

Purpose and Scope

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

This policy applies to all Cahoots staff and volunteers that are responsible for storing, handling, and/or administering medications

Policy Statement

1. Training

All Cahoots Facilitators are Required to complete an accredited Medications Competency Training and their medication administration practice comply with the training they have received before being signed off on Cahoots Facilitator Accreditation checklist.

2. Consent to Administer Medications

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

A medication consent form will be emailed to the parent/carer prior to the participant being accepted onto a camp or program.

The medication consent form is to be returned to Cahoots prior to the camp or program and a copy included with the participant's profile

The medication consent form is current for a period of twelve months

Participants that do not require medications will not require a medication consent form. However, if the participants medication needs change a medication consent form must be completed

Medication requiring invasive administration such as suppositories or injections (other than EpiPen's) are not permitted on camps/programs.

3. Medication Supply and Management

Parents/carers and participants are advised upon acceptance to a camp or program that all medications including prescription, non-prescription, PRN medications, complementary and alternative health care products must be packaged appropriately:

Tablet medication: To be supplied in a blister (Webster) pack and accompanied by 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: 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 commencement of Camp/Program:

Labels on medication packaging and blister (Webster) packs must correspond with the pharmacy generated medication signing sheet.

Signing sheets or labels on medication packaging and blister (Webster) packs are not to be altered by Cahoots staff, parents, or carers.

Medications or treatments that have passed their expiry date cannot be used and parents/carers advised.

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

- Notify parent/carer that Cahoots cannot accept the medication if it is not presented in a blister (Webster) pack, does not have a pharmacy generated label, is not accompanied by a pharmacy generated signing sheet or the labelling has been altered.
- Provide the parent/carer the option of going to a pharmacy to rectify the issue before dropping the medication off at the camp/program.
- If the parent/carer is unable to get the medication issue resolved before the participant is due to take the medications, the participant cannot be signed into the service.

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

4. PRN Medications

PRN Medications (as required medications) including antihistamines, ibuprofen, bowel aids, etc (prescription or non-prescription) must be packaged as outlined in section 3 of this Policy:

- 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 requires a protocol to be followed i.e., Asthma, anaphylaxis or seizure management must be accompanied by instructions in a Health Condition Action Plan authorised by the participants 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 about the participants health and believes a medication is required, the Facilitator must contact the parent/carer and inform them. The parent/carer can then make arrangements to provide the medication, appropriately packaged and labelled.

It may be possible to take the participant to a local pharmacy and the parent engage in a teleconference with the pharmacist, who will then provide the medication labelled and packaged as per the policy.

Any cost of medications incurred will be charged to the parent/carer.

Schedule 8 medications (Controlled Drugs)

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

Schedule 8 medication is to be stored doubly secured; this means inside a locked box or case within the main locked medication box or case.

Schedule 8 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 they **must** be labelled correctly and be accompanied by a pharmacy generated signing sheet.

Schedule 8 medications that are not blister (Webster) packed i.e., patches must be counted or measured by the Facilitator and a witness at the same time each day. This amount must be recorded daily and any discrepancies to the count, that is not accounted for by medications administered must be reported and investigated.

5. Storage of Medications

All medications and 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 previously, it must be completed at drop off. The Facilitator is to put the participant's, blister (Webster) pack, any other medications, pharmacy generated signing sheets and consent form in the participants folder.

All medication folders are to be stored in the locked medication box or case. Only the Facilitators will have access to the locked medication box or case.

If medications are required when the camp/program is off the main site, the Facilitator is to take the participants whole medication file with them and store it securely, in a smaller locked box or case.

Leaders and Facilitators are not permitted to store any personal medications in their luggage. Any medications are to be stored in the locked medication box or case. Leaders can access their medications at any time by asking the Facilitator.

At the end of the camp/program, all blister (Webster) packs, medications and signing sheets are to be returned to the participant's parent/carer.

6. Administering Medications

Only Facilitators are permitted to administer participant medications. A support worker or volunteer leader may witness the medication being administered and initial the pharmacy generated signing sheet.

The Facilitator must follow dosage and treatment instructions as per the signing sheets and/or the medication label. Signing sheets or labels on medication containers are not to be altered by staff, families, or carers.

Staff 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 their expiry date must not be used and the parent/carer advised

The locked medication box or case contains equipment required to administer medications safely and efficiently.

- The facilitator is to set up a table/area-specific for medication
- Ensure there is water is available for participants taking tablets
- Participants are called to the table individually with their leader
- Ensure hands are washed.
- Check medication signing sheet matches the blister (Webster) pack or pharmacy generated medication label (any discrepancy's contact the parent/guardian)
- Confirm participants name with the leader then confirm a match with the blister (Webster) pack
- Use Pil-bob to remove medications from the pack (do not use your hands). If liquid, draw medication out using a syringe
- Show witness the medications to confirm dosage before giving to the participant.
- Give the participant the medication to consume in front of you and the witness
- Check the medication has been consumed
- Facilitator signs signing sheet
- Witness signs signing sheet
- Ensure the Pil-bob is washed and dried thoroughly before the next participant (to avoid cross-contamination of medications) and any rubbish is disposed of.
- When applying any creams or drops ensure appropriate PPE is worn and the privacy and dignity of the participant are upheld.
- Ensure you wash your hands in between administering each participant's medication.
- Ensure the participant's dignity and do not make a spectacle. If participants ask questions about another participant's medication, answer it in a non-direct manner (e.g., redirect the question).

7. Manipulation of Medications

Medications may be required to be manipulated e.g., crushed or concealed in food. If this is required written permission is to be granted from the participants GP before the camp/program. The instructions are to be made available to the Facilitator and included in the participant's profile.

8. Refusal to take Medication

If a participant is refusing to take their medication the parent/carer is to be contacted to give advice. Any strategies are to be noted on the medication chart. If the participant is still refusing to take the medication the parent or guardian has the option to attend the camp/program to administer the participant their medication or the participant will be sent home. Any phone calls or other correspondence are to be recorded.

Physical force and/or use of a restrictive practice is not permitted in administering a participant's medications. Occasionally, 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 practice has been authorised by the Cahoots Restrictive Practices Quality Assurance Panel. If used, the restrictive practice strategy must be reported through the incident management reporting system.

9. Self-administration

Adult participants can manage and self-administer their own medication if their general practitioner has approved this practice and a letter from the participants GP, must be provided prior to the camp or program.

Adult participants that are self-managing their medications must still have their medications stored securely in the locked box or case.

10. Medication Administration Incidents

If there is an error in medication administration such as giving medication to the wrong participant, giving medication at the incorrect time, or missed medication to name a few, the following process 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.
- If the parent/carer does not respond, please call a pharmacist for advice.
- Advise Cahoots office or on-call
- Take the participant to the nearest hospital if advised by the above persons.

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

All medication incidents are to be reported and documented on an incident report form and the risk notification procedures are to be followed. A report also must be completed if there is a near miss i.e., the wrong medication is prepared but the mistake identified and rectified before administration.

11. Medication for Health Condition Management Plans

All PRN medication that requires 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 participants GP or medical consultant.

The Health Condition Management Plan must be available before the Camp or Program departure, so the Facilitator and the participants leader are aware of what actions need to be taken if the health emergency occurs. The Management Plan will be accessible to the Facilitator and the participant's leader and kept with the participant's profile.

Any emergency medications used in response to the Health Condition Management Plan (e.g., Ventolin, EpiPen, or Midazolam) are to be handed to the Facilitator at camp/program drop off. All leaders responsible for participants with emergency medications will be briefed on what to do if an emergency occurs.

The participant's leader is permitted to hold and administer the emergency medication if they hold a current senior first-aid certificate. If the leader has not completed first aid training the Facilitator will hold the emergency medication and the leader is to notify the facilitator immediately if the emergency medication is required.

12. Accessing Additional Supply of Medication

In the case of medication being lost, damaged or more is required than provided, 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 etc. the following are steps are to be followed:

- Where medication is blister (Webster) packed, take medication from the same time slot but from the day furthest from the current day. Sign signing sheet for current day/time.
- 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 still not contactable take participant to a local GP or emergency room, along with medication signing sheets, for review and assistance.
- As soon as possible advise parent/carer of actions taken

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

13. Disposing of Medications

Any medications that need to be disposed of should not be treated as general waste. If a medication needs to be disposed of (e.g., tablet dropped on the floor) it is to be bagged and stored securely until it can be disposed of at a pharmacy. Do not flush medications down the toilet or sink.

This policy has been developed in accordance with the following:

- 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 -Core 3 & 4 Provision of Supports

Reference and Related Documents

- Medication Consent Form
- Accident, Injury, and Incident Report Form

Versions

Version Number	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

Owner	Approver	Next Review
Community Engagement Manager	CEO	Dec 2023