

THE FORTUNE CENTRE OF RIDING THERAPY

Medication Policy

VERSION NO.	PREPARED BY	TRUSTEE APPROVAL DATE
1	NRR Aug19	N/A

Introduction

This policy applies to all Students and Associates at FCRT, unless otherwise stated and should be read in conjunction with:

- Department for Education: Supporting pupils at school with medical conditions Dec 2015
- Any Individual Risk Assessments, Care Plans where appropriate, and Individual Medication Risk Assessments.
- Medication Administration Records (MARS)

Philosophy 1997

The Fortune Centre of Riding Therapy (FCRT) is committed to ensuring that all Students and Associates are safeguarded in every aspect of the 24hour curriculum and care provision. FCRT is committed to providing opportunities for students to develop a range of life and social skills that will be relevant to them in their everyday lives both now and in the future. These will seek to be realistic, while taking account of a student's aspirations, and matching needs to enhance their quality of life. Being safe and healthy and well cared for is an expectation that everyone should have, and FCRT believe that being supported and encouraged to be as involved and independent in respect of medical needs is essential when seeking to improve self-confidence, self-respect and self-esteem.

Principles

All staff, including volunteers at FCRT are required to support our Students and Associates following these principles:

- Students and Associates are to be given the opportunity to consent to their care and treatment, and to make informed choices regarding their health and wellbeing.
- Information regarding the care needs of the Students and Associates, including any medication they may need will be made available and be accessible to all relevant staff.
- Staff responsible for administering medication will be suitably trained and assessed as competent.
- FCRT will follow advice from the relevant GPs and pharmacy prescribing and dispensing our medications, who will audit our practice regularly.
- Every effort will be made to support our Students and Associates to be as independent as possible with their medication.
- The FCRT Nurses will be responsible for completing internal auditing and monitoring of our medication management and ensuring that any errors or potential problems are reported and dealt with appropriately.

Medicines Management Procedure

Medicines ordering

All prescribed medication is ordered monthly, from the relevant GP practice.

Prescriptions are sent electronically to Boots Christchurch.

On receipt of prescriptions, Boots notify an FCRT Nurse, if there are any missing items. In this instance the FCRT Nurse will liaise with the relevant surgery.

If there are any changes made to prescribed medication, or if new medication is prescribed, a 'Service User Update Form' is completed by an FCRT Nurse and sent by Fax to Boots Pharmacy.

Receipt of medication

Medication is delivered monthly.

An FCRT Nurse is present to receive the order, and MARS sheets.

All medication is then checked by an FCRT Nurse to make sure what is received corresponds with the MARS sheet.

This is then recorded on the MARS sheet, in the appropriate box.

If there are any missing items, an FCRT Nurse will notify Boots Pharmacy.

Receipt of Controlled Medication must be recorded in the C.D. book, and witnessed and signed for by two members of staff, who have the appropriate training. The amount of medication received **must be added to ALL of that individual's medication currently onsite**, including the medication kept in their own cupboard if self-medicating. This figure should then be entered into the totals column in the C.D. book.

Medication auditing

Two FCRT Nurse's audit all medication monthly.

The amount of medication 'carried over' is entered on the MARS sheet, in the appropriate box.

The figures are then checked to make sure they tally with what should have been used.

Any discrepancies are reported to an FCRT Nurse.

Disposal of medication

Boots Pharmacy, Christchurch, collects medication for disposal.

An FCRT Nurse completes the 'Returns Book'.

The following information is recorded:

Date, student or Associate's name, date of birth, medication, dose, amount being returned and reason for disposal.

On collection, an FCRT Nurse and the Boots' driver both sign the 'Returns Book'.

Returned medication is also entered on the MARS sheet in the appropriate box.

Administering prescribed medication

• Only staff who have received generic medication training and have been observed and signed off as competent should administer prescribed medication. A competency

Medication Policy revised August 2019 (NRR)

assessment is completed at least annually by an FCRT Nurse and is kept on the staff member's Personnel file. If a member of staff has not been signed off by a current FCRT Nurse then they should not administer prescribed medication.

