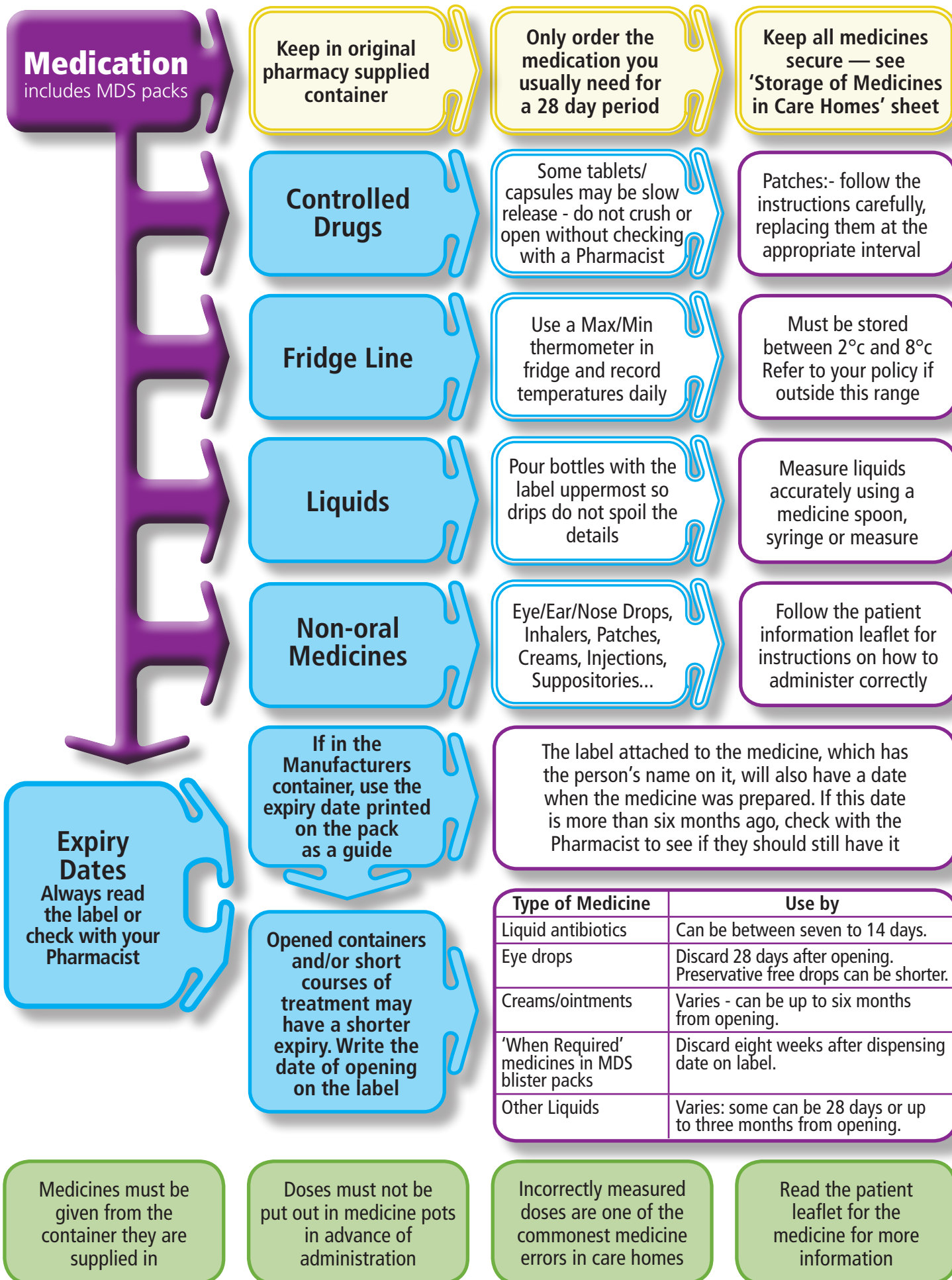
