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| **Review Sheet** | |
| Last Reviewed Last Amended Next Planned Review in 12 months, or  07 Jun '19 07 Jun '19 sooner as required. | |
| Business impact | Changes are important, but urgent implementation is not required, incorporate into your existing workflow.  **MEDIUM IMPACT** |
| Reason for this review | Scheduled review |
| Were changes made? | Yes |
| Summary: | This policy has been reviewed and updated to reflect any new guidance from the Royal Pharmaceutical Society and now contains reference to support care assistants' responsibilities in nursing homes from the Department of Health. Please note that the reference on this policy has changed as it used to be CM10. |
| Relevant legislation: | * The Care Act 2014 * Medical Act 1983 * Medicines Act 1968 * The Human Medicines Regulations 2012 * The Pharmacy Order 2010 |
| Underpinning knowledge - What have we used to ensure that the policy is current: | * Author: RCN, (2015), *Accountability and delegation*. [Online] Available from: <https://www.rcn.org.uk/professional-development/accountability-and-delegation> [Accessed: 7/6/2019] * Author: NICE, (2018), *Decision-making and mental capacity - NICE guideline [NG108]*. [Online] Available from: <https://www.nice.org.uk/guidance/ng108>[Accessed: 7/6/2019] * Author: NICE, (2017), *Managing medicines for adults receiving social care in the community*. [Online] Available from: <https://www.nice.org.uk/guidance/ng67>[Accessed: 7/6/2019] * Author: NICE, (2014), *Managing medicines in care homes*. [Online] Available from: <https://www.nice.org.uk/guidance/SC1>[Accessed: 7/6/2019] * Author: Royal Pharmaceutical Society, (2018), *Professional Guidance on the Administration of Medicines in Healthcare Settings*. [Online] Available from: [https://www.rpharms.com/Portals/0/RPS%20document%20library/Open% 20access/Professional%20standards/SSHM%20and%20Admin/Admin%20of% 20Meds%20prof%20guidance.pdf?ver=2019-01-23-145026-567](https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/SSHM%20and%20Admin/Admin%20of%20Meds%20prof%20guidance.pdf?ver=2019-01-23-145026-567) [Accessed: 7/6/2019] * Author: Royal Pharmaceutical society, (2018), *Professional guidance on the safe and secure handling of medicines*. [Online] Available from: [https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure- handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of- medicines](https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines/professional-guidance-on-the-safe-and-secure-handling-of-medicines) [Accessed: 7/6/2019] |
| Suggested action: | * Read the Policy |



**1. Purpose**

* 1. To ensure the safe administration of medication via different routes. This policy should be read alongside the suite of medication management policies and procedures at Holbeach Hospital & Nursing Home and dovetail with any local protocols, standard operating procedures or policies.
  2. To support Holbeach Hospital & Nursing Home in meeting the following Key Lines of Enquiry:

# Key Question Key Lines of Enquiry

|  |  |
| --- | --- |
| EFFECTIVE | E2: How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support? |
| SAFE | S4: How does the provider ensure the proper and safe use of medicines? |
| WELL-LED | W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed? |

* 1. To meet the legal requirements of the regulated activities that Holbeach Hospital & Nursing Home is registered to provide:
     + The Care Act 2014
     + Medical Act 1983
     + Medicines Act 1968
     + The Human Medicines Regulations 2012
     + The Pharmacy Order 2010



**2. Scope**

* 1. The following roles may be affected by this policy:
     + Registered Manager
     + Nurse
     + Care staff
  2. The following Service Users may be affected by this policy:
     + Service Users
  3. The following stakeholders may be affected by this policy:
     + Commissioners
     + External health professionals
     + NHS



**3. Objectives**

**3.1** Staff responsible for the administration of medication understand their responsibilities when administering medication via alternative routes and follow best practice at all times.



**4. Policy**

**4.1** Holbeach Hospital & Nursing Home understands that medication administered by routes other than the oral route can offer Service Users greater flexibility, rapid response to medication, greater compliance with medication regimes as well as a better therapeutic response. It is the responsibility of Holbeach Hospital & Nursing Home to ensure that Service Users are involved and consent, and that staff have the training, skills and competencies to administer the medication via the route prescribed.



**5. Procedure**

* 1. The Registered Manager will ensure that staff with responsibility for medication understand the 6 Rights of Medication plus the right to refuse
  2. Holbeach Hospital & Nursing Home will ensure that all staff understand the medication policies and procedures including the different types of administration. Nurses only work within their defined role, competency and skill levels.
  3. Holbeach Hospital & Nursing Home should ensure that the most recent version of the Royal Marsden Manual of Clinical Nursing Procedures is available for staff to ensure that evidence-based clinical procedures are followed.
  4. Holbeach Hospital & Nursing Home staff will ensure that the Infection Control policy is followed.
  5. Holbeach Hospital & Nursing Home should ensure that staff understand the implications of the Mental Capacity Act and the Code of Practice. All staff involved in medication administration must ensure

that Service Users give informed consent before administering medication. Where Service Users lack capacity, any best interest decisions will be documented.

