



Review Sheet



Last Reviewed  
25 Apr '24



Last Amended  
25 Apr '24



Next Planned Review in 12 months, or  
sooner as required.

Business impact



Changes are important, but urgent implementation is not required, incorporate into your existing workflow.

Reason for this review

Scheduled review

Were changes made?

Yes

Summary:

This Overarching Medication Policy and Procedure provides guidance and support on the measures and requirements in place at Medcom Personnel Ltd. It has been reviewed with minor word changes. Additional sections have been added at 5.6 (Self Administration) and 5.14 (Governance). Underpinning Knowledge and Further Reading reference links have also been checked and updated.

Relevant legislation:

- The Care Act 2014
- Care Quality Commission (Registration) Regulations 2009
- Control of Substances Hazardous to Health Regulations 2002
- The Controlled Drugs (Supervision of Management and Use) Regulations 2013
- The Hazardous Waste (England and Wales) Regulations 2005
- The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Health and Safety at Work etc. Act 1974
- Human Rights Act 1998
- Medical Act 1983
- Medicines Act 1968
- The Human Medicines Regulations 2012
- Mental Capacity Act 2005
- Mental Capacity Act Code of Practice
- Misuse of Drugs Act 1971
- The Misuse of Drugs (Safe Custody) Regulations 1973
- The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007
- The Pharmacy Order 2010
- Data Protection Act 2018

Underpinning knowledge - What have we used to ensure that the policy is current:

- Author: Care Quality Commission, (2022), *Managing medicines: home care providers*. [Online] Available from: <https://www.cqc.org.uk/guidance-providers/adult-social-care/managing-medicines-home-care-providers> [Accessed: 25/4/2024]
- Author: Royal Pharmaceutical Society, (2018), *Safe and secure handling of medicines*. [Online] Available from: <https://www.rpharms.com/recognition/setting-professional-standards/safe-and-secure-handling-of-medicines> [Accessed: 25/4/2024]
- Author: National Institute Health and Care excellence, (2018), *Medicines management for people receiving social care in the community - QS171*. [Online] Available from: <https://www.nice.org.uk/guidance/qs171> [Accessed: 25/4/2024]
- Author: National Institute for Health and Care Excellence, (2017), *Managing medicines for adults receiving social care in the community - NICE Guideline [NG67]*. [Online] Available from: <https://www.nice.org.uk/guidance/ng67> [Accessed: 25/4/2024]
- Author: Care Quality Commission, (2023), *Medicines information for adult social care services*. [Online] Available from: <https://www.cqc.org.uk/guidance-providers/adult-social-care/medicines-information-adult-social-care-services> [Accessed: 25/4/2024]
- Author: NICE and SCIE, (2021), *Discussing and planning medicines support*. [Online] Available from: <https://www.nice.org.uk/about/nice-communities/social-care/quick-guides/discussing-and-planning-medicines-support> [Accessed: 25/4/2024]



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<b>Suggested action:</b>	<ul style="list-style-type: none"><li>• Encourage sharing the policy through the use of the QCS App</li><li>• Add the policy to the planned team meeting agendas</li><li>• Ensure relevant staff are aware of the content of the whole policy</li></ul>
<b>Equality Impact Assessment:</b>	QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law.



## 1. Purpose

**1.1** To outline key points and responsibilities regarding medication management. This policy and procedure must be used with the individual, specific medication policies and procedures at Medcom Personnel Ltd to support best practice. Any local medication policies or procedures will be appended to this suite of policies.

**1.2** To support Medcom Personnel Ltd in meeting the following Key Lines of Enquiry/Quality Statements (New):

Key Question	Key Lines of Enquiry	Quality Statements (New)
EFFECTIVE	E1: Are people's needs and choices assessed and care, treatment and support delivered in line with current legislation, standards and evidence-based guidance to achieve effective outcomes?	QSE1: Assessing needs QSE2: Delivering evidence-based care & treatment
EFFECTIVE	E2: How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?	QSE2: Delivering evidence-based care & treatment QSE3: How staff, teams & services work together
EFFECTIVE	E7: Is consent to care and treatment always sought in line with legislation and guidance?	QSE6: Consent to care and treatment
SAFE	S4: How does the provider ensure the proper and safe use of medicines?	QSS8: Medicines optimisation
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?	QSW5: Governance, management and sustainability

**1.3** To meet the legal requirements of the regulated activities that Medcom Personnel Ltd is registered to provide:

- | The Care Act 2014
- | Care Quality Commission (Registration) Regulations 2009
- | Control of Substances Hazardous to Health Regulations 2002
- | The Controlled Drugs (Supervision of Management and Use) Regulations 2013
- | The Hazardous Waste (England and Wales) Regulations 2005
- | The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- | Health and Safety at Work etc. Act 1974
- | Human Rights Act 1998
- | Medical Act 1983
- | Medicines Act 1968
- | The Human Medicines Regulations 2012
- | Mental Capacity Act 2005
- | Mental Capacity Act Code of Practice
- | Misuse of Drugs Act 1971
- | The Misuse of Drugs (Safe Custody) Regulations 1973
- | The Misuse of Drugs and Misuse of Drugs (Safe Custody) (Amendment) Regulations 2007



