

MEDICATION ADMINISTRATION

POLICY AND PROCEDURE

Policy Statement

Each Participant requiring medication should be confident their support professional administers, stores and monitors the effects of their medication and works to prevent errors or incidents.

Mypower Foundations will provide on-line training on assisting with medication to its Support professionals. This training will ensure support professionals are able to support clients and assist them with their medication, provided it is ready for dispensing in a Webster Pack; the prescribed dosage has been separated and identified by an appropriate person or the support professional has access to the original packaging of the medication, labelled with all necessary details.

Medication will not be administered by a support professional on behalf of Mypower Foundations without training.

All support professionals to provide individualized care to the client. Every client's needs and reactions to medications can differ, so personalizing the approach is crucial.

Failure to administer medication in accordance with this policy may amount to a breach of the Duty of Care policy. Some medications are only used when needed for a specific situation, such as intermittent chest pain, the common cold, allergies, constipation, or pain.

Definitions

An **appropriate person** is a family member, carer or other authorised person who has been nominated by the client and supports them with decision making or communicating instructions.

Training in medication administration will be provided by a recognised and accredited training provider, confirmed by a valid certificate.

A **Medication Chart** is used to direct how and when drugs are to be administered and as a record of their administration. The Medication Chart will be referred to when administering medication and initialled by the support professional when the administering has been completed. Not every client will have a Medication Chart.

An **Incident Report** is a detailed account written after an adverse or unusual event relating to medication administration, describing what occurred, actions taken, and recommendations for future prevention.

A **Webster Pack** is a system to manage medications, by pre-packing a week's worth of tablets in an easy to administer blister pack, segregated into a board which is in a calendar format, with times of days and dates. Not every client will have a Webster Pack. Webster Packs might also take the form of reusable **Compartmentalised boxes**.

Personal Protective Equipment is any equipment designed to prevent the risk of injury or infection to the client and/or the Contractor when administering medication such as facemasks, gloves, eye protection, hand sanitiser or gowns.

A **PRN** is a Latin term that stands for "pro re nata," which means "as the thing is needed." A client will choose when to take a PRN.

Procedure

- Medication will be provided to the client in accordance with the dosages prescribed by the Webster Pack, compartmentalised boxes or as instructed by the appropriate person.
- Where medication is being supplied directly from the packet, the support professional will:
 1. Check the medication name aligns with the instructions on the medication chart.
 2. Check the expiry date has not passed, in which case the medication should not be administered.
 3. Check the name and date of birth on the medication matches the client's name and date of birth.
 4. Check the required dosage.
 5. Administer the medication in accordance with packet instructions.
- The method of administering medication will be prescribed by the instructions on the packet; whilst most medication is administered orally as tablets or elixirs, it can be by drops in the eye/ear/nose, by inhalation or the application of creams or ointments.
- Medication administered vaginally or rectally are absorbed by the body at faster rates than oral medication, however support professionals without suitable qualifications should not administer these forms of medication, as they pose a higher risk to client safety.
- Whilst administering medication personal hygiene is to be implemented by thoroughly washing hands and with the use of any appropriate Personal Protective Equipment.

- In the case of a medication recall, cease giving the medication to the client immediately, seek the advice of the client's Dr and return the medication to a chemist.
- A client's right to choose must always be respected, including in the event a client refuses medication. Appropriate advice from the relevant authority such as the client's Dr or Chemist should be sought when this occurs.
- After use, medication is to be stored following the packet instructions or following the direction of the appropriate person.
- Unused medication should be stored in its original packet, container or by the instructions of the appropriate person.
- Failure to follow or breaching this policy may amount to a breach of the Duty of Care policy; unintentional breaches may lead to mentoring and further training, however persistent and flagrant breaches may result in Termination of Contract, in accordance with that policy.
- Contingencies that may occur whilst administering medication:
 1. Client's incomplete ingestion of medication
 2. Use of contaminated, out-of-date or discoloured medication
 3. Client displaying physical, behavioural or cognitive changes before or after the administration of medication.
 4. Allergic reactions, and
 5. Incorrect administration of the medication.
 6. Medication mix-ups or administering medication to the wrong client.
 7. Client may refuse medication.
- Support professionals need to be watchful and identify any side effects or adverse reactions following the administration of medication, such as:
 1. Nausea
 2. Ringing on the ears
 3. Dry mouth
 4. Memory loss
 5. Itching
 6. Blurred vision

Any of these side effects needs to be noted in the shift notes and on the Medication Chart (if applicable). The appropriate person must be informed.

- More severe side effects require immediate assistance and an emergency call for an ambulance; these include changes to a client's:
 1. Airway, such as choking or high-pitched wheezing, otherwise known as stridor.
 2. Breathing, such as slowed, fast, noisy, wheezy or absent breathing.
 3. Circulation, such as the loss of a pulse or the pulse becoming weak, irregular or rapid, the client appearing flushed or sweaty or their skin showing a bluish discolouration, and

4. Level of consciousness, such as unexpected drowsiness or the loss of consciousness
5. Skin rashes
6. Rhinitis – inflammation of the nasal mucosa or runny nose
7. Diarrhoea
8. Nausea
9. Wheezing
10. Dyspnoea – difficulty breathing
11. Watery eyes

Responsibility

It is the support professional's responsibility to administer medication (if they are suitably trained), complete accompanying documentation such as medication charts, Webster packs or Compartmentalised boxes and later complete a Shift Report confirming administration of medication, incorrect administration, inconsistencies, adverse side effects and other handling contingencies.

It is the support professional's responsibility to monitor the client for adverse reactions following the administration of medication and take appropriate action, such as seeking emergency assistance.

It is the support professional's responsibility to complete an Incident Report should there be any adverse side effects or other unusual consequences or errors.

A client will decide if and when to take PRN.

It is the facilitators and director's responsibility to ensure support professionals are appropriately trained and that they have access to the necessary resources for safe medication administration.

Relevant Legislation and Policies

- Privacy Act 1988
- Work Health and Safety Act 2011
- Poisons and Therapeutic Goods Act 1966 (NSW)
- Health Records and Information Privacy Act 2002 (NSW)
- Medicines, Poisons and Therapeutic Goods Regulation 2008
- NSW Disability Services Standards
- National Standards for Disability Services
- Disability Discrimination Act 1992
- National Disability Insurance Scheme Act 2013
- NDIS Code of Conduct
- NDIS Quality and Safeguarding Framework
- Universal Declaration of Human Rights

- United Nations Convention on The Rights of Persons with Disabilities
- Public Health Act 2010
- Disability Inclusion Act 2014
- Aged Care Act 1997