

33. Medications

Most people take some form of prescription or non-prescription medications, either on a daily basis or incidentally (antibiotics for an infection, Advil for occasional aches and pains, etc). Some of the people in Spectrum's services manage and self-administer their own medications and do not require any assistance from staff or caregivers. Others require assistance to monitor and/or administer their medications. Accountability for medications will be clearly defined when services start, reviewed annually and documented on the person's support plan. If Spectrum provides assistance with medications, the following guidelines will be observed:

- (a) Spectrum personnel are expected to implement the medication plan as prescribed, or report to the supervisor immediately if they are unable to implement the plan for any reason, for example if the person refuses.
 - 1. The medication plan will include steps to follow if personnel are unable to monitor or administer the person's medication, including when to report back or seek guidance from the doctor or pharmacist.
- (b) The manager or designate is responsible for monitoring the medication supply, ensuring there is an adequate supply on hand, that additional medication can be obtained if necessary during off-hours (evenings, weekends), and that any unused medications are properly disposed of, according to the pharmacy's guidelines.
- (c) Medications in staffed residences will be carded each month by a pharmacist.
- (d) Medications will only be administered by personnel who have been trained and signed off on the medication administration record. Person-specific training on medications will be part of the staff orientation.
- (e) Spectrum personnel are only authorized to administer medications that have been ordered by a physician, pharmacist or other licensed practitioner (eg. naturopath, homeopath). This includes non-prescription medications and PRN ("as needed") medications.
- (f) Medication will be kept in the original labeled containers provided by the pharmacist, or in a secure "social leave" pouch, until immediately prior to administration.
- (g) Medication will be administered at a time and in the dosage prescribed, by a trained staff member or caregiver who will remain with the individual until the medication is taken.
- (h) Medication ordered and dispensed for one person will not be administered to another person.
- (i) Individuals in staffed residences will not be allowed to self administer medication unless specifically authorized in writing by their prescriber. This authorization must be renewed every six months.

- (j) Medications in staffed residences will be kept in a secure area, which will be kept locked when not in use and will be accessible only to authorized personnel.
- (k) Medications requiring refrigeration will be stored safely in a refrigerator, clearly labelled in a secure container and kept separate from food items.
- (l) Medications requiring protection from light will be stored safely in a cupboard or other area that is protected from light, clearly labelled and kept separate from food items.
- (m) Medication Administration Records will be retained in the agency archives for the person served. Empty blister packs may be discarded but only after the person's name and any other personal information is removed or blacked out.
- (n) In consultation with their physician, individuals may choose alternative over traditional therapies. Where alternative therapies are used, written guidelines will be in place, clearly describing the therapy, its intended outcomes, possible side-effects, and any other pertinent information.
- (o) Medications will be regularly monitored by the individual's physician or prescribing practitioner.
- (p) All medication errors will be documented on the appropriate form, as per guidelines. See Policy #25 – Critical Incident Reporting.

Medications Procedure

- (a) Unless otherwise stated in the individual's service plan, the following procedure should be used when dispensing medications:
 - (i) Wash your hands. Wear gloves when applying topical ointments.
 - (ii) Check the date and time, and compare the medications listed on the Medication Administration Record with the medications on the cards. Make sure you have the right medications for the right person!
 - (iii) Once you're sure everything checks out, punch the pill(s) out of the blister pack next to the correct date (if a previous dosage has been missed, just leave it in the blister pack). For topical ointments, follow the directions on the container.
 - (iv) Administer the pill(s) to the individual in the method they most prefer (with water, on a spoonful of applesauce, etc). Stay with the person until the medication is taken.
 - (v) After the medications are taken, or the ointment applied, initial the Medication

Administration Record in the appropriate box. If the medication is refused or lost, record the appropriate code.

- (b) The Medication Administration Records are legal documents and must not be tampered with. If you make an error in recording, circle it and write on the reverse side what happened. Do not use liquid paper or try to change anything once it has been recorded.
- (c) PRN medications ("as needed") will also be recorded on the Medication Administration Record, indicating the date, time, dosage given and the benefit or lack thereof to the individual. Note that all PRN medication requires a written prescription.
- (d) If you are preparing medications to be given by someone other than yourself, record the appropriate "social leave" code on the Medication Administration Record. If you are unsure how to prepare the medications for social leave, call the Pharmacist for assistance.
- (e) Medication dropped or lost should be replaced by using the medication from the last day of the month. Phone the pharmacist to order a replacement for the end of the month. Record the lost medication on the Medication Administration Record.