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| **Review Sheet** | |
| Last Reviewed Last Amended Next Planned Review in 12 months, or  12 Jun '19 12 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 the content updated to reflect the changes within the NMC. Please note that the reference number for this policy has changed, it was previously CM14. |
| Relevant legislation: | * The Care Act 2014 * Care Quality Commission (Registration) Regulations 2009 * Medical Act 1983 * Medicines Act 1968 * The Human Medicines Regulations 2012 * Misuse of Drugs Act 1971 * Data Protection Act 2018 |
| Underpinning knowledge - What have we used to ensure that the policy is current: | * Author: NICE, (2014), *Managing Medicines in Care Homes*. [Online] Available from: <https://www.nice.org.uk/guidance/sc1>[Accessed: 12/6/2019] * Author: Royal Pharmaceutical Society, (2019), *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: 12/6/2019] * Author: CQC, (2019), *Medicines in health and adult social care*. [Online] Available from: [https://www.cqc.org.uk/sites/default/files/20190605\_medicines\_in\_health\_and\_adult\_social\_](https://www.cqc.org.uk/sites/default/files/20190605_medicines_in_health_and_adult_social_care_report.pdf) [Accessed: 12/6/2019] * Author: The National Care Forum, (2013), *A Guide for Employers: Training for Safer Medication*. [Online] Available from: [https://www.nationalcareforum.org.uk/ncf- publications/medication-safety-resources/](https://www.nationalcareforum.org.uk/ncf-publications/medication-safety-resources/) [Accessed: 8/7/2019] |
| Suggested action: | * Share ‘Key Facts’ with all staff * Ensure relevant staff are aware of the content of the whole policy |



**1. Purpose**

* 1. To ensure that Service Users are at all times kept safe with respect to medication and that staff are appropriately trained and assessed as competent when handling and administering medication.
  2. To support Holbeach Hospital & Nursing Home in meeting the following Key Lines of Enquiry:

## Key Question Key Lines of Enquiry

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| --- | --- |
| 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 | W1: Is there a clear vision and credible strategy to deliver high-quality care and support, and promote a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people? |

* 1. To meet the legal requirements of the regulated activities that Holbeach Hospital & Nursing Home is registered to provide:
     + The Care Act 2014
     + Care Quality Commission (Registration) Regulations 2009
     + Medical Act 1983
     + Medicines Act 1968
     + The Human Medicines Regulations 2012
     + Misuse of Drugs Act 1971
     + Data Protection Act 2018



**2. Scope**

* 1. The following roles may be affected by this policy:
     + Registered Manager
     + Other management
     + Nurse
  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
     + Local Authority
     + NHS



**3. Objectives**

**3.1** To ensure that Nurses who administer medication are trained in the handling and use of medication and have their competence assessed prior to commencing any medication-related activity.



**4. Policy**

* 1. Holbeach Hospital & Nursing Home aims to provide safe, high-quality care to everyone using its services through the maintenance of a skilled and competent workforce. As part of this, Holbeach Hospital & Nursing Home requires all staff to attend specific training subjects on a mandatory, non-optional basis depending on their role and area of work. This includes but is not limited to Medication Training.

Where non-clinical staff are required to carry out health-related activities, delegated by a registered further competency training and assessment will be required. Mrs Maxine Winch will refer to the [Department of Health guidance](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/518298/Medicines_in_care_homes_A.pdf).

* 1. Nurses must follow the procedure policy when ordering, receiving or destroying medication.
  2. Holbeach Hospital & Nursing Home will ensure that staff who do not have the skills to administer medicines, despite completing the required training, are not allowed to administer medicines to Service Users.
  3. Holbeach Hospital & Nursing Home will ensure that, as part of their role to support Service Users

with medication, all staff are required to have an annual review of their knowledge, skills and competencies relating to managing and administering medicines. Holbeach Hospital & Nursing Home will identify any other training needed by staff responsible for managing and administering medicines. If there is a medicines- related safety incident, this review will be more frequent to identify support, learning and development needs.

