

Medicines Management Policy and Procedure

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Introduction

Banquo Limited will at times be required to provide staff to assist with the administration of medications to our service users. The level of support required may vary from prompting service users to take their prescribed medications to the administration of medications by a trained member of staff. The administration of medication is a regulated activity under the Health and Social Care act 2008 (regulated activities) 2014. This policy is applicable to any individuals who require support with their medication from staff employed by Banquo Limited. It should be read in line with other relevant policies and applied to all matters pertaining to management of medication in a domiciliary setting.

The importance of appropriate procedures to ensure the quality and safety of all aspects of medicines usage is paramount and is a key component of governance. All members of staff dealing with medicines need to contribute to maximising their effective use and minimising medicine-related harm to service users.

Aim

- To ensure that medicines are correctly stored and correctly administered in a safe and timely manner.
- To support Banquo Limited's strategic objective of delivering safe, high-quality care and an excellent service user experience.
- To ensure all staff working for Banquo Limited understand and follow best practice specific to service users who are being cared for and in receipt of medication at home.
- To ensure all staff understand their responsibilities and accountability in relation to service user safety in relation to the management of medications.

Roles And Responsibilities

All staff who handle, supply or administer medicines are accountable for working within Current legislation, and within any organisational policy and procedure.

Staff employed by Banquo Limited have a responsibility, where appropriate to encourage service users to be as independent and as involved as possible in the management and administration of their medications.

The purpose of this is to promote independence, a sense of well-being and to help service users remain in their own homes for as long as possible. However, if after a risk assessment has been carried out by a trained member of staff, a service user is deemed to be unsafe to

administer their own medications it is the responsibility of staff who are handling and administering medications to be competent to do so. All staff who have this responsibility will be regularly assessed by a senior member of the team to ensure compliancy is maintained.

The Registered Manager has overall responsibility for the safe and secure handling of medications.

Procedures

Initial Assessment

It is Banquo Limited's policy to carry out a full assessment prior to accepting responsibility for the management of a service user's medications. The assessment will consist of the following:

- What types of medications the service user is taking ie Dosage, Dosage forms and frequency.
- What overall level of support the service user requires in relation to their physical and mental capabilities ie do they have a condition which effects their ability to physically administer their own medication? Do they have on assessment, the capacity to safely administer their own medications? Do they consent to support with the administration of their medications?.
- Does the service user wish to administer their medications independently?.
- Who else is involved in supporting the service user and the management of the service users' medications ie District Nurses, GP surgery, Pharmacist, family, friends.
- Banquo Limited's ability to provide emergency care and treatment in a medical emergency.
- Is the service user taking any medications requiring specialist input ie Insulin.
- Banquo Limited will also liaise with the service users GP surgery and nominated pharmacy from when management of the service user's medications begins then as required going forward.

Concern's regarding a service user's medication could include but is not limited to:

- Someone refusing to take their medicine.
- Side effects from medication.
- Medication errors or near misses.
- Mental capacity issues around medications.
- Any changes to a service user's physical or mental health.

Documentation

Medication Care Plans

Each individual service user will have a care plan in place relating to the administration and management of their medications. This will be reviewed on a monthly basis or sooner if there are any changes to the regime or the service user's condition.

The care plan in place detailing the level of support they are receiving, prompting with medication, assistance with the administration of medication or specialist support with administration of medication ie Insulin. The care plan will also detail the service users GP surgery and nominated pharmacy, actions staff will take if medications are unavailable or if medications go missing, actions to take if treatment changes and how medications should be safely disposed of if they are refused by the service user or if the regime is changed. The care plan will include any medication allergies or special considerations ie insulin regimes, time specific medications, controlled drugs etc.

Medication Administration Records (MAR)

Banquo Limited will use paper-based Medication Administration Records. Our priority is to maintain a system that is accurate, easily accessible, and compliant with UK regulatory standards, ensuring thorough documentation of all medication administration activities.

Staff administering and managing service user's medications are duty bound by law to maintain accurate administration records this is in accordance with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

These records will be stored securely at the service user's home address where the care takes place.

Any support given will be recorded on a medicines administration record (MAR). The MAR will be a printed record and will include:

- Service user's name and date of birth.
- Name, formulation and strength of the medicine(s).
- How often or the time the medicines should be taken.
- How the medicine is taken or used – for example by mouth (orally), applied to the skin (topically).
- Name of GP practice.
- Any stop/review date.
- Additional information, for example specific instructions or known drug allergies.

