

## AIT Top Tips - Reducing Waste Medication

Much of the medication waste in care homes is avoidable due to it being ordered or prescribed but never used. All staff involved in the management of medication have a responsibility to ensure medication resources are allocated responsibly.

Repeat medication lists should reflect current medication use. Staff should highlight to GP/dispensing pharmacy;

- discontinued or continually unused medication, this should be removed from list to prevent re-ordering or administration in error,
- any quantities that appear excessive (especially PRN medication) to be reduced appropriately,
- any quantities that are insufficient for the month to be increased appropriately this will reduce the need for mid-cycle ordering, and
- any medication that is continually refused - discuss with prescriber before re-ordering.

Ensure medication is regularly reviewed with the prescriber.

Before requesting prescriptions for the next cycle/month, check current stock levels of medication, especially for items not supplied in individually packed MDS such as PRN medication or items that can be safely retained for use in following month(s) e.g. Topical preparation (creams/ointments), sachets, liquid medications, inhalers, insulin, GTN spray.

Ensure opening date/expiry date is written on ALL topical & liquid preparations, preferably in indelible ink.

Do not dispose of unused medication at the end of each month unless the item has been discontinued or has reached its expiry date.

**Remember: Medication once supplied cannot be reused even if returned unused, so only order what is needed.**