* 1. Health professionals working in, or providing services to Holbeach Hospital & Nursing Home, should work to standards set by their professional body and ensure that they have the appropriate skills, knowledge and expertise in the safe use of medicines for Service Users living at Holbeach Hospital & Nursing Home.



**5. Procedure**

## Individual

Each member of staff has a personal responsibility to participate actively in training to enable them to carry out their medication administration safely and effectively. This will involve:

* + - Looking for and identifying their own training needs and discussing the development and implementation of an agreed development plan
    - Participating in development activities
    - Monitoring and evaluation of the plan and development activities
    - Spending time on their own self-development
    - Ensuring that they read and understand all aspects of the relevant the medication policies and procedures

## Line Managers

Line managers have a key role in the training and development of their staff in relation to Medication Management. Line Managers should ensure that staff are trained to carry out their current job effectively and receive training to develop them for future opportunities. This involves:

* + - Conducting appraisals to identify the training, development and support needs of their staff
    - Ensuring plans are developed to help meet these needs
    - Providing on-the-job training where possible
    - Providing opportunities for personal development, e.g. by exploring new areas of work when appropriate
    - Reviewing, monitoring and evaluating development activities and their effectiveness
    - Identifying opportunities to practise new skills and demonstrate knowledge
    - Reporting training and development activity to the Registered Manager
    - Ensuring that staff who do not have the skills or competencies to undertake medication-related activities do not do so

## Registered Manager

The Registered Manager will need to ensure that Medication Training is:

* + - Suitable for Holbeach Hospital & Nursing Home
    - High Quality
    - Accessible
    - Flexible
    - Relevant
    - Accredited
    - Meets regulatory and contractual requirements
    - Supports best practice recommendations and guidance

In addition to having sufficient numbers of suitably trained staff to support medication administration, the Registered Manager will need to demonstrate that they have put in place appropriate quality assurance systems to record and monitor the effectiveness of their medication arrangements. These will include:

* + - Lists of staff who have received training (and when)
    - Records of the initials that staff will use to record medication administration on MARs
    - Regular auditing of MARs
    - Supervision records

## After a Medication-Related Incident

After a medicines administration incident, and where further training is identified as an action, the assessor

should use their professional judgment to identify the relevant parts of the competency assessment framework which require completion in consultation with the Registered Manager. It will not always be necessary to complete the whole assessment.



**6. Definitions**

## Competency Assessment

* + - An assessment that is both undertaken by the member of staff (the assessee), and completed by the assessor
    - The competency assessment once completed only ensures that the person is competent at the time of assessment

## Assessor

* + - A person who is knowledgeable in a particular field and is called upon for advice. In this role, they need to have the appropriate skills, experience and knowledge and ideally qualifications to oversee the competency of others

## Competence

* + - Relates to the need for the staff member to demonstrate their ‘capability’ in certain skill areas to a required standard at a point in time



**Key Facts - Professionals**

Professionals providing this service should be aware of the following:

* + - Staff should not undertake any medication-related activity unless they have been trained and assessed as competent to do so
    - Training should be right for the service, high quality, accessible, flexible, relevant and accredited
    - All staff should read and understand the Medication Policies and Procedures as part of their induction process



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

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

* + - You have a right to be supported with your medication by staff who have the training, competency and skills to support your needs and wishes



**Further Reading**

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

## Skills for Care - Care Certificate:

<http://www.skillsforcare.org.uk/Learning-development/Care-Certificate/Care-Certificate.aspx> **NHS England - Enhanced health in care homes vanguards:** <https://www.england.nhs.uk/new-care-models/about/care-homes-sites/>

## NHS England - Medicines optimisation in care homes:

<https://www.england.nhs.uk/primary-care/pharmacy/medicines-optimisation-in-care-homes/>



**Outstanding Practice**

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

* + - For all staff involved in handling and administering medication to Service Users, training certificates are available and in date
    - Ongoing staff competency checks are recorded and are carried out periodically, at least quarterly
    - Training needs are identified and recorded, and an action plan is in place to meet these needs
    - Training provided is above the minimum required, and people are provided with training in areas to increase their knowledge and understanding, beyond what would normally be expected
    - Awareness training on medication issues is provided for all staff even if they are not going to be directly handling or administering medication