If a family member or carer gives medicines support that is usually provided by Banquo Limited's staff, a pre-arranged decision will have been made about how to record this.

If a change does need to be made to the MAR chart at short notice ie a dosage change two staff should countersign the change on the chart, document the change in the service user's notes and the GP should issue a new prescription.

Staff administering medications will sign for each individual medication once it has been given using their initials or the relevant code from the key on the MAR chart ie refused, hospitalised, medicine unavailable etc.

NICE guidelines – The 6R's

Staff at Banquo Limited will always follow NICE guidelines when administering medication to service users and the “6 R's Principle”.

Right Person – Staff will confirm the service user's identity prior to administering their medication.

Right Medicine – Staff will confirm that the medication in the box or dispenser is the same as the medication on the administration record. The medication will be in date.

Right Route – Staff will confirm they are administering the medication to service user via the right route ie orally, topically etc this can be confirmed by reading the medication's instruction leaflet.

Right Dose – Staff will confirm they are administering the correct dose of medication by the checking the strength prescribed on the MAR chart and on the packaging of the medication.

Right Time – Staff will check they are administering the medication at the correct time by following the instructions on the MAR chart.

Right To Decline – Staff will recognise the service user's right to decline the medication they are being offered. If there are any ongoing concerns in relation to the service user's mental capacity to make this decision. Banquo Limited's staff will liaise with the service user's GP.

Medications

Only competent staff with up-to-date training may administer medications to service users.

Staff should have a sound understanding of what medications they are administering including potential side effects, what signs to look out for in the case of an allergic reaction and who to contact for routine and emergency medication queries.

Banquo Limited staff will only administer medications that are in the original box or container they were dispensed in by the pharmacy. The container must be clearly labelled with the service user's name, the medication, the dose, frequency and any special instructions to be followed. Any issues around this will be discussed with the service user's nominated pharmacy prior to administration.

Should a service user be prescribed medications which are time sensitive such as Insulin, antibiotics, Parkinson's medications etc. Banquo Limited will always ensure visit times are co-ordinated suitably to incorporate this requirement.

Self-Administration

If a service user wishes to self-administer any of their medications. A risk assessment should be in place. This should be reviewed on a monthly basis or sooner if staff have any concerns regarding the service user's ability to do this safely and effectively.

Ordering Medications

Where appropriate and as defined by our agreements with healthcare partners, Banquo Limited staff may undertake the responsibility of ordering medications for service users. This process is managed to ensure timely supply and stocking of medications according to the specific needs and prescriptions of service users, facilitating uninterrupted care and strict adherence to treatment protocols.

Specialist Support

In the event that specialist medication administration is required staff will always work in line with their competencies and current practice guidelines.

Certain medication administration techniques can only be used by qualified healthcare professionals who have received specialist training ie injections where medications must be prepared prior to administration, syringe drivers, intravenous medications

Specialist techniques may also include but are not limited to the following;

- Rectal or vaginal administration of medications – ie suppositories or pessaries.
- Intramuscular or subcutaneous injection inclusive of prefilled syringes such as insulin or EpiPens.
- Administration of medications via a nasogastric (NG) or Percutaneous Endoscopic Gastronomy (PEG).

PRN Medications (Pro Re Nata) Or “When Required Dose”

Medicines with a PRN (pro re nata) or ‘when required’ dose are used to treat many different conditions.

Examples include nausea and vomiting, pain, indigestion, anxiety or insomnia.

People with long term conditions may also use when required medicines. For example, inhaled reliever medicines for people with asthma.

Banquo Limited will ensure all service user care plans contain sufficient, up to date relevant information for each individual, to support staff to administer when required medicines. Staff will always ensure that when administering when required medications they are administered in the way directed by the service user's prescriber ie their GP or another qualified healthcare professional.

The medication care plan will include:

- Details about what condition the medicine is prescribed for.

