Using Body Maps

ABUHB Pharmacy Governance Team

22.9.22

Introduction

Welcome to this session on how to accurately record the application of emollients and barrier creams.

To make this presentation easier to follow I will only discuss emollients but the same applies to barrier creams and other topicals

Emollients could be seen as just moisturisers and so not as important as blood pressure or pain relief medication but not applying emollients can lead to skin being dehydrated and therefore more susceptible to breaking down causing pressure ulcers etc

Recording applications of emollients is evidence that it is being used appropriately so it is important that the body map accurately reflects when and where they are being applied. This allows any non administrations to be identified and actions to remedy this to be taken

Signposting

All topical applications should be printed on a residents MAR chart. This ensures that it can be ordered for the next cycle and allows the staff member administering medication to have a complete picture of the residents medication

You can divide topicals into two, those to be applied by a qualified staff member and those that can be applied by HCW's. Topicals applied by qualified staff can be recorded on the MAR chart while those topicals applied by HCW's should record their use on a body map.

When a body map is used, the topical entry on MAR charts should signpost to the body map by writing on the MAR ' please see body map' so that it is clear application is recorded elsewhere.

Who should apply what

The nurse or clinical lead will decide which topicals can be applied by a qualified staff member or by a HCW

As a rule of thumb if the topical has a POM ingredient such as an antibiotic or steroid then a qualified staff member must apply it

If it is an emollient, barrier cream or non medicated topical a HCW can administer it (using a body map)

Slightly off message, you should signpost thickeners from the MAR chart to a fluid chart and write on the fluid chart what level of thickness is required, e.g. level 2, consistency of syrup

This is the latest body map the ABUHB pharmacy governance team are recommending.

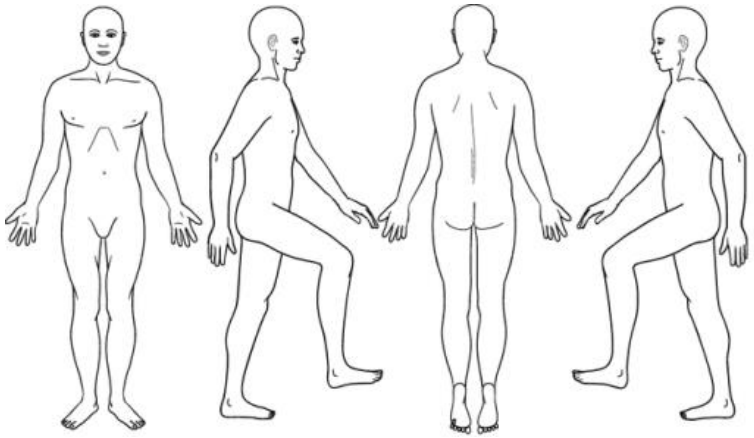
You may not be using this particular chart but the principles are the same regardless of the chart you use and if at present you don’t use one it is strongly recommended that you do start

Topical Medicines Application Record

GIG CYMRU NHS WALES | Bwrdd Iechyd Prifysgol Aneurin Bevan University Health Board

Resident Name		Date of Birth		Room Number	
GP Practice		Allergies			

Topical Preparation		Frequency		Completed By	
Site of Application		How to Apply		Check By	
Storage		Date Opened		Expiry Date	



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Naming the chart

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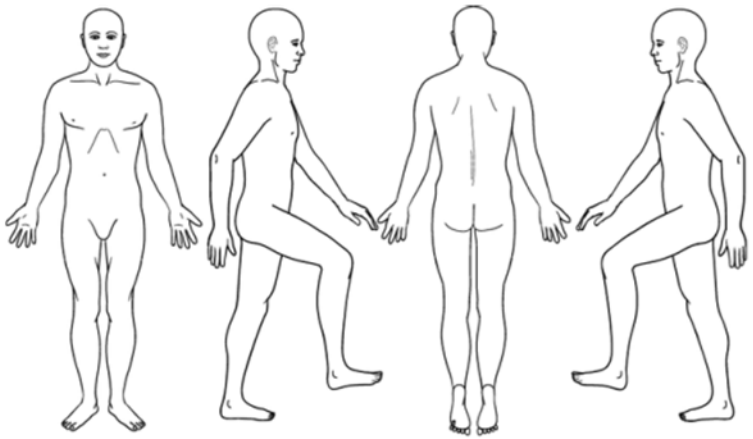

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Topical Medicines Application Record

GIG CYMRU NHS WALES | Bwrdd Iechyd Prifysgol Aneurin Bevan University Health Board

Resident Name	John Smith	**Date of Birth**	12.12 42	**Room Number**	24
GP Practice	The surgery	**Allergies**	NKDA		

The first thing you have to do is put in the residents details. Seems obvious, but once you have filled in a few, sometimes the next chart just gets added to the pile without all the information being there.