**Forms**

The following forms are included as part of this policy:

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| **Title of form** | **When would the form be used?** | **Created by** |
| Medication Administration Competency Assessment Form - CN14 | To assess the competence of staff responsible for medication management | QCS |

|  |  |
| --- | --- |
| **Name of Nurse :** |  |
| **Date of Assessment:** |  |
| **Name of Assessor:** |  |

# Please circle Yes, No, or N/A

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| --- | --- | --- | --- |
| **Policy Compliance - Policy and Training** | | | |
| Has the Nurse completed the approved training on Medication Management? | Yes | No | N/A |
| Has the Nurse read the Policies on Medication Management of Holbeach Hospital & Nursing Home? | Yes | No | N/A |
| Can the Nurse evidence the policies have been read? | Yes | No | N/A |
| Does the Nurse have access to the QCS System to review the policies? | Yes | No | N/A |

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| **Policy Compliance - Preparation and Infection Control** | | | |
| Did the Nurse wash their hands before starting any Medication Administration and did they take correct hygiene measures throughout (e.g. use gloves when applying creams)? | Yes | No | N/A |
| Did the Nurse make sure that everything was properly prepared before starting medication administration, e.g. were there enough medication pots, spoons, jug of water, beakers, etc? | Yes | No | N/A |
| Did the Nurse take measures to ensure they were not going to be interrupted or distracted as far as possible? | Yes | No | N/A |

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| **Policy Compliance - Consent, Mental Capacity Assessment and Best Interest** | | | |
| Before preparing or administering the medication, did the Nurse check the Care Plan to review the level of medication support required? | Yes | No | N/A |
| Before preparing or administering the medication, did the Nurse obtain the Service User's consent? | Yes | No | N/A |
| If consent was not obtained, was this part of a documented Care Plan and procedure for this Service User, and did the Nurse check for best interest decision paperwork? | Yes | No | N/A |
| If consent wasn’t obtained, is the Nurse satisfied that the correct procedures have been followed in the best interests of the Service User? | Yes | No | N/A |

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| **Policy Compliance - Selection and Preparation of Medication** | | | |
| Before selecting, preparing or administering any medication, did the Nurse read the MAR correctly? | Yes | No | N/A |
| Did the Nurse check whether a dose had already been administered or if the medication had been stopped? | Yes | No | N/A |
| If any directions are unclear or illegible on the MAR, did the Nurse take appropriate steps to check the instructions? | Yes | No | N/A |
| Did the Nurse use the 6 Rights of Medication? | Yes | No | N/A |
| Was the medication selected checked against the correct MAR including checking the Service User’s name on the drug label and MAR? | Yes | No | N/A |
| If the directions on the MAR differed from those on the label, did the Nurse take the appropriate steps to satisfy themselves as to the correct dose to be given? | Yes | No | N/A |
| Was the correct medication and dose selected at the correct time? Was consideration given to timing in terms of food or other directions on the label? | Yes | No | N/A |
| Was the medication prepared per directions and information on the MAR or any accompanying procedure or Care Plan? | Yes | No | N/A |
| Did the Nurse use the appropriate measure for any doses of liquid medication (e.g. oral syringe, graduated measuring cup)? | Yes | No | N/A |

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| **Policy Compliance - Administration of Medication** | | | |
| Did the Nurse check the records to see how the individual prefers to take their medication or demonstrate that they knew this information and administer the medication accordingly? | Yes | No | N/A |
| Did the Nurse offer information, support, and reassurance throughout to the Service User in a manner that promotes dignity, independence and is appropriate to their needs and concerns? | Yes | No | N/A |
| Was the medicine administered correctly and a glass of water offered where appropriate? | Yes | No | N/A |

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| **Please place a tick next to the Medicine Types you have witnessed being administered** | | | | | |
| Tablets/ Capsules |  | Liquids |  | Sachets /Powders |  |
| Inhaler Devices |  | Eye Drops |  | Ear Drops |  |
| Nose Drops |  | Nasal Sprays |  | Other (State) |  |
| Transdermal Patches |  | Creams/Ointments |  | Other (State) |  |

