Medications - Pre-packed

Script

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# Segment 1 - Pre-packaged medication

Slide 2: Pre-packaged medication

As part of your role as a support worker or caregiver, you may have to give out medications. If this is the case, you need to have an understanding of how medications may be packaged. In the past medications came in foil packets or bottles for you to dispense and give to the resident. This is no longer the case, and you are not permitted to do this. Dispensing of medications is the responsibility of the Pharmacist. Your role is only to administer medications so in this segment we will discuss what is a medication; types of packaging medications may be dispensed into and how long medications are packed for.

Slide 3: What pre-packaged medications?

Well, pre-packaged medication covers a person’s medication for a specified period of time that is dispensed and packed by a pharmacy for you to administer. The length of time will vary according to the medication. For example, a short course medication may be for a week or regular medications for a month. The medications in the pack will be for tablet or capsule. that are taken orally. However, written on the pack may be lotions, mixtures or creams that may need to be administered or applied but these cannot be included in the pack. The length of time a medication is pre- packed for will depend on the medication or medications the person is taking.

Slide 4: What is a medication and a dose

Well, the medications administered in your facility is prescribed by a medical practitioner and is a legal drug that helps people with maintaining their health or to cure a sickness. You yourself may be on some medication to help you get well too or maintain your health that is prescribed by a medical practitioner.

A dose is the amount of medication administered at one time.

Slide 5: What can medications be used for?

Well, a medication may be prescribed to stop a person getting sick. For example, if you travel overseas, you may need to take medication to stop you getting foreign diseases or help prevent a stroke by maintaining a healthy blood pressure.

Medications also help a person get better. For example, say Kylie has an infection in her eye, she may be prescribed antibiotic eye drops to stop the infection and help her recover. If the eyedrop didn’t work and clear up the infection, they may be prescribed oral antibiotics.

It could be that a person has pain or some other problem that can’t be cured but medications may lessen the pain or problem. For example, Betty has arthritis, so she takes a pill to lessen the inflammation and help relieve the pain or other symptoms. Now there are many other reasons people might be on medications. The above are just some examples.

Slide 6: How do people get medications?

When a doctor sees a patient, they may prescribe a medication for a person on what is known as a prescription. This prescription is then sent or taken to the pharmacy or chemist who puts together medication prescribed by the doctor into packages.

Slide 7: What is written on the packages?

Now a pharmacist just doesn’t hand you over a bottle or packet of medications, they have to write the instructions on how and when to take them. These instructions are written on the prescription by the doctor for the pharmacist to follow. This means on the packet will be the name of the person, the name of the medications and dosage, and when to administer them and any special instructions when taking them.

Slide 8: What medicines will be in the packs?

Medications come in tablets and capsules and are the only kinds of medication that can be pre-packaged. Not all tablets or capsules look the same either. They are different shapes, sizes, and colours. So, you see, each package might contain different types of tablets and capsules that help the person maintain a level of good health like anti-hypertensive medication to lower a person blood pressure or help cure some sickness like antibiotics for an infection.

Slide 9: How will you know how to administer medicines?

Well, it is important that you receive training on how to administer medications, so you need to talk to your supervisor about training in the workplace on using pre-packaged medication. After you have done the training, you will have to pass a competency assessment to ensure you understand what you have learned so you are safe. This must be done before you administer any medications.

Slide 10: Types of medication packs

Well, there are many different types of pre-packaged medications. In your workplace they are likely to be one of the following examples.

The most common are Blister packs and sachets but there are also cassettes and home packed medications. While you may never see some of these, you need to know what they are and what to do if you come across them

Slide 11: What are blister packs?

Blister packs a tray of plastic bubbles that hold the tablets and capsules and sealed with a foil backing. Each person has their own tray that is packed by the pharmacy that lasts a period of time; weekly, a monthly or when required as specified by prescriber. There are separate blisters for when the medicine should be taken, for example, breakfast, lunch, dinner, bedtime. To administer the medicines, you pop the blister and place the pills on a spoon or hand the little container of pills to the person to take.

Slide 12: What is written on the blister pack?

Well, the Blister packs will have information that you need to know. This will be both on the front and the back of the pack.

