

MANAGING SUPERSEDED MEDICINES INFORMATION RESOURCES

Introduction

Medicines Information (MI) Centres rely on up-to-date information resources to do their work. Although more resources are now online, there is still a significant number of books and other paper resources in use. When these are superseded by a new edition or a more up-to-date alternative, it can be difficult to decide whether it is more appropriate to dispose of the old edition (to prevent people using it and to save space) or to keep it (in case of future need).

This document aims to provide some practical guidance on how MI managers may decide which superseded resources need to be kept and which can be disposed of. It is not possible to give a definitive list of what should be kept and for how long after it superseded because:

- Storage space in MI Centres varies. Although it is useful to keep one copy of every BNF/BNFC, not all MI centres will have space to do this.
- Resource holdings vary between MI Centres.
- Enquiry type, and thus future need, varies between MI Centres.

This guidance therefore supports MI managers to make decisions that are most appropriate for their own MI centre.

Reasons to Keep Superseded Resources

The resource still contains useful information

As books or guidelines are updated, information is often removed. This can be either because the information is seen as no longer useful or relevant, or because other information has been added and information seen as less important is removed to make space for it.

In some cases, the old edition of a book may contain a particular useful gem of information that is not in more recent editions. In other cases, a particular resource may be useful for 'history' type questions, such as "What did this brand of medicine contain in 1995?" or "What were we recommending in this situation three years ago?"

Resource examples

- Old copies of the BNF/BNFC. These can be a very useful way of identifying drugs and doses that have been discontinued, or old dosage instructions that have since changed.
- Medicines for Children (2003), the forerunner to the BNFC. This contains some information that is not in the BNFC and may be difficult to find elsewhere.

UKMi Quality and Risk Management Group

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Action to take

Think about whether you have used a previous edition of a resource recently, and check with any staff you have whether they have done so.

Keep these resources for as long as they are useful. In the case of copies of the BNF/BNFC, this is likely to be permanently, so keeping a single copy of each edition is recommended if space allows.

If space allows, **you may decide to keep at least the most recent previous edition of frequently-used resources** that are updated fairly regularly (e.g. Hale's Medications and Mothers' Milk [annually], or Palliative Care Formulary [approximately every 2-4 years]).

In case of a complaint

If there is a complaint about an enquiry or other piece of work, the background research/information for the work should contain all information required to justify the content of the answer. However, in some circumstances, it may also be useful to have access to the original text.

Resources can be divided into three categories: those where it is likely to be relatively easy to obtain a particular edition even after it has been superseded, those which it is not, and those which contain general information, so it is unlikely that an old edition would ever be needed in the course of investigating a complaint.

Resource examples

- Old editions of textbooks and reference books, such as Drugs in Pregnancy and Lactation (Briggs). Most books used in MI departments are published by large/reputable publishing companies, and have relatively large print runs. Consequently, second-hand copies of old editions are likely to be relatively easily available and could be purchased if required. The British Library will hold one copy of every book published in the UK.
- Old editions of internal organisation guidelines. A copy of these should be kept, but it does not have to be in MI. Consult the NHS Records Retention Guide or the Retention of Pharmacy Records document (<https://www.sps.nhs.uk/articles/retention-of-pharmacy-records/>).
- Old editions of other organisations' internal guidelines. The originating organisation should keep a copy of these.
- General textbooks, such as a pharmacology textbook. Not only are these likely to be available second-hand if required, but if the information is not particularly specialist, it is unlikely to be controversial or unavailable elsewhere.

Action to take

Ensure that old versions of internal guidelines that you use in MI are archived appropriately (whether in MI or elsewhere). You can usually assume that external organisations archive appropriately, but if it is particularly important, you could contact them to check.

Check sources of second-hand books (e.g. Amazon) to see whether old editions are available. You could also check with your organisation's library to see what their policies are on keeping old editions of books.

Dispose of any resources which are held elsewhere, or would be easy to obtain in case of need.

Dispose of any superseded "general" resources (e.g. general pharmacology). A complaint is not likely to involve matters such as the general state of pharmacological knowledge at the time.

Other reasons

There may be other reasons to keep a superseded resource that is not related to its future usefulness. For example:

- For historical interest.
- Because it is attractive to look at.
- Because it was written, or contributed to, by a member of staff.

Action to take

Keep these if you want to and have the space!

Risk Management

It is important that out-of-date resources are not used for enquiry-answering inappropriately.

The risk may be reduced by ensuring that superseded/archived resources are kept separate from the up-to-date “active” resources. You may also wish to mark them as “archived”, e.g., with a sticker.

Disclaimer

You should always consult local policies and/or guidance. This document is intended to supplement these, not to replace them.

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Contact

Author: Quality and Risk Management Group.

QRMG.ukmi@nhs.net