

Best Practice Guidance Self-Care & Over the Counter Products

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Working together for a healthier future



Learning Objectives

- What is self-care?
- Why are we talking about self-care?
- Some conditions you and your residents can self-manage
- Vitamin D
- Self-care protocol
- How to obtain, store and keep correct records
- Exemptions
- Other types of self-care









Over the counter (OTC) products may be obtained by residents and their carers via two methods: either through a homely remedies or self-care protocol.

In this webinar we will look at the use of Self-Care Protocols to obtain OTC products.

Residents are also able to obtain OTC items a homely remedy to treat certain conditions for up to 48 hours from a supply of OTC products purchased by the home. This was covered in a previous webinar titled homely remedies, a recording of this is on the HCPA website for those that missed it.



Background

The Care Quality Commission states that as a matter of equality care home residents should have access to OTC products to enable them to self-care and manage minor ailments and that care homes should have systems in place to allow this to happen in a **timely manner**.

Allowing residents to purchases OTC products as part of self-care ensures you meet these duties.





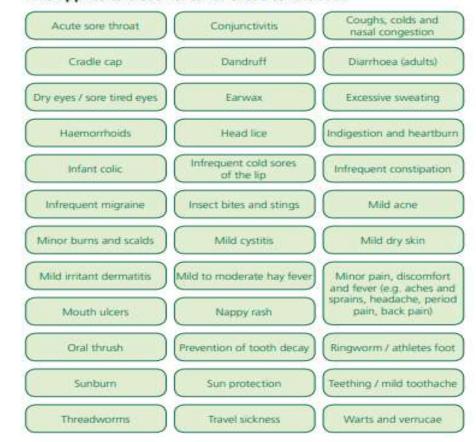


Background

In March 2018 NHS England produced guidance advising that OTC products should not routinely be prescribed for **35 conditions** that are either considered self-care conditions or a minor ailment.

GPs will no longer prescribe items for these conditions.

Your GP, nurse or pharmacist will not generally give you a prescription for certain medicines that are available to buy in a pharmacy or supermarket, even if you qualify for free prescriptions. This applies to treatments for these conditions:





What is Self-care

Self-care is a term used to include all the actions taken by people to recognise, treat and manage their own health.

They may do this independently or in partnership with a care provider. This includes both pharmacological (e.g. using medication) and nonpharmacological (e.g. having good sleep hygiene) actions.





Let's look at some examples....





Ear Wax

A build-up of ear wax can be treated by products designed to soften the ear wax.

Example: Put 2 or 3 drops of ordinary olive oil down the ear 2 or 3 times a day for 2-3 weeks. This softens the wax so that it then runs out of its own accord without harming the ear.

Do not try to clean the ear canal with cotton wool buds.

Otitis media (inflammation of the middle ear) is characterised by severe ear pain or Otitis Externa (inflammation of the external ear canal or surface of the ear) can occur and usually resolves on its own but if persists may require a GP assessment.





Hay-fever





Symptoms will typically consist of seasonal sneezing, nasal itching, nasal blockage, watery nasal discharge and watery eyes.

If occurring all year-round, consider if it's an allergy to something e.g. Pets.

Treatment included: Antihistamine tablets or liquids, Steroid nasal sprays, Sodium cromoglicate eye drops.

Treatment should begin two to three weeks before the hayfever season commences and continue throughout the season.



Dandruff





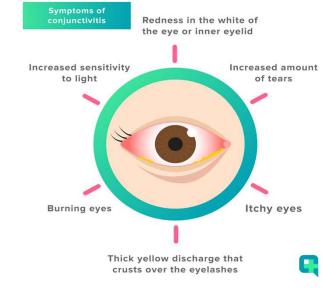


Conjunctivitis

Conjunctivitis is inflammation of the conjunctiva, the thin protective membrane which covers the white of the eye and inside surface of the eyelids caused by bacteria or virus. *Symptoms include irritation, itching, a sensation of grittiness in the eye and watering or discharge.*

Treatment: Chloramphenicol eye drops and eye ointment are available without prescription and contain an antibiotic.

Minimum of five days even if symptoms improve.