- There is an individual medication risk assessment in each student or Associate's file. All staff that are competent to administer medication should have read this. Included in this risk assessment is an individual PRN protocol for each student or Associate.
- Before administering medications staff must follow effective hand washing procedures (see infection control policy).
- The medication is dispensed and administered immediately to the student or Associate. Medication should never be dispensed in advance and left for later.
- All students or Associates taking prescribed medication have a Medication Administration Recording Sheet (MARS) detailing medication and times to be taken.
- Only one student or Associate should be in the Healthcare Room, or other designated area, whilst medicines are being administered.
- Check the student or Associate against the MARS chart to ensure medication not already given and gain consent from student or Associate.
- Staff to retrieve the medication from the cupboard and then lock it again.
- Check the medication container and contents and student or Associate's name on label against the MARS chart.
- Check the time of administration is the same on the prescription chart and medicine container.
- Check the dose/frequency is the same on the prescription chart and medicine container.
- Check the form the medication comes in is correct e.g. tablet, liquid or topical.
- For topical treatments check the date it was opened
- Check the expiry date of the medication on the container.
- Check the medication is to be given in the right way e.g. swallow, chew, and suck.
- Supervise the student or Associate taking the medication in the correct manner.
- Record on the MARS chart that the medication has been taken.
- The aim is for the **right student or Associate** to get the **right drug** at the **right time** in the **right dose** using the **right method** following the **right procedure** and ensuring the **right record keeping**.

Refusal/dropping of medication

If a student or Associate refuses their medication once it has been dispensed then staff need to put the refused medication in a clear pouch (provided by Boots Pharmacy) and label (again, provided by Boots). The information on the label must include student or Associate name, name of medication, dose of medication, date and be initialled by the member of staff administering the medication. The staff member must then record on the MARS that the medication has been refused (using the correct code that is indicated on the MARS and displayed on the wall).

If a student or Associate refuses a medication and it has not yet been dispensed then staff ONLY need to record this on the MARS. Staff do not have to dispose of the medication into the clear pouch.

If staff or a student or Associate drop medication then it should not be given and staff should follow the same procedure as for refusal of dispensed medication.

N.B. If unsure about administering a medicine, contact an FCRT Nurse for advice.

A British National Formulary (BNF) is available on all FCRT sites or access <u>https://www.medicines.org.uk/emc/</u> for staff to consult about the medicine they are giving and its side effects.

Administering of controlled drugs

When staff administer controlled drugs, the following procedure **must** be followed: -

- Only staff who have received generic medication training and been observed and signed off as competent should administer controlled medication.
- There must be another member of staff present to witness the whole procedure.
- Check the student or Associate against the MARS chart to ensure medication not already given and gain consent from student or Associate.
- Remove the controlled drug from the locked cupboard within the medicine cupboard.
- See above for medication administration procedure.

THEN

Count the tablets, if they are in a container then empty from the container to the triangle pill counter.

Both staff members must check the outstanding amount of tablets or liquid in the stock balance column in the Controlled Drug Record book. Each time a tablet is given the number counted should be one less than the number before.

- An entry in the Controlled Drug Record book must be completed with the date, time, student or Associate's name and amount of medication to be given. The witness as well as the staff member administering medication must countersign this.
- Return the controlled drugs to the lockable controlled drug cupboard.

PLEASE NOTE

When a full-unsealed box of tablets is received from the chemist, to avoid over handling and counting, the sealed box is to be placed in the CD cupboard. It is not necessary to individually count these tablets as the amount will be on the sealed label. However, if the seal is broken the tablets must be counted. The number of tablets must be added together with the tablets currently in use to give a stock balance in the CD book.

If a controlled drug is dropped please record in Controlled Drug Record book and place in sealed envelope back in controlled drug cupboard. Please notify an FCRT Nurse as soon as possible for safe disposal at chemist.

Administering homely remedies

There are many times at which a student or Associate may develop a minor ailment that needs to be treated. It is important that staff are able to respond in a timely way and help the student or Associate to feel well. To address this in a care setting, we use **homely remedies/over the counter medications**.

