

# MEDICATION POLICY OPERATIONAL POLICY



<b>POLICY TITLE:</b>	<b>MEDICATION POLICY</b>		
<b>VERSION:</b>	003	<b>DATE EFFECTIVE:</b>	27/05/2020
<b>AUTHORISED BY:</b>	Health Facilitator - RN	<b>DATE REVIEWED:</b>	15/04/2024

## SUMMARY

This policy ensures safe and effective medication support by obtaining consent and authorisation from participants and their decision-makers, based on prescriptions from their treating doctors.

## PURPOSE

The purpose of this policy is to ensure that ARC Disability Services Inc. (ARC) provides a high standard of care, using best practice processes and meeting regulatory guidelines, when providing support to participants who take medication. Medication management and assistance practices will ensure participants who request assistance are supported by competent staff using safe and effective practices, whilst maximising a participant's choice and control.

## SCOPE

This policy applies to all ARC employees and participants, encompassing:

- Documentation, management, and storage of medications.
- Handling and assistance by trained staff, covering:
  - Prescribed Medications
  - Non-Prescribed Medications
  - Complementary and Alternative Therapies

## DEFINITIONS

TERM	DEFINITIONS
<b>Dose Administration Aids</b>	Pharmacists provide organised time-based dosing for solid oral medications, including blister packs and sachet systems.
<b>Non-Prescription Medicine</b>	Medications obtained without a prescription, commonly known as 'over the counter' medicines. This category also includes dietary supplements and alternative medicines.
<b>Prescription Only Medication</b>	Medications requiring a prescription from a qualified healthcare professional for legal purchase and use.
<b>Pro Re nata (PRN) Medication</b>	Medications prescribed to be taken as needed. PRN prescriptions can include both prescribed and over-the-counter medications.
<b>Supporting Self-Medication</b>	Involves assisting individuals capable of understanding their medication regime but needing physical help, like pill extraction or taking with water.
<b>Medication Prompting</b>	The act of reminding or encouraging individuals to take their medication at the appropriate times, while allowing them full control over the actual intake.
<b>Medication Assistance</b>	Support with medication logistics and intake, including ordering, picking up, and delivering prescriptions, assisting with packaging, labels, and providing a drink with medication. It also involves directly assisting individuals who cannot manage independently due to cognitive or physical limitations, ensuring they understand and properly take their medication, supporting safe procedures.

<b>POLICY</b>	<b>Document No.:</b> GOV03-FORM-01	<b>Version No.:</b> 1A
<b>Release Date:</b> 12 February 2020	<b>Uncontrolled if Printed</b>	<b>Page 1 of 6</b>

## THE 8 RIGHTS OF MEDICATION ADMINISTRATION

To ensure safety and efficacy in medication practices, staff must adhere to these rights:

1. **Right Person:** Verify the identity of the recipient.
2. **Right Medication:** Confirm the medication is correct as per the prescription, documentation, and label.
3. **Right Dose:** Administer the correct dosage/amount.
4. **Right Time:** Provide the medication at the correct time on the correct day.
5. **Right Route:** Administer via the correct route (e.g., oral, PEG).
6. **Right Method:** Use the correct technique for assistance.
7. **Right Documentation:** Record all details accurately, sign documentation
8. **Right to Refuse:** Acknowledge and respect the participant's right to refuse.

## ROLES AND RESPONSIBILITIES

ARC ensures that all aspects of medication management adhere to established policies, health regulations, and best practices. This includes providing adequate resources, facilitating training, and maintaining rigorous standards for medication safety and participant privacy.

### ARC Health Practitioner (S8 Safe Manager)

Responsible for overseeing clinical practices, the health practitioner ensures compliance with health care standards and leads ARC's overall medication management protocols, with a particular focus on Schedule 8 medications.

- **S8 Management Oversight:** Act as the S8 Safe Manager, overseeing the overall management and safety compliance of Schedule 8 medications.
- **Healthcare Plans:** Oversee and update healthcare needs and medication regimes for participants, as needed.
- **Staff Training and Support:** Provide essential training and continuous support in healthcare management and medication administration.
- **Comprehensive Medication Audits:** Conduct overarching medication audits that cover all areas of ARC's services, ensuring organisation-wide compliance and safety.

