

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

PROCEDURE FOR THE ADMINISTRATION
OF NON-PARENTERAL MEDICINES BY AUTHORISED PRACTITIONERS
(Refer to separate Procedural Guidelines on Injectable Medicines)

ACTION	RATIONALE
ENVIRONMENTAL FACTORS	
1. Free from distraction and interruptions	It is generally accepted that when undertaking an activity that requires a high degree of concentration people should do so with the least interruptions and distractions.
2. Well lit area	Ensuring adequate light and space will enable the practitioner to view the medication and prescriptions properly and reduce the opportunity for error.
3. Clean and tidy	Quality begins by having things in the right place and of the correct quantity. Putting something back incorrectly leads to wasted time for another practitioner in looking for the item and poses a risk to future administration.
4. NOT APPLICABLE IN CHS	
PREPARATION PRIOR TO ADMINISTRATION	
<p>5. Identify which medicine charts are required.</p> <p>Identify service users prescribed controlled drugs, check medicines chart and identify, where available, a second registered practitioner to check medication and complete controlled drug stationary appropriately</p>	<p>Select out prescription/ administration charts for those service users that are on prescribed medications at that time, those who may ask for medicines PRN 'as required' and those who are not on the ward.</p> <p>The administration of controlled drugs (CD's) must be witnessed by a second practitioner, where a second practitioner is available in order to check accurate administration.</p> <p>Single-handed administration of CDs shall take place only when a second person is not available, eg: in a patient's home</p>
<p>6. Check medicine chart for:</p> <ul style="list-style-type: none"> • Patient's name • Allergies and clinical effects • Dates / time of administration • Name of medicine to be administered at that time • Dosage • Route of administration • Medicines has not already been given • Signatures • Legibility • Written correctly <p>• Injectable Prescription Only Medicines require additionally a direction to administer to be in place</p>	<p>Registered practitioners shall not administer medicines if the prescription is illegible, incorrect or unsigned.</p>

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ACTION	RATIONALE
7. Omit service users on leave and mark drug charts with leave code	This makes sure when evaluating the drug regimen that staff have a clear impression of compliance to medications.
8. Check ward diary and care plans for medication to be withheld for any reason.	Source of communication in wards often extend out of the service user's notes, and prompts in the form of a ward management book or diary are often used to record, for example, due dates of depot antipsychotic medication
9. Prepare containers required for administration of oral medicines	Efficiency in medicines administration; reduction of distractions
10. Container of water for patients taking medicines orally	Water assists swallowing of oral medicine and passage to the stomach.
11. Container to collect used items	To keep used items and clean items separate.
12. Check there is adequate quantity of medicine for subsequent doses. Re-order if quantity is inadequate or remind the patient to order their own	To ensure continuity of treatment.
13. NOT APPLICABLE IN CHS	
14. Wash hands with soap and water or, if not available, alcohol handrub	Hand hygiene is required when handling medicines
ADMINISTERING EACH MEDICINE PRESCRIBED FOR REGULAR ADMINISTRATION AND "AS REQUIRED" (PRN)	
15. Prepare and administer medicines to one patient at a time.	Evidence shows that if service users have some regular and quality contact time at their medicine administration they are more likely to ask questions about their medicines
16. Greet each service user and confirm patient's identity according to current policy In a prison, check the patient's identity card	To confirm correct service user identification. Nurses must not dispense any medication unless absolutely certain of identity of service user.
17. Select correct medicine or medicines to be given	If it is helpful, confirm the medicines verbally with the patient. This involves the patient actively in checking their medicines
18. Check the expiry date for each medicine given.	To ensure the medicine given is within its product licence
19. Re-check the dose on the medicine chart and check that it is due and has not already been administered	To ensure the medicine to be given is correct and as directed by the prescriber
20. Place the required dose into a medicine container without touching the preparation	To prevent contamination (non-touch technique) of the medicine and exposure of the practitioner to the medicine.
21. Repeat steps 16 – 20 for each medicine to be given	To maintain consistent quality of care in administration of medicines
22. Hand the service user the medication to be taken. Take any opportunities that arise to provide information and advice about the medication and any side effects.	To provide patients with opportunity to ask questions or raise concerns about their medicines.

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<p>23. Offer water to the service user to facilitate swallowing the medication</p> <p>Ensure the patient has taken the medicine</p>	<p>To help with swallowing. In a prison, this reduces risk of diversion of medicines and helps rinse the mouth of oral liquids</p> <p>To ensure adherence to treatment and reduce risks in security around medicines</p>
<p>24. If medicines prescribed for regular administration are not given record with appropriate code; make entry in healthcare record.</p> <p>If this is clinically significant, inform the patient's Dr or prescriber</p>	<p>Doses are often omitted with little thought to the overall management of medication.</p>
<p>25. NOT APPLICABLE IN CHS</p>	
<p>26. Replace prescription/administration charts</p>	<p>Medication cards should be kept locked in the clinic room.</p>
<p>27. Tidy medicine cabinet/trolley</p> <p>Check medicine trolley/cupboard is stocked, locked and secured (to a fixed point if a trolley is used)</p>	<p>Quality begins with everything in its correct place. Preparing for the next medication administration is good practice.</p> <p>The Medicines Act indicates that medicines should be stored in a locked cupboard or trolley secured to a fixed place.</p>
<p>28. Wash and dry medicine administration containers.</p>	<p>Maintains good hygiene</p>
<p>29. Wash hands with soap and water or, if not available, alcohol handrub</p>	<p>Hand hygiene is required when handling medicines,</p>
<p>30. Re-order medication from pharmacy where appropriate and remove all discontinued medication from trolley.</p>	<p>Stocks should be checked at regular intervals and re-ordering as part of the medication administration. A reduction in the therapeutic dose of a treatment programme could occur if administrations are missed due to lack of stock.</p>