







Review Sheet

 Last Reviewed 28 Mar '22	 Last Amended 28 Mar '22	 Next Planned Review in 12 months, or sooner as required.
Business impact	 Minimal action required circulate information amongst relevant parties. LOW IMPACT	
Reason for this review	Scheduled review	
Were changes made?	Yes	
Summary:	This policy details the other routes of medication that might be available to service users and will support in a staff member's understanding. The policy has been reviewed with no significant changes and references have been checked and updated.	
Relevant legislation:	<ul style="list-style-type: none"> • The Care Act 2014 • Medical Act 1983 • Medicines Act 1968 • The Human Medicines Regulations 2012 • The Pharmacy Order 2010 	
Underpinning knowledge - What have we used to ensure that the policy is current:	<ul style="list-style-type: none"> • Author: CQC, (2021), <i>Managing medicines: home care providers</i>. [Online] Available from: https://www.nice.org.uk/guidance/sc1 [Accessed: 28/3/2022] • Author: CQC, (2020), <i>Medicines: information for adult social care services</i>. [Online] Available from: https://www.cqc.org.uk/guidance-providers/adult-social-care/medicines-information-adult-social-care-services [Accessed: 28/3/2022] • Author: National Institute for Health and Care Excellence, (2018), <i>Decision-making and mental capacity</i>. [Online] Available from: https://www.nice.org.uk/guidance/ng108 [Accessed: 28/3/2022] • Author: National Institute for Health and Care Excellence, (2018), <i>Medicines management for people receiving social care in the community</i>. [Online] Available from: https://www.nice.org.uk/guidance/qs171 [Accessed: 28/3/2022] • Author: RCN, (2015), <i>Accountability and delegation</i>. [Online] Available from: https://www.rcn.org.uk/professional-development/accountability-and-delegation [Accessed: 28/3/2022] • Author: Royal Pharmaceutical Society of Great Britain, (2019), <i>Professional Guidance on the Administration of Medicines in Healthcare Settings</i>. [Online] Available from: https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Professional%20standards/SSHM%20and%20Admin/Admin%20of%20Meds%20prof%20guidance.pdf?ver=2019-01-23-145026-567 [Accessed: 28/3/2022] 	
Suggested action:	<ul style="list-style-type: none"> • Encourage sharing the policy through the use of the QCS App 	
Equality Impact Assessment:	QCS have undertaken an equality analysis during the review of this policy. This statement is a written record that demonstrates that we have shown due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations with respect to the characteristics protected by equality law.	



1. Purpose

1.1 To ensure the safe administration of medication via routes other than oral.

1.2 This policy must be read with the **Overarching Medication Policy and Procedure**. It will support any locally required policies and procedures. The policy and associated policies and procedures apply to all care staff and managers working within HOLISTIC QUALITY CARE LTD who are involved in Medication Management and must be read and followed.

1.3 To support HOLISTIC QUALITY CARE LTD in meeting the following Key Lines of Enquiry:

Key Question	Key Lines of Enquiry
EFFECTIVE	E2: How does the service make sure that staff have the skills, knowledge and experience to deliver effective care and support?
SAFE	S4: How does the provider ensure the proper and safe use of medicines?
WELL-LED	W2: Does the governance framework ensure that responsibilities are clear and that quality performance, risks and regulatory requirements are understood and managed?

1.4 To meet the legal requirements of the regulated activities that {HOLISTIC QUALITY CARE LTD} is registered to provide:

- | The Care Act 2014
- | Medical Act 1983
- | Medicines Act 1968
- | The Human Medicines Regulations 2012
- | The Pharmacy Order 2010



2. Scope

2.1 The following roles may be affected by this policy:

- | Registered Manager
- | Other management
- | Nurse
- | Care staff

2.2 The following Service Users may be affected by this policy:

- | Service Users

2.3 The following stakeholders may be affected by this policy:

- | Family
- | Advocates
- | Representatives
- | Commissioners
- | External health professionals
- | Local Authority
- | NHS



3. Objectives

3.1 Staff understand their responsibilities when administering medication via alternative routes and comply with legislative, regulatory, contractual and best practice requirements.



4. Policy

4.1 HOLISTIC QUALITY CARE LTD understands that medication administered by routes other than oral can offer Service Users greater flexibility, rapid response to medication, greater compliance with medication regimes as well as a better therapeutic response. It is the responsibility of HOLISTIC QUALITY CARE LTD to ensure that Service Users are involved and have provided consent; and that staff have the training, skills and competencies to administer the medication via the route prescribed.