When and where to apply

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GP Practice		Allergies			
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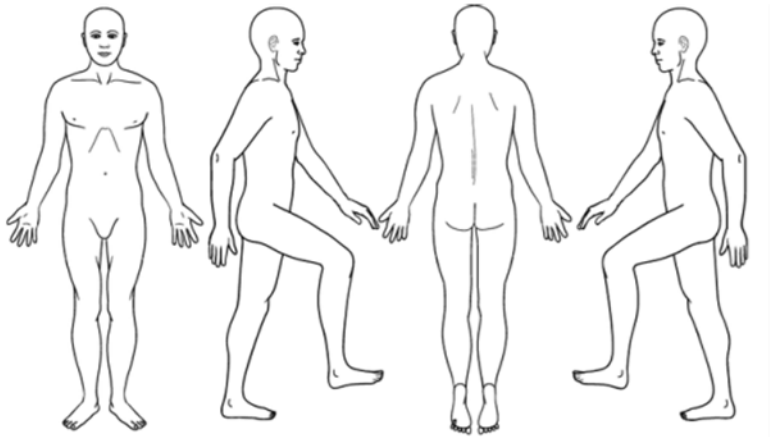

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Topical Preparation	Epaderm Oint.	**Frequency**	Twice daily	**Completed By**	JAD
Site of Application	Dry areas on arms and legs	**How to Apply**	Liberally	**Check By**	CR
Storage	In residents room	**Date Opened**	1.10.22	**Expiry Date**	29.10.22

Each body map should have full directions this is important because often a resident has more than one topical being applied,

If multiple emollients are being prescribed for a resident discuss with the clinical lead the need for two/three emollients

Many emollients can be used both as an emollient and as a soap substitute so again, resident discuss with the clinical lead the need for two emollients to do different things

Where to apply

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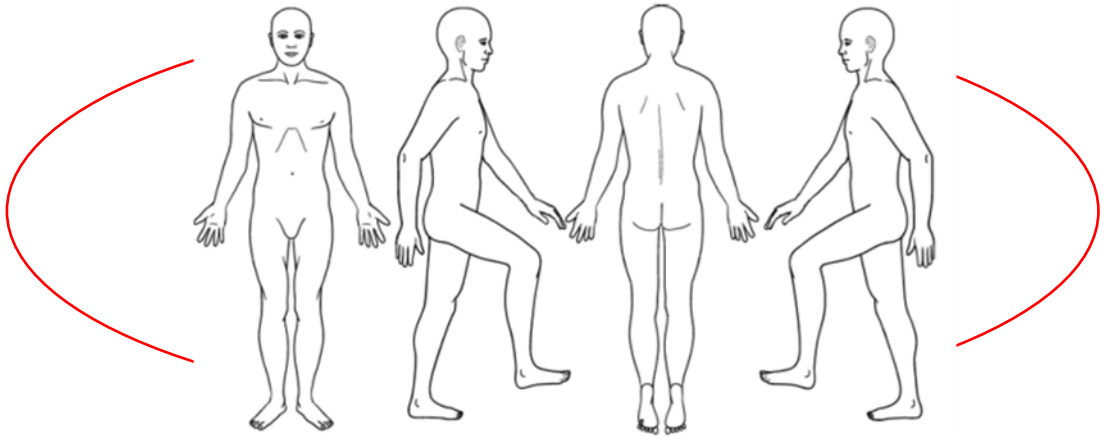