### Service Coordinators (S8 Safe Establisher):

Service Coordinators play a crucial role in ensuring ARC's medication management meets strict standards and regulatory compliance as S8 Safe Establishers, maintaining the integrity and safety of medications organisation wide.

- **S8 Practices Establishment:** Responsible for establishing and maintaining rigorous safety protocols for Schedule 8 medications.
- **Coordination and Oversight:** Oversee medication management processes, ensuring that these processes are correctly implemented and followed by all relevant staff.
- **Documentation and Compliance:** Ensure that all necessary documentation and consents for medications are accurately maintained and readily available for audits and compliance checks.

### ARC Staff

Staff members provide direct support to participants, implementing day-to-day medication management practices, including the administration of Schedule 8 medications under strict protocols.

- **Medication Assistance:** Assist participants with medication administration as prescribed, with special procedures in place for Schedule 8 medications.
- **Participant Support:** Uphold participants' rights to privacy, confidentiality, self-management, and medication refusal, ensuring these rights are respected even in the management of high-risk medications.

<b>POLICY</b>	<b>Document No.:</b> GOV03-FORM-01	<b>Version No.:</b> 1A
<b>Release Date:</b> 12 February 2020	<b>Uncontrolled if Printed</b>	<b>Page 2 of 6</b>

## Participant:

Participants are encouraged to take an active role in their medication management, supported by the rights and resources provided by ARC.

- **Self-Management:** Engage actively in managing their own medication where feasible.
- **Providing Consent:** Offer informed consent for all medications.
- **Communication:** Express preferences and concerns about their medication management.

## SCHEDULE 8 MEDICINES

ARC maintains stringent security measures for Schedule 8 medicines, meeting legislative requirements through robust safeguards to ensure their safety and integrity. This includes secure storage and adherence to regulatory standards with regular audits for ongoing compliance.

## MEDICATION MANAGEMENT AND SUPPORT

ARC is committed to encouraging participants to maintain their independence by managing their medications safely and effectively. When a participant seeks assistance with their medications, the nature of this help will be carefully documented, and the participant's consent will be explicitly obtained and recorded.

## ASSESSMENT AND PLANNING

At the start of service provision, participants, along with their decision-makers, will collaborate with ARC to assess potential risks and determine the necessary level of medication support. This assessment will be documented in detail, highlighting strategies by ARC to foster independence in medication management.

## SUPPORT PREFERENCE

ARC will assist participants in managing their medications according to their preferences and assessed risks, in the following order:

1. Complete self-management by the participant.
2. Management with the support of the participant's family or support network.
3. Management with ARC staff providing medication prompting.
4. Management with ARC staff providing medication assistance.
5. Complete management and administration of medication by ARC staff in collaboration with the participant's General Practitioner, based on delegated authority.

## CONSENT AND AUTHORISATION OF MEDICATIONS

ARC maintains a policy of obtaining informed consent and proper authorisation for all medication support, ensuring adherence to regulatory standards and safeguarding participant well-being. It is important to note that authorisation is obtained based on the participant's consent or that of their decision-making, and in accordance with prescriptions provided by their treating doctor. The following guidelines govern the process for obtaining consent and authorisation for medications:

1. **Participant Consent:** Ensure that participants or their designated decision-makers provide informed consent for medication support.
2. **Prescription Verification:** Verify that medication support aligns with prescriptions provided by the participant's treating doctor.
3. **Decision-Maker Authorisation:** Obtain authorisation for medication support from the participant's decision-maker, if applicable.

## STORAGE AND DISPOSAL OF MEDICATIONS

- **General Storage:** All medications must be stored according to the manufacturer's directions, typically out of reach of children and in a cool, dry place, or refrigerated if specified.