4.2 There will be a record of staff training and competency, with periodic reviews of this taking place in line with local policy.

4.3 Where Care Workers are administering medication via an alternative route, this may be a delegated nursing activity and therefore may require ongoing support from a Nurse.

4.4 During times of a pandemic situation, such as COVID-19, HOLISTIC QUALITY CARE LTD recognises that support must be provided to Service Users in line with government guidelines, including social distancing and PPE requirements. Further information in relation to the requirements for Coronavirus can be found in the COVID-19 Hub of the QCS system.



5. Procedure

5.1 The Registered Manager will ensure that staff with responsibility for medication understand the 6 Rights of Medication.

5.2 HOLISTIC QUALITY CARE LTD will ensure that all staff understand the medication policies and procedures, as well as the different types of administration as defined in the Overarching Medication Policy and Procedure, and that they only work within their defined role, competency and skill level.

5.3 Where required, HOLISTIC QUALITY CARE LTD will make sure that the most recent version of the Royal Marsden Manual of Clinical Nursing Procedures is available for staff to ensure that evidence-based clinical procedures are followed.

5.4 HOLISTIC QUALITY CARE LTD will ensure that the Infection Control Policy and Procedure is followed.

5.5 HOLISTIC QUALITY CARE LTD will ensure that staff understand the implications of the Mental Capacity Act 2005 and the Code of Practice. All staff involved in medication administration must ensure that Service Users give informed consent before administering medication. Where Service Users lack capacity, any best interest decisions will be documented.

5.6 All staff will ensure that the dignity and privacy of a Service User is maintained when administering medication, including via routes other than oral. Irrespective of whether a Service User has the capacity to give informed consent, the Service User must be informed of what actions are taking place and they must be treated with compassion at all times.

5.7 Care Plans will detail how the medication is to be administered, including sites for topical application, injections or transdermal patches.

Where it applies, individual Service User risk assessments will be completed for any risks associated with routes of administration.

5.8 Body maps will be used for each topical medication required. Body maps will also be used for detailing transdermal patch sites.

5.9 If a Service User requires injections, the injection sites must be rotated and a body map and record made in the Service User's notes.

5.10 Where transdermal patches are required, the patches must be disposed of as per the Patient Safety Leaflet. Patches that contain a controlled drug will be disposed of as per CM32 - Controlled Drugs Policy and Procedure at HOLISTIC QUALITY CARE LTD.

5.11 Where a Registered Nurse delegates medication to be administered by specialised technique to a Care Worker, the Registered Nurse will delegate tasks and duties that are within the Care Worker's scope of competence, making sure that they fully understand the instructions.

The Registered Nurse will confirm that the outcome of any task that has been delegated to a Care Worker meets the required standard and regularly review the Care Worker's competency to perform the task correctly.

5.12 Risk assessments must be in place for all medication administration.



6. Definitions

6.1 Pandemic

- | A pandemic is the worldwide spread of a new disease
- | COVID-19 was characterised as a Pandemic on 11th March 2020

6.2 Coronavirus (COVID-19)

- | Novel coronavirus is a new strain of coronavirus first identified in Wuhan City, China. The virus was named severe acute respiratory coronavirus 2 (SARS-CoV-2). The disease it causes is called COVID-19

6.3 Body Map

- | A body map is a blank diagram of a person, showing their front and back, used to document information for future reference. They can be used for recording where creams, lotions, etc. should be applied, injection sites, transdermal patch sites, lacerations, bruising or pressure ulcers

6.4 6 Rights of Medication

- | The 6 Rights of Medication are:
 - | Right **P**atients
 - | Right **D**rugs
 - | Right **D**ose
 - | Right **R**oute
 - | Right **T**ime
 - | Right **D**ocumentation
- | A mnemonic to remember this is **P**atients **D**o **D**rugs **R**ound the **D**ay
- | These 6 Rights vary in Definition:
 - | NICE guidelines refer to **Right to Refuse** instead of Right Documentation
 - | This policy uses **Right Documentation** because of the high rate of errors associated with documentation but refers to the Right to Refuse