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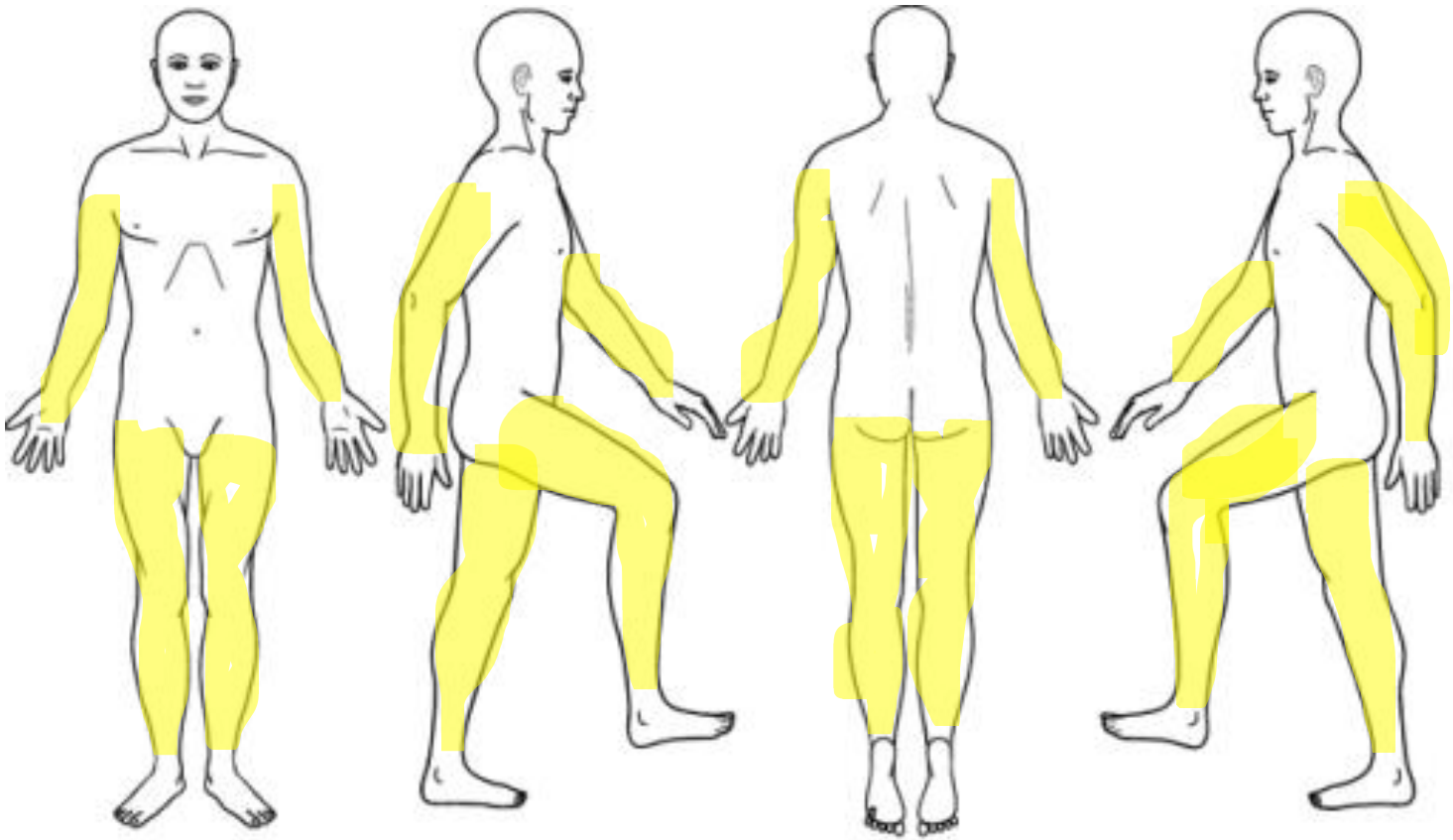
Where to apply



Recording of Adminisration

Topical Medicines Application Record

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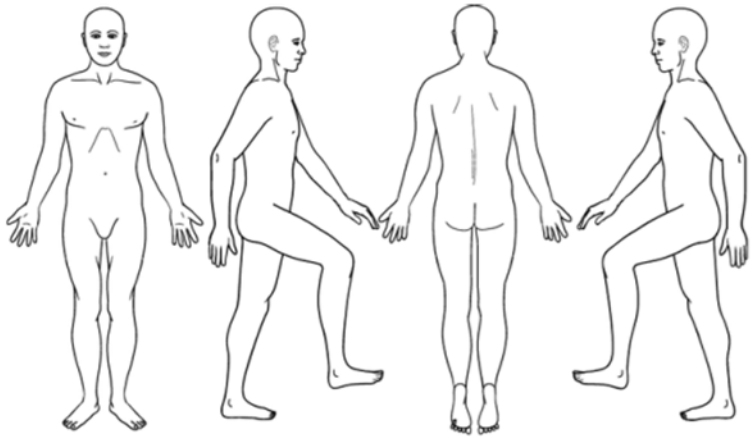

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Recording of Adminstration

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Missed signature

Explanation for non administration

Non-Administration Information

Date	Time	Comments	Signature
5.10.22	8.17	Refused to have cream applied	JAD

No record of why it was not applied later that day at 18.00 could be because:

- they were still refusing
- not applied
- forgotten to sign to apply

Either way if it is not signed or code is used the assumption is that the application was missed

Conclusion

All topical applications should be printed on a residents MAR chart. This ensures that it can be ordered for the next cycle and allows the staff member administering medication to have a complete picture of the residents medication

You can divide topicals into two, those to be applied by a qualified staff member and those that can be applied by HCW's. Topicals applied by qualified staff can be recorded on the MAR chart while those topicals applied by HCW's should record their use on a body map.

When a body map is used, the topical entry on MAR charts should signpost to the body map by writing on the MAR ' please see body map' so that it is clear application is recorded elsewhere.

Thank you

Hopefully you have found this training presentation useful. Using the body maps will give you all the information to provide evidence that applications have been carried out safely and in accordance to the GP's directions

Accurate and complete recordings will keep the resident , your colleagues and yourself safe