- | The Pharmacy Order 2010
- | Data Protection Act 2018



## 2. Scope

**2.1** The following roles may be affected by this policy:

- | Registered Manager
- | Other management
- | Care staff

**2.2** The following Service Users may be affected by this policy:

- | Service Users

**2.3** The following stakeholders may be affected by this policy:

- | Family
- | Representatives
- | Commissioners
- | External health professionals
- | Local Authority
- | NHS



## 3. Objectives

**3.1** To maintain the health, safety and independence of Service Users by supporting them to take prescribed medication at the correct time and in the correct way, as part of an individualised plan of Care.

**3.2** To provide a safe framework for Care Workers to work within when assisting the Service Users with medication, and reducing the risk of medication errors or incidents which in turn will help to prevent unnecessary admissions to hospital.

**3.3** To ensure that Care Workers or nurses are trained, competent and work within their code of conduct to give medicines to Service Users when required.

**3.4** To direct staff to the relevant associated medication policies and procedures at Medcom Personnel Ltd.

**3.5** To direct staff to the relevant medication forms to support best practice for the safe handling of medication at Medcom Personnel Ltd.

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**4. Policy**

**4.1** Staff trained in giving medication at Medcom Personnel Ltd can assume that a Service Users can take and look after their medicines themselves (self-administer) unless a risk assessment has indicated otherwise.

**4.2** Medcom Personnel Ltd understands the importance of providing safe, reliable Care in relation to medication management.

The Registered Manager is accountable for the safe and secure handling of medication at Medcom Personnel Ltd.

**4.3** Mrs Irene Mtisi ensures the provision of resources necessary to support the safe and secure handling of medication at Medcom Personnel Ltd, understanding the importance of having staff who are medication trained and competent as well as suitable equipment that is fit for purpose.

**4.4** Mrs Irene Mtisi will:

- | Promote an open and honest culture at Medcom Personnel Ltd that supports the safe and secure handling of medication
- | Ensure regular audit and monitoring that checks the standards of practice at Medcom Personnel Ltd
- | Ensure the frequency of audit is based on risk assessment
- | Share the results of audits with the team at Medcom Personnel Ltd to improve learning and practice
- | Ensure required actions are taken as necessary

**4.5** Mrs Irene Mtisi is responsible for:

- | Overseeing the quality of medication handling at Medcom Personnel Ltd by staff trained in medication administration
- | Ensuring a culture of evaluation, learning and improvement at Medcom Personnel Ltd
- | Ensuring any medication related incidents are identified, recorded, investigated, reported and escalated as required
- | Ensuring any incidents are reviewed and practices changed if necessary
- | Ensuring that good practice is shared with the team at Medcom Personnel Ltd

**4.6** Service Users will be treated as individuals at all times, respecting their dignity, privacy and independence, choice and control.

If the Service Users agrees, family and friends will have the opportunity to be involved in decisions, and will be given the information and support they need.

**4.7 Protected Characteristics and Medication Management**

Medcom Personnel Ltd will ensure that protected characteristics are considered when managing medicines. This includes the Service Users's cultural and religious requirements which will be fully and carefully considered and may include but not be limited to:

- | Vegetarians and people from some religious groups who do not want gelatin capsules or animal insulin (made from animal products)
- | Having medicines given to them by people of the same gender
- | The administration of medicines during religious festivals, including fasting
- | Medicines including 'unclean' substances

**4.8 Consent and Mental Capacity**

Where the Service Users lacks the mental capacity to make decisions, decisions will be made following the Mental Capacity Act 2005 requirements and in the Service Users's best interests.

Please also refer to the Mental Capacity Act (MCA) 2005 Policy and Procedure.

**4.9** Service Users will be safeguarded in relation to medication management.

Safeguarding issues could include:

- | Deliberate withholding of medication without a valid reason
- | Incorrect use of medication
- | Deliberate attempt to harm through use of medication
- | Accidental harm caused by incorrect administration or a medication error

**4.10** Medcom Personnel Ltd recognises that it has legal, contractual and specific duties to manage



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medicines safely in accordance with statutory and regulatory bodies in England, and to follow best practice recommendations.