6.5 Routes of Medication Administration

- | This is a list of the different routes that medication can be administered:
 - | **Buccal:** Held inside the cheek
 - | **Enteral:** Delivered directly into the stomach or intestine (with a PEG tube or Jejunostomy Tube)
 - | **Inhalable:** Breathed in through a tube or mask
 - | **Infused:** Injected into a vein with an IV line and slowly dripped in over time
 - | **Intramuscular:** Injected into a muscle with a syringe
 - | **Intrathecal:** Injected into the spine
 - | **Intravenous:** Injected into a vein or into an IV line
 - | **Nasal:** Given into the nose by spray or pump
 - | **Ophthalmic:** Given into the eye by drops, gel, or ointment
 - | **Oral:** Swallowed by mouth as a tablet, capsule, lozenge, or liquid
 - | **Otic:** Given by drops into the ear
 - | **Rectal:** Inserted into the rectum
 - | **Subcutaneous:** Injected just under the skin
 - | **Sublingual:** Held under the tongue
 - | **Topical:** Applied to the skin
 - | **Transdermal:** Given through a patch placed on the skin



Key Facts - Professionals

Professionals providing this service should be aware of the following:

- | Staff will refer to the Royal Marsden Manual of Clinical Nursing Procedures, where required, to ensure that practice is evidence based before administering medication via routes other than oral
- | Staff will use the 6 Rights of Medication Administration at all times
- | Staff who administer medication via other routes must only do so when they have been trained and assessed as competent and local policy permits them to do so



Key Facts - People affected by the service

People affected by this service should be aware of the following:

- | You will be asked to consent to provide support with medication, where you are unable to consent we will involve you with our discussions but seek to make a decision in your best interests
- | You will be supported to self-manage wherever possible, irrespective of the route of medication administration



Further Reading

As well as the information in the 'underpinning knowledge' section of the review sheet we recommend that you add to your understanding in this policy area by considering the following materials:

Royal Marsden Manual of Clinical Nursing Procedures:

https://www.amazon.co.uk/Marsden-Manual-Clinical-Nursing-Procedures-dp-1119634385/dp/1119634385/ref=dp_ob_title_bk

NICE - Managing Medicines in Care Homes (although tailored to care homes it is a useful resource to review):

<https://www.nice.org.uk/guidance/sc1>



Outstanding Practice

To be 'outstanding' in this policy area you could provide evidence that:

- | The wide understanding of the policy is enabled by proactive use of the QCS App
- | Care Plans reflect the need to promote Service User's dignity if medication is required via alternative routes
- | Service Users can access alternative therapies where they wish to control symptoms without medication. They are provided with clinical support and guidance to do this safely
- | Service Users are involved in the discussion about their medication which is regularly reviewed



Forms

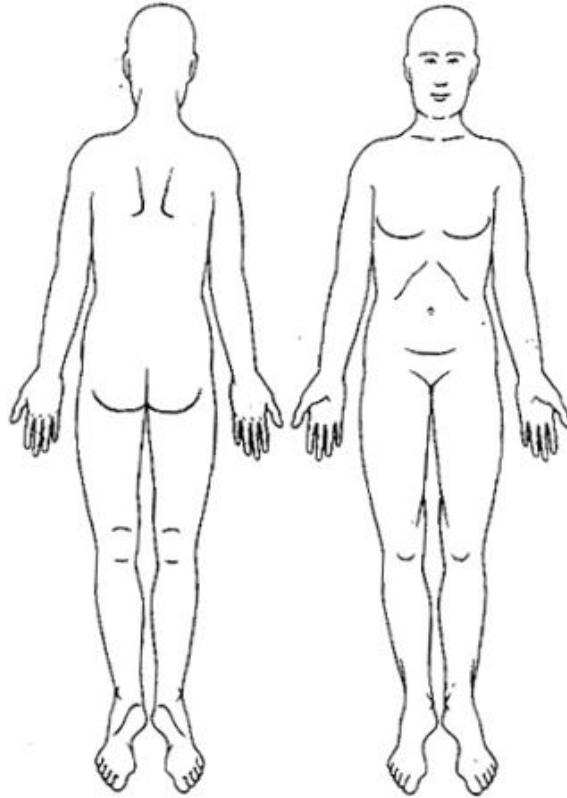
The following forms are included as part of this policy:

Title of form	When would the form be used?	Created by
Body Map - CM33	To indicate where topical medication, injections or transdermal patches are located.	QCS

HOLISTIC QUALITY CARE LTD
64b , Roaseville Road, n/a, Leeds, West Yorkshire, LS8 5DR

Service User's Name:

Use the below body map to indicate where topical medication, injections, or transdermal patches are located.



Notes: