

Medicines Optimisation

Best Practice Guidance for Care Homes – *Bulletin 8*

Homely Remedies

Homely remedies are medicines that are used in care homes to treat minor ailments in the same way a person would treat themselves in their own home. They are for short-term use only. They are medicines **ONLY** for residents use **not** staff use. They are not prescription medicines and can be bought over the counter in most pharmacies.

If a home wishes to use homely remedies, they must develop their own policy which should include:

- A list of approved homely remedies with clear instructions for use
- A protocol detailing how and when to administer, and situations when they should not be administered (for example paracetamol should not be given to residents already taking a medication containing paracetamol)
- Storage
- Record keeping
- How long to treat before seeking further advice from a GP

It is good practice to discuss homely remedies with the surgery before introducing them to the home. It is recommended that each resident should have a document in their care plan signed by a GP, PCN Pharmacist or care home Pharmacist containing a list of approved homely remedies and explaining situations when these should be administered. This document should be reviewed regularly. Homely remedies should only be given for a limited period of up to 48 hours or the period stated in your medicine policy, 24 hours if symptoms of diarrhoea are present and fluid intake is poor before contacting a GP for further advice, although medication policies may vary. **Patient returns should not be used as homely remedies.** CQC can request to see the receipts for homely remedy purchases.

If a home does not stock homely remedies staff may feel the only course of action is to call the GP or out of hours service, this could be for something like a headache. By having homely remedies in the home, an immediate need can be met, and the GP is only called if symptoms persist². This saves GP and out of hours service time and reduces waste medication.

Please contact the NW ICB Medicines Optimisation Team for advice or if you would like examples of policies that you can adapt for your own use nwicb.medsqueries@nhs.net

Residents own medication.

There may be occasions when a resident wishes to purchase their own supply of medication. Please see [Best Practice Bulletin 31 Self-Care³](#) for guidance on residents own medication.

Suggested Homely Remedies for use in the Care Home

Product	Indication	Adult dose	Maximum daily dose	Additional information
Senna 7.5mg/5ml syrup	For the relief of constipation	5 – 10 mL (usually) at night	10 mL	May colour urine yellow/red brown. Do not use if any suspicion of obstruction
Senna 7.5mg tablets	For the relief of constipation	1-2 tablets (usually) at night	2 tablets	
Paracetamol 500mg tablets (also caplets & capsules)	For the relief of mild to moderate pain or raised temperature	<p>≥50kg: 2 tablets every 4 to 6 hours, up to a maximum of 8 in 24 hours.</p> <p><50kg: 1 tablet every 4 to 6 hours, up to a maximum of 4 in 24 hours.</p>	<p>≥50kg: 8 tablets in divided doses</p> <p><50kg: 4 tablets in divided doses</p>	Do NOT give with other paracetamol containing products (e.g., co-dydramol, co-codamol, co-proxamol). Check the contents of branded medicines e.g., Lemsip® for paracetamol contents. Not to be given where there is history of liver damage or alcohol abuse.
Paracetamol 250mg/5mL oral suspension	For the relief of mild to moderate pain or raised temperature	<p>≥50kg: 20mL every 4 to 6 hours, up to a maximum of 80mL in 24 hours.</p> <p><50kg: 10mL every 4 to 6 hours, up to a maximum of 40mL in 24 hours.</p>	<p>≥50kg: 80mL in divided doses</p> <p><50kg: 40mL in divided doses</p>	
Gaviscon Advance/ Acidex Advance	For the relief of heartburn or indigestion.	5 – 10 mL after meals and at bedtime	40 mL in divided doses	Sodium and potassium content should be taken into consideration if a highly restricted salt diet is recommended.
Simple linctus sugar free	For relief of dry irritating cough.	5 – 10 mL up to 4 times a day (suitable for diabetics as sugar free).	40ml in divided doses	Not suitable for productive/chesty coughs.
Lactulose oral solution	For the relief of constipation.	15 mL TWICE daily <i>(Needs 24-48hrs of regular dosing to have desired effect)</i>	30 mL	Not to be given to lactose intolerant patients. Do not use if any suspicion of obstruction. Encourage fluids and fruit/vegetables to aid constipation.
Oral rehydration sachets e.g., Dioralyte®	For treatment of fluid and electrolyte loss associated with acute diarrhoea.	ONE or TWO reconstituted sachet(s) dissolved in 200mL drinking water after each loose motion.	20 - 40 mL/kg	<p>The solution may be refrigerated for up to 24 hours after which it should be discarded.</p> <p>Diarrhoea for over 24 hours warrants GP referral.</p> <p>Refer if dehydration apparent e.g., dry</p>

