

## Medication Procedure

### Completing the Medication sheet:

Coordinators are responsible for updating medication sheets prior to shifts, activities and camps.

All Interchange Outer East (IOE) support workers that assist an individual with their medication are required to complete and sign a medication sheet.

Private support workers/other carers are not required but are encouraged to use IOE medication sheets when sharing the support of a participant. The advantage in using the same medication sheet is that support workers are clearly able to see what medication has been administered when doing a follow-on shift, therefore avoiding medication errors. Support workers that are not employed with IOE should indicate in the signature box that they are a private worker. IOE will not report on any medication administered by a private support worker.

The medication sheet is to be stored within the individual's support information, however medication sheets can be used as a separate document when utilised by support workers to assist with medication.

Medication sheets are to be completed with participant's name, date of birth and signed by the individual or parent/guardian. All known allergies should be listed on the medication sheet along with any specific information about medications side effects and adverse reactions.

When completing the medication sheet, list the medications in the order they are given and include the following information.


- **Time:** This must be recorded in 24-hour time – e.g. 2pm = 1400. If the medication is to be given at breakfast, note the usual time that this would be and then specify in the instructions that it needs to be given at breakfast.
- **Name:** list the name of the medication This should be the brand (or generic) name of the medication
- **Strength:** This should list the strength per tablet, e.g. Lovan ONE tablet 10mg
- **Dose:** The amount to be given in mg/ml and what this equates to in tablets, e.g. 20mg (2 tabs)
- **Route:** This is where the medication is administered e.g Oral, topical
- **Reason:** There can be several reasons why a medication is prescribed and given, it is important to ask what the medication is for in order to determine the reason. Once you understand the reason the medication is given you will need to list the reason from one of the below categories:

Reason/Purpose	Explanation
Pain relief	This includes medicines for both short term and long term, prescription and over the counter medication.
Behaviour	Medication that is used to treat behaviour including mood, hyperactivity or aggression without a diagnosed mental disorder or physical illness or condition.
Therapeutic	Treatment of diagnosed disease or condition by medical practitioner.
Temporary illness	Medication for temporary illness or infection, e.g. antibiotics
Supplements	E.g. Vitamins, dietary supplements over the counter medications.
Contraceptive	Used to prevent unplanned pregnancy. May be considered as therapeutic to control symptoms of diagnosed conditions, e.g. polycystic ovary syndrome (PCOS), endometriosis or to assist with heavy, painful periods.
Creams and lotions	Treatment or prevention of skin conditions, typically over the counter.

- **Instruction:** In this section you will include specific information on how to administer the medication, e.g. crush the tablet and add it to a teaspoon of strawberry jam.

### Receiving Medication:

When on camps and group-based activities, staff must follow the below procedure when receiving medication for an individual in their care:

Check	
1. Check medication against medication sheet	Staff must check that the medication provided by the parent/guardian is the same as what is recorded on the medication sheet.
2. Check medication is labelled and within date	Staff must check that all medication they are required to handle is labelled, dated correctly within expiration date and in a Webster-Pak (tablets and capsules) or original packaging (liquids, powders, ointments, lotions). PRN medication is not required to be in a Webster pack.  

3. Check quantity	Staff must ensure that there is a sufficient quantity of medication, especially for medication that cannot be stored in a Webster-Pak, e.g. Ventolin.
<b>Document</b>	
4. Document any changes on medication sheet	Any changes to medication/dose/strength/route etc are to be documented on the medication sheet and initialled by the parent/guardian.
<b>Sign</b>	
5. Parents to sign medication sheet	Staff must ensure the parent/guardian has the opportunity to read the medication sheet and sign the sheet to confirm that the information is correct; this includes PRN medication. In the event a parent/guardian is not transporting participant, prior arrangements should be made to ensure the medication sheet is signed before the participant arrives.
6. Parents to sign-in medication	Parent/guardians are required to sign-in the medication on the sign in/sign out register (this only relates to services provided to children).
<b>Store</b>	
7. Store medication in locked bag	Medication is transferred from the parent/guardian to the staff member who stores it in a locked bag; being aware that some medications require refrigeration or transportation in an insulated cooler to maintain the required temperature.
<b>Self-Administration Medications</b>	Medication that is to be self-administered must be contained and labelled in a zip lock bag. It must be clearly documented that the participant is self-administering. Staff are responsible for storing the medication safely and ensuring the medication is available for participant at the times required.

