

MEDICATION MANAGEMENT POLICY AND PROCEDURE

Purpose and Scope

This policy outlines the standards and procedures necessary to ensure that all participants' medication is managed in a safe and secure manner to prevent medication errors from occurring.

This policy applies to all participants and Cahoots staff who are responsible for storing, handling, and/or administering medications.

The Community Engagement Manager is responsible for the implementation of this policy.

The Operations Manager will ensure that only appropriately trained staff provide medication management to participants.

POLICY STATEMENT

Safe practices and procedures for administering medication are essential to maintaining the well-being of the participants we support during camps and programs.

Training

All Facilitators must complete accredited Medication's Competency Training and their medication administration practice must comply with the training they have received before being approved on the Cahoots Facilitator Accreditation Checklist.

Consent to Administer Medications

Parents/carers are to provide Cahoots consent to administer medication to participants. This includes prescription, PRN, non-prescription and over-the-counter medications, and complementary and alternative health care products.

The Medication Administration Consent Form will be emailed to the parent/carer prior to the participant being accepted onto a camp or day program.

The Medication Administration Consent Form is to be returned to Cahoots prior to the camp or day program. A copy of the form will be included in the participant's profile.

Medication consent is valid for a period of 12 months, unless withdrawn by the participant or parent/carer.

Participants who do not require medications will not be required to complete the Medication Consent Form. However, if a participant's medication needs change, a Medication Administration Consent Form must be completed.

Medication requiring invasive administration, such as suppositories or injections (other than EpiPens), are not permitted on camps or day programs.

Medication Supply and Management

Upon acceptance to a camp or day program, participants or parents/carers are to package all medications, including prescription, non-prescription, PRN medications, complementary and alternative health care products as outlined below:

Tablet medication: are to be supplied in a blister (Webster) pack and accompanied by a pharmacy-generated signing sheet. This includes routine prescription medication, PRN medications and over-the-counter medications, i.e., Panadol, antihistamines, vitamins etc.

Medications that cannot be stored in a blister (Webster) pack: are to have a pharmacy-generated label attached and be accompanied by a pharmacy-generated signing sheet. This includes:

- Medication in liquid form
- Emergency PRN medications i.e., Midazolam, Ventolin inhalers
- Contraception pill presented in pre-labelled blister packet
- Eye/ear drops
- Inhalers
- Creams
- Nasal sprays
- Dermal patches

Pharmacy-generated labels and signing sheets must contain the following information:

- Participant's name
- Medication name
- Dose and Frequency/times to be administered
- Treatment instructions, where applicable

Accepting medication at the commencement of a camp or day program: Labels on medication packaging and blister (Webster) packs must correspond with the pharmacy-generated medication signing sheet.

Pharmacy-generated medication signing sheets or labels on medication packaging and blister (Webster) packs are not to be altered by staff or parents/carers.

Medications or treatments past their expiry date will not be accepted or used.

If a participant arrives with medications, not packaged correctly, without correct labelling or accompanying signing sheets, staff will:

1. Notify the parent/carer that Cahoots cannot accept the medication.
2. Provide the parent/carer the option of going to a pharmacy to rectify the issue before dropping the medication off at the camp or day program.
3. If the parent/carer cannot resolve the medication issue before the participant is due to take the medication, the participant cannot be signed into the service.

Once the medication has been placed in a blister (Webster) pack or other issues rectified, the participant can then join the camp or day program. The parent/carer is to communicate a suitable time and location for the participant and their medications to be dropped off.

PRN Medications

PRN Medications (as required medications) including antihistamines, ibuprofen, bowel aids, etc (prescription or non-prescription) must be packaged as outlined:

- Tablet medications in a blister (Webster) pack and accompanied by a pharmacy-generated signing sheet.
- Medications that cannot be stored in the blister (Webster) pack are to have a pharmacy-generated label attached and be accompanied by a pharmacy-generated signing sheet.

All PRN medication that require a protocol to be followed, i.e., asthma, anaphylaxis or seizure management, must be accompanied by instructions in a Health Condition Management Plan authorised by the participant's GP or medical consultant.

Facilitators are not permitted to purchase and administer any over-the-counter PRN medications such as Panadol, antihistamines, bowel treatments, etc. If the Facilitator is concerned of the participant's health and believes medication is required, the Facilitator must inform the parent/carer. The parent/carer can then arrange for the appropriately packaged and labelled medication.

If practical, the participant may be taken to a local pharmacy and the parent/carer can teleconference with the pharmacist. The pharmacist may then provide the appropriately packaged and labelled medication.

Any medication costs incurred will be charged to the parent/carer.

Schedule 8 medications (Controlled Drugs)

Schedule 8 (S8) or “controlled drugs” are substances that require a restriction of manufacture, supply, distribution and possession. S8 medications need to be handled in a controlled manner.

