

Homely remedies example policy

Care home name:	
Signature of care home manager:	
Date policy authorised:	
Date of review:	

Introduction

A homely remedy is a product that can be purchased (e.g. from a pharmacy or supermarket) for the relief of a minor, self-limiting ailment without the need for a prescription. Homely remedies should be made available in care homes to allow access to medicines that would commonly be available in any household. [NICE guidance \(SC1\) Managing medicines in care homes](#) states that care homes may stock a small range of homely remedies for the treatment of minor ailments.

Discussion and agreement on the consent for use of homely remedies in the care home should be held with residents and their families, in addition it is good practice have a discussion with the resident's GP or pharmacist, and inform the GP practice of the care home's homely remedies policy.

Only items purchased by the home may be used as a homely remedy. The homely remedy must be kept in the original container with the patient information leaflet. Any resident who brings their own homely remedy in to the care home should have the medicine stored, recorded, and administered as per the guidance in this policy; however, the medicine belongs to the resident and is for their use only.

Homely remedies

The following list of medicines are recommended as homely remedies for appropriate use in response to symptoms of a minor nature.

Medicine	Indication for use as a homely remedy
Paracetamol	Mild to moderate pain and/or fever
Senna	Constipation
Rehydration sachets	Fluid and electrolyte loss associated with acute diarrhoea
Gaviscon Advance [®] / Peptac [®]	Dyspepsia
Simple Linctus	Dry / irritating cough

Only the conditions included in this policy may be treated with the homely remedies listed, at the specified dose. The maximum duration of treatment should not exceed that stated for each particular medicine within the policy, without obtaining medical advice. If symptoms persist, or give cause for concern, medical advice must be obtained as this may indicate a more serious underlying condition.

Administration

All staff must recognise and act within the parameters of safe practice. The care home manager is responsible for ensuring all staff involved in the administration of medicines receive the appropriate on-going training and support to maintain and update their knowledge on the use and administration of homely remedies.

Administration of homely remedies must only be undertaken by suitably qualified staff who have signed the [authorisation to administer homely remedies](#) form, stating that they have read and understood the homely remedy policy.

The care home should inform the GP practice(s) that they will be using homely remedies for the short-term treatment of minor ailments, and provide a copy of the policy for good practice. Care home staff should ensure that they obtain the resident's consent before administering a homely remedy and confirm that the resident has no allergies to the remedy. If unable to obtain consent, or if in doubt, the resident's GP should be contacted. Homely remedies must not be labelled for individuals if they are to be administered to several residents. The administration of the homely remedies listed in this policy are for adults only.

Monitoring

The resident should be checked after taking a homely remedy to determine if the remedy has had the desired effect. If the resident's condition does not respond, or worsens after the administration of the homely remedy, the GP must be contacted for advice.

Recording of homely remedies

It is essential that a record is made of all medicines given to residents, to ensure accurate records are maintained, and to avoid possible overdosing. Administration of homely remedies must be recorded on the resident's medication administration record (MAR) chart. The medicine must be clearly marked on the MAR chart as a homely remedy, with full directions and the dose given. The reason for administration must also be recorded on the MAR chart.

Storage of homely remedies

A locked medicine cupboard or trolley is required for the storage of all homely remedies. They should be separated from all prescribed medicines and clearly marked as homely remedies.

Stock checking

When a dose of a homely remedy is given to a resident it must be logged out on the [homely remedies stock record](#), and a running balance maintained so a clear audit trail of these items can be maintained. Stock should be counted every week to maintain an audit trail of usage. A separate record should be held for each individual homely remedy stocked by the care home.

Expiry dates

The expiry dates of all homely remedies stocked must be checked regularly (at least every three months), and before every administration.

