

Purpose

To comply with current legislation and best practice in the administration of medicines

Scope

All medications and drugs and all persons delivering care or support and persons ordering, receiving, managing, administering, disposing and recording medicines

Policy

This policy must be read in conjunction with Royal Pharmaceutical Society - Handling Medicines in Social Care, which takes precedence over this document and any specific requirements of the Registration Authority.

Roles, responsibilities and arrangements for supervision

Management and supervisors are responsible for:

- The training and assessment of care workers in the skills and techniques of medications management consistent with their role;
- Instruction of the care workers in the specific requirements in respect of medications management;
- Ensuring that care workers are at all times provided with administration systems and resources to support their role;
- Supervision and auditing of individual care workers and systems in order to ensure compliance with this policy, as well as with legal requirements and best practice, and to ensure that at all times care workers are meeting the needs of Customers;
- Medications records will be audited on a monthly basis in order to confirm that the standards of practice and record keeping in respect of medications are as specified to the care worker. Shortcomings will be reported into the organization's quality assurance system, and in addition the care worker(s) involved will be formally supervised and remedial action taken.

Care workers are:

- Permitted to assist the Customer in taking prescribed medication, within the limits of the care worker's training and experience;
- Care workers will be instructed, through induction and continued training, in the skills, requirements, and level of competence which are required in order to carry out their role.
- Care workers may not purchase or administer homely remedies which have not been specified for use by the Customer's GP.

Medications management in a Customer's own home

General

Wherever possible, Customers will manage their medications and self-administer them. If an assessment determines that this is not possible, potential Care Plans may include:

- A care worker with appropriate training encouraging the Customer to self-medicate, confirming that the medication has been taken or refused, recording this result, including the time, and taking the action described elsewhere in this policy in the event of a refusal;
- A care worker trained and certified as competent may administer the medication, taking responsibility for correct administration according to this policy and procedure.
- Identify any special medication administration preferences of the Customer by reading the Care Plan.

Refusal of medication

If a Customer refuses to take their prescribed medication then the reasons for refusal should, if possible, be identified with the Customer, and a second attempt made to offer the medication having addressed the Customer's concerns and requirements.

A Customer **MUST NEVER BE FORCED TO TAKE MEDICATION**; this act would constitute abuse.

When a Customer refuses medication the office should be informed and advice should be obtained from the prescribing GP in order to minimise medication risks. Medication refusal and consequent action taken by the care worker must be documented in the Care Plan on the care sheet and with an X on the medication administration record, and the information communicated to the office, who will in turn communicate that information to the incoming person responsible for medication.

Deprivation of Liberty Safeguard

Assessments in accordance with the Deprivation of Liberty Safeguards policy must be carried out if required in order to determine whether there are any capacity and understanding issues e.g. if a medication constitutes a sedative, whether the Customer is able to understand about and consent to the medication.

General

Medicines are managed and administered safely to Customers who need them at a time they need them and by staff who have been trained and assessed as competent to do so. Medication will be used to prevent and manage disease and alleviate discomfort.

Customers' rights to choice, independence, privacy and dignity are promoted by staff in the medication processes and procedures in the care service and Customers' values and beliefs are respected by staff who are involved with the management and administration of their medication. Customers will be fully involved with the management and administration of their medication. If medication is to be prompted, supervised or administered this will be incorporated into the care plan and will be discussed and a signature obtained at initial assessment.

Training

Care workers must be trained in the handling and use of medication and carry a card that states the terminology definitions and the differences between them. Care workers will be trained to follow the medication instructions in the Care Plan as defined on the card and within this policy. Each staff member will have an individual record of medication training.

Training must include:

- The storage of medicines
- Safe administration of medicine
- Quality assurance and record keeping
- Accountability, responsibility and confidentiality

Basic medication training prepares care staff to give:

- Medicines via the mouth (tablets, capsules and liquids)
- Drops into the eyes, ears, nose and mouth
- Medication by inhalers
- Medicines applied to the skin

Induction Training

Certification of previous medication training must be supported by a competence assessment of the staff member's knowledge and ability to manage and administer medication before any such staff member is permitted to undertake medication handling. Staff must be given time to read and understand all of the provider policies and procedures related to medication management and administration.

The following key tasks of care workers are to be observed:

- Checking what medication the Customer takes on the medication administration record and on the medication labels and/or dosed box
- Checking it is the right person
- Asking whether the person wants the medication
- Checking that the medication has not already been given
- Preparing the correct dose for the time of day
- Giving a suitable drink, with the medication, to the Customer
- Signing the medication record entering the relevant data for example time, where specific time is required or for a medication which is taken only when needed e.g. for pain management)

Further details of the skills and knowledge required for medicines handling can be found at the Skills for Care website www.skillsforcare.org.uk.