<b>POLICY</b>	<b>Document No.:</b> GOV03-FORM-01	<b>Version No.:</b> 1A
<b>Release Date:</b> 12 February 2020	<b>Uncontrolled if Printed</b>	<b>Page 3 of 6</b>

- **Secure Storage:** At all ARC facilities, medications are securely locked in storage areas accessible only to authorised personnel. This measure is implemented to maintain medication integrity and to prevent unauthorised access, ensuring the safety of all individuals at the facility.
- **Packaging Compliance:** Medications must always be dispensed from their original or pharmacy-provided packaging to avoid contamination and ensure proper usage.
- **Disposal Protocol:** Medications no longer required, or those that are unwanted, have ceased being prescribed, or have expired, should be returned to a pharmacy for safe disposal. This helps prevent misuse and environmental harm.

**Rationale for Secure Storage:** The policy of securely locking away medications aligns with Queensland Health regulations and NDIS guidelines, which mandate appropriate safeguards for storing medications in healthcare settings. This approach is designed not as a restrictive practice but as a proactive measure to protect individuals who may be vulnerable to accidental or inappropriate use of medications. It supports the health and wellbeing of participants by preventing potential misuse or harm.

## REGULATED RESTRICTIVE PRACTICE

When a participant receiving services from ARC is prescribed medication specifically to modify behaviour, such use must be authorised and accompanied by a comprehensive Positive Behaviour Support Plan (PBSP). This approach ensures that the medication is used ethically and effectively as part of a broader strategy to enhance the participant's quality of life while addressing specific behavioural challenges.

## EXAMPLES OF MEDICATIONS COMMONLY USED AS CHEMICAL RESTRAINTS

- **Antipsychotics:** Such as haloperidol or risperidone, often used to manage psychotic symptoms but sometimes used to control aggressive behaviour.
- **Benzodiazepines:** Used in acute settings to manage severe agitation or aggression. Examples include lorazepam and diazepam.
- **Mood Stabilisers:** Such as lithium or valproate, which may be used to stabilise mood swings that contribute to behavioural issues.

## STAFF COMPETENCY AND TRAINING

ARC is committed to ensuring that all support staff possess the necessary competencies for providing safe and effective support to participants. Our training program, governed by our *Human Resources Management Policy* and *Training and Professional Development Policy*, includes:

- **Initial Training:** New staff members participate in comprehensive medication management training that combines online courses with face-to-face competency assessments to ensure a thorough understanding of all medication protocols.
- **Specialised Training:** For participants requiring specialised assistance, targeted training is provided to their support team. This ensures that all staff involved are equipped with the specific skills needed to handle unique or complex medication management cases.
- **Refresher Training:** To maintain high standards of care, staff are required to complete refresher training as per the training plan, or more frequently if deemed necessary. These sessions help staff stay updated on the latest practices and regulatory requirements.

## MEDICATION ERRORS AND INCIDENTS

ARC requires immediate action in response to any medication error or incident. The person who discovers the error or incident must:

- Report and document it as an incident report.
- Seek medical advice or consult with an appropriate health professional without delay.

<b>POLICY</b>	<b>Document No.:</b> GOV03-FORM-01	<b>Version No.:</b> 1A
<b>Release Date:</b> 12 February 2020	<b>Uncontrolled if Printed</b>	<b>Page 4 of 6</b>

## IDENTIFYING A MEDICATION EMERGENCY

Employees should use their training and judgment to decide when to call emergency services, erring on the side of caution. Emergencies may include:

- **Severe Allergic Reaction:** Difficulty breathing, facial swelling, or rapid rash development.
- **Overdose:** Suspected or confirmed excessive medication ingestion.
- **Altered Consciousness:** Extreme drowsiness, unresponsiveness, or unconsciousness.
- **Respiratory Difficulty:** Breathing problems or cessation.
- **Severe Behavioural Changes:** Sudden mood shifts or extreme agitation.
- **Signs of Toxicity:** Nausea, vomiting, seizures, or severe reactions.

In these cases, staff should promptly call for an ambulance and provide support as directed. After stabilising the situation, the relevant supervisor or the on-call officer should be notified about the incident.

## NON-EMERGENCY MEDICAL GUIDANCE

For non-emergency situations, staff should use their training and judgment. Prompt consultation with a healthcare professional is crucial for managing mild to moderate side effects.

