

## Homely Remedies Guidance



<b>TARGET AUDIENCE</b>	Care home staff, Primary care staff providing care to patients in care, nursing or residential home settings
<b>PATIENT GROUP</b>	Patients living in care, nursing or residential homes

### Clinical Guidelines Summary

- A homely remedy is a non-prescription product stocked by the care home for the immediate relief of a minor or self-limiting ailment.
- The information provided in these guidance notes suggests best practice; however, each care home organisation assumes sole responsibility for the content and implementation of a homely remedy policy within their own care setting and in line with their existing company policies.
- Timely treatment for such minor ailments is a right for someone living in a care home, whether they manage their own medicines or are cared for by the care home service.

## Homely Remedies Guidance

### Introduction

A “homely remedy” is a non-prescription medicine used to treat minor ailments, such as mild pain, constipation, or indigestion. Homely remedies medicines can be purchased and held as communal stock by the care home for use by any resident who needs it without the need for a prescription to help manage minor, self-limiting ailments.

The benefits include-

- Immediate access to treatment for the resident at the onset of a minor ailment, removing the need to wait on review by a prescriber and for a prescription to be prescribed and dispensed.
- The nursing/caring staff is saved the time of contacting the GP and organising prescription collection and dispensing of treatments for minor ailments.
- Demand on prescriber time is reduced
- Reduces waste of prescribed medications for short term conditions.

It is expected that each care home for adults and older people must have a process in place that ensures residents can have minor ailments treated promptly when needed. However, each care home organisation assumes sole responsibility for the content and implementation of a Homely Remedy Policy within their own care setting in line with their existing company policies. To allow access to these medicines, the GP should approve the list of homely remedies and authorise homely remedy use within the care home by completing an agreement form (see appendix 1).

### Homely Remedy Policy

Care Inspectorate advise that any homely remedy policy should consider:

- Which medicines may be offered and for which symptoms
- The amount of the medicine that should be given as well as how often
- The maximum amount of the medicine that be given as well as how often
- The maximum amount of the medicine that should be taken each day
- Where to record that the medicine has been given
- How long the medicine should be given before the GP is contacted
- Which residents should not be given certain medicines-a relevant healthcare professional (doctor, pharmacist or nurse) should be able to offer advice on this

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## Obtaining Homely Remedies

- Homely remedies can be purchased from any community pharmacy or supermarket by the care home, usually from the community pharmacy that regularly dispenses to the home.
- The purchase should be recorded as part of a running balance of stock (see appendix 2).
- Re-using any other medication either prescribed or non-prescribed as a homely remedy (for example by removing a medication dispensing label for a resident no longer at the home) is inappropriate.

## Storage

All homely remedies must be stored in their original packaging and should be kept in a lockable drawer or cupboard, separate from prescribed medicines and clearly marked as homely remedies.

## Administration of Homely Remedies

Administration of homely remedies must only be undertaken by a trained nurse or carer who has received appropriate medication training as per their company standards. Only stock purchased by the care home under the 'Homely Remedies Policy' may be used and only for the ailments listed within the policy. Homely remedies can then be administered to residents who meet the following criteria:

- The Home has a signed agreement from the GP/prescriber to approve the use of homely remedies.
- The Resident's condition is minor and self-limiting.
- The Resident is not already taking another medicine that may interact with or contraindicate the homely remedy.
- The Resident is not allergic to the homely remedy.
- The Resident has not received the homely remedy on a regular basis, i.e., for more than 2 days.

Homely remedies can be administered up to 48 hours or the agreed period stated in the local medicines policy. If symptoms persist for longer than 48 hours (or the agreed period in the medicines policy – but never longer than 72 hours), the resident will require medical attention and the resident should be referred to their GP, ANP or GP Clinical Pharmacist for assessment. If a homely remedy is needed regularly for a resident the GP, ANP or GP Clinical Pharmacist should be informed.

**If there is ANY doubt as to the suitability of using a homely remedy the pharmacist, GP or ANP should always be consulted.**

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### Record Keeping

It is essential that all medicines administered to residents are recorded to maintain accurate records and to reduce associated risks. All administered doses must be recorded in the Medicines Administration Record (MAR chart) and a reason for administration of homely remedies should be noted on the appropriate resident's care plan. It is also good practice to record this information in the homely remedies stock sheet (appendix 2). A running balance must be kept at all times.