For variable doses make sure and document the exact amount given, i.e. whether one or two tablets has been administered.

Administration and Record Keeping

Homely remedies should be stored in the drugs room in a separate locked container away from prescribed medication. Only trained staff should be involved in administering homely remedies. It is recommended that each resident should have a signed protocol in their care plan, with a copy kept with the MAR chart, explaining the conditions where homely remedy administration is appropriate. Staff must always make a full assessment of the resident before giving these medicines and if they are considered necessary. **Administration should be recorded on the MAR chart in line with the home's medicines policy, this could be the front or back of the MAR chart along with a reason for giving and the outcome e.g. knee pain resolved by paracetamol.**

It is also good practice to have a separate record book for homely remedies, which should be stored with the box of medicines in the drug room. Ensure that any homely remedies which are purchased by the home are recorded in the book as well as **all** administrations. Ideally each medicine should be on a separate page.

Homely remedies need to be included in the regular medication audit to ensure that quantities are correct, the medicines are still in date and adequate stock is held. Once opened all liquids should have the date opened recorded on the container, some items may have a shorter shelf-life once opened, check manufacture's information. Expired homely remedies should be entered in both the homely remedy record book and the returns book and disposed of according to your returns policy. Safe management of homely remedies is the responsibility of the care home.

References

- 1 Care Homes – Homely Remedies' – PrescQIPP Bulletin 72 <https://www.prescqipp.info/our-resources/bulletins/bulletin-72-care-homes-homely-remedies/>
- 2 Homely Remedies Guide - [HomelyRemediesGuide_PPMO_CareHomes_01062024.pdf \(nwknowledgenow.nhs.uk\)](#)
- 3 Best Practice Guide 31 Self-Care [BestPracticeSelfCare_Carehomes.pdf \(nwknowledgenow.nhs.uk\)](#)

Title	Best Practice Guidance – Home;y Remedies
Description of policy	To inform healthcare professionals
Scope	Information for Care Homes
Prepared by	Medicines Optimisation Team
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 June 2018
Authorised by	Medicines Optimisation Team June 2018
Review date and by whom	Medicines Optimisation Team
Date of issue	June 2018

Version Control (To be completed by policy owner)

Version	Date	Author	Status	Comment
0.1	Dec 2014	Prescribing & Medicines Management Team JC	Draft	Discussed at SMT and some amendments suggested
0.2	Jan 2015	Prescribing & Medicines Management Team JC/ SW	draft	Clarification of wording. "Prescribing Team" amended to NEL CSU Anglia Prescribing Team & contact details added. Amended table: ml instead of mls
1.0	Jan 2015	Prescribing & Medicines Management Team JC/ SW	final	
2.0	Jan 2016	Prescribing & Medicines Management Team JC/ SW		Checked for accuracy/ content.
2.1	April 2018	Prescribing & Medicines Management Team SPC	Draft	Reviewed and updated. AGEM logos added. References checked and added. Additional information added to Guide.
3.0	June 2018	Prescribing & Medicines Management Team	Final	Approved by Senior Team June 18
3.1	Nov 20	Medicines Optimisation Team - LW	Review	Reviewed minor updates made
4.0	Jun 21	Medicines Optimisation Team	Final	Approved by Senior Team May 21
4.1	Aug 2023	Medicine Optimisation Team LE	Final	Uploaded to new template only