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| **Policy Compliance - Administration of Medication** | | | |
| Was the security of all medication maintained throughout e.g. Medication not left on the bedside table, medication trolley locked when staff not present? | Yes | No | N/A |
| Did the Nurse visually witness the Service User taking all their medication? | Yes | No | N/A |
| If the medication was not taken, was the appropriate advice sought and documented including checking information in the Care Plan if appropriate? | Yes | No | N/A |
| If the medication was not taken, was it dealt with as outlined in the Medication Administration Policy? | Yes | No | N/A |

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| **Policy Compliance - Record Keeping** | | | |
| Did the Nurse sign the MAR immediately after the medication was administered? | Yes | No | N/A |
| If the medication was not given, was the correct code entered on the MAR? | Yes | No | N/A |
| If the medication is a controlled drug, did the Nurse ask a trained colleague to witness the entire procedure and sign the CD Register? | Yes | No | N/A |
| If the Medication was a variable dose drug, was it given and recorded correctly and other records checked prior to administration if required? | Yes | No | N/A |
| Were the MARs returned to the proper place after the medication round? | Yes | No | N/A |

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| **Policy Compliance- Stock Control** | | | |
| Did the Nurse check that there was sufficient stock in place to complete future medication rounds? | Yes | No | N/A |
| If there are shortages in medication noted, did the Nurse take appropriate action to ensure the stock was replaced? | Yes | No | N/A |
| Was all medication returned to the secure storage area once the medication round was completed and placed tidily? | Yes | No | N/A |

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| --- | --- | --- | --- |
| **Policy Compliance - Ordering, Receipt and Disposal of Medication** | | | |
| Does the Nurse record any medication received into the home in a timely fashion using the correct documentation? | Yes | No | N/A |
| Does the Nurse order medication in accordance with the organisation’s procedures after checking currently held stock? | Yes | No | N/A |
| Is any out of date medication or medication no longer required recorded on the appropriate documentation and stored securely, clearly separated from ‘in use’ medication until it can be safely disposed of following local procedures? | Yes | No | N/A |

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| **Policy Compliance - Storage** | | | |
| Is the Nurse aware of the correct storage conditions for medicines and where to find this information? | Yes | No | N/A |
| Is Nurse the aware of the correct temperature range for the medication fridge and how to use the thermometer? | Yes | No | N/A |
| Does the Nurse fill in the fridge temperature records correctly? | Yes | No | N/A |
| If new medication is received is the stock put away so that older supplies are used first? | Yes | No | N/A |

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| **Policy Compliance - Non-Prescribed Medication** | | | |
| Is the Nurse aware of what action to take if a Service User wants to take over the counter medication? | Yes | No | N/A |
| Is the Nurse aware of what to do if the Service User living at the home has a minor ailment? | Yes | No | N/A |
| If a non-prescribed medication was administered, was this from the original container as purchased and was the dose offered within the directions given on the packaging? | Yes | No | N/A |
| If a non-prescribed medication was administered did the Nurse record this correctly on the MAR? | Yes | No | N/A |

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| **Policy Compliance - Accessing Advice and Information** | | | |
| Does the Nurse know who to contact if they need advice on medication? | Yes | No | N/A |
| Is the Nurse aware of the information sources held at the home, particularly patient information leaflets which should be available for the Service User and staff? | Yes | No | N/A |

**Other Information - Please record any discussions held with the CW/RN**

|  |  |
| --- | --- |
| **Following the Medication Administration Competency Assessment, (insert name) has been assessed as:** | |
| **Tick as applicable** | |
| Demonstrating competence at this assessment to administer medication unsupervised |  |
| Demonstrating competence at this assessment to administer medication unsupervised with the exceptions recorded below |  |
| Requiring further supervision or training to administer medication unsupervised |  |

**Actions/Exceptions**

|  |  |
| --- | --- |
| **Signature of Nurse:** |  |
| **Job Role:** |  |
| **Signature of Assessor:** |  |
| **Job Role:** |  |
| **Date of Next Review:** |  |