Document Control

Title	
Administration of Medications by Skilled Non-Registered Staff in the Community Standard Operating Procedure	
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0.1	August 2019	Draft	Initial version for consultation. Operational aspects pulled from SNR Policy to create SOP.
1.0	Sept 2019	Final	Approved by the Drugs and Therapeutics Committee on the 19th September 2019.
1.1	January 2021	Revision	Addition of Fragmin to list of medications-Agreed with Pharmacy
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Lead Director Divisional Director, Clinical Support & Specialist Services	
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Consulted with the following stakeholders: • Clinical Tutor • Deputy Chief Nurse • Non-medical Prescribing Lead • Head of Therapies • Head of Clinical Education and Development • Urgent Care Services Manager • Professional Lead for Community Physiotherapy and Occupational Therapy	**Contact responsible for implementation and monitoring compliance:** Urgent Care Services Manager **Education/ training will be provided by:** As per Medicines Policy for Skilled Non-Registered Staff

Approval and Review Process   • Drugs and Therapeutics Committee

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CONTENTS

1. Background

1.1. Skilled Non-Registered (SNR) staff are essential for enhancing the independence of the service user. SNR workers may be asked to provide support to a service user with medication, as specified in the care plan.

2. Purpose

2.1. The purpose of this document is to provide a formal procedure to cover those SNRs who have been approved by NDHT to assist or administer medications to adult patients in the community.

2.2. It will allow SNR staff to be aware of the systems and arrangements that must be in place regarding access to medication, storage, assistance with medicines, control and disposal of medication.

3. Scope

3.1. This Standard Operating Procedure (SOP) relates to the following staff group who have completed the appropriate training and competency assessments, who will be involved in assistance or administration medication:

- **Skilled Non-Registered Staff**

3.2. This SOP must be used in conjunction with the Medicines Policy for Skilled Not Registered Staff. Within the procedure, SNRs can work at all 3 levels outlined in the Policy.

3.3. All SNR staff will be required to undertake medicines management training in accordance with the Medicines Policy for Skilled Not Registered Staff. The training requirements will vary depending on level of administration so please ensure the correct training is undertaken before administering any medications.

4. Roles

4.1. Prescriber

- Ensuring that, where they initiate a change to medication, the service user and/or person responsible for their care have the appropriate information so that the medication can be taken safely.
- Ensuring that medication is reviewed at least annually.
- Ensuring that a complete and up to date record of the service user's medication is maintained and provided to other health or social care staff when appropriate.

4.2. SNR

- Enhancing the independence of the service user
- SNR workers may be asked to provide support to a service user with medication, as specified in the care plan.
- SNR workers should report to their Line Manager any concerns relating to medication.

4.3. Line Manager

- Ensuring that queries relating to medication are dealt with appropriately. If a line manager is not a Registered Healthcare Professional and a query arises in relation to medication, an appropriate Registered Healthcare Professional should be contacted to provide guidance.

5. Location

5.1. This Standard Operating Procedure ~ Administration of Selected Medications by Skilled Non-Registered Staff in the Community is for use **only** in the community setting.

6. Procedure

6.1. Ordering and Supply of Medication

- Wherever possible, the medication should be obtained by the service user or family member / friend. In exceptional circumstances, SNR workers may take a prescription to the pharmacist and return medication to the service user. This should be documented in the Patient's Clinical Record. If in exceptional circumstances, a Controlled Drug requires collection from a pharmacy by an SNR worker, evidence must be produced to confirm identification of that worker to the pharmacist.

- Prescription requests should be completed by the service user, or a member of the family. In exceptional circumstances if this is not possible, the SNR worker should refer back to line manager who will then contact the appropriate Registered Healthcare Professional as required.

- SNR workers must not fill any Monitored Dosage Systems (e.g. dosette boxes) for service users. They should only be considered once assessment by a health professional (for example, a pharmacist) has been carried out, in line with the Equality Act 2010, and a specific need has been identified to support medicines adherence.

- It is not appropriate for an SNR worker to request a monitored dose system (MDS), e.g. dosette box or blister pack, from a community pharmacy merely for the sake of convenience when assisting with or administering medication to a patient.