This will include the name of the person, name of medication, dose, and time to be administered. You may find the week it is to be administered is colour-coded too. This reduces confusion over which blister to open for the medicine to be taken next.

The blister pack information must include details of the pharmacy and prescription number as well. It will also have the date it was dispensed.

Slide 13: What is written on the blister pack?

There will also be directions for taking the medicine, including any special instructions, alerts, and cautionary notes. The person’s photo may be on the pack as well. Now as well as having the information being on the main part of the pack, each blister will also have the person’s name, list of contents and the date, day, and time the medicine is to be taken.

There may also be notes that may be on the label or there may be little yellow stickers that are applied on the pack by the pharmacist that alerts you to something. These notes give specific advice and cover a range of topics, from advice on the correct way to take the medication to warnings on possible side effects. There may also be an alert for a duplicate name which means there may be two people in the facility with the name Smith. This will alert you to be extra careful and you give the right Smith the right medication.

Slide 14: What do you need to do?

Before you give out the medicines, you need to count the pills in each blister to ensure it matches the numbers of pills prescribed before you take the blister to the person to take. Now you don’t need to know what each tablet or capsule looks like, but you do need to know there are not less or more tablets in the pack than there should be. While there are many checks along the way to make sure they are correct, sometimes an error occurs, and a medicine gets missed or an extra medicine get put it. As you are the person actually administering the medication to the person, you are responsible for ensuring the medications given are correct to what has been prescribed.

Slide 15: How long are Blister packed for?

They can be for a month, which is the most common way for long term medications and regular medications. However, it may be for a week especially in the case of controlled medications. Sometimes they may be made up for a specific time like a 7- or 10-day course of antibiotics or other short course medications.

All the information you require is on the back of the pack as I said in slide 15 however you may also find the pack is colour-coded at the top with the place to start administration clearly marked. You might see a circle on the front of the pack to a specific day that alerts you to give at a particular time as well.

Slide 16: Sachet packaging

Now sachet packaging is when each dose is put in a separate clear soft plastic envelope you can see the tablets in. These envelopes are provided in a long strip, and you tear off each envelope when it is required. The instructions are on the envelope. The advantage of this, is you can write on the pack to remind you of non-packed medicines or treatments you have to do at the same time as giving out the medications. For example, liquids or suspensions, eye or ear drops or creams or lotions.

The advantages of using sachets are they are compact and easy to tear off from the roll. These are commonly used in residential care these days.

Sachets are packed by robot machines, and this may also be called robotic packaging

Slide 17: What are cassettes?

Some lesser used medication management systems are cassettes. These are similar to blister packs and sachets but hold the tablets and capsules a person will need for a week.

Unlike blister packs and sachets, cassettes are made of solid plastic that hold the medication inside and slide out of the cassette to administer. These are refilled by the pharmacist.

Like blister and sachet packs, the backing sheet contains information on all the medication a person is taking, including things that are not contained in the cassette such as ointments or suppositories. The back of the container also has instructions on when and how it is to be taken.

However, these are not used widely in residential care, but it is good to know they exist if you come cross them.

Slide 18: Home packed medication

Some people may come into your facility with a weekly pack of medication they have dispensed themselves. When medications are dispensed from a pharmacist to a person, they generally come in a bottle or foil pack. Once the person gets home, they or their caregiver dispenses the medication into daily amounts. This means the packs come in without the names, dose, times to be given etc on the packs so you don’t know what you are administering.

In a facility, this is not a safe practice and is not permitted. Facilities only accept prepacked medication from the pharmacy, but many individuals do not choose the prepacked option for home use even though it is available for them but at a cost.

So, what do you do if a person comes I with their medication is one of these packs? Well, you send them to pharmacy for them to dispense medications into the method used in your facility. That being more commonly blister or sachet packs.

Therefore, any medications that come into a facility in any other form, other than what your facility uses, must be sent to your pharmacy for them to re-dispense. Do not be tempted to administer from their packs. Dispensing can only be done by a registered pharmacist or technician.

Slide 19: Important notes about medication administration

Whenever giving out medications, never give a person medication from any pack that has already been opened. It might be damaged or mixed up with different medication. This is because they can be contaminated if they fall out of the pack and their efficacy i.e., the effectiveness of the medication, can be altered by the air or other contaminants.

