

Administration of Medicines Guide in Care Homes

Staff involved in administering medication **MUST** ensure they are giving the right medicines to the right person. A robust system must be in place for patient identification such as resident photographs.

- All equipment should be assembled and ready before starting the medicines round. This will include:
 - 1) All medication to be given at that time of day including fridge items and PRN medicines.
 - 2) Medicine pots, water, cups, gloves, and any measuring devices required
 - 3) The medicine administration record (MAR) charts
 - 4) Do not disturb apron/tabard if used within the home
- Ensure MAR chart records are
 - 1) Legible, clear and accurate
 - 2) Signed by the care home staff where needed
 - 3) Have the correct date and time
 - 4) Are completed as soon as possible after administration
 - 5) Avoid jargon and abbreviations
- Always ask the resident (if appropriate) if they want their medicines **before** they are removed from the packaging. If the medication is refused the resident should not be forced to take it and neither should it be given covertly by hiding it in food or drink unless a covert care plan is in place and agreed by the multidisciplinary team. Instead it should be offered again a little while later. If the resident continues to refuse their medication the lead carer/care home manager should be informed and the GP may also need to be informed if the resident continues to refuse their medicines.
- Ensure that the label on the medication matches that on the MAR chart in all respects i.e. drug name, strength, directions, and form (tablets, capsules, liquid)
- Remember the 7 R's
 1. RIGHT resident
 2. RIGHT time/frequency
 3. RIGHT dose
 4. RIGHT route
 5. RIGHT medicine
 6. RIGHT documentation
 7. RIGHT to refuse
- Check that the dose is clear and if the directions say 'as required' ensure that you understand the circumstances under which they should be offered by referring to the residents PRN protocol. E.g. if the tablets are for pain relief, establish whether the person has any pain before offering them. Ensure that the medication has not already been administered by another staff member by checking the MAR chart and on the reverse. If a dose of a PRN medicine is administered it needs to be recorded on the MAR chart (front and back ensuring all details are completed and follow up is documented). Please check your medication policy for further information regarding documentation of PRN medications that are not required.

- Tablets/capsules should be prepared by a clean method. That is, they should be pushed out of their packaging directly into the preferred method of administration for that resident e.g. medicine pot, spoon, directly into the residents hand. They should then be handed to the person. Syrup or mixtures should be administered using the spoon or measuring device provided by the pharmacy. Some medicines can be harmful on direct contact with the skin in which case plastic gloves should be worn.
- Ensure the resident has a drink of water to assist them in taking their medication. If fluids need to be thickened for a resident then this should be discussed with the GP/Pharmacist to confirm suitability of thickening medication.
- Observe the resident taking their medicines. Once the resident has taken the medicine, sign the MAR chart in the correct column by the correct medication and administration time. If the medication has been refused the MAR chart should also be endorsed with the appropriate code as indicated on the bottom of the MAR chart additionally, if necessary a note should be made on the back of the MAR chart explaining why it was refused.
- If the medication has a variable dose e.g. 1 or 2 tablets the quantity given must be endorsed on the MAR chart
- Once the person has received all the medication due to be administered and all the entries have been made on the MAR chart the procedure should be repeated with the next resident.
- Once the medicine round is complete, ensure the drugs trolley is clean and tidy ready for the next person to use. Any spillages should be cleaned up immediately and according to local COSHH (Control of Substances Hazardous to Health) regulations. Store the medicines trolley safely and securely by ensuring it is tethered to the wall.
- If you notice a resident's medicine is getting low, ensure that this has been ordered or requested from the GP practice, if not then place an order/request for this item and annotate the residents care notes accordingly.
- Dispose of any rubbish/unused medicines appropriately. Discarded medicines should be disposed of as per local policy. If they are to be returned to the dispensing pharmacy use the process detailed by them. Any confidential waste (medicine boxes with labels on) should be disposed of via a confidential waste bin and should not be disposed of in general household waste. Be aware of cytotoxic/static and controlled drug disposal requirements.