### Assisting with medication on 1:1 shifts

When on 1:1 shifts, staff must follow the above procedure for steps 1-5. IOE acknowledges that storage of medication is more difficult on 1:1 shifts; it is therefore the staff member's responsibility to ensure that during their time on shift, that the medication is stored in a safe manner, locked where possible. If a locked bag is not available, this can be discussed with the family and coordinator.

If a parent/guardian presents medication that is not on the medication sheet, the staff member needs to discuss this with the parent/guardian and understand what the medication is, its purpose and all other necessary details (the 9 Rs - see below). All details of the medication sheet are to be recorded on the individual's medication sheet and signed off by the parent/guardian. If the staff member has any concerns, they are to call the emergency after hours phone to discuss and seek further clarification.

## **Assisting with administration of medication:**

The procedure below applies to all staff members supporting administration of medication, on both camps/activities and on 1:1 shifts.

Staff members must:

1. Understand the basic purpose of giving medication;
2. Remain focused and attentive to the administration of medication, and not attend to any other task at the same time;
3. Read the medication sheet and collect any equipment that may be required (for example, a medicine cup, syringe, cup of water);
4. Wash their hands and ensure the work area and any equipment to be used is clean; gloves must be worn when applying ointments, creams and/or lotions;
5. Ensure the medication is not contaminated or damaged;
6. Follow all instructions for the administration of the medication. These instructions should be found on the medication sheet, although may also be on the label of the original container or the Webster-Pak. For example, a medication instruction may be *to be taken with food*.
7. Be familiar with the instructions contained in emergency management plans and behaviour support plans (see 'Administration of PRN Medication', below);
8. Check any instructions regarding how to best administer the medication (for example, crushed in jam);
9. Check the 9Rs of administration against the individual's medication sheet:
  - Right person;
  - Right medication;
  - Right dose;
  - Right time;
  - Right route;
  - Right day;
  - Right documentation
  - Right reason
  - Right response
10. Ensure that the medication is administered as close as possible to the scheduled time. If the medication is given orally, the staff member administering the medication must remain with the individual until satisfied that the dose has been swallowed;
11. Observe the individual for any adverse reactions to medication; if any reaction occurs, report these promptly to the parent/guardian and IOE (via the emergency after hours phone, if out of office hours).

## **Assisting with administration of medication overseas:**

When organising a camp overseas, coordinators must receive the following paperwork from each individual's general practitioner/prescribing doctor:

- A letter stating that medications are ok to be administered as staff see fit, e.g. if the medication is usually administered at 7am in Eastern Standard Time, then staff can administer it when it is 7am overseas or;
- A letter stating the procedure on how staff are to alter the medications times/adjust medication administration times over the travel period.

While this is particularly important for any individual who is on medications for seizures, behaviour modification or mental health, this must be done for every individual for whom staff will be responsible for administering their medication.

### **Assisting with administration of Pro Re Nata (PRN) Medication:**

PRN medication is medication to be administered as required. Some individuals require PRN medication for specific conditions (for example, anti-convulsant medication for epilepsy) whilst others require PRN medication for general conditions (for example, paracetamol for a temperature/pain). Further, some individuals are prescribed medication to alter their behaviour (for example, if they are causing harm to themselves, others and property); this is classed as a chemical restraint, and is a restrictive intervention (for example, anti-psychotic to calm an individual or sedative medication to assist sleeping).

The procedure for assisting with administration of PRN medication is identical to the assisting with administration procedure (above), in conjunction to the Medication sheet, any emergency management plan, and/or a behaviour support plan is required.

When commencing a camp/activity or in-home/recreational shift, staff must ensure that there are clear written directions for the assistance of administration of PRN medication, and of the exact circumstances when PRN medication is required. This information can be found on the medication sheet; behaviour support plan and/or the emergency management plan.