Medications should also be administered on a spoon or cup and not in your hand. The heat and moisture on the skin could contaminate or affect the efficacy of the medication as well.

Medications that have been dropped on the floor should not be given. You should advise your registered nurse or pharmacy and await their instructions and follow facility policies and procedures. Always complete an incident form too if this happens.

# Segment 2 **-** Why use pre-packaged medication?

Slide 1: Why use pre-packaged medication?

There are many good things about pre-packaged medication, but there are also some risks. So, you need to talk to your supervisor about training and workplace policies on using pre-packaged medication. So, in this segment I will talk about the benefits of prepacked medication but also the potential risks. I will also discuss what you need to check when giving medications

Slide 2: What are the benefits of prepacked medications?

Well generally people make fewer mistakes with pre-packaged medication. This means the person is less likely to take the wrong medication. Also using prepacked medications with an electronic monitoring system reduces the risk of giving the wrong medication to someone as well.

Also, it is clearly labelled with the time of day the medication should be given so the support worker can see which dose should be taken next and when it should be taken. For example, if it is labelled to be given at breakfast, that is the time you give it. You do not give the lunch medication at breakfast.

The medication is more likely to be correct as the pharmacy has dispensed the right medication for the time of day that it is prescribed for. This means you don’t have to organise different bottles and containers and dispense the medicine for the person in your facility which is not only time consuming but more open to errors being made.

Slide 3: What are the benefits of prepacked medication?

If the medication is for a specific time period, then the person is more likely to complete a course of medication because you know when it starts and when it finishes. This means the person is more likely to recover completely.

Also, each dose is individually sealed so is less likely to be damaged. This means the person gets the best quality medication. It is also easy to see when the medication has been administered plus it is easy to see if the package has been tampered with. Because the pack is sealed, then air cannot get into the medications which can affect the efficacy of the medicine.

Prepacked medication reduces the risk of death from being given the wrong medications as they are packed by a qualified person.

Slide 4: What are the potential risks?

There are many potential risks that you need to be aware of when using pre-packaged medication:

If a person misses a dose, then they are likely to miss all the medication they should have taken at that time. Now for some medications, this may not affect the person but in other situation it could have a serious effect on them. For example, if a person with Parkinson’s disease is not given their medication at the correct time, it will make their shakes more pronounced and not only very uncomfortable for them, but it will also throw out their whole medication regime for the whole day. Another example is if people are on regular pain relief that makes their life comfortable. Once they get into pain again it takes a long time to become pain free again so never delay given medication that is specified to be taken at a specific time.

If one of the medications is stopped, then the whole pack needs to be removed and sent to the pharmacy for the medications to be changed and repacked. Your registered nurse will advise you what to do in this circumstance. You don’t remove the stopped medication and give the rest as you do not know what the medication looks like.

Slide 5: What are the potential risks of prepacked medications?

If the person is responsible for opening their own pack of medication, and they have difficulty using their hands, they may find the packages hard to open. As a result, they may just give up taking the medications. Anything that is too hard becomes a chore. While this is unlikely in residential care as medications are given out by a registered nurse or support worker, at home this could be a real issue. In these circumstances you may assist by pulling up one corner for them to gain access to it. However, if you notice anything like this, then you must report it so that a solution can be found for them to get their medicine at the right time, with ease.

Packages so cost and this may make it too expensive for a person to use it. Each time a new pack it made up, there is a charge. It is not only the person in home care who has to pay for them but also a facility has to pay for each pack, so you need to be aware they are not free.

Some of the packages can be quite large which might make it difficult for them to handle. So not only are they large, but they may also have difficulty tearing off the blister, tearing open the sachet or slipping out the cassette. So, you need to be observant of any difficulties a person may have.

Slide 6: What are potential risks prepacked medications

The pack seal may be broken. If the glue on the back is faulty, and it doesn’t adhere to the back of the pack, air will get in and affect the efficacy of the medication or indeed medication may fall out. This is why you need to count the number of pills to make sure you give the person to right medicines.

If there are two people with the same surname in the facility, you need to make sure you give the right pills to the right person. If there is a photo on the pack, this will help when you go to see the person, but if not, an error could be made. This is why you should always ask the person their name before you give their medication if they can answer you.

