriate, reduce the frequency of insulin administration.
- Reduce the need for traditional fingerprick testing.
- Provide education and training to enable care staff to develop their knowledge and understanding of diabetes management.

Thank you to those who have already kindly completed [the survey](#). This is helping us to gather initial data for the project. However there is still time to complete the survey.

Medication Related Incident Reporting

A big thank you to all care settings/providers that are utilising the Ulysess medication incident reporting form to report in medication related incidents that have resulted in actual harm. The period of January - April 2025 (Q4), saw an increase in reporting with 38 incidents reported in.

We promised to share trends and themes as a result of reporting. Trends & themes for this quarter have been highlighted around:

- Poor discharge from an acute setting, including lack of discharge paperwork, little communication and issues with medicines supply on discharge
- Incorrect medicine dose administered due to recent dose change and documentation including electronic MAR chart records not being updated to reflect medication changes
- Dispensing errors, including mismatching of medication strengths and labels
- Incorrect dose of Warfarin administered due to the most recent information recorded on the INR card not being reflected on the individuals MAR chart/eMAR

From reviewing the incidents reported, it is important to ensure a robust method of communication is in place and followed when medication changes are made.

All incidents reported relating to poor discharge from SATH have been fed back to the Medicines Safety Officer for the trust for further investigation and action/learnings.

All incidents reported relating to community pharmacy and medicines supply have been reported to the national team for review, trend and theme identification and sharing of learning.

Keep Meds Safe in the Heat: Check Your Fridge

The hot weather is a reminder to make sure medicines are stored at the right temperature. Read the full CQC advice on [Storing medicines in fridges](#) and here's a quick reminder of some of the points:

- **Don't store food or biological samples in your medicine fridge**
- **Don't store large amounts of medicines as this can lead to potential freezing**
- **Regularly check dates of the contents and rotate stock**
- **Record the temperature daily - minimum, maximum and current temperatures, using a minimum/maximum thermometer**
- **The thermometer should be reset after each reading – make sure all staff know how to do this**
- **Make sure that staff know what to do when the fridge is outside the recommended temperature range and keep records of any actions taken.**

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