* 1. All staff will ensure that the dignity and privacy of a Service User is maintained when administering medication, including via routes other than oral. Irrespective of whether a Service User has the capacity to give informed consent, the Service User will be informed of what actions are taking place and they should be treated with compassion at all times.
  2. Care Plans will detail how the medication is to be administered e.g. injections or transdermal patches.. The bedside documentation will detail sites for topical application.

Where it applies, individual Service User risk assessments will be completed for any risks associated with routes of administration.

* 1. Body maps should be used for each topical medication required. Body maps should also be used for detailing the site of application of transdermal patches used to administer Parkinson’s medication. Other patch sites are detailed on the MAR chart.
  2. Where transdermal patches are prescribed, staff should ensure that there is a system in place for checking these are still in place following application and until removal.
  3. Where a Registered Nurse delegates medication to be administered by specialised technique to a Care Worker, the Registered Nurse should only delegate tasks and duties that are within the other person’s scope of competence, making sure that they fully understand the instructions. Staff should refer to the [Department of Health](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/518298/Medicines_in_care_homes_A.pdf) official guidance for further clarity.

The Registered Nurse should confirm that the outcome of any task that has been delegated to someone else meets the required standard.

A full record of competencies will be logged and periodic checking of this will be assessed in line with the Training and Competency on Medications Policy and Procedure at Holbeach Hospital & Nursing Home.



**6. Definitions**

# Routes of Medication Administration

* + - This is a list of the different routes that medication can be administered:
      * Buccal - held inside the cheek
      * Enteral - delivered directly into the stomach or intestine (with a PEG tube or Jejunostomy Tube)
      * Inhalable - breathed in through a tube or mask
      * Intramuscular - injected into muscle with a syringe
      * Nasal - given into the nose by spray or pump
      * Ophthalmic - given into the eye by drops, gel, or ointment
      * Oral - swallowed by mouth as a tablet, capsule, lozenge, or liquid
      * Otic - given by drops into the ear
      * Rectal - inserted into the rectum
      * Subcutaneous - injected just under the skin
      * Sublingual - held under the tongue
      * Topical - applied to the skin
      * Transdermal - given through a patch placed on the skin
      * Vaginal - inserted into the vagina

# 6 Rights of Medication

* + - A mnemonic to remember this is **P**atients **D**o **D**rugs **R**ound **T**he **D**ay
    - The 6 Rights of Medication are:
      * Right **P**atients
      * Right **D**rugs
      * Right **D**ose
      * Right **R**oute
      * Right **T**ime
      * Right **D**ocumentation
    - These 6 Rights vary in Definition:
      * NICE guidelines refer to **Right to Refuse** instead of Right Documentation
      * This policy uses **Right Documentation** because of the high rate of errors associated with documentation but refers to the Right to Refuse

# Body Map

* + - A body map is a blank diagram of a person showing their front and back used to document information for future reference. It can be used for recording where creams, lotions, etc. should be applied, injection sites, transdermal patch sites, lacerations, bruising or pressure ulcers



**Key Facts - Professionals**

Professionals providing this service should be aware of the following:

* + - Staff who administer medication via other routes should only do so when they have been trained and assessed as competent and local policy permits them to do so
    - Staff should use the 6 Rights of Medication Administration at all times
    - Staff should refer to the Royal Marsden Manual of Clinical Nursing Procedures to ensure that practice is evidence-based before administering medication via routes other than oral



**Key Facts - People affected by the service**

People affected by this service should be aware of the following:

* + - You will be supported to self-manage wherever possible, irrespective of the route of medication administration
    - You will be asked to consent to have support provided with medication and where you are unable to consent, we will involve you with our discussions but seek to make a decision in your best interest



**Further Reading**

There is no further reading for this policy, but we recommend the 'underpinning knowledge' section of the review sheet to increase your knowledge and understanding.



**Outstanding Practice**

To be ‘ outstanding ’ in this policy area you could provide evidence that:

* + - There is evidence that Service Users are involved in the discussion about their medication which is regularly reviewed
    - Service Users can access alternative therapies where they wish to control symptoms without medication. They are provided with clinical support and guidance to do this safely
    - There is evidence that the use of anti-psychotic medication has been reduced



**Forms**

The following forms are included as part of this policy:

|  |  |  |
| --- | --- | --- |
| **Title of form** | **When would the form be used?** | **Created by** |
| Body Map - CN10 | To indicate where topical medication, injections or transdermal patches are located | QCS |

Holbeach Hospital & Nursing Home

Boston Road North, Holbeach, Spalding, Lincolnshire, PE12 8AQ

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Body Map - CN10



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| --- |
| Service User Name: |
| Use the below body map to indicate where topical medication, injections, or transdermal patches are located. |
|  |
| Notes: |