### 4.11 Roles and Responsibilities of Staff - The Registered Manager

Mrs Irene Mtisi is responsible for ensuring:

- | Risk assessments are completed to support the safe and secure handling of medication
- | Medication is readily available to Service Users when required
- | That all staff involved in medication management are trained, assessed and competent to perform the activities required of them within their role, and this is regularly reviewed
- | Assessments are undertaken regularly and documented
- | Staff read and understand relevant medication related policies and procedures
- | A mental capacity assessment forms part of a person-centred Care Plan and that consent to support with medication is obtained
- | Where best interest decisions are required, this is done in collaboration with others involved in the Service Users's care and is recorded and shared with the relevant staff
- | A Service Users's capacity in relation to the management of medication is reviewed regularly
- | Service Users who are new to the service have their medicines listed by Medcom Personnel Ltd at the initial assessment and checked on the day that they begin service, and that the Ordering and Collecting Prescriptions Policy and Procedure at Medcom Personnel Ltd will be followed
- | Medication reviews are part of (and align with) the Service Users's care and treatment assessments, plans or pathways and that they are completed and reviewed regularly when their medication changes
- | There is a culture that allows staff to report incidents. To achieve this, there will be systems to support:
  - | Clear incident reporting
  - | Investigations of incident reports, to decide whether to offer training to an individual or review existing procedures
  - | Simple and regular audits of how things work
  - | Reporting of serious incidents to the regulatory body and compliance with the Duty of Candour
  - | Whistleblowing

### 4.12 Roles and Responsibilities - The Care Worker is responsible for:

- | Ensuring that they only administer medicines that they have been trained and have been assessed as competent to give
- | Being aware of their responsibilities if a Service User refuses to take their medicines
- | Remaining up to date and participating in any training and supervision sessions
- | Reading and following the policies and procedures at Medcom Personnel Ltd and seeking guidance if there are any areas of misunderstanding before supporting Service Users with medication management
- | Reporting any concerns to their line manager as soon as they arise including errors or omissions
- | Accepting the delegated task of administering or assisting with medicines, and taking responsibility for ensuring that their actions are carried out carefully, safely and correctly by following the suite of policies and procedures at Medcom Personnel Ltd

4.13 Should circumstances arise that are not detailed in this policy, advice must be sought from the most relevant healthcare professional such as a GP or other appropriate healthcare professional or pharmacist.

### 4.14 Related Medication Policies Available at Medcom Personnel Ltd:

- | Ordering and Collecting Prescriptions Policy and Procedure
- | Storage of Medication Policy and Procedure
- | Administration of Medicines Policy and Procedure
- | Controlled Drugs Policy and Procedure
- | Covert Medication Policy and Procedure
- | Homely Remedies and Self Care Policy and Procedure
- | Medication Away from Home Policy and Procedure



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- | Mediation Errors and Near Misses Policy and Procedure
- | Safe Disposal of Medication Policy and Procedure
- | Training and Competency on Medications Policy and Procedure
- | Auditing and Monitoring of Medication Policy and Procedure

#### 4.15 Medication Forms

The following medication forms for use can be found in the following policies:

- | Administration Competency Assessment Form - Training and Competency on Medications Policy and Procedure
- | Authorisation to Administer a Medication Under the Homely Remedies and Self Care Policy - Homely Remedies and Self Care Policy and Procedure
- | Expiry Dates for Medication - Administration of Medicines Policy and Procedure
- | GP Homely Remedies Agreement - Homely Remedies and Self Care Policy and Procedure
- | Holiday or Day Leave Medication Tracker - Medication Away from Home Policy and Procedure
- | Homely Remedies Competency Assessment - Homely Remedies and Self Care Policy and Procedure
- | Homely Remedies Stock - Homely Remedies and Self Care Policy and Procedure
- | Interim Medication Tracker - Ordering and Collecting Prescriptions Policy and Procedure
- | MAR Audit - Auditing and Monitoring of Medication Policy and Procedure
- | Medicine Administration Record (MAR) - Administration of Medicines Policy and Procedure
- | Medicine Administration Record (MAR) Front Cover - Administration of Medicines Policy and Procedure
- | Medication Administration Record (MAR) Audit - Auditing and Monitoring of Medication Policy and Procedure
- | Medication Administration Competency Assessment Form - Training and Competency on Medications Policy and Procedure
- | Medication Assessment Form - Overarching Medication Policy and Procedure
- | Medication Audit Form - Auditing and Monitoring of Medication Policy and Procedure
- | Medication Error Route Cause Analysis - Medication Errors and Near Misses Policy and Procedure
- | Medication Incident Report Form - Medication Errors and Near Misses Policy and Procedure
- | Medication on Transfer or Discharge Tracker - Overarching Medication Policy and Procedure
- | Medication Reconciliation Tracker - Ordering and Collecting Prescriptions Policy and Procedure
- | Over the Counter/Homely Remedies Authorisation - Homely Remedies and Self Care Policy and Procedure
- | Protocol for As Required (PRN) Medication - Administration of Medicines Policy and Procedure
- | Recommendation for Self Care Product - Homely Remedies and Self Care Policy and Procedure
- | Record of Medications Returned - Safe Disposal of Medications Policy and Procedure
- | Self Administration of Medication Risk Assessment - Overarching Medication Policy and Procedure
- | Specimen Signature Sheet - Administration of Medicines Policy and Procedure
- | Suggested Expiry of Products from Date of Opening - Administration of Medicines Policy and Procedure
- | Topical Medication Allocation Record (TMAR) - Administration of Medicines Policy and Procedure
- | Transdermal Patch Application Record - Administration of Medicines Policy and Procedure





## 5. Procedure

### 5.1 Advice and Support

The Registered Manager will seek advice from those with the relevant knowledge, skills and experience, for the safe and secure handling of medication at Medcom Personnel Ltd as required to support staff and Service Users.