Slide 7: Important note about your role

You will not be competent to give out medications by the learning for this unit standard. It does not adequately train you or assess you as competent to administer medication. You need to be observed by your registered nurse or trainer and assessed as competent and pass a competency test usually annually or to the policy and procedure in your facility or organisation.

The word administer means to open the packaging or give the medication to the person, or both. It does not mean to dispense the medicine from another foil pack or bottle.

Many facilities now use electronic medication management systems. This system has many checks and balances in it which has reduced the number of medication errors. While they still use blisters or sachets you need to do many checks as you will see in the next slides.

Slide 8: Check how much support the person needs

Now you need to know how much support a person needs to take their medication. If a person is self-medicating at home, may need support to open the pack. If they are in residential care, you need to find out if they what support the need. You will of course be opening the blister and placing the medication on a spoon or tipping them into the person’s mouth. Then you give them the water to swallow the medication. This is the first thing you must do. So, not all people who use pre-packaged medication need support. There is different requirement for home care and for residential care. Homecare is generally meant to be able to look after their own medication while in residential care, they are now permitted to look after own medication unless specifically mentioned they can self-medicate. However, self-medicating in residential care is rare and there will be specific policies and procedures in place if this is the case.

The person’s personal plan will tell you the degree of support a person needs. If it's not mentioned, you don't have to support or remind them.

Slide 9: Check the instructions.

Now before you start a medication round you must wash or sanitise your hands before you handle the package of medication. Remember that you are not allowed to administer the medication yourself unless you have received specific training and you are not permitted to dispense the medications. So carefully read the instructions on the package for any specific requirements like to be given with food or on an empty stomach, or any other alerts, cautionary or advisory labels.

Slide 10: Check that the person is ready.

Now when you go to the person to give them their medications your need to make sure the person has clean hands, is sitting upright because it is very difficult to swallow pills lying down or with their head bent. They also need to be fully alert. If they are not, then they won’t be able to swallow the medication and they may sit in their mouth and dissolve. So apart from the awful taste in their mouth, medications are designed to be taken with a full glass of water if possible or as much water as the person will take. They are not designed to be dissolved by saliva or the mucous membrane of the mouth unless specifically stated they can be.

Slide 11: Check the person is ready

Give them a sip of water before taking the tablets. It is much easier to take the medication is the mouth is moist.

Also get them to take a sip of water between taking the tablets if there are more than one to take and they take them one at a time. Many people can swallow more than one at a time, so they need sufficient water to enable them to swallow the medicines.

Make sure the person has a full glass of water ready to drink before they take their medication and after taking the last tablet. This will wash the tablets out of the mouth and throat and into the stomach.

Slide 12: Follow the 5 Rs.

Also follow the 5 Rs which will be discussed in more detail in the next segment to help you work with pre-packaged medication correctly.

It is essential that you record what the person has taken. This is the proof they have had the mediation. If it is not signed for, there is no evidence they have had it.

You have a paper-based system of signing or more commonly now, an electronic system. The paper-based system is not as safe as an electronic system that won’t allow you to move to another person’s medication unless all tasks, including signing, has been completed. You need to take extra special care when using a paper-based system. However, you will be shown the full process of medication administration when you are trained. If you are unsure, then make sure you talk to your supervisor about anything you are unsure of. There will also be policies in place for you to follow anyway.

It is especially important to record if medication was not taken, and the reasons why. For example, did they refuse, are they absent from the building or it was too difficult for them to swallow.

#### Finally, you need to report any concerns. This could be that something went wrong during the administration, or if you’re worried about anything. These must be reported to your registered nurse or supervisor

# Segment 3 - What are the 5 Rights?

Slide 1: What are the 5 Rights?

It is really important that you do the right checks before you give medications so in order to ensure you give them to the right person. So, there are a series of steps to take which are commonly called the 5 Rs It is a way of are a way of checking to help you know how to use pre-packaged medication correctly and safely. Your workplace’s policies will tell you how to check the 5 Rs. In this segment I will explain what the 5 Rs are and also discuss what to do if a person refuses their medicines and when can a person never refuse medication.

