

# Medication: Administration of Non oral and non-injectable medication by support workers

## POLICY AND PROCEDURE

### 1.0 Purpose

This policy guides training and procedures to determine qualifications, skills, and competencies required for support workers to administer non-oral and non-subcutaneous medication safely and consistently to clients living in the community.

### 2.0 Scope

#### Community:

This policy and procedure applies to all care staff administering non-oral and non-injectable medication to Subee Newlake clients in the community. This includes:

- Ear and eye drops
- Metered aerosols, space inhalers and turbo-halers
- Suppositories
- Rectal or vaginal medications
- Transdermal medication
- Nebulisers
- Enteral medication/feeds
- Topical medications

Facility: Subee Newlake staff working in a facility must follow the Medication Policy and Procedures of the facility they are working in.

#### **Desired Outcome**

To maintain a quality and safe procedure for support and service deliver to clients and staff.

To have clear guidelines around who is appropriately qualified and trained to administer non oral and non-injectable medication to clients.

Client has choice and involvement around medication management.

### Definitions

Non-Oral Medications - Medication taken topically (such as creams), inhalers, metered aerosols, injections, per rectum,

per vagina, enterally, ear/eye drops, nebulisers, transdermal

medication patches, intravenous, oral medications via Percutaneous Endoscopic Gastroscopy (PEG).

Administration - Refers to the act of physically giving a Medication by inhalation, per rectum, per vagina, topically or Enterally and ensuring that the substance has entered the service user's body.

Prompting - Refers to assisting service users in taking their medication by either reminding or prompting. This includes staff being able to push the medications directly from a Webster Pack into the service user's hand.

PRN - Pro re nata is a Latin phrase meaning "in the circumstances" or "as the circumstance arises." It is commonly used in medicine to mean "as needed" or "as required" It is generally abbreviated to p.r.n. in reference to dosage of prescribed medication that is not scheduled. Staff must follow the written authority from the medical practitioner regarding the indications for administering the PRN medication. Such administration of medication is not meant to imply, and should never allow for, exceeding a given daily dosage.

Care Plan - A document developed in response for a request for service. It is developed by an appropriately

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V1	11/07/2023	Page 1 of 5



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skilled professional from the service provider. It outlines the tasks, duties and interventions required to meet the care and service needs of the service user. The care plan guides and directs staff in the day to day delivery of services.

### Responsibility

All staff delivering hands on care to any Subee Newlake client are responsible for knowing and adhering to this policy.

Human resources is responsible for recruiting appropriate trained staff and arranging annual mandatory medication assist training.

Business support is responsible for updated employee training records onto TRACK and in N-drive

Service Coordinators and Subee Newlake registered nurses are responsible for enforcement of this policy.

The Quality Coordinator is responsible for monitoring medication incidents and training compliance

### Safe Medication Handling

Medication can have a significant impact on the wellbeing of the service user. Subee Newlake staff must always contact the office, Case Manager or RN, should there be any doubts about the administration or prompting of medication to their Service User.

Subee Newlakes risk assessment for medication management includes but is not limited to;

- Clients choice;

- Degree of assistance, including physical, dexterity and cognitive;
- Clients cognitive capabilities, including understanding of the medication requirements, timing management and processes for correct medication management;
- Clients literacy to read and interpret labels and medical instructions;
- Safe and correct storage requirements; and
- Where required the responsibilities and role of staff in this process.

If a person does not have the capacity to consent to receiving medication, the person's medical practitioner is required to seek consent from a person responsible.

Subee Newlake staff must adhere to the following 10 rights to medication management to ensure safe medication handling:

1. Right Client
2. Right Medication
3. Right Route
4. Right Time
5. Right Dose
6. Right Form
7. Right Reason/Education
8. Right Action (side effects)
9. Right Documentation
10. Right to response/ right to refuse

- Staff must document the service user's health status prior to the administration of medication and document any effectiveness or side-effects to the medication given.
- Staff must always check the service user's Care Plan before administering or prompting any medications.

P-Administration of non-oral and non-injectable medication in the community	Printed documents are uncontrolled. View current documents on the Subee Intranet	
V1	11/07/2023	Page 2 of 5



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- On all medication packaging, the service user's name, medication name, strength, dose, route, and directions for use must be filled in by the pharmacist. Staff can administer from individually dispensed and labelled containers only if there is written confirmation of the service user's medications from the medical practitioner or a copy of the prescription.