Remember the drops are a fridge item!

Quiz







Vitamin D

Probiotics, vitamins and minerals will not be prescribed by GPs.



The body creates most vitamin D from modest exposure to direct UVB sunlight.

Vitamin D is essential for healthy bones.

A variety of oral vitamin D supplements are available to buy OTC at most pharmacies, health food shops and supermarkets (includes preparations containing 400IU, 800IU, 1000IU, 2000IU & 4000IU).





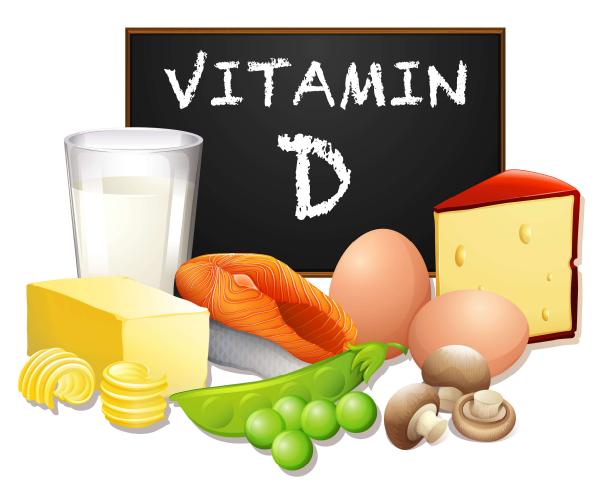
Our local position on this:

The Government and the Care Quality Commission (CQC) both advise that care home providers are expected to support people's full nutritional needs, which includes supplementation with vitamin D throughout the year as recommended by Public Health England.

Care Homes are required to purchase and provide suitable vitamin D supplements (these may include tablets, liquid or oral sprays) for residents.

Any requests to GP practices to prescribe 10 micrograms/400 units vitamin D supplements for care home residents should be declined and care homes should be directed to purchase products themselves.









Quiz

Which of the following will not help your resident to get Vitamin D:

- A. Getting outside where possible
- **B.** A breakfast of cereal and eggs
- C. Purchasing folic acid to take 5mg daily

D. Purchasing vitamin D to take 800

units daily





Who authorises?

Follow your medicines policy which should advise on how to purchase OTC products for self-care appropriately.

Allowing residents to purchase OTC products via the selfcare protocol does not require a prescription from the resident's General Practitioner (GP) but may require advice from healthcare professionals (For example: GP, Community or GP Clinical Pharmacist, Pharmacy Technician, Nurse, Paramedic, or a Physiotherapist) before administering to the resident.





Who authorises?



Some products are personal care items and will not need a HCP to recommend it before using.

Sometimes the OTC item is recommended as part of the Community Pharmacist Consultation Service (CPCS) - The surgery or 111 may refer minor ailment queries into the Community Pharmacist Consultation Service (CPCS).

During this consultation, a community pharmacist will have a same day consultation with the resident and carers and may advise the purchase of a specific OTC product.



Obtaining

Self-care OTC products can be purchased by a resident or their family if required for their personal use from any community pharmacy, supermarket or other retail store. Carers can support the resident to make this purchase.

It is important to initially check if the OTC product is available as a homely remedy in which case the resident would not be required to purchase the OTC as they can be treated with the homely remedy for up to 48 hours.

For new residents it is important to check with them if they are already purchasing an OTC as part of their self-care you should support them to continue to do so whilst living at the care home.





Storage



All self-care OTC products should be labelled 'self-care purchased item' with the resident's full name.

All self-care OTC products must be stored in their original packaging.

All self-care OTC products should be stored securely in a lockable cupboard or trolley and kept separate to the resident's prescribed medication. This also applies to residents who selfadminister their medications.