### 5.2 Medication Assessment

An individual medication assessment will be carried out to find out how much support a Service User needs to carry on taking and looking after their medication themselves (self-administration). A Self-Administration of Medication Risk Assessment can be found in the Forms section of this policy. The Registered Manager is responsible for coordinating the risk assessment and deciding who should be involved for each Service User. This should include:

- | The Service Users
- | Family members if the Service User wishes
- | Medication trained staff who are trained and skilled in assessment
- | GP or pharmacist as required to enable the Service User to self-medicate

Assessment should consider:

- | Service User choice
- | Risk to the Service User or to other Service Users regarding self-administration
- | If the Service User can identify all the medication they are taking and what they are taking it for
- | If the Service User can take the correct dose of their own medicines at the right time and in the right way (consider capacity and manual ability)
- | If the Service User had problems with forgetting to take medication in the past
- | How the medicines will be stored
- | If the Service User understands the requirements for safe storage within Medcom Personnel Ltd
- | How often the assessment will need to be repeated based upon individual Service User need
- | The responsibilities of staff at Medcom Personnel Ltd which should be documented in the Service User's Care Plan
- | The involvement of other health and social care practitioners (such as the GP and pharmacist) as appropriate, to help identify whether the Service User's medicines could be adjusted to enable self-administration

The outcome of the medication assessment is to determine the support needs of the Service User from the following options:

- | Able to self-manage without assistance (self-caring)
- | Able to self-manage with the use of administration aids
- | Requires full or partial administration assistance (including the use of verbal reminders, sometimes referred to as prompts)
- | Requires administration by specialised technique

The Registered Manager will ensure that staff are trained to support Service Users as required.

### 5.3 Types of Medicines Support within Domiciliary Care

The following describes how Medcom Personnel Ltd will support with medication management once an assessment has been completed

- | Physically assisting with medication administration (where the Service User has been assessed as having mental capacity)
- | Verbally assisting with medication administration (where the Service User has been assessed as having mental capacity)
- | Administering medication
- | Administering medication using specialised techniques after receiving further training
- | No support required - fully independent with medication - self-managed





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### 5.4 Confirmation of what Medication Support is Required

Following completion of a risk assessment, Medcom Personnel Ltd is responsible for agreeing on the medication support required and ensuring that the appropriate record keeping, and training needs are met. Risk assessments and Care Plans should include:

- | Obtaining or ordering medication
- | Storage
- | Keeping records
- | Support required to take medicines if required
- | Monitoring
- | Disposal of unwanted medicines

The Service Users's Care Plan and risk assessment will require review as needs change.

The Service Users's MAR will reflect the current medication for the Service Users and be regularly updated where changes occur.

### Ordering Medications

Where Medcom Personnel Ltd takes responsibility for ordering medications for Service Users, information will be completed within the Care Plan and an associated risk assessment will be in place.

A clear audit will be in place which follows the quality assurance procedures at Medcom Personnel Ltd and details the following:

- | Name, strength and quantity of medicine ordered
- | Date of order
- | Date medicines were received
- | Any discrepancies between what was ordered and what was received

### 5.5 Self-Managed

When a Service Users is assessed as having both the mental capacity and the physical ability to be able to fully undertake the medication process, and therefore needs no assistance from the Care Worker, they are considered to self-manage their medication.

- | Support must be provided for the Service Users to understand the medication process and encourage them to self-manage their medication
- | The Medication Administration Record (MAR) does not need to be completed
- | No assistance in any form will be given during any stage of the medication process
- | This is for any prescribed or over-the-counter medication (including homely remedies) in any form (e.g. tablet, capsule, liquid, drops, spray, cream) and covers medication:
  - | Supply
  - | Storage
  - | Preparation
  - | Administration
  - | Disposal
- | Where any support is provided by the Service Users's family, etc. then this must be detailed in the Care Plan
- | The risk assessment must detail how medicines will be safely stored for the Service Users to remain self-managing
- | Service Users will be encouraged to seek regular medication reviews from their GP
- | In order to protect the safety of the Service Users and others, it is essential to assess the Service Users's ability to manage their medications independently and safely. This assessment will include the following:
  - | Whether the Service Users wishes to self-manage
  - | Identification that the Service Users knows the medication they are taking, what it is for, and how and when to take it
  - | Understanding of how important it is not to leave the medicines lying around where someone else may take them accidentally



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- | The assessment and documentation will be stored in the individual Service Users's Care Plan, and a copy held with the Service Users's medication record when a Service Users is self-managing their own medication. This will help to remind staff of the need to monitor any associated risks