S8 medication is to be stored with additional security. This means inside a locked box or case within the main locked medication box or case.

S8 medications supplied in a blister (Webster) pack or presented in forms that cannot be blister (Webster) packed, i.e., liquids or patches can be administered but must be labelled correctly and be accompanied by a pharmacy-generated signing sheet.

S8 medications that are not blister (Webster) packed, such as liquids or patches, must be counted or measured by the Facilitator, with a witness present, at the same time each day. The recorded amounts should be documented daily on both our internal medication schedule form and the pharmacy-generated signing sheets provided at drop-off. Any discrepancies in the count must be reported immediately and investigated in accordance with the Incident Management Policy and Procedure.

Storage of Medications

All medications and pharmacy-generated signing sheets are to be handed directly to the Facilitator at drop-off.

If medication administration is required and a Medication Administration Consent Form has not been returned prior, it must be completed at drop-off. The Facilitator is to put the participant's blister (Webster) pack, other medications, pharmacy-generated signing sheets and the Medication Administration Consent Form in the participant's folder.

All medication folders are to be stored in the locked medication box or case. Only the Facilitator is permitted to access the locked medication box or case.

If medications are required when the camp or day program is away from the main site, the Facilitator is to take the participant's whole medication file with them and store it securely in a smaller locked box or case.

Staff and volunteer leaders are not permitted to store any personal medications in their personal luggage. Staff and volunteer leader medication is to be stored in the locked medication box or case. Staff and volunteer leaders can access their medications at any time by asking the Facilitator.

At the conclusion of the camp or day program;

- all participant blister (Webster) packs, medications and signing sheets are to be returned to the participant or parent/carer.
- all staff and volunteer leader medication is to be returned.

PROCEDURE

Administering Medications

Only Facilitators are permitted to administer participant medications. Support workers or volunteer leaders may witness medication being administered and initial the pharmacy-generated signing sheet.

The Facilitator must follow dosage and treatment instructions as per the pharmacy-generated signing sheet and/or medication label.

Signing sheets or labels on medication containers are not to be altered.

Staff must follow the “Seven Rights of Medication Administration”. These rights form the principles to ensure medication is given in a safe, careful, and consistent manner.

1. Right person
2. Right dose
3. Right route
4. Right medication
5. Right time
6. Right method
7. Write it down

Medications or treatments that have passed the expiry date cannot not be administered. The parent/carer is to be advised accordingly.

The locked medication box or case will contain the equipment required to administer medications safely and efficiently.

In administering medication, each participant's dignity must be maintained. Unnecessary attention or spectacle must be avoided. If participants inquire about another person's medication, respond indirectly (e.g., by gently redirecting the conversation).

Steps:

1. The Facilitator is to set up a table/area specific for administering medication to the participant.
2. Water is to be available for the participant taking tablets.
3. Each participant is to be called to the table individually with their volunteer leader.
4. Staff and participant hands are to be washed and clean.
5. The Facilitator is to check that the medication pharmacy-generated signing sheet matches the blister (Webster) pack or pharmacy-generated medication label.
6. Confirm the participant's name with the volunteer leader, then confirm a match with the blister (Webster) pack,
7. Use Pil-bob to remove medications from the pack. Do not use hands. If a liquid medication, draw medication using a syringe.
8. Show the witness the medications to confirm dosage before giving to the participant.
9. Give the participant the medication to consume in front of the Facilitator and witness.
10. Check that the medication has been consumed by the participant.
11. Facilitator signs pharmacy-generated signing sheets that medication has been administered.
12. Witness signs pharmacy-generated signing sheets that medication has been administered.
13. Ensure the Pil-bob is washed and dried thoroughly before the next participant to avoid cross-contamination of medications.
14. Any rubbish is to be disposed appropriately.
15. When applying any creams or drops, ensure appropriate PPE is worn and the privacy and dignity of the participant is upheld.
16. Ensure you wash your hands in between administering each participant's medication.

Manipulation of Medications

Medications may be required to be manipulated e.g., crushed or concealed in food. If this is required, written permission is required from the participant's GP before the camp or day program.

The instructions are to be provided to the Facilitator and included in the participant's profile.

Refusal to take Medication

If a participant refuses to take their medication, the parent/carer will be contacted for advice.

If the participant still refuses to take the medication, the parent/carer has the option to attend the camp or day program to administer the participant's medication or the participant will be sent home. Any phone calls or other correspondence are to be recorded on the incident report.

Physical force and/or use of a restrictive practice is not permitted in administering a participant's medications. Notwithstanding this, a participant may have a restrictive practice strategy for medication administration identified in their behaviour support plan. This strategy can only be implemented if all less restrictive options have been tried and the Cahoots Restrictive Practices Quality Assurance Panel has authorised the practice. If used, the restrictive practice strategy must be reported in accordance with Incident Management Policy and Procedure.