Slide 2: Check it is the right person

While this is self-explanatory you must ensure you give the medication to the right person, so you need to carefully check that the name on the medication is the same name as the person taking the medicine.

You can do this by checking the person’s identification bracelet, name tag or badge, if they are wearing one. However, this is not common in residential care.

You can look at their photograph on medication packs or medication sheets or in their personal plan to confirm it is the right person. Most medication packs now have a photo of the person on them

You can also ask the person their name if they are able to tell you who they are and respond to you. Most people when you call out their name will acknowledge you.

However, you must NEVER give medication from a pack that does not have a person’s name on it. There should never be any packs in the facility that do not have a person’s name and photo on it anyway but if by chance, one does arrive, don’t give it out to anyone.

Slide 3: Check It is the right medicine

This means you must ensure the name of each medicine is on the pre-packaged medication and it matches the medication prescribing sheet. Now you will not know what each medication is and what they look like, but you can count the number of pills or capsules in the pack and match it with the written information.

However, if you are using an electronic system, the colour and shape of the medicine will be beside the name of the medication which makes it easy for you to verify. However, in a paper-based system this is unlikely to as clear so you will need to count the tablets or capsules with the prescribing sheet. Be aware here for medications that may be given on irregular days like Monday, Wednesday, Friday or Monthly.

You also need to check if other medicines are due as well like eyedrops, ear drops, suspensions, or patches. These will not be in the medication pack but will be written on the prescribing sheet so make sure they are on the trolly before you start you medicine round.

Slide 4: Check it is the right dose

The dose of the medicine in the pre-packaged medication must match the medication sheet. Written beside each medicine it will have the milligrams of the medicine and sometimes grams or micrograms. Sometimes it may require two medications or even a half tablet to make up the dose. Just be aware of this when you are checking the medication to be given. So, you check the number of tablets required and how many milligrams, grams or micrograms is on the prescribing sheet, on the blister pack and the individual blister or sachet so there are a lot of checks to make. Note the sachets are likely to come in a roll and not in a pack so the dose will only be written on the sachet.

Slide 5: Check it is the right route

Now the route is the way the medicine is administered and enters the body. For example, taken by mouth which will be orally or absorbed through the skin as in a patch. They could also be sublingually which is absorbed through the mucous membrane in the mouth. It may also be rectally as in suppositories or injected. However, any injections are more likely to be given by and registered nurse, with the exception of insulin, which you would need to be specifically trained to do. This will be on the pre-packaged medication and must match the medication sheet. Now when a medication is to be given orally it is usually swallowed into the stomach. This is how they are designed to work. Some people may have difficulty swallowing pills or capsules and chew them. This can be very dangerous especially if a tablet has a coating on it to slowly release the medication. If a person cannot swallow the medicine, then you must report this to the nurse or doctor to see is there is a syrup or suspension available for the person to take.

Slide 6: Check it is the right time

The time and date the medication is taken on the pre-packaged medication must match the medication sheet, for example, breakfast time on Tuesday 8 March. Also, as I mentioned in slide 3, be aware that some medications are not given every day but maybe three times a week once a week or even once a month. Some medications are time critical too. Now Parkinson’s medication if particularly crucial for the comfort of the patient. If they don’t it receive it at the right time, it can make their shaking or stiffness worse which is very uncomfortable for the person. Also, medicines like sleeping tablets wouldn’t be given during the day. So, make sure the medicines are given at the right time and day.

Slide 7: What if a person refuses their medicine

Well, this is actually one of their rights. Now the medicines are actually owned by the person so if they don’t want to take them, then this can be difficult for you. It may well compromise their health. So, what are you going to do if this happens because they do have the right to refuse? Well, if a person is refusing to take the medication you must listen to them and their reasons for refusing medication. Once you have heard their explanation which could be that they are fearful the medication may harm them, or afraid of the side effects or even believe they don’t need the medications. This is there belief be it right or wrong. So, you must explain why it has been prescribed for them and what the consequences of not taking the medication are and offer it to them again.

Slide 8: What if a resident refuses their medicine.