### 5.6 Self-Administration

- | Support will be provided for the Service Users to understand the medication process and encourage them to self-manage their medication
- | Risk assessments and Care Plans should include:
  - | Obtaining or ordering medication
  - | Storage
  - | Keeping records
  - | Support required to take medicines if required
  - | Monitoring
  - | Disposal of unwanted medicines
- | The Service Users must be observed administering their medication to ensure they are taking their medication safely and correctly
- | Service Users must be encouraged to seek regular medication reviews from their GP
- | The assessment and documentation will be stored in the individual Service Users's Care Plan, and a copy held with the Service Users's medication record when a Service Users is self-administering. This will help to remind staff of the need to monitor any associated risks
- | The Medication Care Plan will clearly detail any support required
- | Where Medcom Personnel Ltd is responsible for ordering a Service Users's medication and the Service Users is self-managing, Medcom Personnel Ltd will keep an accurate list of the medication to ensure accurate reconciliation and support safe self-administration. The Ordering and Collecting Prescriptions Policy and Procedure should be followed
- | Service Users should be able to get any medicines that need special storage at a time when they need to take or use them

### Support for Service Users to Self-Administer:

- | Reasonable adjustments could include:
  - | Alarms
  - | Multi-compartment compliance aids
  - | Large print labels
  - | Colour coded labels
  - | Easy to open containers
- | Reminders such as:
  - | Reminder charts
  - | Alarms
  - | Devices to help with inhalers or eye drops
  - | Providing the Service Users with suitable information about their medicine. This includes explaining how to take it and any potential side effects

If staff identify a change that indicates it may no longer be safe for the Service Users to self-manage, then staff must consult with the Service Users's GP to determine if:

- | The status is short-term or long-term
- | The Service Users requires a medication review
- | Any new procedures are required in light of the information obtained from the above

A persistent or increasing need for a reminder may indicate that a Service Users does not have the ability (or the wish) to take responsibility for their own medicine and this must trigger an urgent review of the Service Users's Care Plan. The Registered Manager will be informed at all times.

### Assistance from Medcom Personnel Ltd that Enables Self-Medication

This assistance from staff will not involve the Care Worker choosing or selecting medication for the Service Users but will allow the Care Worker to verbally remind or physically assist the Service Users to take their

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medication.

**Verbal reminder** - ask if they have already taken the medication or remind them to take their medication now (during the course of the visit).

**Physical assistance** - assist with opening the medication packaging under the direction of the Service Users.

- | When the Care Worker either provides physical reminders or verbal assistance this must be recorded on a MAR to evidence that the support has been provided. Where MAR records are supplied by external providers, the reference 'V' for verbal reminder will be used and 'P' for physical assistance will be used. This reference coding or chosen method must be clearly communicated to all staff involved in medication management
- | The term 'prompt' will **not** be used in the Care Plan as this does not clearly define the activity the Care Worker is required to undertake. 'Verbal Reminder' or 'Physically Assist' gives a clearer indication of the type of support required of the Care Worker

**Records:**

- | Support provided to the Service Users in taking their medication will be recorded in the Service Users's care records
- | Supplying medicines (including controlled drugs) for self-administration will be recorded
- | Where a Service Users self-administers a medicine, this should be recorded on the MAR as 'Self Medicating'. Individual doses taken by the Service Users do not need to be recorded
- | The Service Users's Care Plan will require review as needs change

Medcom Personnel Ltd recognises that there may be situations where Service Users are keen to look after some medicines and not others. A Service Users may keep an inhaler for immediate use but prefers staff to administer tablets. Self-management does not have to be all or nothing; an assessment must be undertaken with the person and documented in the Care Plan.

**5.7 Administration of Medication by Trained Staff**

The Service Users will have been assessed as requiring care staff to administer medication possibly due to impaired cognitive awareness, sensory disability or through physical disability or their expressed wish.

Staff should refer to the **Administration of Medicines Policy and Procedure** at Medcom Personnel Ltd.

**5.8 Consent and Mental Capacity**

- | Consent will be obtained for medication administration
- | When assessing the Service Users's requirements and agreeing their Care Plan, consideration will be given to the Service Users's mental capacity and ability to give informed consent
- | The medication trained staff member will be guided by the principles of the Mental Capacity Act 2005 and the policies on consent and mental capacity at Medcom Personnel Ltd
- | A record of a Service Users's informed consent will be made in their care record
- | The Service Users should be deemed to have the mental capacity to make decisions about their care unless there is an indicator that they are unable to make decisions relating to their medication. Where an indicator exists that a Service Users may not have the capacity to make decisions about their medication, Medcom Personnel Ltd will ensure that:
  - | An assessment is completed in line with the Mental Capacity Act 2005 and, where required, a best interest decision will be recorded in the Service Users's care record
  - | Medcom Personnel Ltd recognises that Service Users should have the same opportunities to be involved in decisions about their treatment, and that Service Users should get the support they need to help them to take full part in making decisions

**5.9 Care Plans**

All Service Users will have a medication Care Plan detailing how staff will support the Service Users with their medication.

