



# Medication Administration Policy and Procedure

## Policy Statement

Some employees of All About You – Disability will be expected to administer medication; know and understand the purpose for the medication and its side effects; follow all procedures relating to this policy; maintain competency in Medication Administration and document any issues or concerns in relation to medication.

This policy will cover procedures of general medication administration; refusal of medication; medication storage and PRN (taken as needed) medications.

## Procedure

- The procedures for the Administration of Medication have been developed to reflect the Department of Health and Human Services (DHHS) guidelines, and all medication administration will be undertaken in accordance with these guidelines.
- Medication will only be administered by employees who hold a current Medication Administration qualification.
- All medication must be in pharmacy packaging; either Webster packs or the original packaging. This must be accompanied by the current Doctor's Authorisation Chart (DAC).
- DAC's must be updated every 3 months and the staff member must initial the DAC when medication is administered.
- Staff members must wash their hands and wear gloves when administering medication.
- If staff are administering a Schedule 8 (S8) drug, two staff members will be required to sign the DAC and the medication should be counted at the beginning and end of the shift. A record of these counts should be maintained.
- It is the responsibility of the Managing Director to ensure that all medication being administered is current and meets the required DHHS guidelines.
- When administering medication, all staff must follow the 'Six R's' of Medication Administration.

## The Six R's of Medication Administration

All staff administering medication must follow the 'six R's' of Medication Administration. These must be checked six times before administering the medication:

1. Right Medication
2. Right Route
3. Right Time

4. Right Participant
5. Right Dosage
6. Right Documentation

### **PRN Medication Procedure**

PRN medication is medication that is taken 'as needed' and can only be administered by staff after reviewing the doctors' instructions. These instructions must contain the following information before PRN can be administered:

- the exact circumstances under which the medication must be given;
- the exact procedure;
- the interval between doses and the time of the last dose must be known;
- the maximum dose that can be given within a 24 hour period; and
- any circumstances where the doctor must be notified.

Once the above instructions have been confirmed, the following steps must be taken:

- permission from the Managing Director must be obtained before administering the PRN medication;
- administer the medication as per the Medication Administration procedure;
- sign the DAC;
- advise the individual's significant others that PRN has been administered and when it was administered; and
- record the PRN administration in the individual's communication book, if they have one.

### **Medication Storage**

When storing medication, all employees who hold a current Administration of Medication Certificate are responsible for implementing the following procedure:

- all medication must be stored in a locked cupboard;
- if accessing the community, medication must be stored in a locked portable device and the DAC must accompany it;
- medication that is self-administered may need to be securely locked depending on the circumstances, which will be assessed by the Managing Director;
- medication will need to be stored according to package instructions and if refrigeration is required then it should be stored in a locked container in the fridge; and

- all S8 medications must be stored in two locked containers if accessing the community, or in a locked container within a locked cupboard on site.

## **Medication Refusal**

Should an individual refuse to accept the administration of medication, all employees who hold a current Administration of Medication Certificate are responsible for implementing the following procedure:

- the staff member administering the medication should explore all reasons as to why the individual may be refusing to take the medication;
- explain to the individual why they need to take their medication;
- wait for 10-15 minutes before returning to the individual and attempting to administer the medication again;
- if possible, request that another staff member attempt to administer the medication;
- if the individual continues to refuse to take the medication contact the Managing Director and follow the instructions given;
- if the staff member is unable to get in contact with the Managing Director, contact the individual's doctor, explain the issues and follow the directions given;
- dispose of the medication if required by:
  - putting the tablet into an envelope and taking it to the nearest chemist; or
  - if the medication is a cream or liquid, contact the Managing Director for disposal instructions;
- complete a file note regarding the individual's refusal to take the medication; and
- inform the individual's significant others and record in the individual's communication book, if they have one.

## **Medication Emergencies**

Any staff members faced with a medication emergency should follow their first aid training and either contact 000 or the Poisons Hotline on 131126. The Managing Director must be informed and an Incident Report Form must be completed.