

## Care and Administration of Medicines

<b>First name:</b>																				
<b>Surname:</b>																				
<b>Company:</b>																				
<b>Date:</b>																				

Please complete the above, in the blocks provided, as clearly as possible.  
 Completing the details in full will ensure that your certificate bears the correct spelling and date.  
 The date should be the day you finish & must be written in the DD/MM/YYYY format.

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N.B: We are aware that official practice is to use the terms “service users” or “people using this service” to describe those receiving care. We prefer the term “client” and use it throughout our training package.

### Key:



worksheet



important

## Learning outcomes.

- Understand the legislative framework for the use of medication in social care settings.
- Know about common types of medication and their use.
- Understand roles and responsibilities in the use of medication in care settings.
- Understand techniques for administering medication.
- Know how to receive, store and dispose of medication supplies safely.
- Know how to promote the rights of the individual when managing medication.
- Understand how to support use of medication.
- Know how to record and report on use of medication.

## Alignment to Qualifications and Credit Framework (QCF).

Covers knowledge aspects of unit HSC3047.

## Links to Care Quality Commission (CQC) outcomes.

Outcome 9: Management of medicines.

## We suggest that the following manuals will complement this manual.

Record Keeping.  
Infection Control.

## Introduction.

**As of February 2006 nearly half of all nursing and care homes were failing to meet the minimum standard of safe handling of medicines.**

The principles for the safe handling of medicines do not vary depending on type of care offered, people cared for or size of business. Your home, and you, have a duty of care to properly handle medication and to support your clients to take their medicines safely.

The majority of people living in care homes take some kind of medicine. Some will be administering their own medication, others may take medicines that can only be administered by trained doctors and nurses. As a care worker you will need to be familiar with the medicines taken by your clients and you may even be trained to administer a number of them. You should be aware of issues concerning their control and must have knowledge of your home's own policies and procedures.

As a carer you are most likely to be administering medicines that are taken by mouth, inhaled or applied to the skin, you may also receive specific training to use suppositories and to carry out certain types of injection. Clients requiring medicines that cannot be administered by you should, unless they are self-administering, be treated by doctors and / or nurses.

This course is designed as an introduction to the care and administration of medicines. It will make you think about the type of medicines used in your care home and the reasons for their use, it will also look at how they need to be controlled and administered. As well as completing this manual, your employer will also check your competence in delivering medication. Please see example form, at back of this manual, that should be completed, and added to the personnel records, as evidence of competency.

## Unit One

### Legislation.

Medicines can be highly dangerous substances and as such must be carefully controlled. It is essential that only competent staff administer medications and that there are suitable in-house policies and procedures for the safe storage and use of all medicines in the home.

Staff administering medications must have received appropriate training that must include:

- Basic knowledge of how medicines are used and how to recognise and deal with problems in use.
- The principles behind all aspects of the home's policy on medicine handling and records.

Administration of medication must be carried out by a designated, appropriately trained member of staff and should be witnessed by a second designated, appropriately trained member of staff. In essence the members of staff responsible for the administration of medication should have enough knowledge and experience to carry out the task safely and efficiently.

**All staff must receive in-house training on policies and procedures relevant to their workplace. This may form part of the induction programme and must be updated regularly.**

### Health and Social Care Act 2008.

Regulation 13 Health and Social Care Act 2008 (regulated activities) Regulations 2010.

(OUTCOME 9: Management of medicines).

“The registered person must protect service users against the risks associated with the unsafe use and management of medicines, by means of the making of appropriate arrangements for the obtaining, recording, handling, using, safekeeping, dispensing, safe administration and disposal of medicines used for the purposes of the regulated activity”.

#### Managers must:

- Make sure a person-centred approach is taken regarding medication.
- Manage risk.
- Follow relevant guidelines.
- Promote rights and choices.
- Support clients appropriately.
- Ensure staff are competent.

## Health and Safety at Work Act 1974.

Appropriate measures must be taken to ensure the safety of all staff and anyone who may be affected by work practices.

Medications are hazardous substances therefore their use must be risk assessed and safe procedures should be implemented. Adequate training must also be available.

## Control of Substances Hazardous to Health 2002.

Medicines can cause ill health if they are given in incorrect amounts, administered by the wrong method or given to the wrong person. Clients, staff and even visitors may be at risk.

### Employers must:

- Ensure correct storage of medicines.
- Provide information sheets about the hazards associated with each type of medicine.
- Provide appropriate personal protective equipment e.g. gloves.

### Employees must:

- Handle medicines according to in-house policies.
- Make themselves aware of associated hazards.
- Use personal protective equipment where provided.

Safe administration of medicines is a vital part of care homes' responsibilities for their clients' welfare. Both over and under medication can be signs of carer abuse and wilful or accidental neglect. Clients should receive appropriate medication whether they are self-administering or dependent on staff; you must also be able to account for all medication received in the home.

You must be able to demonstrate that all medications have been stored, used and disposed of appropriately, failure to do so could result in investigation and, where necessary, prosecution. Medicines are hazardous substances and may have a high value, in-house policies and procedures must protect against misuse, abuse, theft and accidental harm.

As it is important for you to encourage your clients' independence efforts should be made to support them in controlling their own medication. Decisions as to who is able to do this will be made jointly between the client, their family, doctors and care staff; there should be ongoing monitoring of the situation to prevent clients suffering if they become more forgetful or fail to recognise the importance of taking their medication.

**It may be considered an invasion of privacy to check up on clients each time they are supposed to have taken medication. Monitoring should be discreet and appropriate.**

Clients who are able to self-administer must be provided with a lockable drawer or cupboard for safe storage of their medicines. In case of problems occurring there must be a fall back policy to allow care staff to access this drawer or cupboard with the client's permission.

Any clients who are mentally able to choose are free to buy their own remedies for minor ailments, they should be supported to do this and encouraged to discuss options with the pharmacist. It is important that staff take care of the needs of other, less independent, clients when they suffer from complaints such as coughs, colds and headaches. The home may keep a stock of over the counter treatments from a list that has been compiled with the assistance of clients' GPs and the pharmacist, policies must exist for their safe administration and there should be procedures in place for recording their receipt, storage and use.

Complementary or alternative treatments may only be used with the informed consent of the client or a person authorised to speak on their behalf. Advice should be sought from the pharmacist regarding the possibility of reactions between these remedies and any prescription medicines being taken.

Some personal control over medication is better than none at all, so for example if a client suffering from arthritis is unable to open containers staff should be able to provide help but medicines may still be retained in the client's own room. A client may be able to apply creams but decide to let staff administer tablets etc.

## Unit One Questions

1. Give two examples of hazards associated with medicines.

1.

2.

2. If you are going to administer medication what training should you have received?

3. What does self-administration mean?

4. In your opinion why is it important to encourage and support self administration?

5. Who is responsible for the administration of medication in your workplace?