Care workers are permitted, if trained, to:

- Give capsules tablets and oral medicines;
- Apply external creams and lotions;
- Instil drops to ears nose or eyes;
- Administer inhaled medication.
- Specialist additional training is needed in order to enable care staff to carry administration via gastrostomy tubes

Medicines must be given only to the person for whom they are prescribed, following the prescription instructions.

Medicines must be given from the container they are supplied in.

DOSES OF MEDICATION MUST NOT BE PUT OUT IN ADVANCE OF ADMINISTRATION

This can lead to errors and accidents.

Particular staff training issues for services delivered in the Customer's own home

Where care workers only prompt or supervise Customers' medication and Customer becomes unwell and unable to self medicate, the Care worker will contact management to confirm consent has previously been given to enable Care worker to administer medication. This will be recorded on Customer's careplan.

Important points for domiciliary care staff:

- The amount of help and support the Customer needs with their medications;
- Which medications the care worker may administer after being trained to do so;

- The way that the care worker keeps records.

Where care workers administer medications to Customers:

- Heritage Care at Home Ltd's insurance policy provides suitable indemnification for the policies and procedures that are followed.
- Care workers who work alone are appropriately trained and assessed for their competence in the safe handling of Customers' medication.
- Heritage Care at Home Ltd has clear policies on the individualised support for Customers in their own homes who use medication. This is detailed in their Care Plan and actively reviewed and monitored by the designated care staff who will have the appropriate skills and knowledge to do so safely and effectively.
- Communications between care workers, supervisors, and prescribers must be effective in order to ensure that the care staff are kept up to date with Customer medication changes and associated support needs.

What the care worker MUST NOT DO

It is not appropriate for a care worker to influence:

- How a person chooses to obtain medicines;
- How medicines that are no longer in use are disposed of;
- The choice of over the counter medicines the Customer may wish to buy;

Confidentiality

All medication records for the Customer must be treated as confidential, and permission obtained from the Customer (or their advocate where appropriate) for the sharing of medication records, when this is needed to contribute to their health and wellbeing.

Where Customers wish to be given their medication in private this must be accommodated to support their personal dignity and promote their autonomy.

Self- medication

All Customers who have the ability and mental capacity to self-medicate should be given the opportunity and support to do so. In order to protect the safety of the Customer and others the Customer's ability to manage their medications independently and safely is formally assessed. A full assessment of their ability and mental capacity to self-medicate will either be carried out prior to initial assessment by Social Services or we will liaise with the family and GP of the Customer if it is a private contract.

During initial assessment Heritage Care at Home Ltd will:

- Assess whether the Customer wishes Heritage Care at Home Ltd to prompt, supervise or administer their medication and that if they become unwell and unable to take self medicate that the Care worker will be able to administer if the need arises.
- Identify that the Customer knows the medication they are taking, what it is for, and how and when to take it.
- Identify that the Customer understands how important it is not to leave the medicines lying around where someone else may take it accidentally.
- Assess whether the Customer understands the terminology definitions and the differences between them.

In a Customer's own home, the assumption is that the GP supports self-medication. However, if there is any doubt then self-medication by the Customer should be authorised by the prescribing GP, following a risk assessment.

The assessment and documentation will be stored in the office copy of the individual Customer Care Plan, details of which will be documented in the Customer's own Care Plan when Customers are self-medicating. This will help to remind staff of the need to monitor any associated risks.

The assessment will be reviewed if there is a change in the Customer's mental or physical health state, and on a routine basis timed according to self-medication Care Plan instructions (as the timing of review will depend on individual needs and risks).

Heritage Care at Home Ltd will have individual medication records for Customers in their Care Plans.

Heritage Care at Home Ltd will obtain consent from the Customer to enable designated care staff to monitor the medication supply being used by the Customer and to monitor the Customer's continuing ability to manage their medication safely.

When care staff have to prompt or supervise self-medicating Customers to take their medication this should be documented and closely monitored by all staff involved in medication management and administration. If the Customer continually fails to self-medicate a risk assessment for self-medication for the individual should be carried out and appropriate action taken and documented in the Customer's Care Plan.

All carers are issued with cards detailing the following:

Prompt – Heritage Care at Home Ltd's care workers remind the Customer to take their medication but do not watch them take it.