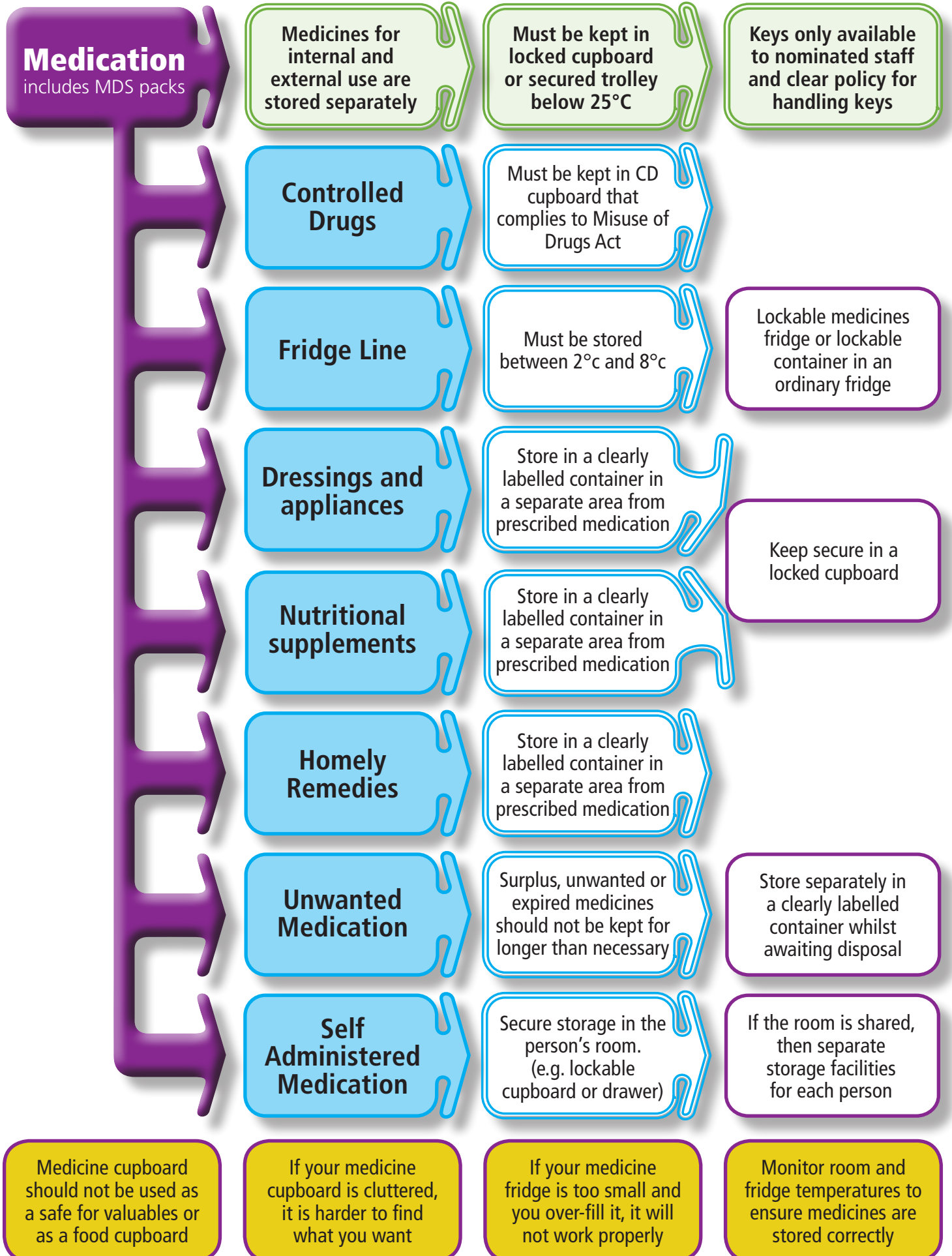