The information should include:

1. Clear circumstances under which a dose should be administered;
2. Safe interval times between doses, should a further dose be required;
3. Aspects of the individual's condition that staff must be aware of;
4. How to best administer the PRN medication to the individual;
5. Any major side effects or adverse reactions that may occur;
6. When to contact a doctor/paramedic if required (for example, when a maximum number of doses have been administered within a given time period);
7. Procedures to follow if the medication does not have the desired effect;
8. If approval is needed prior to administering PRN medication, and who is contacted first – parent and/or coordinator;
9. If and when to contact a coordinator or the emergency after hours phone;
10. If an incident report is required.

Approval to administer PRN medication is required in certain circumstances. For PRN medication for specific conditions (anti-convulsant medication for epilepsy) with an emergency management plan, the plan will detail whether approval from a coordinator or parent/guardian is needed. For PRN medication for general conditions (paracetamol for a temperature/pain), no approval is needed, provided that the parent/guardian has confirmed the medication and signed the medication sheet prior to the activity/shift commencing. Be sure to check the individual's support information and plan prior to administering any medication.

For circumstances involving PRN medication that is classed as a chemical restraint, approval may be required from a coordinator or parent/guardian; this will be detailed specifically in the behaviour support plan. If approval is required, this must be done prior to administration of restrictive PRN medication, if safe to do so. If approval is not required, staff may administer the restrictive PRN medication. An incident report is required each time a restrictive PRN medication is used. The only exception is when the individual's emergency management plan or behaviour support plan identifies specific situations where this is not necessary. An incident report must also be completed should the medication be considered a chemical restraint and there is no behaviour support plan in place.

Any administration of PRN medication (for general and specific conditions or to modify behaviour) must be reported to coordinators, as well as parents/guardians, at the end of the camp/activity or shift, even if the PRN medication does not require approval, or communication has occurred earlier.

PRN medication is not required to be provided in a Webster pack.

Event	Definition	What to Do
Missed Dose	A prescribed amount of medication is not administered at all.	<ul style="list-style-type: none"> <li>- Note 'missed dose' or error code 'M' on the medication sheet;</li> <li>- Contact the emergency after hours phone on 0439 883 667 and the individual's family regarding further instructions;</li> <li>- Complete an incident report.</li> </ul>
Late Dose	A prescribed amount of medication is administered later than the required time; this may mean the medication has less or no effect. Late is generally determined as within 60 minutes of the prescribed administration time.	<ul style="list-style-type: none"> <li>- If administered within 60 minutes, note 'late dose' or error code 'L' on the medication sheet.</li> <li>- If administered over 60 minutes, call the emergency after hours phone on 0439 883 667;</li> <li>- Contact the individual's family if needed;</li> <li>- Call Nurse On Call – 1300 60 60 24;</li> <li>- Administer the dose if directed by the staff member on the emergency after hours phone/family; discuss any further dosages in the next 24 hours to ensure the individual is not overdosed;</li> <li>- Note 'late dose, &gt;60 minutes' on the medication sheet;</li> <li>- Complete an incident report.</li> </ul>
Incorrect Dose	An incorrect amount or type of medication is administered to an individual; or a medication is administered to an individual who has not been prescribed that medication.	<ul style="list-style-type: none"> <li>- Note 'incorrect dose' on the medication sheet;</li> <li>- Contact the emergency after hours phone on 0439 883 667;</li> <li>- Contact Poisons Information Line – 13 11 26;</li> <li>- Contact the individual's family.</li> <li>- Seek medical advice if required;</li> <li>- Complete an incident report.</li> </ul>
Overdose	Too much medication is administered to an individual; this may include an incorrect and increased amount of medication administered, or too many doses are administered within a specific time period.	<ul style="list-style-type: none"> <li>- Note 'overdose' on the medication sheet;</li> <li>- Observe the individual for potential changes to breathing, presentation;</li> <li>- Contact Poisons Information Line – 13 11 26;</li> <li>- Call 000 if necessary;</li> <li>- Call the emergency after hours phone on 0439 883 667;</li> <li>- Contact the individual's family;</li> <li>- Seek medical attention as required;</li> <li>- Complete an incident report.</li> </ul>
Incorrect Day	Administering the correct medication at the right time, route and dosage, on the wrong day.	<ul style="list-style-type: none"> <li>- Note 'incorrect day, correct tablets' on the medication sheet;</li> <li>- Call the emergency after hours phone on 0439 883 667 and the family;</li> <li>- Call Nurse on call 1300 60 60 24;</li> <li>- Contact the individual's family;</li> <li>- Seek medical advice as required;</li> <li>- Complete an incident report.</li> </ul>

