

Who can administer medication?

Staff can administer the following medications:

- oral, this includes tablets, capsules and liquids
- eye, eye drops or cream
- nose, sprays or drops
- ears, drops
- skin, application of ointments in lotion, cream or liquid, sprays and transdermal adhesive patches.

In addition to the above, staff are to receive training specific to a particular participant to administer medication via the following methods:

- Inhalation through nose or mouth using appliances such as nebulisers, masks, vaporisers, and nasal prongs.
- Rectal or vaginal using enemas, suppositories, pessaries and syringe nozzles inserted in to rectum or vagina.
- Nasogastric, PEG or other tubes inserted into the gastrointestinal tract.
- insulin injection pen.
- Epipen, a set dose injector pen to deliver adrenaline for severe allergic reactions. Note: use of Epipen in an emergency situation may occur as per first aid requirements.
- Medication loaded into an injection pen with a subcutaneous length retractable needle.

The following medications (with training focussed on monitoring and side effects):

- Midazolam
- Palliative care medications.

What administration methods cannot be used

Staff must not administer medication by:

- injections by a standard syringe or an injection device that has a standard length non-retractable needle. This includes intramuscular, intravenous and subcutaneous injections
- injection by any means into IV lines, or similar equipment that is sited intravenously.
- manually drawing up or loading injection devices with medication.

Administration methods not specified

Where a participant requires medication administration by a method where the training and practice requirements are not clearly described in this instruction, for example, by a type of injection pen where the dose has to be drawn up by eyesight, or administered by pushing a plunger/button for a specified time period discussions will need to be held to assess the appropriateness of staff administering this medication. Consideration should include:

- the risk the administration method may present for over or under dosing
- whether the dose is set and the same every time, or has to be determined prior to each dose based on other clinical information

- the feasibility of having all staff trained in this administration, and a second staff member on shift at all times to witness the safe administration of this medication
- Where Wild Pumpus decide the risks cannot be effectively mitigated, it would be more appropriate to engage a health professional such as RDNS or equivalent to administer this medication,

Before medication is administered

Before administering medication, staff must as far as possible, understand:

- the reasons a resident is taking each medication
- how the medication is administered
- possible major side effects of the medication
- how to recognise possible major side effects
- be familiar with the location of all first aid equipment and how to use it.

How to administer medication

step	action
1	Pay attention to the administration of medication and do not attend to any other task at the same time. Have a second staff member witness the whole process where possible.
2	Follow infection control procedures: <ul style="list-style-type: none"> • Wash and dry hands before and after administering medications to each participant. • Ensure that the work area and any other equipment to be used are clean. • Wear gloves to apply ointments, creams and lotions.
3	Collect all information and equipment required.
4	Check the medications are in suitable condition and have been stored properly. Check use by dates on original container medications.
5	Check the medication against the medication record and the medication notes. Check the '6 Rs': <ul style="list-style-type: none"> • right medication <ul style="list-style-type: none"> • right date • right time • right dose • right person • right route.
6	Check that the person is able to receive medication. Do not give medication by mouth if a person is unable to receive it, such as if they are asleep, unconscious, drowsy, vomiting or having a seizure.
7	Give the person clear instructions about how to take the medication, for example swallow, hold under tongue, using methods the person understands, for example gestures or photo's

- 8 Administer the medication strictly according to the prescribing doctor's instructions.
- 9 As far as possible, ensure the entire dose is taken by the participant.
- 10 Record the administration of each medication. The participant who administered the medication must do the recording.
- 11 Monitor and if there appears to be an unusual or adverse reaction notify the service user's doctor

Liquid medications for people with swallowing issues

Where syringe administration of liquid medications is required, staff must follow the recommendations provided by the doctor or speech pathologist to minimise the risk of aspiration,

Liquid medication must never be squirted into the back of the throat. Syringes should not be re-used with the same participant and never re-used for another participant as traces of different medications may remain causing adverse reactions or transfer of infection may occur as syringes cannot be adequately cleaned.

If the participant wants to administer their own medication

If the participant wants to administer their own medication, staff must ensure the following process occurs:

- An assessment by Wild Rumpus, in consultation with the participant and their parent/carer to assess their ability to administer their own medication without any supervision or assistance from staff. This assessment must consider:
 - how much the participant wants to self-administer medication
 - the participant's understanding of the purpose of the medication
 - the participant's awareness of the consequences of incorrect or missed doses
 - the participant's knowledge of safe storage methods
 - the likely benefits of having the participant self-administer medication and whether these benefits outweigh the risks
 - the likelihood of incorrect administration occurring and the risk of harm this may cause to the participant or others
 - any precautions that should be taken to prevent incorrect administration.
- All decisions made in relation to self-administration of medication, as well as the factors contributing to this decision, are recorded in the participant's file
- if required, develop and implement strategies to assist the participant build their skills towards self administration

Role of all staff

All staff are to ensure they have:

- completed the staff signature record
- attend any specific training required for participant.
- followed any instructions specific to the participant.
- Ensure there are efficient systems in place for each participant to successfully administer medication - this includes planning around medication administration in the community, and on the various programs.