

HEMEL HEMPSTEAD DAY CENTRE LTD

Company Registered in England No: 1288177

Registered Charity No: 272688

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1. Policy Statement

Adult service users attending day centres should be encouraged, where appropriate to retain, administer and control their own medication in order to maximise their independence and retain control over their own lives.

Some service users will be assessed as able to self medicate, while others, particularly will need assistance. In some cases supervision and some prompting will be sufficient but in others staff will need to take complete responsibility for the safe-keeping and administration of medicines.

2. Legal Context

The Medicines Act 1968

The Misuse of Drugs Act 1971

3. Capacity and consent

3.1-Service users with mental capacity to make decisions about their medication retain responsibility for and control of their medication but may require varying levels of support and assistance. Risk assessment is used to determine the level of support required.

3.2-Where it appears that the service user may lack capacity to make decisions about their medication; Mental Capacity Act procedures must be followed to assess capacity. If the assessment confirms that the service user does not have capacity, a best interest decision will be made in consultation with family and relevant health professionals.

3.3-Even where written consent to administer medication or carry out related tasks is held, care staff will seek the service user's verbal consent each time support is provided.

3.4-Where adults are deemed by a health professional to lack the mental capacity to consent, their carer or advocate may do so on the grounds that it is in the person's best interests. Generally doctors, nurses and therapists are normally allowed to provide treatment which they believe to be in the best interest of the person, taking into account not just their physical health but also their general well-being and beliefs. This decision should be made in consultation with involved carers and family.

4. Self-medication

4.1-Where a person has been risk assessed by an appropriate assessor and deemed to be competent to self-medicate whilst attending day care then staff should monitor that the

service user keeps the medicines with them at all times and that they are not left where they can be easily accessed by others.

4.2- If there is concern about the person's ability to administer their own medicines safely, the manager of the establishment and the involved professionals, together with the service user and their carer or family should agree how much responsibility they are able to undertake. Where there is doubt, and it is safe to do so, the person should be given charge of their own medicines for a trial period. In certain circumstances it may be necessary for staff to immediately remove medication during that period if the risks become too great. After this, staff should check whether or not the person has taken the medicine as prescribed, and a decision made and recorded as to whether they can cope with medicines in the long term. A person's ability to administer their own medicines should be reviewed at least every three months.

4.3- When a person cannot manage their own medicines, staff should explain that they will take responsibility for the administration in accordance with the prescribing professional's instructions. Staff will need to manage these situations sensitively.

4.4- If a service user is concerned about their medicines; a referral should be made to the prescribing health professional. Day service staff should liaise with carers to ensure that this happens.

4.5- To gain maximum benefit, medicines should always be taken at the prescribed times. Staff should reinforce the health professional's advice on this.

4.6- Staff must keep a record of all service users that have been prompted to take their medication; this is in the form of a spreadsheet and must be completed each day by a trained member of staff.

5. Supply of Medicines

5.1- A record should be kept to evidence what medication is brought into the day centre to be administered by staff, this is kept on a spreadsheet and must state the name of the service user, the date that the medication was brought into the day centre, the name of the medication, the dose of the medication, the amount brought in, the location of where it is stored and the name of the staff member who booked this medication in.

5.2- Labels on medication being administered by staff must not be altered in any way, and any unlabelled medication must never be administered by staff.

5.3- Service users may wish to bring over the counter medicines with them into the day centre for minor ailments, in this case the person must be deemed to have mental capacity to self medicate as staff at the day centre cannot administer non prescribed medication.

5.4- Staff should never participate in any form of secondary dispensing i.e. when medication is removed from the container/compliance aid in which it was dispensed and placed in another container. In such circumstances a request must be made to the person and/or their carer to ensure that medication is sent to the day centre in its original container. Community pharmacists may be willing to supply a separate container of medication purely for the day centre if attendance is on a regular basis.

5.5- On no account must staff take for personal use any prescribed medicines that are the property of the individual.

6. Storage of Medicines

6.1-The premises must have a safe place to store medicines; this must be in the form of a locked medication cupboard with only authorised members of staff to access by keeping the keys on their person at all times while at work in the day centre.

6.2-Irrespective of the system in use, all medicines retained and stored by the day centre staff must be stored in packages/containers as dispensed by the pharmacist or doctor which record:

- > The name of the person
- > The name of the medicine (preferably the generic and not the trade name)
- > The prescribed dosage
- > The frequency of administration
- > The quantity
- > The date when the medicine was dispensed

6.3-Medicines that are taken internally and those for external use should be stored on different shelves in the Medication cupboard.

6.4-Controlled drugs must not be brought into the day centre, as we do not have suitable storage requirements for these, if a service user is prescribed controlled drugs then alternative arrangements must be made for this, it should be discussed and decided between staff at the day centre, the service user, their advocate or carer and their G.P if necessary, and an agreement must be reached for the well being of the service user.

6.5-When medicines require refrigeration; they must first be placed in a plastic container and clearly labelled to identify contents. This container must be stored in a refrigerator, which is not easily accessible to other people, and preferably not the kitchen refrigerator. The temperature should be checked daily with a maximum/minimum thermometer. The normal range is between 2 and 8 degrees centigrade and any variation from this should be reported to the manager who should contact a pharmacist to check information on individual products, as some may need to be destroyed and replaced.