### Intravenous medications and injections must only be administered by Registered Nurses.

- Documentation must occur after client has been administered medication. This occurs on a medication sign off sheet including- Date of written confirmation, name and address of Service User, drug allergies, name of medication, dose, times, route, frequency, indication, duration, signature and printed name of medical practitioner
- PRN orders must have additional information on when the medication is required and indicated
- If the medication regime changes, a new written confirmation must be received from the medical practitioner

If there is no written confirmation or copy of prescription available, then Subee Newlake staff must contact the Service Coordinator or RN to obtain advice.

#### Department of Veterans Affairs (DVA)

Only RNs and EENs are able to administer oral and non-oral medications to DVA Service Users.

### Safe Medication Requirements

Staff can only administer medications after completing relevant competencies and assessments. This includes but is not limited to.

- Monitor for effectiveness and side-effects.
- Documentation progress notes, medication chart
- Follow infection control and waste management procedures.

If there are any discrepancies in the recording or administering of medications, these must be reported to the Clinical Team Leader immediately, or Emergency After Hours, who will seek further clinical support and escalate as required.

### PRN medication

Refer to written medical order before administering. Staff must complete the medication chart and document the indication for administration in the progress notes.

Monitor client for effectiveness and any follow-up actions required.

### Clients own medication: Over the Counter and Non-Prescribed Medications

Staff are not to initiate any over-the-counter medications.

Service users living in their own homes have the responsibility for choosing and administering their own non-prescription medications.

P-Administration of non-oral and non-injectable medication in the community	Printed documents are uncontrolled. View current documents on the Subee Intranet	
V1	11/07/2023	Page 3 of 5



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Staff cannot administer any non-prescribed medication to any service user unless there is a prior written medical order.

If staff are providing medication assist with over-the-counter medication, it must follow the above safe medication handling rules and '10 rights of medication administration'.

### Adverse Reactions to medication

Consumer Medicines Information (CMI) sheets are developed by the manufacturer to accompany medications and should be provided by the pharmacist when medications are dispensed. The CMI sheet contains information about the purpose of the medication, things to do or know before commencing treatment, how and when to take the medication, what to do if a dose is missed or taken twice, and the side effects.

If the CMI sheet does not accompany the person's medications, print a copy from the website ([www.mydr.com.au](http://www.mydr.com.au) or [www.medicines.org.au](http://www.medicines.org.au)) and refer to this information when supporting people to take their own medications.

#### Side effect or client adverse reaction

Common side effects or reactions to medicines include rashes, wheezing, swelling, difficulty breathing, dizziness, nausea or loss of consciousness. These are taught in mandatory medication assist training.

Support staff are not expected to have the same knowledge as a registered nurse or doctor. However, if the client is not behaving or reacting in their usual way following taking medicine, staff should treat this as a side effect or adverse reaction to medicine.

As soon as staff suspects that the client is having a side effect or an adverse reaction to medicine, staff must:

- Call an ambulance – 000 - straight away if required
- Notify their manager immediately
- Document the nature of reaction e.g. rash, wheezing, swelling, difficulty breathing, dizziness, nausea or loss of consciousness
- Manager or RN will report reaction to the client's doctor immediately
- Observe client and follow supervisors and doctors' instructions.
- Call the Poisons Information Centre - 13 11 26 – for 24-hour emergency service and advice
- Record the incident in client's notes
- Complete medication incident report and give to supervisor

### Medication Errors

All medication errors need to be reported immediately after ensuring the safety of the Service User to the Service Co-ordinator or RN.

Staff are to monitor the clinical status of the service user and document the incident in the progress notes, if available. An Incident report is to be completed as soon as practicable.

The Service Co-ordinator or RN will then take the appropriate course of action which will include:

- informing the Business Owner and Company Director
- escalating to an appropriate clinical support person
- informing the medical practitioner (if required)

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V1	11/07/2023	Page 4 of 5



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# **Medication: Administration of Non oral and non-injectable medication by support workers**

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- ensuring an Incident Report is completed and submitted on TRACK

Medication incidents will be recorded in monthly TRACK incident report trend at Management review meeting.

A corrective Action Plan will be developed and implemented if reports show gaps in service, staff training or client safety.

### **Useful Resources**

Health Direct – 24 hours health advice Ph 1800 022 222

Poison Information Hotline – 24 hours advice Ph: 131126

Adverse Medicines Events (AME) Line 1300 134 237 for reporting or advice on adverse drug reactions

Medicines Line (Australia) 1300 633 424 for information on prescription, over the counter and complementary medicines.

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V1	11/07/2023	Page 5 of 5



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