


Policy name	Medication Administration	CEO Approved	
Category	Work Practice	Approval date	June 2018
Version	3	Review date	June 2020

Why do we need this policy?

Safe practices and procedures for administering medication are essential to maintaining the well-being of the people we support. This policy outlines the principles of medication administration that all workers adhere to in order to prevent medication errors occurring.

Who is this policy for?

This is for all Identitywa workers who are responsible for handling, administering and/or supervising others to provide medication to the people they support.

Students completing their practical placement at Identitywa are not authorised to administer medication.

What do we want to achieve with this policy?

We want workers to work in a consistent and safe manner and understand their responsibilities whilst performing their medication administration duties.

Definition

Medication

Any medicine that is administered via any route to an individual to maintain optimum health. It includes prescription and non-prescription medicines, complementary and alternative health care products.

PRN Medication

PRN (pro re nata) medicines or “when required” are those which are ordered by a prescribing practitioner for a specific person and recorded on that person’s medication chart to be taken only as needed in response to a specific target symptom.

Schedule 8

Schedule 8 (S8) or “controlled drugs” are substances that require restriction of manufacture, supply, distribution, possession, and need to be handled in a controlled manner.

Self-administration

Medication administration is undertaken independently by the individual.

Signing sheet

A sheet provided by the dispensing pharmacist to document medication administration.

Worker

For this policy a Worker is considered to be a person who carries out work in any capacity for a person conducting a business including work as a worker. They will be referred to as a staff member or worker in this policy.

Policy Statement

1. Administration

- Staff follow the Seven Rights of Medication Administration, these rights form the principles to ensure medication is given in a safe, careful and consistent manner.
 1. Right Person
 2. Right dose
 3. Right route
 4. Write it down
 5. Right medication
 6. Right time
 7. Right method
- All administered medication is correctly recorded on pharmacy supplied signing sheets
- All PRN medication that requires protocol is accompanied by instructions in a Health Care Plan authorised by the Nurse in consultation with the person's family/carer and/ or their Medical Practitioner. A copy of these instructions is kept with the person's signing sheets.
- Staff follow dosage and treatment instructions as per the signing sheets and/or the medication label. Staff do not take instructions from families or carers. Signing sheets or labels on medical containers are not altered by staff, families or carers.
- Unless Schedule 8 medications (Controlled Drugs) are being administered, one staff member is responsible for medication administration. If possible, a second staff member witnesses and checks the administration process.
- All Schedule 8 medication must be counted and the number recorded in the shift/daily report at the end of each shift. The signature of the staff member handing over and the new staff member on shift is a legal requirement (i.e. two persons must check).

2. Storage

- In our shared living, all medication is stored in a secure designated medication cupboard at recommended temperatures and labelled with pharmacy labels.
- Schedule 8 medication is to be stored doubly secured; this means inside a locked safe or box within the designated secure medication cupboard.

3. Self-administration

- People are able to manage and self-administer their own medication if their medical practitioner has approved this practice.

4. Medication management

- Changes to medication require a new pharmacy generated signing sheet to show all current medication for a particular person.
- New or amended medication instructions are provided by a pharmacy in writing prior to staff administering the medication.
- Medications or treatments that have passed their expiry date must not be used and should be returned to the pharmacy.

5. Training and competency

- All direct care workers participate in mandatory competency based training annually and

their daily practices comply with the training they have completed.

- A worker who fails to attend and complete mandatory medication training or instructed re-training may be suspended from work until they have completed the required training.

6. Medication Incidents

- All medication incidents are reported and investigated as per Identitywa Medication Incident Procedure.
- Medication is not given if it is dropped or spilt, workers are to follow Kiara Pharmacy procedure regarding medication replacement.
- Any dropped, superseded or unused medication is returned to the dispensing pharmacy or the family/Carer for safe disposal.

The Legal and Regulatory Requirements we have to follow

This policy has been developed in accordance with the following:

- National Standards for Disability Services – Standard 1: Rights.
- National Standards for Disability Services – Standard 3: Individual Outcomes.
- National Standards for Disability Services – Standard 5: Service Access.
- National Standards for Disability Services – Standard 6: Service Management.
- The Community Care Common Standards – Standard 1: Effective Management.
- The Community Care Common Standards – Standard 2: Appropriate Access and Service Delivery.
- The Community Care Common Standards – Standard 3: Service User Rights and Responsibilities.
- Poisons Act 1964
- Poisons Regulations 1965

Other related documents

- Administration of Medication checklist
- Duty of Care Policy
- Going to Hospital Guidance
- Health Care Plan
- Medication Administration Procedure
- Medication Incident Procedure
- PRN Administration Health Care Plan
- Seven Rights of Medical Administration

How do we know we're getting it right?

All our policies and procedures are measured against the National Standards for Disability Services and the Community Care Common Standards.

We will also monitor the following measures:

- The PRN Health Care Plans are in use and all are signed by the Nurse.
- Hospital Transfer forms are being completed for individuals who are likely to be admitted to hospital.
- The checklist on the Medical Treatment form is being followed and completed.
- Medication incidents are being correctly recorded on both the forms and the

spreadsheet.

- Medication incidents are being actioned every time by the Team Leader
- Families are informed of any medication incident by either the House Senior or Team Leader.
- Success of staff following the medication administration policy and procedure is reflected in a reduction of medication incidents and, in particular, multiple staff incidents.

Do you need to know more?

Please contact the Policy Officer if you have any questions regarding policies, procedures and/or review details. If you would like to be involved in our policy development programme please also use the contact details below:

- Telephone: (08) 9474 3303