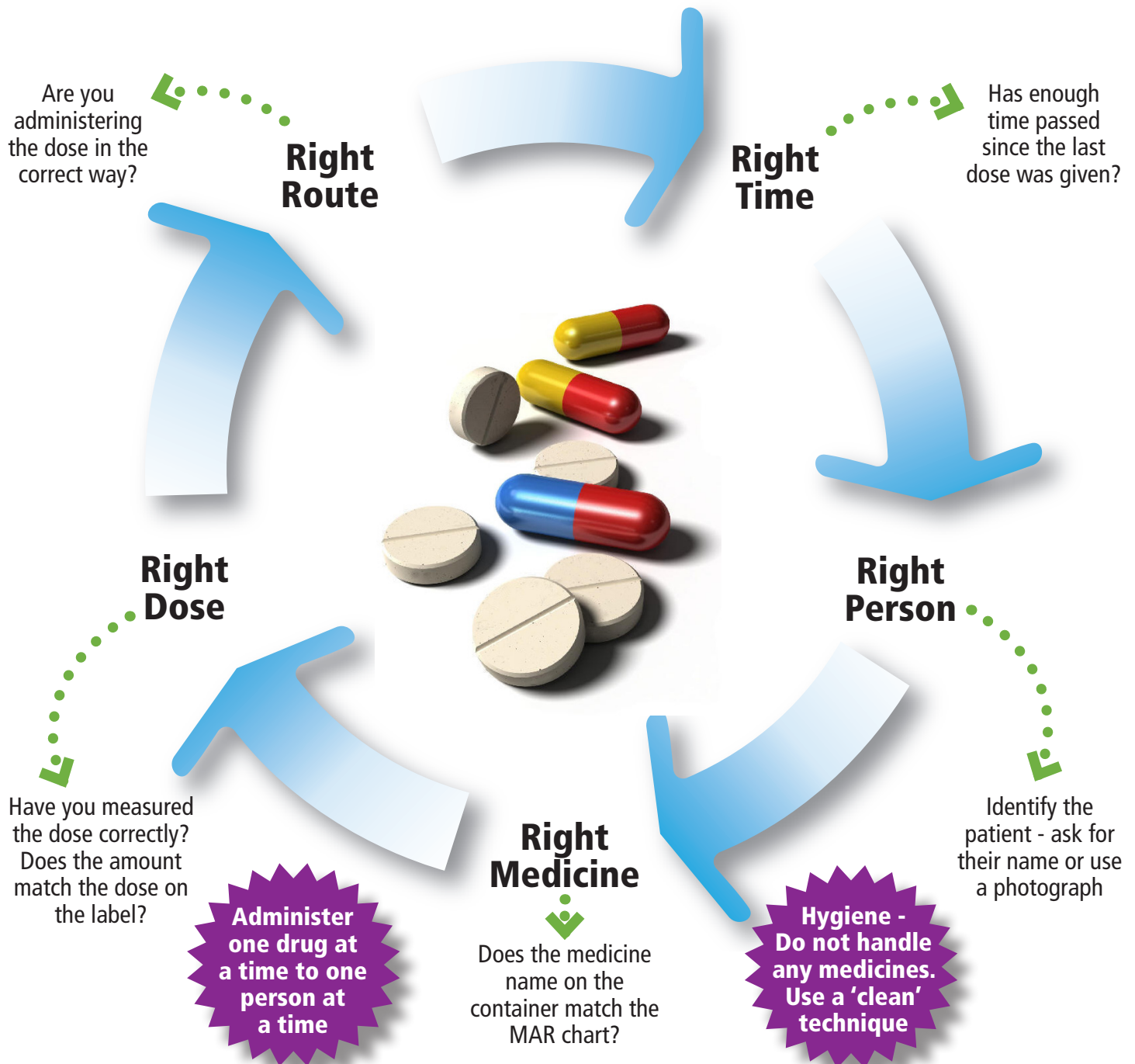
Handling Medicines in Care Homes



Storage of Medicines in Care Homes



Administration of Medicines in Care Homes



Check the MAR chart before administering the medicine - has it already been given or has enough time elapsed since the last dose?

Check the Five Rights - see above - on the medication label and the MAR chart.

Administer the dose, following any instructions or warnings on the label, and record immediately on the MAR what has been given or record if it has been refused or omitted using the correct code.

MAR charts should not have gaps and records must be made in ink. No Tipp-Ex for mistakes!

Medicines that have been prescribed and dispensed for one person should not, under any circumstances, be given to another person.

