

Medicines Optimisation

Best Practice Guidance for Care Homes – *Bulletin 4*

Crushing or Opening Medication in Care Homes

General Information

- Some people are unable to take their medicines in solid oral dosage forms because they have swallowing difficulties or feeding tubes (e.g., Percutaneous endoscopic gastrostomy (PEG) tube)
- The choice of medication and the administration should be made on an individual basis by their prescriber and where possible in discussion with the patient.
- Consent for medication administration must be obtained prior to administration, even if medication is administered crushed or via feeding tubes

Care Quality Commission (CQC)

- Overall, CQC does not encourage crushing or opening medication BUT acknowledges it is acceptable practice if the following measures are in place:
 - ✓ **The prescriber agrees and documents individual agreed special measures and MUST provide written instruction to the care home.**
 - ✓ **Professional guidance (by prescriber and/or Care Home) is obtained from a pharmacist or the CSU Medicines Optimisation Team on suitability for crushing medication.**

Staff have written advice on appropriate administration (especially important for Enteral Feeding tubes)

General Practitioner (GP)

Opening capsules or crushing tablets is an unlicensed use of the medication. Where possible the prescriber will provide a licensed preparation. If opening/crushing is advised:

- **Verbal** communication from a GP to open or crush medication is **NOT** sufficient.
 - The home **MUST** be provided with written documentation from the GP.
 - ✓ **Add extra instructions to dose on prescription which will then appear on dispensing label and MAR chart.**
- CARE HOME staff MUST document this instruction in individual care plan.**

Crushing or opening medication without the above written instructions can leave the care home open to CQC criticism for 'malpractice'.

Steps to take when Swallowing Difficulties Identified or has an Enteral Feeding tube (e.g., PEG)

- 1) **Request that the** resident has their medication reviewed by the prescriber; some items may be stopped if deemed appropriate. The resident may also be referred to a speech and language therapist (SALT) to determine their ability to swallow.
- 2) **The prescriber** should review the medication and **MAY**:
 - a. **Seek** an alternative licenced formulation e.g., liquid, soluble/dispersible tablets, patches etc.
 - b. **Switch** to a different medication within the same class, of a suitable formulation.
 - c. **Agree** to using a medication outside of licence e.g., opening, crushing, or mixing with water.
 - d. **AS A LAST RESORT** consider using a *special-order* liquid product
- 3) **Ask** the prescriber for written instructions that they have asked you to open or crush the medication by amending the dosage instructions on the prescription.
- 4) **Ensure** staff administering medication to residents with swallowing difficulties or feeding tubes, are adequately trained (see below for obtaining guidance).
- 5) **Make sure** any relevant information goes with the resident if transferred i.e., hospital or elsewhere.
- 6) **Monitor** each resident as some can regain their ability to swallow.
- 7) Use a tablet crusher (available to buy from pharmacies) to crush tablets,
- 8) Wear gloves and a mask if crushing tablets or opening capsules.

Note: not all people with an enteral feeding tube require administration of their medication this way. Sometimes the person may still be able to take medication and additional food by mouth.

ALWAYS SEEK ADVICE

The Individual

- If the resident has capacity to understand, they should be fully involved in the decision process and remain informed about how the administration of their medicine is changing.
- **Remember** a patient has the right to refuse their medication, however ill-advised this may seem to staff caring for them.

Medicine should only be administered in food with the patient's knowledge and consent. Hiding medication in food is considered 'covert administration' and only permitted under certain circumstances

Further Guidance

- If you require further information regarding the process of crushing/opening medication or any of the above, then contact should be made with the CSU medicines optimisation team (or a pharmacist). We can provide you with clear written instructions on how to crush or open each medication and how to administer it.

Please contact:

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Title	Best Practice Guidance – Crushing or opening medication in care homes
Description of policy	To inform healthcare professionals
Scope	Information for Care Homes
Prepared by	Prescribing & Medicines Management Team – JS – update MS
Evidence base / Legislation	Level of Evidence: <i>A. based on national research-based evidence and is considered best evidence</i> B. mix of national and local consensus <i>C. based on local good practice and consensus in the absence of national research-based information.</i>
Dissemination	Is there any reason why any part of this document should not be available on the public website? <input type="checkbox"/> Yes / No <input checked="" type="checkbox"/>
Approved by	Medicines Optimisation Team
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Version Control (To be completed by policy owner)

Version	Date	Author	Status	Comment
0.1	June 2014	Prescribing & Medicines Management Team JS	Draft	Took to STM and some wording amendments made
0.2	8/8/14	Prescribing & Medicines Management Team JS	Draft	PRG further amendments GPs did not want AND letter for care plan in there and would increase workload. Changed “outside of licence” to state swallowing difficulty and feeding tubes. To amend and send round committee for agreement and take to D&T for ratification.
0.3	8/8/14		Draft	Added CARE HOME MUST add to individual care plan.
1.0	Sept 2014		final	Review date Sept 2016
1.1	Sept 2016		Draft	Changed GP to prescriber. Added written advice in CQC section. Added info on the unlicensed use by crushing/ opening
2.0	October 2016	Prescribing and Medicines Management Team MS	Final	Agreed at SMT.
2.1	September 2018	Medicines optimisation Team	Draft	Changed Team name & AGEM logos. Reviewed and minor amendments made
3.0	February 2019	Medicines Optimisation Team	Final	Amendments approved. Agreed by Senior Team
3.1	August 2021	LW Medicine Optimisation Team	Reviewed	Postal address and telephone numbers removed, and email address added.
4.0	September 2021	Medicines Optimisation Senior Team,	Final	Changes agreed and approved at Senior Team meeting Sept 21
4.1	August 2023	Medicines Optimisation Team - LE	Final	Uploaded to new template only