Stock of homely remedies should be counted every month to maintain an audit trail of usage and a copy of the purchase receipts should be kept.

Care home staff who administer homely remedy medicines to residents should be **named** in the homely remedies policy. They should sign to confirm they have the skills to administer the homely remedy and acknowledge that they will be accountable for their actions.

### Expiry Dates

Expiry dates of all homely remedy stock should be checked every month. Guidance on the expiry of each item will be noted on the manufacturer's label on the packaging or on the patient information leaflet provided.

It is recommended that when administering homely remedies care/nursing staff should use their professional judgement and if they suspect changes in colour/consistency/smell then the item should not be used and the stock should be replaced.

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## References/Evidence

Care Inspectorate [Homely remedies in care homes: a practice note | Care Inspectorate Hub](#)

NHS Lanarkshire Paracetamol Dose Advise- Adult [paracetamol-dose-advice-guideline-0125-final.pdf](#)

NICE Guidance [Managing medicines in care homes](#)

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## Appendices

### 1. Governance information for Guidance document

<b>Lead Author(s):</b>	Claire Osprey
<b>Endorsing Body:</b>	Care Home Governance & Guidance Group
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<b>Distribution</b>	

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## Homely Remedies Guidance

CHANGE RECORD			
Date	Lead Author	Change	Version No.
2016		<i>e.g. Review, revise and update of policy in line with contemporary professional structures and practice</i>	1
Oct 2019	Iain Hathorn		2
Feb 2026	Claire Osprey	<p>Review, revise and update of guideline in line with contemporary professional structures and practice.</p> <p>Updated paracetamol dose guidance.</p> <p>Removed request for individualised agreement forms for all residents.</p> <p>Addition in Record Keeping from NICE guidance to name the care home staff administering homely remedies in the care home's policy.</p>	3
		.	4
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## Homely Remedies Guidance

### Appendix 1-Homely Remedy Agreement Form

Care Home Name:	
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I agree that a suitably trained senior person on duty may administer the medication I have authorised in this form for the indications stated, at the dose stated.

**This agreement does not remove the requirement that staff involved in the administration of homely remedies must ensure that the medicine to be administered is suitable for the resident's particular circumstances at the time of administration.**

Indication	Drug	Dose	Cautions /Contraindications	GP agreement YES/NO
Heartburn /Indigestion	Peptac Liquid	10ml up to four times daily after meals and at bedtime	Sodium and potassium content should be taken into consideration if a highly restricted salt diet is recommended.	
Mild to moderate pain or raised temperature	Paracetamol 500mg tablets	<40kg 500mg four times daily 41kg-49kg 1g three times daily >50kg 1g four times daily <b>Maximum of 8 tablets in 24 hours.</b>	Do not administer with any other paracetamol containing products. If weight <50kg dose should be adjusted to 1 tablet 4 times daily.	
	Paracetamol 250mg/5ml SF suspension	<40kg 500mg (10ml) four times daily 41kg-49kg 1g (20ml) three times daily >50kg 1g (20ml) four times daily	Do not administer with any other paracetamol containing products.	
Constipation	Senna 7.5mg tablets	1-2 tablets (usually) at night.	Excessive use may cause diarrhoea.	
	Senna 7.5mg/5ml SF Oral solution	7.5mg-15mg (5-10mls) (usually) at night.		

Care Home Mangers Signature:		GP Signature:	
Date:		Date:	

**Homely Remedy should not be used for more than 48 hours unless approved by GP/prescriber.**

**Policy due for review one year from date of signatures or sooner if resident's circumstances change.**

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## Homely Remedies Guidance

### Appendix 2- Homely Remedy Audit Sheet

Name and strength of Homely Remedy: <i>Please use one sheet per medicine.</i>	
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Date Obtained	Quantity Obtained	Date and Time Administered to resident	Name of Resident	Reason Given	Dose Administered	Administered by	Balance

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