

Haringey Community Reablement Service

Medication Policy

Based on and includes guidance from:

1. “Managing medicines for adults receiving social care in the community” (NICE guidelines NMG67 March 2017)
2. CQC Guidance “Medicines: training and competency in adult social care settings”
3. Care Act 2014

Purpose of document

This policy has been updated and written for Haringey Council’s Community Reablement Service as a guide on how medication is to be managed by the enablers within the boundaries of their knowledge and training and to ensure a safe service for both service user and provider. It has also been written to provide a guidance tool for enablers to refer to when seeking clarification on their roles and responsibilities.

Not all service users will be able to manage their own prescribed medications but where they are assessed to have the capacity to do so, it is vital that they are encouraged and supported to do this daily activity as part of their reablement programme.

Where they are not able to do so, it is the role of the assessor to highlight this prior to any service being provided and ensure that an adequate, appropriate, and safe system is put into place to manage a service user’s medication.

General Principles around medication management

1. Care staff must undertake the necessary induction training relevant to the type of care setting they are working in and the tasks they are responsible for undertaking.
2. The capacity of all service users to make decisions around medications must be established by the practitioner at the assessment stage, with the outcome clearly documented and guidelines of any support required, documented in the support plan. Any additional concerns around capacity will be immediately referred to the line manager and referring practitioner.

3. Care staff will refer to the support plan to establish which service users require support with medications and will record their observations of the service user taking their own medications or whether prompting is needed. If prompting is needed on a regular basis then this may indicate a need for further assessment.
4. Care staff will consult with their line manager immediately if any concerns arise around the management of medications and be aware of how to access advice/information from medical professionals should the need arise.
5. Medicines are available when the individual needs them and the care provider makes sure that unwanted medicines are disposed of safely.
6. Medicines are prompted safely and correctly and care staff preserve the dignity and privacy of the individual when doing so.
7. Medicines are stored safely.

Aim

To ensure individuals are supported at home in the most appropriate way within the realms of reablement and preventative practice and to enable individuals to have an informed and balanced choice wherever possible.

The following additional information has been established and should be carefully considered by care services:

- Some people may prefer to have medicines 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

Self Administration

Where an individual is considered capable of self administration of medicines, it is not the responsibility of the community reablement service to ensure that medication is taken as prescribed. However, staff should notify their management team who in turn will notify the GP or source of referral if there is a reason to believe the individual is failing to take the medication as directed or is non compliant. This must be recorded on the individual's care plan.

General support with Medications

General support is also known as prompting or assisting with medications.

Prompting with Medication: Where an individual is assessed as being able to physically take their medicines, but forgets to do so and the care worker persuades, encourages or reminds them to do so. In these situations, the

enabler should refer back to the practitioner to explore solutions such as assistive technology, to maximise the independence of the service user

Assistance with Medication: This includes

- ordering a repeat prescription from the GP's surgery
- picking up a prescription from the GP surgery
- bringing packs of medicines to a person at their request so that the person can take their medicines
- opening bottles or packaging at the request and direction of the person who is going to take the medicine. The individual may seek this assistance due to a physical disability that prevents them from being able to manipulate packaging. In this situation, the enabler should refer this issue to the practitioner for further advice on solutions to maximise the service user's independence.
- Where an individual can remember to take their medications, but is unable to open the compliance aid or blister pack, this should be clearly written in their support plan with the informed consent of the individual or their relatives or representatives and forms part of the risk assessment.
- Reablement staff are able to assist only if tablets or capsules medication are from a compliance aid or blister pack and this has been filled by a medical professional.
- A compliance aid or blister pack needs to be labelled clearly with service user name, correct date and instructions if applicable.

Documentation

Staff record, with the service user's consent, observation of the service user taking medication and any assistance given, including dosage and time of medication on the care records visit sheets kept in the home of the individual. Any advice to the individual to see or call in their GP or other health professional to be recorded and signed and dated by the care worker and the service user or their representative. The record is signed and dated by the care worker and service user or their representative. All concerns and actions taken to be reported to their team leader or team manager.

Creams and Lotions

The administration of topical preparations, including ointments, creams, gels and lotions may only be permitted if prescribed by a GP or Hospital with directions for application clearly written with service user's name and correct date and be clearly written in their care plan.

Staff Training

All staff to attend training including team manager and team leaders, to ensure staff competencies in prompting or assisting (only from a compliance aid or blister pack) prescribed medication. The current training programme is 3 yearly. Staff attendance is compulsory.

Staff are not permitted to assist or administer ear, eye or nose drops or inhalers.

Staff are not permitted to use invasive medication such as suppositories, enemas or injections.

Staff are not permitted to empty a colostomy or fistula bag.