- Dose instructions. This includes the maximum amount to take in a day and minimum interval between doses. Where a variable dose is prescribed there should be clear directions as to what dose should be given.
- Signs or symptoms to look out for and when to offer the medicine. Include if the person can ask for the medicine or if they need prompting or observing for signs of need. For example, non-verbal cues.
- The plan should include appropriate alternative support. It should also include interventions to use before medicines.
- Where more than one required medicine is available for the same condition, it should state how and in what order they will be administered.
- When to review the medicine and how long the person should expect to take it. For example, what to do if the medicine is taken regularly or not used for a long period of time.
- When to check with the prescriber if there is any confusion about which medicines or doses to give.

Medicines Used To Manage Behaviour

If staff are administering medication to manage a person's behaviour staff should know how to support a person in a different way before using a medicine. For example, changes to the person's environment.

See Banquo Limited's Positive Behavioural Support Policy and Procedure for further information.

Medication Administration Record

When PRN medicines are administered Banquo Limited will ensure the record includes:

- The reasons for giving when required medicine.
- How much has been given including if a variable dose has been prescribed.
- The time of administration for time sensitive medicines.
- The outcome and whether the medicine was effective.

Staff will always contact the prescriber if medicines do not have the expected effects. For example, effective pain relief.

When required medicines will always be retained in their original packaging. They should be held in suitable quantities and be in date.

Storing Medications

Banquo Limited will encourage service users to store their medication safely and in accordance with manufacturer's instructions and guidelines ie in a cool, dry place. Medications should be easily accessible to staff and where they are stored should be documented in the service user's care plan. The medications should be kept in the containers they were dispensed in and out of reach of children or vulnerable adults.

If a medication is required to be kept in the fridge, it should be kept in a box with a lid and not frozen. The instruction booklet should be followed as some medications do not need to be stored in the fridge once opened or vice versa.

Staff at Banquo Limited will consult the service user's pharmacy or the instruction booklet in the medication box for any further advice required in relation to the safe storage of medications.

If for the safety of the service user medications need to be kept locked away, a risk assessment will be carried out and this will be documented in their care plan. If the person has capacity written consent will be obtained to do this however, if they are assessed as lacking capacity a best interest decision will be made in line with Mental Capacity Act 2005.

Use Of Covert Medications

Staff will only administer medications to service user's covertly when a service user consistently refuses to take their medications and has been assessed as lacking the insight to make that decision without being able to understand the consequences for their health and wellbeing.

The use of covert medication will only be considered as part of a best interest decision and full capacity assessment which may include input from the service users GP, Nominated pharmacist and next of Kin. The decision will need to be authorised in writing.

Banquo Limited will ensure when administering medications covertly they apply the fundamental principles of the Mental Capacity Act 2005.

The least restrictive option will be used as a last resort once other options ie reapproach and change of face techniques have been explored.

The use of covert medication will be time limited and reviewed regularly.

The use of covert medication will be documented in the service user's care plan along with specific instructions regarding administration ie if the medicine, with a pharmacist's approval, can be crushed or dispersed and how it will be given ie in a drink, in food etc. The medicine should be dispensed into the smallest amount of food or drink possible to ensure compliance and for the wellbeing of the service user.

Controlled Drugs

Controlled drugs are drugs that are subject to high levels of regulation and defined under the Misuse of Drugs Act 1971.

Our staff are also trained and duly authorised to handle controlled drugs, adhering to stringent protocols. These protocols are designed to ensure the secure handling, administration, and documentation of controlled drugs, aligning with the legal requirements and best practice guidelines to safeguard service users safety and maintain the integrity of our medication management system.

Emergency supplies of controlled drugs are not permitted (except in the case of drugs prescribed for administration at the end of life). If staff are responsible for ordering a service user's controlled drugs, they will ensure this is done in a robust and timely manner. Prescriptions for controlled drugs are valid for 28 days after the date on the prescription and the maximum quantity of controlled drugs should not exceed a 30 day supply.

It is not Banquo Limited's policy for staff to collect a service user's controlled drugs from the pharmacy. If in exceptional circumstances this was required in order to reduce the risk of adverse service user outcome, a decision would be made by the Registered Manager, and they would carry out a thorough risk assessment.

Storing Controlled Drugs

Controlled drugs will be stored by the service user in their own home. Unless highlighted by risk assessment there is no legal requirement to treat these medications differently to or to store differently from the service users other prescribed medicines. Storage will be risk assessed in line with [NICE guidance NG67](#).