Supervise – Heritage Care at Home Ltd's care workers remind the Customer to take their medication and watch them take it.

Administer – Heritage Care at Home Ltd's care workers give the Customer their medication and watch them take it; place it into their mouth if they cannot take it themselves; instill any eye or ear drops; apply any patches as prescribed and directed.

Cultural requirements and medication

Vegetarians and people from certain religious groups will not want to take gelatin capsules, because they are made from animal products. Some people may prefer to have medications given to them by people of the same gender. Some religious festivals include fasting and some people prefer not to have medicines given at certain times. Followers of the Jewish and Islamic faiths may be concerned about medicines containing substances which are unclean according to the tenets of their faith.

Administration of medication

Medication must be given safely to maximise the benefits to Customers' health and wellbeing. Medication must be managed and administered by procedures and processes which promote Customer independence, choice, privacy, and dignity. Medication management and administration procedures and processes must take account of Customers' cultural and religious values and beliefs.

Customers must be given an opportunity to self-medicate and be given the range of support and care needed to enable them to self-medicate, i.e. prompting, supervising when they have been assessed

and proved to be able to self-medicate. Where Customers have consented to their medication to be administered by staff, they should be assured that the staff responsible have been trained and assessed as competent to do so.

All care staff, including those who are not directly concerned with the administration of medicines, should be trained in the understanding of medications, the main types of medications in use, their administration procedures, and how to look for and report possible adverse reactions, including changes which may require review of the Customer's medication prescription.

Only staff who have had certificated medication management and administration training and who have been assessed by the manager as competent should be involved in the administration of medication. Medication must be checked, administered and signed for on the medication record by one person who is accountable for all stages of medication with respect to individual Customers.

MEDICATION MUST NOT BE TAKEN FROM ITS ORIGINAL CONTAINER AND GIVEN TO ANOTHER MEMBER OF STAFF TO GIVE THE MEDICATION TO THE CUSTOMER

The person checking the right dose for the right person must also witness the person taking the medication, and must be sure that the medication has been taken properly by the Customer.

Storage of medication

Medications should be stored in a safe and appropriate place. External medications such as creams and lotions should be stored separately from other medications. There should be adequate storage facilities to ensure all medications are stored correctly, medications should not be stored on the floor. Storage of medication is discussed when the assessment is completed. If a member Of staff is concerned they should contact the office for advice.

Record keeping

Record what you do and when you do it. As medicines are given they should be recorded immediately and signed for by the person responsible. Records will be clear, complete, legible, written in black ink, dated and signed to say who has made the record.

The medication administration record will include the name of the drug, the dose, and time to be given, and any special requirements e.g. with food only. For supervised Customers the date and the name of the care staff who supervised the Customer must be recorded in the care sheet and must be accounted for by their signature. Where records are held on computer these must comply with data protection regulations, must be tamper-proof, and must give clear indications of who has made the record entry. Medication administration records must record:

- The medications are prescribed for the person
- The time they must be given
- The dose of the medication
- Any special administration requirements

ALL STAFF INVOLVED IN MEDICATION MANAGEMENT AND ADMINISTRATION ARE RESPONSIBLE FOR ACCURATE RECORD KEEPING.

External medication application

Medication applied to the Customer's skin should be applied by a staff member wearing disposable gloves. Creams and lotions must be applied according to the prescription instructions.

Instructions for creams and lotions must be clear. Before care staff members apply creams and lotions they must be trained and assessed for their knowledge and competence related to the application of external medication.

Clear information must be available to inform care staff as to what the Customer's cream is for, where precisely to apply the cream, the frequency of application and for how long the application is to continue. There must be a Cream Sheet for the application of the cream and a daily account of its application.

Controlled drugs

There are special legal requirements for the ordering, storage and disposal of all controlled drugs. Controlled drugs are prescribed differently.

Neither Heritage Care at Home Ltd nor its employees will collect controlled drugs from a pharmacy.

All controlled drugs will be accounted for on the Customer's medication administration chart. The chart must have numbered pages and each controlled drug for each person must have a separate page to account for receipt, administration, disposal, and stock audit, which must be accounted for each time the medication, is given.

Carers are required to sign the controlled drugs chart which is to be used in conjunction with the regular medication chart.

Disposal of controlled drugs

Neither Heritage Care at Home Ltd nor its employees will dispose of controlled drugs.

Non-prescribed controlled drugs

If a Customer is found to have non-prescribed drugs in their possession then the local police should be contacted for their advice.