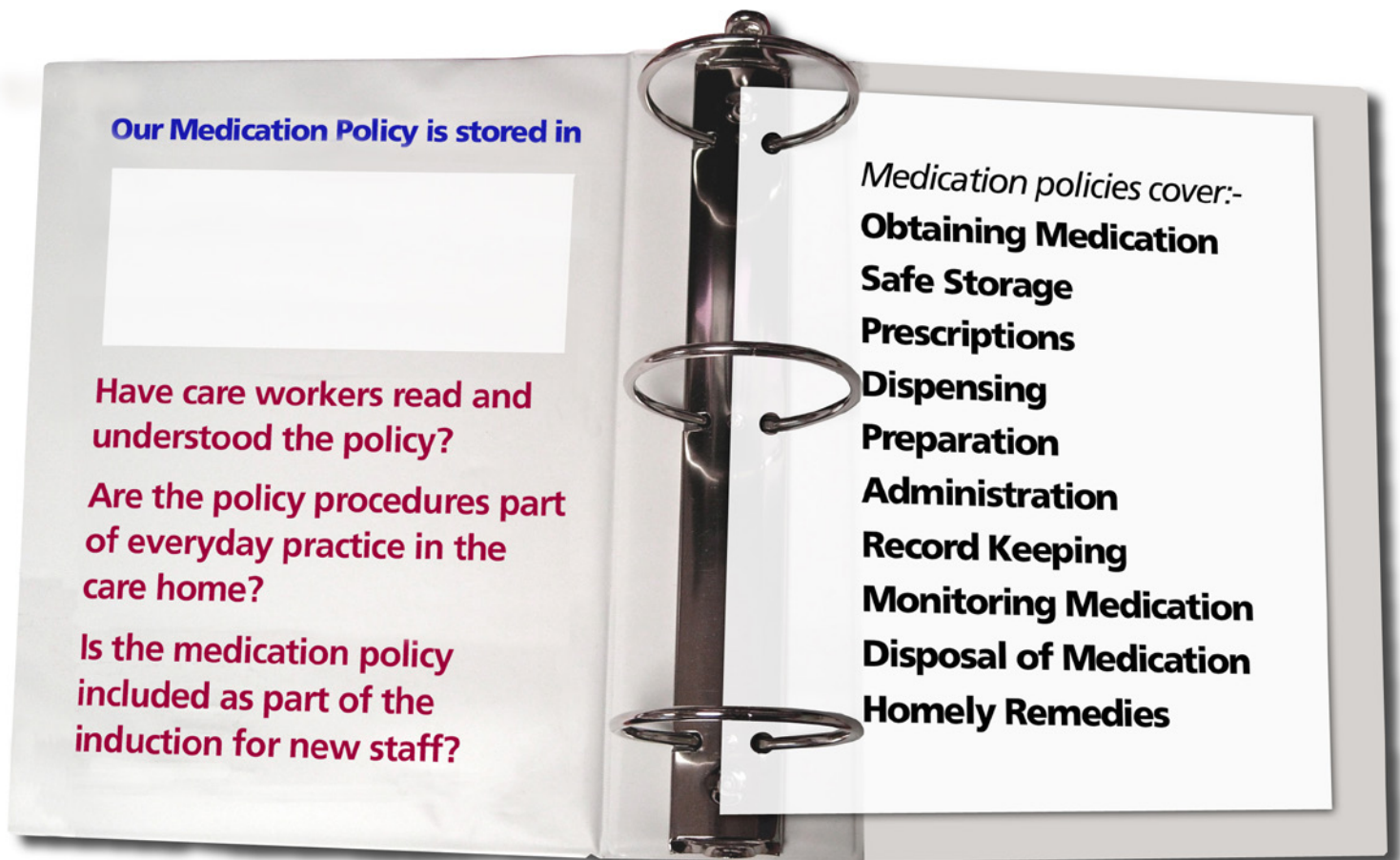
You should only give medicines that you have been trained to give.

Disguising medication (or covert administration) can only happen when all the necessary conditions are met and are documented accordingly. It should not happen routinely.

Record Controlled Drugs in the CD register as well as on the MAR chart immediately.

Check your medication policy for full details.

Medication Policies in Care Homes



Medication policies should include: -

- How 'as required' (PRN) medicines are handled and used.
- Details of training for staff who handle medicines so they have the necessary competency.
- The arrangements for requesting a second opinion in relation to medicines for people detained under the Mental Health Act 1983.
- The full procedure and recording requirements if covert administration is identified as necessary.
- The arrangements for assessing if a person is able to self-administer their medicines.
- The recording of when medicines are given to the person.
- How to deal with relevant medicine-related patient safety communications.
- There is an up-to-date list of medicines taken by the person when they begin to use the service.
- The management of discharge medicine to allow for continuity of care.
- How to deal with and report adverse events, incidents, errors, near misses, share concerns about mishandling and have systems in place to reflect on the findings of incident reviews so that the risk of them being repeated is reduced to a minimum.
- What to do with medicines following a patient's death.

Clear procedures for controlled drugs including:-

- Systems in place to comply with the requirements of the Medicines Act 1968 and the Misuse of Drugs Act 1971, and their associated regulations, the Safer Management of Controlled Drugs Regulations 2006, and other relevant professional guidance, as well as all of the above.