Paracetamol

Medicines information	
Name & form(s) of medicine	Paracetamol 500 mg tablets Paracetamol 500 mg soluble tablets Paracetamol 250 mg/5 ml sugar free suspension
Indication	Relief of mild to moderate pain and/or fever
Route	Oral
Dose and Frequency according to weight	Over 50kg Take ONE or TWO tablets (500 mg – 1g) OR 10-20 ml up to four times a day when required
	Between 40-49kg Take ONE and a HALF tablets (750 mg) OR 15 ml up to four times daily when required (max 3g in 24 hours)
	Under 40kg Take ONE tablet (500mg) OR 10 ml up to four times a day when required
Required interval between doses	Dose not to be repeated within 4 hours of the last dose
Maximum duration of treatment as a homely remedy	Up to 48 hours, then seek advice
Do not give in these circumstances	If the resident: <ul style="list-style-type: none"> • is already receiving prescribed paracetamol or other medicines containing paracetamol (e.g. co-codamol, co-dydramol, Solpadol[®], Zapain[®], Remedeine[®] etc.). • is intolerant to paracetamol. • has alcohol dependence. • has liver impairment/disease or is having any investigation of the liver. • has severe kidney impairment. • has hypersensitivity to any components of the preparation.
Warnings / adverse reactions (see product information for full details)	Rashes, blood disorders, liver damage following overdose
Action if resident excluded	Refer to GP / OOH

Senna

Medicines information	
Name & form(s) of medicine	Senna 7.5 mg tablets Senna 7.5 mg/5 ml solution
Indication	Relief of constipation
Route	Oral
Dose	One to two 7.5 mg tablets or 5 ml to 10 ml of 7.5 mg/5 ml solution
Frequency	Once a day, at night
Maximum dose in 24 hours	15 mg
Maximum duration of treatment as a homely remedy	Up to 48 hours, then seek advice
Do not give in these circumstances	If the resident: <ul style="list-style-type: none"> • has hypersensitivity to any of the ingredients • has abdominal pain • is feeling nauseous or is vomiting
Warnings / adverse reactions (see product information for full details)	May colour urine May cause temporary mild griping pain
Action if resident excluded	Refer to GP

Rehydration sachets

Medicines Information	
Name & form(s) of medicine	Oral rehydration sachets
Indication	For treatment of fluid and electrolyte loss associated with acute diarrhoea
Route	Oral
Dose	One sachet after each loose motion (reconstituted according to manufacturer's instructions)
Frequency	As required
Maximum dose in 24 hours	Five sachets
Maximum duration of treatment as a homely remedy	12 hours then seek and document advice from GP
Do not give in these circumstances	<p>If the resident has:</p> <ul style="list-style-type: none"> • diarrhoea that has lasted for more than 24 hours • hypersensitivity to any of the ingredients • severe dehydration • intestinal obstruction • liver or kidney disease • antibiotic-associated diarrhoea • bloody diarrhoea • low potassium or sodium diet • diabetes <p>Where more than one resident is affected</p>
Warnings / adverse reactions (see product information for full details)	<p>Oral rehydration sachets must only be reconstituted in water. Follow the manufacturer's guidance when preparing the sachets.</p> <p>Refer to the patient information leaflet.</p> <p>If vomiting is present then the solution should be given in small frequent sips.</p> <p>Ensure appropriate infection control procedures are followed to minimise risk of an infection spreading.</p>
Action if resident excluded	Refer to GP

Gaviscon® / Peptac®

Medicines Information	
Name & form(s) of medicine	Gaviscon® suspension, Peptac® suspension
Indication	Dyspepsia
Route	Oral
Dose	10 ml to 20 ml after meals and at bedtime
Frequency	As needed
Maximum dose in 24 hours	40 ml in divided doses
Maximum duration of treatment as a homely remedy	48 Hours
Do not give in these circumstances	<p>If the resident:</p> <ul style="list-style-type: none"> • Has taken another medicine within the last two hours – wait two hours before administering dose. • Has heart failure • Is on a low salt diet
Warnings / adverse reactions (see product information for full details)	May affect absorption of enteric coated tablets
Action if resident excluded	Refer to GP

Simple linctus

Medicines Information	
Name & form/s of medicine	Simple linctus (sugar free)
Indication	For a dry / irritating cough
Route	Oral
Dose	5 ml to 10 ml
Frequency	Up to four times a day
Maximum dose in 24 hours	40 ml
Maximum duration of treatment as a homely remedy	48 hours
Do not give in these circumstances	If the resident has a productive cough
Warnings / adverse reactions (see product information for full details)	N/A
Action if resident excluded	Refer to GP