Covert medication

This is the term used when medications are hidden and given without the consent of the Customer. Covert medication must not be given to a Customer who has the capacity to give their consent or refusal with respect to receiving medical treatment. Employees of Heritage Care at Home Ltd will not administer medication covertly unless a complete DOLS assessment has been carried out by the multidisciplinary team.

GIVING MEDICATION BY DECEPTION IS POTENTIALLY AN ASSAULT.

Adverse drug reactions

If a Customer becomes unwell after taking a new medication then the office and the prescribing GP should be notified immediately, or it may be necessary to contact the emergency ambulance service if the reaction is severe.

Inappropriate use of medication

Medication must only be administered to the person who has been prescribed that medication. Partly used medication dispensed for an individual, and no longer required, must not be used for any other person.

**MEDICATION MUST NOT BE USED AS A FORM OF RESTRAINT TO SEDATE PEOPLE FOR
THE CONVENIENCE OF THE CARE SERVICE STAFF.
THIS IS ABUSE.**

Medication Errors

Any medication error must be immediately reported to the GP of the Customer affected by the medication error and any advice given acted upon to protect the safety of the Customer. If a GP cannot be contacted immediately then NHS Emergency Services (Telephone 111) and the local pharmacy should be contacted for advice.

The incident and all action taken must be documented in the Customer Care Plan, medication record, and an appropriate incident form completed by the person responsible.

The Customer and their personal advocate must be fully informed by the service manager of the incident and the actions taken in order to minimise the risk to the Customer.

An incident report should be made to the regulatory authorities regarding the incident and actions taken by the service management following the medication incident to investigate causal factors and future medication error prevention strategies to be acted upon.

All staff involved in medication error incidents should have an immediate formal supervision by their line manager to offer support and to support investigation of the incident.

All medication errors should be documented, reported to the manager and investigated to prevent further errors occurring.

Any mistake with medication management or administration should be treated as an incident or error and recorded as such, and brought to the attention of the person in charge of the service at the time, and to the attention of the service manager.

Examples of medication errors:

- Medication given to the wrong person;
- The wrong dose is given i.e. too much or too little;
- Medication is not given.

Actions as a result of medication errors

- All employees will be encouraged to report medication errors.
- All medication errors will be investigated, with any necessary changes to training and procedures being made immediately.
- All actions taken will be recorded.
- All serious incidents will be reported to the regulatory body.

Nutritional supplements

It must be noted on the medication administration record if any nutritional supplements are used by the Customer. It must be accurately documented on the medication administration record when the supplements are given, by whom and the measured quantity taken by the Customer. Refusal to accept nutritional supplements must be treated as other medication refusal and reported to the prescribing professionals and recorded as refused on the medication administration record by the

accountable staff member. All medications given must be recorded at the time they are given and also when a person refuses their medication.

A regular review of the use of the nutritional supplements should be requested by the care service and this will be made by the prescribing GP or the dietician.

If a person cannot swallow then their medication advice must be obtained from a health care professional and alternative liquid medication could be prescribed. **MEDICATION MUST NOT BE CRUSHED OR CAPSULES SPLIT** to give to Customers as this may affect the way medicines work and can be potentially harmful to the Customer.

Homely Remedies

Care workers may not purchase, prompt, supervise or administer homely remedies which have not been specified for use by the Customer's GP. Where a Customer wishes to take homely remedies the GP should be contacted for advice and to arrange their agreement and consent in consideration of other medicines currently being taken.

Relatives who buy homely remedies for Customers should be encouraged to contact the GP or pharmacist for their advice regarding proposed homely remedy medication. Advice regarding the use of homely remedies must be obtained from a doctor, pharmacist, or nurse.

'Emollients that have previously been prescribed by the GP and no longer prescribed due to cost are still to be applied, however they are to be labeled with the date and signature of the person opening them.'

Advice from a pharmacist

Local Pharmacies and dispensing GP's will be contacted for advice concerning medication management and administration if required. Medication supply from a community pharmacist should be of appropriate quality and suitably labelled for its intended purpose. Dispensing services should be:

- Accurate
- Accessible
- Prompt
- Reliable

Changing a pharmacy supplier

When changing a pharmacy supplier the following must be agreed:

- The date of change for supplies to begin with the new pharmacy.
- The procedure for requesting repeat prescription orders and any documentation by the pharmacy or the GP practice.
- An arrangement for prescription repeats a few weeks prior to commencement of the new supply.
- That current medication stocks are used before reordering.