Disposal Of Medications

An agreement will be made between the service user and Banquo Limited staff about how unused or unwanted medications will be disposed of. This will be recorded in the care plan. The service user will usually return the items to their nominated pharmacy. If they are unable to do this an alternative plan will be made for them to be returned or disposed of. Any medications returned will be documented in the service users notes including the date of disposal, name, quantity and who took them back to the nominated pharmacy or collected them.

If there are specialist considerations ie controlled drugs or sharps the individual arrangements and requirements for disposal of these drugs will be documented in the service users care plan.

Leaving Out Medications

Banquo Limited will only leave out medications for service users if this has been assessed as safe to do so and is documented in the service user's individual care plan.

Medication Errors

A medication error can occur in the process of prescribing, dispensing, preparing, administering, monitoring, or providing medicine advice, regardless of whether any harm has occurred. Examples of medication errors can include the following:

- Omissions - any prescribed dose not given.
- Wrong dose administered, too much or too little.
- Extra dose given.

- Wrong medication - the administration to a service user of any medicine not authorised for them.
- Wrong dose interval.
- Wrong administration route - administration of a medicine by a different route or in a different form from that prescribed.
- Administration of a drug to which the service user has a known allergy.
- Administration of a drug past its expiry date.

If staff are aware or become aware of an error and the service user is unwell, medical assistance must be sought **immediately**. In all situations, staff will contact the registered manager immediately, ensure they make a record on the service users Medication Administration Record (MAR) and in their daily records.

The Registered Manager will then do the following:

- Seek advice from the GP or appropriate health professional immediately and follow their advice accordingly.
- Record any communications and actions taken.
- Log the incident on the company's incident management system as per the Incident Management Policy and Procedure.
- They will notify other relevant staff, local safeguarding and any other relevant service user family members and/or representatives of the error, actions taken and any changes or deterioration in the service user's health or behaviour.
- The registered manager will promote a culture where staff are encouraged to report errors, incidents and near misses to support shared learning and reduce repeated incidents.
- Ensure investigations are carried out and recorded including any actions taken such as training to staff and reviewing of procedures.

The Care Quality Commission will be informed if the error directly leads to:

- A death.
- An injury.
- Abuse, or an allegation of abuse.
- An incident reported to or investigated by the police.

Training Requirements

Training will be provided to Banquo Limited staff in line with the Banquo Limited's Training and Development Policy and Procedure. Staff will be expected to do refresher training on an annual basis or sooner if deemed necessary by the Registered Manager, Ongoing competency assessment will be undertaken for staff administering medications. Training records will be monitored by the Registered Manager.

Monitoring

Regular audits on MAR charts and care records will be carried out in accordance with Banquo Limited's Quality, Governance and Risk Policy and Procedure.

The Registered Manager will ensure this policy continues to adhere to current standards and guidelines including those set out by NICE.

Related Policies And Procedures

Training and development Policy and Procedure

MCA and DOLs Policy and Procedure

Safeguarding Policy and Procedure

Duty of Candour Policy and Procedure

Quality, Governance and Risk Policy and Procedure

Consent Policy and Procedure

Legislation And Guidance

Code of Professional Conduct, NMC 2002; 2008; 2015.

Health and Social Care Act 2008

Human Medicines Regulations 2012

Misuse of Drugs Act 1971

The Mental Capacity Act 2005

Care Quality Commission "Essential standards of quality and safety" March 2010 Outcome 9

Management of Medicines

<https://www.cqc.org.uk/guidance-providers/adult-social-care/managing-medicines-home-care-providers>

<https://www.cqc.org.uk/guidance-providers/adult-social-care/medicines-administration-records-adult-social-care>

<https://www.cqc.org.uk/guidance-providers/adult-social-care/medicines-information-adult-social-care-services#homecare>

National Institute for Health and Care Excellence (NICE): Managing Medicines in Care Homes: Managing medicines for adults receiving social care in the community.

<https://www.nice.org.uk/guidance/ng67>

Covert administration of Medicines – disguising medicine in food and drink, NMC 2006

The Nursing and Midwifery Council (NMC 2013) guidance:

<https://www.nice.org.uk/Media/Default/About/NICE-Communities/Social-care/quick-guides/giving-medicines-covertly-quick-guide.pdf>

National Institute for Health Care Excellence: <https://www.nice.org.uk/about/nice-communities/social-care/quick-guides/discussing-and-planning-medicines-support>.