The Care Plan should include:

- | Practical support
- | Health conditions being treated
- | Use of specific medicines



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- | When required medication
- | Time-specific medicines
- | Covert administration
- | How the Service Users likes to take their medication
- | Medication side effects
- | Monitoring and reviews required
- | Family involvement
- | Rescue medication

The Service Users's medication or self-medicating Care Plan should detail:

- | How staff will support a Service Users with their individual medicines
- | Personal care
- | Practical support
- | Specific information relating to the health conditions being treated
- | Known allergies and reactions to medicines
- | Use of specific medicines:
  - | When required medicines
  - | Time-specific medicines
  - | Covert medicines
  - | Known side effects
  - | Any monitoring and review
- | Service Users personal preferences
- | How the Service Users likes to take the medication (all together, one at a time)
- | Medication reviews - when these are taking place, when they are due, and any outcomes
- | A separate Care Plan may be required for medicines to manage specific conditions (e.g. diabetes, epilepsy)

### 5.10 Medication Review

The Service Users's GP is responsible for arranging medication reviews as set out in the Service Users's Care Plan.

The interval between medication reviews will be no more than one year and best practice states a review is conducted whenever a medicine is started, stopped or changed and when a Service Users moves between care settings.

Medcom Personnel Ltd will agree with the Service Users's GP how often they will be offered a multidisciplinary medication review. This will be based on the health and care needs of the Service Users, but the Service Users's safety will be the most important factor when deciding how often to do the review. More frequent reviews should be considered for Service Userss:

- | Entering the end of life phase
- | Diagnosed with new conditions
- | Requiring frequent or complex monitoring

The frequency of planned medication reviews will be recorded in the Service Users's Care Plan.

The medication review should involve the Service Users and/or family members, and a local team; this could include:

- | The GP
- | The pharmacist
- | A medication trained staff member at Medcom Personnel Ltd
- | A community matron or specialist nurse
- | A practice nurse

If Medcom Personnel Ltd is in attendance, they will discuss and review the following during a medication review:

- | The purpose of the medication review



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- | What the Service Users and/or their family members think about the medicines and how much they understand
- | The Service Users's and/or their family members' concerns, questions or problems with the medicines
- | All prescribed, over-the-counter and complementary medicines that the Service Users is taking or using, and what these are for
- | How safe the medicines are, how well they work, how appropriate they are, and whether their use is in line with national guidance
- | Any monitoring tests that are needed
- | Any problems the Service Users has with the medicines, such as side effects or reactions, taking the medicines themselves, and difficulty swallowing
- | Helping the Service Users to take or use their medicines as prescribed (medicines adherence)
- | Any more information or support that the Service Users and/or their family members or carers may need

Following the review, the Care Plan and MAR should be updated and all staff supporting the Service Users's care informed of any changes.

### 5.11 Medication on Permanent Transfer from Medcom Personnel Ltd to Another Setting

There will be times where Medcom Personnel Ltd supports a Service Users with a permanent move, from residing in their own home to living in residential or nursing care. If Medcom Personnel Ltd is assisting with this and helping to organise the Service Users's belongings, the following will apply.

- | Medcom Personnel Ltd will ensure that all medication is gathered and packed in a safe place to go with the Service Users
- | The Service Users's GP must be notified to ensure that the Service Users has sufficient medication to continuously provide for all their medication needs for a period of seven days following discharge
- | The Service Users's pharmacy must be notified to ensure that they are aware that the Service Users will be moving to another setting, and the date from which this will take place
- | On permanent transfer to a care facility, following the principles of working in partnership, a copy of the current assessment, most recent review and the current medication administration chart must be transferred together with the Service Users
- | Original copies of all documents relating to medications for that Service Users must be retained in accordance with normal practice for storage and retention

### 5.12 Sharing Information

- | Information regarding a Service Users's medication and health must be treated confidentially and respectfully
- | All records must be stored securely where they cannot be accessed by unauthorised persons
- | Information about a Service Users should only be disclosed with that person's consent, unless Medcom Personnel Ltd is legally obliged to share the information
- | Any information shared must be relevant, necessary and proportionate
- | If the Service Users agrees, relevant information about them can be shared with their relatives or nominated representatives
- | The agreement for sharing information should be documented in the Care Plan
- | Information should be shared with health and social care professionals involved in the direct care of the Service Users where it is needed for the safe and effective care of the individual, unless the Service Users has refused to share the information
- | The Service Users's refusal should be documented in their Care Plan and the medication trained staff member should ensure that the Service Users is aware that such a refusal may compromise their safety if relevant information is not shared
- | Information about the Service Users's medication will be shared if they transfer to a new care setting

### 5.13 Keeping Service Users Safe

The Registered Manager will be aware of local arrangements for notifying medication related safeguarding incidents.

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A clear process will be in place for reporting any medication related safeguarding incidents to Essex County Council and the Care Quality Commission.

Further information can be found in the Medication Errors and Near Misses Policy and Procedure at Medcom Personnel Ltd.