Dosset boxes and compliance aids:

Care workers **do not**

- Supervise or administer medication that is stored in a home-made Compliance Aid; care workers may only prompt medication under these circumstances.
- Partially dispense medication from a dosset box. Once the compartment seal is broken all of the medication therein must be administered. Should a Customer wish to take some of the medication at a later time Heritage Care at Home Ltd will consult with the GP and the pharmacy to arrange for the medication to be packaged in a separate compartment.

Care workers are only permitted to supervise or administer medication if it is held in an original, pharmacy-sealed and dispensed dosset box/blister pack or if it is from an original, pharmacy-labelled packet and the **5 Rights** can be checked.

Medication NOT to be packaged in a dosset box:

- Medicines that are sensitive to moisture, e.g. effervescent tablet;
- Light-sensitive medicines, e.g. chlorpromazine;
- Medicines that should only be dispensed in glass bottles, e.g. glyceryl trinitrate (GTN);
- Medicines that may be harmful when handled, e.g. cytotoxic products like methotrexate;
- Medicines that should only be taken when required, e.g. painkillers;
- Medicines whose dose may vary depending on test results, e.g. warfarin.

Where Warfarin is administered the latest blood results and consequent dosage will be kept in the office and with the medication administration record. Care workers will not administer Warfarin if the office does not hold this information in an up-to-date format..

Liquid medicines, creams, eye drops, inhalers must be supplied in traditional containers. Therefore, Heritage Care at Home Ltd could have two different systems operating at any one time. Heritage Care at Home Ltd **does not** permit secondary dispensing. The risk of making a mistake is too great.

MEDICATION FOLLOWING SERVICE COMMENCEMENT

Medication assessment

Pre-commencement assessments of medication taken by the Customer will be made to include medication name, dose, time of taking, reason for taking and Customer understanding regarding their medication. On commencement, the Customer's formal consent will be sought to allow the care workers to support the Customer with the management of their medication supply.

Medication assessments and associated Care Plans will be carried out by staff that have been trained and assessed as competent for the management and administration of Customers' medication. All Customers will have a formal, documented assessment for medication and a formal, documented assessment of their individual needs and specialist requirements in relation to their medications. The assessment will include any potential side effects or known allergies associated with medication for the individual Customer.

Following the assessment the information will be used to formulate a Care Plan and medication administration record which will stipulate medication names, doses, times of administration, route of medication, and any special requirements the Customer has in relation to individual medications and their safe management. Any changes made by the GP will be noted and appropriate changes made in the records. This will be discussed with the Customer where appropriate.

Disposal of Customer's medication

Neither Heritage Care at Home Ltd or its employees will dispose of Customer's medication.

Verbal telephoned medication instructions

Neither Heritage Care at Home Ltd nor its employees will accept verbal telephoned medication instructions.

PROCEDURE FOR MEDICATION ADMINISTRATION

Remember the 5 x R's:

- **Right Medication** – Check the medication against the Medication Record.
- **Right Dose** - Liquid medication must be measured into a clearly graduated and marked medication pot or by using an appropriate sized syringe which clearly identifies individual mls.
- **Right Way** - Check the method of administration. Give the medication with a tumbler of water (or milk if required by the prescription) and encourage the person to sit in an upright position whilst swallowing the medication.
- **Right Person** - Check the pharmacy label so you give the medication to the right person.
- **Right Time** - Select all of the correct medication for the time of day for the individual Customer.

ALWAYS CHECK THE MEDICATION RECORD – DO NOT RELY ON MEMORY OR ADMINISTER ONLY WHAT IS IN FRONT OF YOU.

If the tablets or capsules are in a dosset box, open the appropriate section and empty the tablets/capsules into a medicine pot and hand it directly to the Customer. Transfer the medication from the bottle or pack into a medication pot and give this directly to the Customer. Medication must not be handled but transferred to the medication pot in a non-handling clean method.

Some medications may be harmful if handled by the care worker and disposable plastic gloves must be worn at all times. This may also apply where the Customer is unable to handle medication and they require extra support, although the handling of drugs should be avoided and medication spoons used to aid administration where difficulties are identified.

Medication doses affected by the latest blood results should have a copy of the latest results kept with the medication administration record.

Ask if they want to take their medication before removing them from the pack. If they refuse try again a little later. Refusal must be documented and the GP or pharmacist telephoned for advice.

NEVER FORCE ANYONE TO TAKE MEDICATION AND IT MUST NOT BE HIDDEN IN FOOD OR DRINK.

All employees of Heritage Care at Home Ltd will be issued with a copy of this Medications Policy and Procedure.