If they still refuse, then report it to the Registered Nurse to see if they have any instructions or suggestions for you. It may be that they will come and try to get them to take the medicine. If still refused, mark R on the signing sheet or the appropriate symbol in your electronic system and document it in their notes or notebook if you are in homecare. So, before you give up you must return several times to see if they are more amenable to taking the medicines. You have to write up your notes, outlying everything you have done to get them to take the medication. This means you have to specific in what you did, how many times you went back, what their reason for refusal was and any other information. Also, don’t forget to tell the oncoming staff as well at handover so they can be alerted to any consequences that may occur of the person refusing the medication. It is good to have a discussion around the issues you experienced as other staff may have been in the same situation and have some solutions or tips on what they have done that have worked.

Don’t whatever you do try to disguise the medication in food or crush them. This may render the medication useless as most tablets are designed to work being taken with a full glass of water not crushed or mixed with food.

If the person continually refuses, it may be that the medications need to be discontinued, changed to a mixture or suspension. However, that is not a decision you make, it is up to the Registered Nurse to discuss with the Doctor and for the doctor to make the decision.

Slide 9: When can a person not refuse medication

Now there are some cases where a person cannot refuse medication and that is when they are under a compulsory treatment order or assessment. You will be informed if this is that case, but it still does not mean you crush the medication or force them to take it. You have to inform them that they are under a compulsory treatment order or assessment. If they still refuse, you must call your registered nurse immediately and they will give you instructions of what to do.

A compulsory order means a person must accept treatment for a mental health condition that is an order by a court of law. Now go to Segment 4 to find out more important notes on medication administration and how to open a blister or sachet.

# Segment 4 - Important notes on medication administration

Slide 1

This segment is a continuation from segment 3 and will discuss important things to know about medication administration including other rights of the person, how to manage medicines in Homecare if not in blisters or sachets, what you should report and how to open a blister or sachet.

Slide 2: Important notes about medication administration

The medication also has to be given for the right reason. Now generally speaking this is the responsibility of the registered nurse or doctor as you probably do not know what each medication is for. An example may be that a person is already asleep before you have given the sleeping tablet so you may withhold it. If this is a regular occurrence for the person, then maybe they don’t need it? Anyway, you must discuss this with your registered nurse and record the reason you withheld it in the persons notes and, on the medication, signing sheet.

Now when it comes to prn medication which means when required medication you do need to know the reason it is being given to ensure it is given for the right indication. PRN medication should always be authorised by the registered nurse anyway so you must check with them before you administer it. Also, don’t be afraid to ask questions if you have any queries. Once the medicine is administered, you are the person responsible so make sure you know why it is being given and note who authorised it.

The right documentation is really important too. There is a process for prescribing, dispensing, and administering medications. There has to be checks and balances in place. So, in residential care it will be written on the facility prescribing sheet by the doctor. This may be handwritten however, this is rarely done these days in residential care, but home care will be different. Most prescribing sheets are computer generated from the pharmacy. The doctor sends the scrip direct to the pharmacy, they dispense it to the blisters or sachets and along with the signing sheet it is sent to your facility, or the sheet downloaded into your electronic system and then the medications are delivered. Prescribing sheets have to be legible so it is easily read to prevent errors occurring. In the past there has been many errors through nurses not being able to read the writing on the prescribing sheet. The advent of computerisation has alleviated this issue.

The list of medications is also written on the header of the blister pack or single dose pack of medicines and on the back of each blister. This means you have several checks to make before you sign the medication as having been given. It is your responsibility to do all these checks before you administer the medicine.

Slide 3: Important notes about medication administration

Always sign the sheet AFTER you have given the medicine. You never sign before you give the medication because the person may refuse, not be in their room or the facility.

You must also witness that they have actually taken the medication too. Neither do you leave the medication sitting on their locker as anyone can come along and take it. Also don’t just hand it to the person and trust them to take it. As I said you must witness the medicine is taken.

It is too easy to miss someone or sign in the wrong place or get distracted. I know it takes longer to do the round but if you don’t do all the checks, you are likely to make an error. So, you MUST sign after the medication has been taken.

You must never take phone calls while giving out medicines or leave the trolly to assist someone with care. Distractions are the cause of most medication errors.

If you find that a medication has not been signed for you must document this because you will not know if the medication has been given or not. Recording and reporting it is a checking mechanism if anything untoward happens. You need to read you policies and procedures on what you need to do here. It could be on an Accident/Incident form or in the resident notes or both. However, with an electronic system there is more safety checks as you cannot move on to give another medication unless you have signed the medication is given.