A homely remedy is a medicinal preparation used to treat minor ailments; it is purchased over the counter and does not require a prescription. These homely remedy products are kept in the residence.

Homely remedies fall into two legal categories,

- **GSL** (general sales list), which are available widely and sometimes referred to as over the counter medicines or
- **P** (pharmacy) medicines, which are available only from a pharmacy.

The GP (Dr R Jenkinson) for the Fortune Centre of Riding Therapy has agreed a list that can be given without consultation this is known as the FCRT GP Homely Remedy Group Directive (this is displayed in the medication area/room of each residence) If a homely remedy is used occasionally,

It is now **not** advised for staff in a care setting **to administer ibuprofen** tablets for mild to moderate pain. If paracetamol and ibuprofen gel are not sufficient, advice should be sought from the GP. If a student or Associate chooses to purchase ibuprofen, please inform an FCRT Nurse who will refer to the procedure for assessing capacity to buy homely remedies.

If a student or Associate buys or returns from home with homely remedies an FCRT Nurse needs to be informed. A decision will then be made as to whether this item is safe to be kept in their room OR will need to be taken and put on a MARS and kept into the homely remedies cupboard.

Administering PRN (as required) medication

Any student or Associate who is prescribed specific PRN medication such as anti-histamine or inhalers or regularly requires non-prescribed PRN medications such as paracetamol will have an individual PRN protocol within their medication risk assessment. This is kept in each student or Associate's medication file.

If a student or Associate is prescribed a PRN medication, this will be entered on the individual MARS.

At WHF and LFH, there will always be a member of staff on duty who has been trained and assessed as competent to administer medication. Therefore, if a student requires a homely remedy, this should be administered by that member of staff.

At ATY, if there is no FCRT Nurse available, efforts should be made to locate a staff member who has been trained and assessed as competent to administer medication. If there is no such staff member available, it has been decided that all staff are able to administer homely remedies, in accordance with the following procedure.

The procedure is:

Before administering any homely remedy, the staff member must firstly check:

- 1. Which homely remedies can be administered by FCRT staff. A laminated green summary is available in the ATY Healthcare room and the WFH Medical room.
- 2. The student or Associate allergy list that is listed on a laminated sheet on the inside of the glass-fronted cabinet in the ATY Healthcare room. At WHF, the sheet is on the inside of the homely remedies cupboard. At LFH the list is inside the stock medication cupboard.
- 3. The handover book and the homely remedies recording book (at either site) which show whether the student or Associate has already received any homely remedies that day.

It is also recommended that staff refer to the individual medication risk assessment for the student or Associate which details any specific PRN medication requirements.

Staff should record the medication given, the time, the dose and the reason on two stickers. One sticker is added to the homely remedies recording book kept in the Healthcare room at ATY, in the medication room at WHF, and in the office at RH and LFH. The second sticker is added to the relevant Handover book. In addition to this staff need to record the stock levels of paracetamol in the over the counter medication book.

Student/associate allergy list is inside the glass cabinet in the Healthcare room at ATY, inside the OTC cupboard at WHF, inside the stock medication cupboard at LFH and on the cupboard by the desk in RH office. It is also accessible on SharePoint.

Dispensing medication on exeat weekends and holidays

- Check what medication is required, including dosage and frequency by referring to medication charts in prescription folder.
- Check medication against chart and ensure medication is clearly labelled with drug name, dosage, frequency of taking and any relevant precautions
- Ensure student or Associate has enough for the weekend/holiday + a few days extra, (should they not be able to return as planned).
- If the student or Associate is responsible enough to carry own medication the staff member must ensure that it is packed in an appropriate place.
- If it is inappropriate for student or Associate to carry own medication then inform the adult accompanying student or Associate of medication required and any special instructions and give medication to responsible adult.
- Record all medication dispensed on specific exeat/holiday form in the back of the medication file.
- On return from holidays/exeat, all medication to be counted and entered onto exeat/holiday form.