- **Primary Consultation:** Contact the participant's Healthcare Professional or Pharmacist.
- **Secondary Resources:** If unavailable, contact:
  - Adverse Medicines Events Line: 1300 134 237
  - 13 HEALTH Hotline: 13 432584
  - QLD Poisons Information Centre: 13 11 26
- **Documentation:** Record all consultations, actions, and observations.
- **Supervisor Notification:** Inform the supervisor or on-call officer of what has occurred, who has been contacted and any further actions required.

## OVERSIGHT AND FOLLOW-UP ON INCIDENTS AND ERRORS

ARC maintains a thorough oversight process for all medication-related incidents and errors, overseen by the leadership team. This ensures continual improvement in medication management practices, addressing emerging patterns and specific risks promptly.

- **Response to Discrepancies:** Any unexplained medication discrepancies are promptly addressed and escalated for comprehensive review by a coordinator or manager.
- **Management of Adverse Reactions:** Adverse reactions or side effects observed by ARC employees are treated as medical incidents, necessitating immediate reporting and documentation. This swift action safeguards participant safety and well-being.

Thorough investigations are conducted into all reported medication incidents or errors to determine their cause, effect, and responsibility. These investigations are vital for accountability, prevention of recurrence, and fulfilling ARC's duty of care to protect participants from harm.

## SUPPORT AND CORRECTIVE ACTIONS

At ARC, medication errors are managed through a flexible escalation process that adapts to the severity of the incident and the employee's history of similar incidents. Our approach ensures appropriate and proportionate responses to enhance safety and compliance.

- **Initial Support:** Employees involved in medication errors receive immediate support to identify mistakes and learn from them. This may include corrective feedback and additional supervision to reinforce safe medication handling practices.

<b>POLICY</b>	<b>Document No.:</b> GOV03-FORM-01	<b>Version No.:</b> 1A
<b>Release Date:</b> 12 February 2020	<b>Uncontrolled if Printed</b>	<b>Page 5 of 6</b>

- **Progressive Training:** Depending on the nature and recurrence of the error, further training may be required. This could range from online refresher courses for minor issues to, face-to-face training sessions for more serious or repeated errors.
- **Formal Review:** For more significant issues or patterns of errors, a more formal review process may be initiated. This could involve detailed discussions about the errors, their impact on participant safety, and potential changes to procedures or practices.
- **Disciplinary Actions:** In cases where errors are severe or continue despite previous interventions, disciplinary actions may be taken, which can include exclusion from independent medication duties or, in extreme cases, termination of employment. These decisions are made with careful consideration of all factors, including the potential risk to participants and the employee's overall performance and history.

## RELATED DOCUMENTS

- Complex Bowel Care Policy
- Diabetes Management Policy
- Enteral Care and Management Policy
- Epilepsy and Seizure Management Policy
- Independence, Informed Choice, and Supported Decision-Making Policy
- Participant Privacy and Dignity Policy
- Restrictive Practices Policy
- Subcutaneous Injections Policy
- Training and Professional Development Policy

## REFERENCES

- Disability Services Act 2006 (Queensland)
- Health Practitioner Reregulation National Law Act 2009 (Queensland)
- NDIS Act 2013 (Commonwealth)
- NDIS (Quality and Safeguards Commission) Rule 2018
- NDIS Practice Standards and Quality Indicators 2021
- NDIS High Intensity Support Descriptors 2022
- Privacy Act 1988 (Commonwealth)
- Work Health and Safety Act 2011 (Commonwealth)
- Guiding Principles for Medication Management in the Community 2022 (Commonwealth)  
<https://www.health.gov.au/sites/default/files/2022-11/guiding-principles-for-medication-management-in-the-community.pdf>
- Guideline for Medication Assistance N.D (Queensland Government)  
[https://www.hpw.qld.gov.au/\\_data/assets/pdf\\_file/0026/3779/guidelineformedicationassistance.pdf](https://www.hpw.qld.gov.au/_data/assets/pdf_file/0026/3779/guidelineformedicationassistance.pdf)

## AUTHORISATION

This Policy is approved and issued by:



**SHERIDAN LAWTON**

Health Facilitator - RN

<b>POLICY</b>	<b>Document No.:</b> GOV03-FORM-01	<b>Version No.:</b> 1A
<b>Release Date:</b> 12 February 2020	<b>Uncontrolled if Printed</b>	<b>Page 6 of 6</b>