Adult self-administration

Where the participant's representative has approved, adult participants can self-administer their medication. The Participant's Representative letter template must be provided before the camp or day program.

Adult participants who self-manage medication are required to have their medication stored securely in the locked box or case.

All medication signed-in at drop-off must comply with the Self-Administration Checklist provided on the Authorisation for Self-Administration of Medication Form.

Medication Administration Incidents

If an error occurs in administering medication, such as giving medication to the wrong participant, giving medication at the incorrect time or missed medication, the following steps should be followed:

- The Facilitator is to call the parent/carer immediately to seek advice.
- If the parent/carer does not respond, contact Health Direct for advice 1800 022 222 or call the participant's respective pharmacist for advice.
- Advise Cahoots On-Call Staff.
- Take the participant to the nearest hospital, if advised by the above persons.

If a participant becomes unwell or is experiencing a health issue following the error, take immediate action. If safe to do, transport the participant to the nearest hospital or contact 000 immediately.

All medication incidents are to be reported in accordance with the Incident Management Policy and Procedure.

Risk notification procedures are to be followed in accordance with the Risk Matrix - Service Delivery.

"Near misses", such as the wrong medication is prepared but the mistake is identified and rectified before administration, are to be reported in accordance with the Incident Management Policy and Procedure.

Medication for Health Condition Management Plans

All PRN medication that require a protocol to be followed, i.e., asthma, anaphylaxis or seizure management, must be accompanied by instructions in a Health Condition Management Plan authorised by the participant's GP or medical consultant.

The Health Condition Management Plan must be available before the camp or day program depart to ensure the Facilitator and the participant's leader are aware of actions to be taken in a health emergency.

The Health Condition Management Plan will be accessible to the Facilitator and the participant's leader and will be kept with the participant's profile. Any emergency medications used in response to the Health Condition Management Plan (e.g., Ventolin, EpiPen, or Midazolam) will be handed to the Facilitator at camp or day program drop-off.

Accessing Additional Supply of Medication

In the case of medication being lost, damaged or more is required, parents/carers are to be advised and asked to supply more.

If this is not practical due to distance or being unable to contact parents/carer in time, the following are steps are to be followed:

- Where medication is blister (Webster) packed, take the medication from the same time slot but the day furthest from the current day. Sign pharmacy-generated signing sheet for current day and time.
- 1. Contact the dispensing pharmacy for advice. They may be able to fax/email a prescription to a nearby pharmacy for dispensing.
- Where neither option is possible and parents/carers are not contactable, take the participant to a local GP or emergency room, along with medication pharmacy-generated signing sheet, for review and assistance.
- 2. As soon as practical, advise parent/carer of actions taken.

Receipts are to be kept for any costs incurred through this process for expense reimbursement.

Disposing of Medications

Any medications that need to be disposed of should not be treated as general waste.

If medication needs to be disposed of (e.g., tablet dropped on the floor), the medication is to be bagged and stored securely until it can be disposed of at a pharmacy. Do not flush medication in the toilet or sink.

Communication

This policy will be communicated in an appropriate way to:

- Participants and their support networks through Cahoots e-newsletter, website, intake process, easy to read flyers and accessible on request.
- Staff and volunteers through inductions, professional development and staff meetings.

Policy Review

This policy will be reviewed every two years in consultation with participants and their support networks together with staff and volunteers.

This policy is not intended to be a static document, and Cahoots commits to its ongoing development as part of continuous quality improvement, and as policy and legislation changes dictate.

References and Related Documents

- National Standards for Disability Services – Standard 1: Rights.
- National Standards for Disability Services – Standard 3: Individual Outcomes.
- National Standards for Disability Services – Standard 5: Service Access.
- National Standards for Disability Services – Standard 6: Service Management.
- NDIS Practice Standards -Core 1 Rights and Responsibilities
- NDIS Practice Standards - Core 2 Provider Governance and Operational Management
- NDIS Practice Standards –C ore 3 & 4 Provision of Supports
- Cahoots Incident Management Policy and Procedure
- Cahoots Risk Matrix - Service Delivery
- Cahoots Medication Checklist for Participants

- Medication Administration Consent Form
- Cahoots Medication Chart
- Participant's Representative letter template
- Authorisation for Self-Administration of Medication Form
- Cahoots Facilitator Accreditation Checklist

Versions

No.	Approval Date	Description of Amendment
1.0	1/11/2015	Policy created
2.0	31/8/17	Reviewed LZ
3.0	01/01/19	Reviewed TT
4.0	4/07/2019	Reviewed SS
5.0	28/08/2020	Reviewed and updated SS
6.0	26/08/2021	Reviewed and updated TB
7.0	18/11/2024	Reviewed and updated SG

Owner	Approver	Next Review
Community Engagement Manager	CEO	December 2027