Please note: When dispensing controlled drugs for exeats/holidays, there must be two members of staff present. The process above of signing drugs in and out must be completed in the controlled drugs book as well.

NB Do not transfer medication into other containers or cut sleeves of packets in half.

Self-administration of medication for students and Associates

<u>Aim:</u> To ensure that students and Associates receive training to administer their own medicines in a correct and safe manner to promote independence and autonomy.

Practice:

- Before student or Associate is started on self-administration of medicines programme an initial risk assessment form must be completed.
- Risk assessment to be discussed by the FCRT Nurses for agreement that student or Associate enters into self-administration of medication programme.
- The student or Associate is given information about self-administration of medication in verbal, written or in pictorial format by an FCRT Nurse.
- If the student or Associate agrees to proceed with the self-administration of medicines programme written consent should be obtained from the student or Associate and kept in their medication folder and also in the student or Associate's records. The student or Associate may withdraw consent at any time and this should be recorded in the student or Associate's records.
- The student or Associate is then entered onto the self-administration of medicines programme. Before the student or Associate moves from one level to the next there should be assessment and discussion of their progress by the FCRT Nurses. They would also need to not require prompting for any of the items on each of the self-medicating assessment form.
- All students or Associates will start on Level 1. There is a minimum of one week at each level but this can be longer depending on the individual student or associate.

• Levels of the self-administration of medicines programme

Level 1

- A supply of medication will be left in the student or Associate's named container which is stored in the medication cabinet at WHF.
- In RH and LFH, the medication will be kept in the student or Associate's room, locked in their medication cabinet.
- The student or Associate will be expected to request their medication at the correct time. If the student or Associate has not requested their medication within 30 minutes of appointed time the staff should remind them and then continue to follow the Level 1 assessment process.
- Staff should complete the assessment form. This is kept in the student or Associate's prescription folder.
- When the student or Associate is competent at Level 1, they will move onto Level 2.

Level 2

• A supply of the student or Associate's medication will be stored in a locked medication cupboard in the student or Associate's room. Only a staff member will hold the key.

- The student or Associate will be expected to request their medication at the correct time. If the student or Associate does not request their medication then they should be reminded. As this is Level 2 of Assessment for self-medication, the student or Associate should not need reminding. If the staff member is having to frequently prompt/remind the student or Associate then the student or Associate may have to go back to Level 1 for a longer period.
- The staff member will then open the student or Associate's medication cupboard and observe the student or Associate taking out the required medication. The staff member will then ask the student or Associate what they need to take. Before allowing the student or Associate to take the medication, the staff member needs to check it is the correct tablet and amount.
- Assessment for self-medicating form Level 2 to be completed by staff member. This will be kept in the student or Associate's prescription folder.
- Before moving onto Level 3, an FCRT Nurse needs to complete, with the student or Associate, a **student or Associate self-medication checklist**. The student or Associate needs to 'competent' in all relevant areas on the checklist before they can move onto Level 3.

Level 3

- A supply of the student or Associate's medication will be stored in a locked medication cupboard in the student or Associate's room. The student or Associate and staff will hold the key.
- An FCRT Nurse will dispense a supply of medication, this will vary depending on the level of independence the student or Associate has.
- The student or Associate will be responsible for self-administration
- A member of staff will check daily that the student or Associate has left the medication cupboard locked.
- Review of self-administering medication will vary of the independence of the student or Associate but initially it will be weekly.
- If the student or Associate requires prompting from a staff member on any of the items on the self-medicating assessment form (Level 3) then the student or Associate will need to return to Level 2.

Responsibility

- The FCRT Nurses are responsible for student and Associate information, teaching and supervision before commencing self-administration of medication.
- The FCRT Nurses are responsible for ensuring ongoing supplies of medication.
- All assessments to be undertaken by registered nurses.
- Assessment forms to be stored with prescription chart in the student or Associates' medication folder and be completed by staff member undertaking medication.
- When students or Associates are on Level 1 and Level 2 of programme prescription charts to be signed in usual way. Staff will also need to fill in the assessment form for Level 1 and 2. An FCRT Nurse will complete assessment form for level 3.
- Level 3 does not require a prescription chart to be kept.
- The Registered Manager is responsible for ensuring these procedures are implemented.