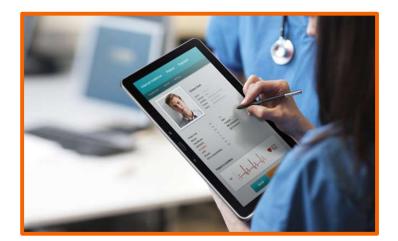


FIRST



Record Keeping

- If a healthcare professional has advised on the purchase of a self-care OTC product for a resident this must be recorded in writing in the resident's care plan by carers.
- If the recommendation was made via email this can be saved/printed for reference if required.
- The medicine should be recorded as for any other medication, by adding to the Medicines Administration Record (MAR), with an accuracy check made by a second, suitably trained member of staff. The entry on the MAR chart must be clearly marked 'Self-Care/OTC'.
- Any expired stock should be disposed of in line with the care home's policy on the disposal of medication. Records of medication disposal should be kept as per policy.







Review

The appropriateness of using a self care OTC product for each resident should be reviewed as a **minimum annually.**

It may be appropriate to review sooner if there has been changes in circumstances.

Residents and carers should have received advice on how long the OTC product is to be used for prior to purchasing and when a review is required.

If a resident's symptoms appear to worsen after using a homely remedy or selfcare product, carers should seek advice from a healthcare professional immediately.



Exemptions

Patients prescribed an OTC treatment for a long-term condition.

Treatment for complex patients.

Circumstances where the prescriber believes that in their clinical judgement, exceptional circumstances exist that warrant deviation from the recommendation to self-care.

Safeguarding concerns e.g. If resident is unable to fund the purchase of a self-care product.





Things to consider

The medicines are not for general use in the home and must remain resident specific.

Good Practice : record of the effects/outcome of the medicine should be maintained and if symptoms worsen, the GP or other relevant HCP should be informed sooner than the initial recommended duration and advice sough.

Patients should be encouraged to look (or ask) for the lowest cost version of medicine that is recommended for self-care, which can often be a generic or non-branded product.

Residents who have been risk assessed as able to self-medicate should also be supported to self-medicate.



Homely Remedy vs Self-Care Comparison table

	Homely Remedies	Products for Self-care
Obtaining	Purchased by care home.	Purchased by a resident or their carer/family, on their behalf.
Duration of Use	Administered at the discretion of a carer to a resident for up to 48 Hours,	Determined by the condition being treated. May be used short or long term.
Medication Choice	Limited list of medications usually for a smaller number of conditions (e.g. pain, constipation, indigestion/heartburn etc).	More extensive list of medications, covering a larger number of conditions.
Storage	Locked away from other medicines, clearly annotated as homely remedies.	Locked away from other medicines, clearly annotated as a self-care product with the resident's full name.
Record Keeping	Administration recorded on the MAR/eMAR chart as 'homely-remedy' for duration of treatment.	Administration recorded on the MAR/eMAR chart as 'self-care' for duration of treatment. Note: This is not required for some personal care products.





Do not confuse medicines for self-care with Homely remedies. Self-care medicines are purchased for an individual resident for their use only, whereas Homely Remedies are purchased for administration to any resident where appropriate in accordance with the Homely Remedy Protocol and for a limited period of time (usually 48 hours).





Oral Hygiene

Care staff knowledge and skills

Care staff need to know how and when to reassess the oral health of a resident, and how to support residents with their daily mouth care to:



Brush their natural teeth at least twice a day with fluoride toothpaste.



Use their choice of cleaning products for dentures.



Clean their dentures (brushing, removing food debris, removing dentures overnight).



Use their choice of toothbrush, either manual or electric/ battery powered, and mouth care products.



Staying well over winter

- Vaccinations
- Remember antibiotics don't treat viral infections
- Stay warm, but encourage movement and room ventilation
- Lots of OTC products available to manage colds and sore throat.
- Encourage residents to socialise with others.





Taking care of yourself



- Its ok to feel overwhelmed.
- Make time for regular exercise, which has been shown to reduce stress and improve mental health.
- Practice mindfulness to reduce stress; try yoga, write your thoughts, do breathing exercises etc.
- Stay hydrated throughout the day.
- Remember to take breaks when needed, and don't be afraid to ask for help if you need it.



True or False

1. You cannot buy a self-care product if it already prescribed for a longterm condition.

2. An antibiotic can help treat a viral infection.

3. It is cheaper to buy the non-branded version of an over the counter product.

4. Items bought as part of self-care can only be used for up to 48 hours.







Any Questions?