6.2. Assessing and reviewing a person's medicines support needs

- The service user's medication support needs should be assessed as part of the care management process, documented and incorporated into the care plan. The care plan should include the following (NICE, 2017):

  ➢ the person's needs and preferences
  ➢ the person's expectations for confidentiality and advance care planning
  ➢ how consent for decisions about medicines will be sought
  ➢ details of who to contact about their medicines
  ➢ what support is needed for each medicine
  ➢ how the medicines support will be given
  ➢ who will be responsible for providing medicines support
  ➢ when the medicines support will be reviewed

- Appropriate timely reviews should be carried out, including where there is any change in the service user's condition, a life event (such as bereavement) or hospital admission or discharge.

- Everyone involved in the care of a service user is responsible for ensuring that his/her medication is managed appropriately. However, the primary responsibility for the prescribing and management of medication rests with the prescriber in consultation with other members of the healthcare team and the service user.

- Within community settings and where appropriate, the GP and supplying pharmacy should be informed of the contact details of the person/service which is to be offering medicines support.

- Assistance with or administration of medication must be in accordance with the prescriber's instructions, as printed on the pharmacy label, discharge summary or GP summary or /Prescription Chart if available.

- "As required" medication must be given in accordance with the prescriber's instructions, details of which should be recorded on the care plan. This will detail the maximum dose in 24 hours, how often the dose can be repeated and details of how and when the medication should be given. If this information is not available it should be obtained from the prescriber. If there are any changes to the patient's condition a registered healthcare professional or the prescriber must be contacted before medication is administered. Administration must be recorded on the approved documentation so that all family involved with the service user are aware when 'as required' medication has been given.

- Before supporting a person to take a dose of their medicine, SNR workers should ask the service user if they have already taken the dose and check the written records to ensure that the dose has not already been given.

- If SNR workers are in any doubt regarding assistance with or administration of medication, they should contact their line manager in the first instance. They will, in turn, contact an appropriate clinician for advice.

- When a person declines to take a medicine, SNR workers should consider waiting a short while before offering it again. They should ask about other factors that may cause the person to decline their medicine, such as being in pain or discomfort. The views of the service user must be respected and any refusal to take medication should be recorded on the approved documentation and reported to the line manager. The person receiving this feedback is responsible for contacting an appropriate clinician.

6.3.   Routes for escalation / referral

- Line manager

6.4.   Providing assistance or administration of medication

- If the SNR worker finds additional medication in the service user's home that is not listed on the discharge summary or the GP summary this must be referred to the line manager who will contact the appropriate healthcare professional. Medication must not be administered unless it is listed in the discharge summary or GP summary.

- Prescribed medicines are the property of the person to whom they have been prescribed and dispensed. They must never be removed from the service user's home without consent.

- SNR staff must not assist with or administer medication unless dispensed by a pharmacy. This includes any medication in monitored dosage systems, which must be dispensed by a pharmacy.

6.5.   Disposal of medicines

- It is expected that the service user or their relatives/representatives will make arrangements for the return of all unwanted medication to the local pharmacy for safe disposal.

- Sharps, needles and sharps bins, will not be accepted for disposal by the local pharmacy and SNR staff should refer this issue to their line manager who will act in accordance with the NDHT Waste Management Policy and Manual.

6.6.   Medication Administration

- Medication administration (Oral and IM) follow the NDHT Administration of Medicines Standard Operating Procedure:

  Administration-of-Medicines-SOP-v4.0pdf

7.   References

- Managing Medicines for Adults Receiving Social Care in the Community NG67 (NICE, 2017)

8.   Associated Documentation

- NDHT Medicines Policy
- NDHT Clinical Record Keeping Policy
- NDHT Confidentiality Policy
- NDHT Consent Policy
- NDHT Incident Reporting and Management Policy
- NDHT Waste Management Policy and Manual
- NDHT SOP Preparation of Medicine Reminder Charts (MRC)
- NDHT SOP Covert administration of medicines
- NDHT SOP Managing Medication Incidents
- Assessment and Maintenance of Clinical and Medical Device Competence in Nurses Midwives AHPs and Support Workers Policy

9. Appendix 1

List of medications permitted to be administered by unregistered practitioners working in the Community	
Approved medications for BAND 3 or 4 Unregistered Practitioners	**Permitted routes of administration**
Glycerine Suppositories	PR
Insulin	S/C
Fentanyl Patches	Topical
Dermovate/Betnovate (Steroid cream)	Topical
Optiflo/Citric Acid	Bladder Washout
Approved medications for BAND 4 ONLY Unregistered Practitioners	**Permitted routes of administration**
Clexane	S/C
Hydroxocobalamin (Vitamin B12)	IM
Fragmin	S/C