Slide 4: Important notes on medication administration - Homecare

Now the same is for homecare. You need to check with your homecare supervisor if you are permitted to administer medicines to the person in your care as technically, they should be able to manage their own medication if living at home but we all know that this is not always the case. Also check if there is a formal signing sheet or prescribing sheet for you to check the medicines against. Also check the medicines are for the right person as all the other rights like-given at the right time, right dose, right route. It is quite common practice now for people at home to have their medications in blister packs or sachets dispensed by the pharmacy and they may have a yellow card that has all the medicines written on it.

Slide 5: When medicines are not in blisters or sachets Homecare

Now on occasions medicines may be in bottles or foil packs. In this case you have to be very careful that you understand the instructions written on the pack or bottle. Dispense them into a cup, saucer, or spoon on a saucer before you take them to the person. and you must work to the policies and procedures of your organisation. Sometimes a family member will dispense the medicine into a single dose system. However, if you have been placed in this situation, I would strongly suggest that you get you supervisor to arrange some form of prepacked medication system for you to administer for your own safety and protection.

Slide 6: What do you report?

Finally, if you have any concerns, you must report these to your registered nurse. This is really important because a person can become really unwell very quickly if given the wrong medication or develop a sensitivity or become toxic to a medicine, they have been on for a while. So, what would you report?

It may be the person has difficulty swallowing the medication, they complain of feeling sick or nauseous after taking the medication or even vomit. They could also spit them out or refuse to take them.

Slide 7: What do you report?

Always report any error you might make immediately you make it. Do not try to cover it up as it could have serious consequences for the person, you, or your career. Report immediately and complete an incident report. This is your best protection and ensures the best outcome for the person. Remember, you are human, and humans make mistakes but own up to them immediately and less harm will occur.

Never feel you have to know everything and may lose face by asking or speaking out.

Report any concerns, ask any questions you have or anything you don’t know. Don’t continue on blindly. These could have serious consequences to your resident or even you and your career if you make a mistake.

Slide 8: What must you always do?

You must always stay with the person to ensure they swallow the medicines. Blisters or medications should not be left on a locker or for the resident to take when they are ready. The person may forget to take them, another resident may pick them up and take them as I said in slide 3. Never sign for any medication until it has actually been taken. Never hand the medication for someone else to give to the person and you sign it. You are, after all, responsible for ensuring the person actually takes their medicine.

Always remember a person can actually die or become seriously unwell if they take the wrong medication or indeed miss a dose of medication.

Slide 9: Opening a blister pack

The packs should not be twisted and while other tablets do not usually fall out, there is a risk that some will. You can either pop the tablets out from the pack on to a spoon or some other receptacle, or you can tear off the blister. It is best practice though to tear off the blister and take the medication to the person in the plastic cup they sit in. This is what the blister has been designed to do. All blister packs must be opened from the back.

Pull back the tab on the corner if it has one to expose the medicines. If there is no tag run your fingers over the back of the blister until a ring appears. The company supplying blister packs may supply a special opener or pick to make it easier to open. If there is no opener supplied, you can use the end of a teaspoon handle. Run the spoon end or pick around the inside of the ring to open.

Note: Do not open the medication till you are beside the person to give it to them. Opening them on the trolley and then taking them to the person could mean loss of some medication.

The label should be checked before the blister is opened as I said before. Only open blister packs if you are authorised to do so and have been trained by your organisation.

Slide 10: To open a sachet

To open a sachet, you first have to tear the sachet from the roll. Take the sachet to the person on a tray or saucer with a spoon or medicine cup on it. Open the sachet and place tablets on the spoon or a medicine cup.

Slide 10 Special Notes

Always check the back of the blister or sachet with the medication prescribing sheet before you administer the medicines.

Always open the blister of sachet when you are beside the person. Do not open on the trolley and take to the person. You could lose some on the way.

If using a medicine cup, check it is dry before you put the medicines in it as they may not only become stuck in the cup, they will taste awful in the person’s mouth on once moist they will start to work. Most medicines are designed to dissolve in the stomach not in a glass unless it is specifically stated to dissolve in water.