Background & Issues

This Policy is developed in line with the Policy Framework and Guidelines endorsed by the WA HACC Program and the Office of the Chief Nursing Officer (Department of Health).

Objectives

The Shire of Manjimup Home and Community Care (HACC) adopts the following medication beliefs and principles:

Beliefs:

- Frail aged people, people with disabilities and their carer's have a right to remain living in the community for as long as possible.
- Clients should be encouraged to maintain their independence as long as possible including managing their own medicines in a safe and effective manner.
- In endorsing the first two beliefs our support staff will provide medication support and/ or administration and will abide by the policy and procedures outlined in this document.
- Support workers will have access to training to ensure that they have appropriate skills and knowledge to support and/or administer client medication.

Principles:

- Shire of Manjimup HACC has established written policy and procedures that outline the decision of This Organisation regarding the role of support workers in the management of client medication and any relevant risk management policy and practice issues.
- Clients receive individual medication assessment (where appropriate) and where appropriate this assessment be in conjunction with the client, family, doctor and other health professionals.
- Shire of Manjimup HACC regularly liaises with general practitioners, pharmacists and other health professionals with regard to medications as required.
- Clients have a clear, individual medication support plan.
- A consent form is completed by the client or carer, family, or guardian.
- Clients with more complex health care needs have access to an appropriate health professional to provide back-up advice and support, as and when needed.
- Staff have access to training that provides them with the necessary skills and knowledge to confidently assist clients with medication support and/or administration.
- There is an organisational commitment to ongoing assessment and monitoring of staff practices.
- Shire of Manjimup HACC is committed to ongoing continuous improvement in the

management and administration of client medication.

Area of Application
Frail aged people, people with disabilities and their carers.

Policy Measures

DEFINITIONS – Medication SUPPORT and Administration

Medication support is the prompting and/or assisting the client with self medication and may involve:

- reminding and/or prompting the client to take the medication
- assisting (if needed) with opening of medication containers for the client
- and other assistance not involving medication administration.

If medication support is being provided the client retains all responsibility for their medications.

Medication Administration is the actual giving of medication and may involve:

- storing the medication
- opening the medication container
- removing the prescribed dosage
- and giving the medication to the client as per instructions.

If medication administration is being provided, the support worker is responsible for ensuring that the client takes their medications.

(Source: Adapted from the Certificate III CHCCS303A Module Provide Physical Assistance with Medication within the Australian Qualification Framework).

Note: Before involvement in the administering or support of client medication a support worker must have achieved the medication competencies described under Staff Training.

DEFINITIONS – Other

Client: The National HACC Program Guidelines 2007 describe the target population as:
(a) people in the Australian community who, without basic maintenance and support services provided under the scope of the National HACC Program, would be at risk of premature or inappropriate long term residential care, including:

(i) older and frail people with moderate, severe or profound disabilities;

(ii) younger people with moderate, severe or profound disabilities; and

(iii) such other classes of people as are agreed upon, from time to time by the Commonwealth Minister and the State Minister; and

(b) the unpaid carers of people assessed as being within the National HACC Program's 'target population'.

The Guidelines also emphasize that eligibility for services is based on frailty, related to impaired functional capacity and that individuals do not qualify for HACC services solely on the grounds of advanced age. Thus, individuals over any particular age do not qualify for HACC services on the basis of their age alone, but because they have difficulties in carrying out tasks of daily living and need assistance due to a moderate, severe or profound functional disability.

Carer: A person such as a family member, friend or neighbour, who provides regular and sustained care and assistance to another person without payment for their caring role other than a pension or benefit.

Primary Carer - The person who provides the most informal assistance to the care recipient.

Container: A container includes any receptacle used for the storage of medication and all dose administration aids such as dosette box, blister pack, webster pack, sachet's and other medication aids.

Medication: medication includes medicines prescribed for the client by a doctor or health professional and medicines purchased over the counter. These medicines include capsules, eardrops, eye drops, inhalants, liquid, lotion and cream, nose-drops, patches, powder, tablets, wafers, suppositories, oxygen, pessaries, nebulisers, schedule 8 drugs, vaginal cream by applicator, sprays (eg nitro lingual spray) and insulin (by pen or pre-filled syringes).

(Source: Adapted from the Certificate III CHCCS303A Module Provide Physical assistance with medication within the Australian Qualification Framework).

Pro re nata (PRN) Medication: is medication that is not needed or taken on a predetermined regular schedule but is taken in response to particular symptoms or complaints.

Support Worker: A support worker is an employee employed to provide personal care services, which shall include assisting clients with hygiene and grooming, dressing and undressing, fitting of appliances, mobility and exercises, toileting, fluid intake, feeding and preparation of meals, assisting enrolled nurses, registered nurses or others to manage clients where necessary, socialisation including talking with client and family and managing and or administering (in line with the HACC Medication Policy Framework) prescribed medications as per client service plan; and environmental services, which shall include limited housekeeping, bed making,

laundry, shopping, sewing, transport, assistance with correspondence, care of pets and pot plants and basic home maintenance; but does not include an employee who is substantially employed to perform domestic housekeeping work.

(Source: Adapted from the Draft HACC Award).

Relevant Legislation and Guidelines

The relevant legislation in Western Australia includes:

- Poisons Act 1964; and
- Poisons Regulations 1965.
- Medication Management Guidelines for Nurses and Midwives: Nurses & Midwives Board of Western Australia
- Operational Directive OD 0215/09 Storage and Recording of Restricted Schedule 4 Medicines Government of Western Australia Department of Health

CATEGORIES OF MEDICATION

For the purpose of this policy the medication covered by this policy is included in the table below. Suitably trained and competent support workers can assist clients with second category medications only. For agencies whose staff are only authorised to assist with the support of medications (NOT administration), clients can **only** be prompted and assisted with opening second category medication packaging.

FIRST CATEGORY MEDICATION (Health Professionals only) Support workers must not provide support to clients with this medication.	**SECOND CATEGORY MEDICATION** Support workers may assist clients with this medication after receiving approved competency based training and assessment of competencies and should be reviewed on an annual basis.
	Scheduled 8 medications if in medication aid.
	Tablets, Patches and Wafers.
	Eye drops; Ear drops; Nose drops and Sprays.
	Topical, rectal and vaginal preparations (eg creams and ointments)
	Enemas, pessaries and suppositories

FIRST CATEGORY MEDICATION (Health Professionals only) Support workers must not provide support to clients with this medication.	**SECOND CATEGORY MEDICATION** Support workers may assist clients with this medication after receiving approved competency based training and assessment of competencies and should be reviewed on an annual basis.
Any drugs that are to be nebulised that **have not** been dispensed and prepared by a pharmacist into unit doses.	Any drugs that are to be nebulised that **have been** dispensed and prepared by a pharmacist into unit doses. Metered dose inhalers that have been dispensed by a pharmacist.
Medicines given via feeding tubes (eg gastrostomy, jejunostomy) that **have not** been dispensed and prepared by a pharmacist into unit doses.	Medicines given via feeding tubes (eg gastrostomy, jejunostomy) that **have been** dispensed and prepared by a pharmacist into unit doses.
Medications given by the following routes: Intrathecal (into the spinal cord area) Intraperitoneal (into peritoneum/abdominal cavity) Intraventricular (into ventricles of brain) Epidural Intravenous, Intramuscular, Subcutaneous (excluding dispensed and prefilled syringes i.e. insulin)	Subcutaneous dispensed prefilled syringes i.e. Insulin.
All medications that are administered by the nasogastric route.	

Emergency situations: In an emergency situation it is the responsibility of This Organisation to have a written procedure in place to report and manage the emergent health needs of the HACC client. An emergency situation may involve as an example, giving the client the incorrect dose of medication or the client refusing to take their medication.

CLIENT ASSESSMENT

Where an assessment is needed to determine a client's capacity to participate in the management of his or her own medication The Shire of Manjimup HACC will use the following procedures:

- A general practitioner, registered nurse or pharmacist will complete an assessment of the client's ability to self medicate and provide it to the Shire of Manjimup HACC.
- A client **Medication Consent** form will be completed by the coordinator of The Shire of Manjimup HACC and signed by the client or their representative.

Key elements of client medication support

The Shire of Manjimup HACC will ensure that client medication is managed in the following way:

- Client medication will only be managed or administered if stored in a medication administration aid (such as a blister pack prepared by a pharmacist), as they are considered to assist in the minimising of potential errors.
- Where medication is not suitable for a medication aid (eg liquid, eye drops eardrops, ointment, cream etc) a set procedure is developed and followed (see the procedures at the end of this policy).
- The coordinator will develop a **Client Medication Support Plan** based on the
- medications that the client is currently self administering that includes:
  - a description of key tasks
  - client's name and date of birth
  - client allergies and reaction to allergens
  - medication to be given
  - dose to be administered
  - specific route eg oral, topical etc
  - time to be given
  - specific instructions regarding the medication, e.g. to be taken with food
  - commencement date of medication
  - cessation or review date of the medication.
  - The coordinator will communicate with the client's general practitioner, pharmacist, and/or other health professional when required to clarify or discuss the client's medication support and/or medication administration needs.

The **Medication Support Plan** should not have specific medication names on it. It is used only to prompt staff to the medication to be given, eg blister pack contents, inhaler, cream to legs.

SUPPORT WORKER ROLE IN MEDICATION support and/or medication ADMINISTRATION

When administering medication support and/or medication administration the support worker will:

- identify on the support plan that the client requires supporting medication support or administration
- (if support only) prompt or assist the client to take their medication including assistance with the packaging and taking the medication as per the support plan(a medication order is not required for support only)

- (if administration) the client has a medication order **and** a support plan
- the client has consented to the support worker assisting with the administration of their medication
- the client has their medications available
- the support worker washes their hands prior to assisting the client with the support and/or administration of their medication

For Administration Only

- the support worker ensures that the medication has been taken
- the support worker records the administration of the medication on the medication record.

Medication Record.
Support workers employed by the Shire of Manjimup HACC to assist clients with the medication support and/or administration will:

- never be involved in the support and/or administration of client medication, beyond their skills and training.
- be adequately trained by attending HACC endorsed medication training (including theory assessment), assessed as competent by their coordinator (on two occasions) and feel confident in performing the client medication assistance required of them.
- ensure that their day to day practices comply with the training they have attended.
- have their competencies monitored every twelve months by reassessment by their coordinator in the workplace.

MEDICATION INCIDENT GUIDELINES
DEFINITION OF A MEDICATION INCIDENT

A medication incident is any event where the expected course of events in the administration of medications is not followed. It can include the following:

- Medications given to the incorrect client
- Incorrect medicine being given
- Incorrect dose being given
- Incorrect time of medicine
- Incorrect route of medicine
- Spilt or dropped medicine
- Out of date medicine

- Missing medicine
- Lack of documentation such as assessment, medication order, medication support plan, medication record sheet (if required)
- Medication not given without instruction from the doctor or request from the client
- Breaches of the Shire of Manjimup HACC policy and guidelines
- Client refuses medication
- Incorrect storage of medications
- Incorrect supply of medications from the pharmacy.

ACTIONS IN THE EVENT OF A MEDICATION INCIDENT – SUPPORT WORKER

In the event of an incident in the management and or administration of client medication the support worker should:

1. Remain calm and acknowledge that an incident has occurred.
2. Identify the nature of the incident. For example, has the wrong tablet been given, has the medication been dropped on the floor or has the client refused their medication.
3. Call your manager/coordinator to seek further advice.
4. Call an ambulance if the client is in distress or showing signs of being unwell.
5. Observe the client for changes in behaviour or well-being as a result of the incident and report these to your coordinator/supervisor.
6. Record the incident in the client's record and on the client medication record.
7. Complete a **Medication Incident Report** and provide this report to your coordinator/supervisor.
8. Reassure the client and do not leave the client until instructed to do so by your manager/coordinator.

ACTIONS IN THE EVENT OF A MEDICATION INCIDENT – MANAGER/COORDINATOR

In the event of an incident in the management and or administration of client medication the manager/coordinator should:

1. Remain calm and acknowledge that an incident has occurred.

2. Identify the nature of the incident. For example, has the wrong tablet been given, has the medication been dropped on the floor or has the client refused their medication.

3. Contact the general practitioner or pharmacist or poisons information centre for information and instructions.

4. Follow advice provided by the general practitioner, pharmacist or poisons information centre (get this advice confirmed in writing as soon as possible after the event and include it as part of the medication incident report).

5. In accordance with the general practitioner, pharmacist or poisons information centre instructions, instruct the support worker to observe the client for changes in behaviour or well being as a result of the incident and report these to the general practitioner as advised;

6. Instruct the support worker to call an ambulance if the client is in distress or showing signs of being unwell.

7. Advise the support worker when they can leave the client.

8. Assist the support worker to complete a **Medication Incident Report**.

9. Advise the client's carer or significant other of the medication incident.

10. Ring to check on the client later in the day/next day (if appropriate).

11. Carry out an investigation of the specific incident with emphasis on the process associated with the incident not on the people involved.

12. Develop an action plan to prevent re-occurrence of the incident and share the decided actions.

Staff Training

The Shire of Manjimup HACC will ensure that staff who provide medication administration services will be provided with the following training:

- Theory of medication support and administration
- Competency assessment by the coordinator in medication support in the home of a client, on two occasions (or once in a classroom situation and once in the home of a client).
- Annual re-assessment of competency in the home of a client.

Policy Review

The Shire of Manjimup HACC will review this policy on an annual basis with input from the Shire of Manjimup HACC Manager and staff and endorsed by the Shire of Manjimup Council.

MEDICATION PROCEDURES

Shire of Manjimup HACC will specify and develop medication procedures deemed necessary for example, when medications are not suitable for a medication aid.

Administration

HACC Manager/ Coordinator

Adoption and Date Due for Revision

ADOPTED 9 MARCH 2006
REVIEWED 9 DECEMBER 2010
NEXT DUE FOR REVIEW DECEMBER 2011

The Administration of this Policy is by Community Services.