**5.14 Governance**

Mrs Irene Mtisi is responsible for ensuring that all aspects of medication management at Medcom Personnel Ltd are regularly audited as part of the medication audit process.

Staff should refer to the Auditing and Monitoring of Medication Policy and Procedure at Medcom Personnel Ltd.

**6. Definitions****6.1 A Medicine**

- | A medicine is a substance that is introduced into the body, or externally applied to the body that exerts a physiological change to the body
- | Medicines and medicinal preparations which come under the provisions of the Medicines Act (1968) and include medicines used in clinical trials, unlicensed medicines, dressings, and medical gases
- | They can be controlled drugs, i.e. substances controlled under the provisions of the Misuse of Drugs Act (1971) and Regulations made under the Act
- | They can be alternative medicinal products, e.g. herbal or homeopathic remedies, that are used for therapeutic purposes

**6.2 Medication Error**

- | A medication error is any preventable event that may cause or lead to inappropriate medication use or Service Users harm while the medication is in the control of the health care professional, Service Users, or consumer

**6.3 Medication Review**

- | Many frail, elderly people have multiple and complex conditions. These conditions can change, and the medicines that Service Users receive to treat these conditions need to be reviewed regularly to ensure that they remain safe and effective

**6.4 Assisting and Administering**

- | The difference between **assisting** someone to take their medicines and **administering** medicines is:
  - | When a care worker **assists** someone with their medicine, the person **must indicate** to the care worker what actions they are to take on each occasion
  - | If the person is not able to do this, or if the care worker gives any medicines **without** being requested (by the person) to do so, this activity must be interpreted as **administering** medicine

**6.5 Protected Characteristics**

- | The Equality Act 2010 protects people in nine protected characteristic groups from discrimination in the use of services and employment:
  - | Age
  - | Disability
  - | Gender reassignment
  - | Marriage, same-sex marriage and civil partnership
  - | Pregnancy and maternity
  - | Race, this includes ethnic or national origins, or nationality
  - | Religion or belief
  - | Sex
  - | Sexual orientation

**6.6 Delegation**

- | Delegation is defined as the transfer of responsibility for the performance of a task from one person to another - 'Transferring to a competent individual the authority to perform a selected nursing task in a selected nursing situation. The nurse retains accountability for delegation'

**6.7 Medication Administration Record (MAR)**





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- | The MAR is individual to the Service Users and is a formal record of administration of medicine within the care setting and may be required to be used as evidence in clinical investigations and court cases. It is, therefore, important that it is clear, accurate and up to date
- | The MAR reflects the items which are still being currently prescribed and administered, together with information about repeat prescriptions for PRN ('when required') medicine



## Key Facts - Professionals

Professionals providing this service should be aware of the following:

- | Staff must only administer medication when they have been trained and assessed as competent
- | Consent must be obtained before any medication support is provided
- | Service Users who fully self-administer their own medication have been assessed as having the capacity to self-manage and do not need a MAR
- | Service Users who need physical assistance or verbal reminders but have been assessed as having the mental capacity to manage their own medication will need a MAR chart so that staff can record clearly when the physical assistance or verbal reminders have been provided and what medication the Service Users has taken
- | Service Users are kept safe and medication-related incidents are reported to relevant bodies
- | Information about a Service Users's medicine is shared with other health professionals, following the rules of confidentiality
- | Medication reviews of Service Users' medication are undertaken at least annually



## Key Facts - People affected by the service

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

- | You can administer all or some of your medication
- | You will be supported to continue to self-administer
- | You will be asked to consent before any medication support is provided



## 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:

**Health and Social Care Information Centre - A Guide to Confidentiality in Health and Social Care:**

<https://webarchive.nationalarchives.gov.uk/20180328130852tf/http://content.digital.nhs.uk/media/12822/Guide-to-confidentiality-in-health-and-social-care/pdf/HSCIC-guide-to-confidentiality.pdf/>

**Boots - Care Learning:**

<https://www.boots-uk.com/newsroom/features/boots-makes-its-care-learning-free-for-all-residential-and-nursing-homes-as-government-recruits-20-000-new-carers/>





## Outstanding Practice

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

- 1 The Service Users's personal choice is reflected in Care Plans and they are supported to self-manage wherever possible. Staff follow the Care Plans
- 1 Risks to individuals are thoroughly assessed and extensive information and control measures are put in place for staff to follow. This maximises people's opportunities for independence whilst minimising the risks they face
- 1 Staff have a good understanding of the Mental Capacity Act 2005 and its implications when providing support with medication
- 1 The wide understanding of the policy is enabled by proactive use of the QCS App



## Forms

The following forms are included as part of this policy:

Title of form	When would the form be used?	Created by
Medication Assessment Form - CM03	To assess the medication management support needs of Service Userss.	QCS
Medication on Transfer or Discharge Tracker - CM03	When a service user is discharged or transferred to another setting with medication.	QCS
Self -Administration of Medication Risk Assessment - CM03	To assess service users for self-administration.	QCS



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Medications Assessment				
	Yes	No	Not Applicable	Comments
Are you allergic to any medication?				
Do you need any assistance with medication?				
Do you need occasional verbal or physical support?				
Do you need assistance more regularly (opening bottles, etc.)?				
Is there anyone else who supports you with your medication?				
Do you need medication by routes other than by mouth (patches, drops, injection, etc.)?				
Do you use any over-the-counter medication?				
Is your medication in bottles, blister packs or pharmacy-filled dosette boxes or other (state)?				
Does any of your medication need to be given at a specific time every day (e.g. Diabetic, Parkinson's, Epilepsy)?				