Management of medication errors

A medication error is an error in the process of prescribing, dispensing, preparing, administering, monitoring or providing medicine advice regardless of whether harm has occurred.

As a preventative action, senior staff made a decision to limit the number of staff trained to administer medication. All staff that administer medication have been signed off as 'competent'.

Staff action in the event of a medication error

If a student or Associate is seriously unwell because of the medication error or incident, medical assistance should be sought straight away and the student or Associate monitored closely. If the student or Associate is mobile and communicating then the senior staff should contact an FCRT Nurse or Registered Manager to inform them of the error and seek advice.

Staff involved should then report the error on My Concern. The Registered Manager / FCRT Nurse will then investigate and decide whether the error is notifiable or not.

Examples:-

- 1. Omissions prescribed dose not given
- 2. Wrong dose administered too much or too little
- 3. Extra dose given
- 4. Un prescribed medicine giving a student or Associate a medication that is not authorised for them
- 5. Wrong dose Interval giving the medication too early or too late.
- 6. Wrong administration route administration of a medicine in a different form than prescribed.
- 7. Administration of a drug to a student or Associate that has a known allergy.
- 8. Administration of a drug past its expiry date
- 9. Not signing the MARS when medication not given.
- 10. Recording errors including signing on the wrong date or time on the MARS/CD book.

PROMPTING ASSISTING AND ADMINISTERING

Staff may be required to prompt, assist or administer medicines. Staff should be clear of the difference between these roles.

The FCRT Registered manager will ensure that required staff are trained in medicines administration before these core roles can be done. Staff will be reassessed as competent annually.

The level of support a student / Associate requires may vary, with the person taking more or less responsibility over time depending on their health and capability, and with the medicine itself. For example, a student / Associate may self-administer an inhaler, but require staff to give tablets and nursing staff to given an injection.

Prompting

the dictionary definition of 'prompting' is: 'the action of saying something to persuade, encourage or remind someone to do or say something'.

Prompting of medication is reminding a student / Associate of the time and asking if they have or are going to take their medicines. The person is still in control of their medicines, and may decide not to take them or to take them later. Prompting can be useful when a person knows what medicines to take and how to take them, but may simply forget the time.

(N.B. If carers are expected to prompt a person to take medicines, they need to know what time(s) of the day to do this. The Care Inspectorate is aware of examples where people were prompted to take all of their medicines irrespective of whether they were due. This resulted in one case of a person taking Warfarin three times a day, instead of once a day, with serious consequences.)

Assisting

A student / Associate may be able to retain control of his or her medicines but need assistance with simple mechanical tasks.

Assisting with medicines can include:

- ordering repeat prescriptions from the GP's surgery
- picking up prescriptions from the GP's surgery
- collecting dispensed medicines from the pharmacy
- bringing packs of medicines to a person at their request so that the person
- can take the medicines
- opening bottles or packaging
- reading labels and checking the time at the request of the person who is
- going to take the medicine

• ensuring the individual has a drink to take with his or her medication

As with prompting above, the student / Associate is assessed as being able to self-medicate, and is in control of their medicines. This independence should be supported.

Administration

if a student / Associate cannot take responsibility for managing their medication, staff may be needed to ensure that the person gets offered or is given:

- the correct medication
- at the correct time
- in the correct way

this must be considered medicines administration.

Administration of medicines is one, all, or a combination of the staff member doing the following:

- deciding which medicine(s) have to be taken or applied and when this should be done
- being responsible for selecting the medicines

giving a student / Associate medicines to swallow, apply or inhale, where the person receiving them does not have the capacity to know what the medicine is for or identify it
giving medicines (even at the request of the student / Associate) where a degree of skill is required to be exercised by the care worker to ensure it is given in the correct way

<u>Staff trained to support students / Associates with their medication should consult the</u> <u>individual medication risk assessment to establish the level of support this person requires.</u>