7. The Administration of Medication

7.1-The removal of medicines from their original containers into other containers by anyone is not acceptable as such secondary dispensing increases the risk to both staff and service user & medicines prescribed for one person must never be given to another, or used for a different purpose.

7.2-The procedure for administering medication is as follows:

- > Carefully check the identity of the person
- > Explain what you are about to do and obtain the consent of the person.
- > Ensure that the sensitivity/allergy box is checked

> Observe the person's record, checking the individual's name and dosage instructions & ensure that the dose has not already been administered

> Identify the appropriate medicine container/s checking the label/s and person's record match. If there is a discrepancy, the centre must check with an appropriate health professional before giving the medicine to the individual. If the label becomes detached or illegible, the prescribing health professional must be contacted for advice. Where possible, this advice should be sought in writing, e.g. by fax, so that the instructions can be held on file.

> Administer the medication in accordance with any special instructions e.g. to be taken with food.

> Measure or count the dose and give it to the person having again checked their identity.

> Sign the administration record immediately after the medicine has been given and taken.

> Where there is choice e.g. 1-2 tablets, record the number administered.

> Record if the medicine is refused, not administered or wasted e.g. dropped on the floor.

7.3- The manager must ensure that staff are suitably trained in the use of medication and are aware of potential side effects. It is good practice to have a list of staff who are authorised to handle and administer medicines.

8. Management of Medication errors and incidents.

8.1- Despite there being high standards of good practice and care, mistakes may occasionally happen for various reasons. Every employee has a duty and responsibility to report any errors immediately to their line manager and consult with the relevant health professional so as to prevent harm to the service user. The person and their carer must be informed either in person or by telephone of any error.

8.2- Any error must be clearly recorded on the MARR and on the service user's daily records in full detail. It must be reported within the next 24 hours as an incident.

8.3- Managers should encourage staff to report errors. They should be dealt with in a constructive manner that addresses the underlying reason for the incident and prevents recurrence. If an error occurs the manager must meet with the employee in person and go through the guidance with them to ascertain their level of understanding. Managers must differentiate between those incidents where there was a genuine mistake, where the error resulted from pressure of work or where reckless practice was undertaken and concealed. A thorough and careful investigation taking full account of the position of staff and circumstances should be conducted before any managerial or professional action in line with Disciplinary procedures is taken.

9. Medication Records

9.1- A record of administration must be maintained for each person. Staff must sign to say that a medication has been administered. If the medicine has been refused it must be

disposed of in accordance with any pharmacist's instructions and two members of staff must sign the MARR to indicate the reason. The carer and/or the GP must be notified of the refusal. If the medicine is discontinued and/or returned to the person then two staff members should also record this.

9.2- A record of all medicines, which are held for service users should be noted on their individual medication record, specifying:

- > Date received
- > Medicine name
- > Strength
- > Quantity
- > Route of administration
- > Signature of staff member receiving the medicine

9.3- Service user's medication should be listed on their individual client profile, and should state the following information:

- The person's full name and date of birth
- > Details of any known drug sensitivity e.g. penicillin, aspirin
- > The name of the medicine (preferably the generic and not the trade name)
- > The form of the medicine e.g. tablets or liquid
- > The dose
- > The time(s) it should be administered
- > Any special instructions e.g. whether it should be given before or after food

10. Disposal of Medicines

10.1- As medicines are the personal property of an individual they should give their consent for the disposal of any medicines. Best practice would indicate that people should return their own medication.

10.2- Medicines should be disposed of when:

- > The expiry date is reached. If this is not indicated on the container, contact the dispensing health professional for guidance
- > Some preparations should be discarded a few weeks after opening so it is good practice to note when they are first opened on the label
- > A course of treatment is completed or the doctor stops the medicine or the prescription changes
- > The person for whom the medicine is prescribed dies although these should be retained for seven days in case of a post-mortem enquiry.

10.3- People should be encouraged to return their out of date or unwanted medicines to a pharmacist for safe disposal. If a supply of medicine or tablets has been left at a day centre by a person who no longer attends, or has died, then these should be returned in the first instance to the person's next of kin to return to the pharmacist.

10.4- In the event of a sudden or unexplained death all medication must be retained for seven days in case there is an inquest. In most cases, day centre staff will return any medicines held for safekeeping to the family/next of kin for them to hold for the mandatory seven days. If day centre staff are responsible for ordering and retaining the medication on behalf of someone they will remain responsible for holding the medicines for the seven day period. After seven days, all medications must be returned to the pharmacy.

11. Required training for care staff who administer medication

11.1-Care staff may not administer medication unless they have completed the Level 2 certificate in Understanding the Safe Handling of Medication (or equivalent) and been assessed as competent.

11.2- In addition care staff may be required to complete training for tasks specific to an individual service user. Care staff may not carry out the task unless they have completed the certificate of competence for the required task and been assessed as competent.

11.3- Competency will be periodically assessed under the observation of a member of the management team.

12. Monitoring and review

12.1- This policy will be reviewed annually, but will also be monitored through staff supervision and the reporting of accidents, incidents and near misses.

Hemel Hempstead Day Centre Ltd is a non-profit making company 'Limited by Guarantee' the sole purpose of the company is to provide for the comfort and welfare of its members who are elderly residents of the Borough of Dacorum.

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