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Medications Assessment				
	Yes	No	Not Applicable	Comments
Do you have any infections we should know about (e.g. MRSA, Blood Borne Virus)?				
How and where do you usually dispose of medication?				
Do you have a preferred pharmacy for your medication?				
Does your medication get delivered or do they/someone collect it?				
Who orders your medication?				
Does the Service Users know and understand what medicines they should be taking and why?				
Is the Service Users aware of date, day, time?				
Does the Service Users always want to take their medication?				
Does the Service Users usually remember to take their medication at the right time?				

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Medications Assessment				
	Yes	No	Not Applicable	Comments
Can the Service Users read the labels on medication packaging?				
Can the Service Users remove tablets/capsules from the container themselves?				
Is the Service Users able to swallow their tablets/capsules?				
Can the Service Users pick up a bottle and pour out a dose of liquid medicine accurately?				
If applicable, does the Service Users describe any problems using inhalers?				
If applicable, does the Service Users have, or will they have any problems putting in eye drops?				
If applicable, does the Service Users have, or would they have any problems putting in ear drops?				
If applicable, does the Service Users have, or would they have any problems applying creams?				
If applicable, does the Service Users have, or would they have any problems administering medication via PEG?				

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Medications Assessment				
	Yes	No	Not Applicable	Comments
Is there any known medical reason why self-administration of medication should not be agreed?				
Has the Service Users administered their own medication prior to commencement of care service?				
Will the Service Users be able to give valid consent?				
Have monitoring arrangements/review dates been set and agreed?				

Details of any Medication Support Provided by Family or Others



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<b>Details of any Medication Support to be Given by Staff</b>

Outcome of Assessment dated: _____	Circle/Delete as Appropriate
The Service Users fully manages their own medication (no support required)	<b>YES/NO</b>
The Service Users requires physical assistance as detailed in medication policy	<b>YES/NO</b>
The Service Users requires verbal reminders as detailed in medication policy	<b>YES/NO</b>
Staff will need to fully administer medication	<b>YES/NO</b>
Staff will need to administer medication by specialised technique	<b>YES/NO</b>



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<b>Service Users Name:</b>		<b>DOB:</b>		<b>Service Users Address:</b>	
<b>Destination:</b>		<b>Leaving Date:</b>			
<b>Medication</b>	<b>Strength</b>	<b>Form</b>		<b>Quantity</b>	
<b>Signed out by:</b>		<b>Signature:</b>			
<b>Received by:</b>		<b>Signature</b>			



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<b>Self-Administration of Medication Risk Assessment</b>		
Service Users Name:	Date of Birth:	
Name of GP:	Service Users Address:	
Does the Service Users want to self-administer fully or partially?	Fully	Partially
Does the Service Users know what medicines they are taking and what they are for?	Yes	No
Does the Service Users know what time to take the medicines?	Yes	No
Does the Service Users know what dosage to take?	Yes	No
Does the Service Users know how to take the medicines?	Yes	No
Does the Service Users know about any special instructions?	Yes	No
Does the Service Users know about common, possible side effects?	Yes	No
Does the Service Users know what to do if they miss a dose?	Yes	No
Does the Service Users have any difficulty in reading the label on the medicines?	Yes	No
Can the Service Users open their medication (blister packs, bottles)?	Yes	No
Does the Service Users understand the principles of safe storage for medicines, including their responsibility for safe keeping?	Yes	No
Does the Service Users agree to notify staff of any changes to the prescribed medication and/or over-the-counter/homely medications?	Yes	No
Will the Service Users be responsible for the re-ordering of prescribed medication and its collection?	Yes	No

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Name of Medicine	Dose	Route	Time/Frequency	Self-Administration Yes/No

Details of any medication support to be given by staff

<ul style="list-style-type: none"> <li>• A copy of the Self-Administration Risk Assessment must be kept with the Service Users's MAR</li> <li>• The MAR should show which medications are for self-administration</li> <li>• A monthly stock balance should be maintained to record medicines obtained by Medcom Personnel Ltd on the Service Users's behalf and recorded on the MAR</li> </ul>			
Service Users Name:	Service Users Signature:	Date:	
Completed by Name:	Designation: Signature:	Date:	
Review (minimum 6 monthly or sooner if relevant change)			
Next Review Date	Completed by name	Completed by signature	Date