Incorrect Time	Administering the prescribed medication at the wrong time of day.	<ul style="list-style-type: none"> <li>- Note 'incorrect time' on the medication sheet;</li> <li>- Call Nurse on Call 1300 60 60 24;</li> <li>- Call the emergency after hours phone on 0439 883 667 for further directions;</li> <li>- Contact the individual's family;</li> <li>- Seek medical advice as required;</li> <li>- Complete an incident report.</li> </ul>
Incomplete Administration	When the medication has been prepared as prescribed, however is compromised by being spat out, vomited up or ejected from the body, making it impossible to determine how much medication has been ingested. This includes medication put in food (for example, Weetbix) that is unfinished.	<ul style="list-style-type: none"> <li>- Note 'incomplete administration' on the medication sheet;</li> <li>- Do not administer a second or 'booster' dose;</li> <li>- Contact the family or emergency after hours phone if concerned about the impact of incomplete administration;</li> <li>- Inform the coordinator and family at the end the activity/shift;</li> <li>-</li> </ul>
Missing Medication	If medication in a Webster-Pak is missing.	<ul style="list-style-type: none"> <li>- Note 'missing medication' on the medication sheet;</li> <li>- Speak with other IOE staff, support worker or parents to determine if the medication has already been administered;</li> <li>- If not administered, check to see if there is another identical compartment and administer;</li> <li>- Contact the emergency after hours phone on 0439 883 667;</li> <li>- Complete an incident report</li> </ul>
Spilt/Lost Medication	If medication is spilt or lost and is unable to be administered to the individual (e.g., a bottle of liquid medication has leaked in transit).	<ul style="list-style-type: none"> <li>- If the medication is spilt, determine if there is enough to prepare the medication again, administer as directed; note 'spilt medication, second amount prepared and administered' on the medication sheet.</li> <li>- If the medication is lost, determine if there is an identical dosage available, and administer as directed; note 'lost medication, second amount prepared and administered' on the medication sheet; note which day's medication was used instead.</li> <li>- If there is not enough medication available to prepare a second dosage, note 'spilt/lost medication, no medication administered' on the medication sheet;</li> <li>- Call the emergency after hours phone on 0439 883 667 for further instructions;</li> <li>- Complete an incident report</li> </ul>



Already Administered	Medication has already been administered prior to the time specified on the medication sheet by parent/guardian.	<ul style="list-style-type: none"> <li>- Note 'Already Given' or error code 'A' on the medication sheet.</li> </ul>
Refused	Participant has declined medication	<ul style="list-style-type: none"> <li>- Note 'refused medication' or error code 'R' on the medication sheet.</li> <li>- Contact the family or emergency after hours phone if concerned about the impact of incomplete administration;</li> <li>- Inform the coordinator and family at the end the activity/shift;</li> </ul>
Webster-Pak Administration Error	Administering the correct medication dosage from the incorrect Webster-Pak compartment.	<ul style="list-style-type: none"> <li>- Note 'correct tablets, incorrect compartment' on the medication sheet;</li> <li>- Check that the dosage administered is identical to the dosage due to be administered;</li> <li>- Note on the medication sheet to use the skipped compartment for the following day's medication;</li> <li>- Inform the family upon the end of the activity/shift.</li> </ul>
Inconsistency in Medication Sheet and Medication Provided	When the medication sheet is different to the medication provided, or vice versa.	<ul style="list-style-type: none"> <li>- Do not administer medication if in doubt;</li> <li>- Contact the emergency after hours phone on 0439 883 667 or family to resolve the differences;</li> <li>- Inform a coordinator regarding any changes made.</li> </ul>

### Completed medication sheets

All medication sheets should be sent to IOE by the first day of each month. Support workers, not families are responsible for medications sheets to be returned to IOE. Medication sheets can be emailed to [reporting@ioe.org.au](mailto:reporting@ioe.org.au)