



Acacium Group

Oral Administration

Procedure Reference | SOP MEDS 02

Version | V4.0

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| Procedure Name | Oral Administration |
| Purpose of Document | To ensure that the correct preparation, procedures & outcomes are achieved by implementing a consistent and systematic approach to oral administration of medication |
| Target Audience | All Nurses & appropriately trained carers |
| Version | V4.0 |
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| Last Reviewed | 3 yearly or when clinical or operation guidelines change |
| Next Review Date | July 2025 |
| Equality Impact Assessment (EIA) Form | Acacium Group is committed to Equality, Diversity and Inclusion and in line with our values, we strive to ensure that everyone that is part of the Acacium community is not disadvantaged or discriminated against given their individual need or characteristics. To support this, an Equality Impact Assessment has been undertaken on this policy/procedure. This information is held centrally and can be requested from the Clinical Governance Team. |
| About Acacium Group | Details of all Acacium Group trading companies that this policy applies to are detailed within Appendix A |

| Document History | | | |
|------------------|----------|-----------------------------------------------------------|-------------------------|
| Version | Date | Changes made/comments | By whom |
| V1 | Dec 2016 | Implementation of document history page | KNF/VM |
| V1 | Apr 2018 | Updated front sheet to include new review frequency date. | KMS/VM |
| V2 | Sep 2019 | 3 Yearly Review and implementation of new template | Clinical Advisory Group |
| V2.1 | Oct 2020 | Updated re rebrand | CC |
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| V4 | Jan 2024 | Rebrand | Clinical Advisory Group |
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1. Introduction

This document describes the process to follow when an individual requires oral medication to be administered to them.

Medication administration is the direct application of a prescribed medication—whether by injection, inhalation, ingestion, or other means—to the body of the individual by an individual authorised to do so.

Oral medication can be in the form of solid tablets, capsules, chewable tablets or lozenges to be swallowed whole or sucked on, or as drinkable liquids such as drops, syrups or solutions.

2. Aim

The aim of this SOP is that all oral administration of medications is completed in a safe consistent manner, ensuring the clients comfort and safety at all times.

3. General

Wherever possible the Client will be encouraged to self-administer and take full responsibility for all aspects of their medication. This will be assessed in line with local policy and service level agreements in place for the service Acacium Group provide

NICE (NICE guideline [NG67] 2017) recommend the discussions and decisions about the person's medicines support needs are documented and present in the individual's care plan:

All Acacium group workers administering medication will be trained and competent to do so.

4. Monitored dosage systems and compliance aids

These may be in use for clients when they have been assessed as general support with their medication and when the client takes responsibility for their own medication. In these circumstances the worker will always be working under the direction of the person receiving the care.

The monitored dose systems (MDS) and compliance aids will be dispensed and labelled by the community pharmacist or dispensing GP and can only be used for tablets and capsules

If a pharmacist or dispensing GP does not fill the compliance aid, Acacium Group will put in place suitable alternative arrangements for administration to minimise the potential for error. Acacium Group workers will not re-package medicines into MDS's as the risk for error is too great. Please see Acacium Group Medication management Policy for further information

5. Equipment

- Drugs to be administered
- Medication administration record (MAR)
- Care Plan
- PPE as per current guidelines
- Handwashing supplies
- Oral syringe if indicated

6. Covert Administration

Covert administration is the administration of any medical treatment in a disguised form. This usually involves disguising by administering in food or drink. As a result, the person is unknowingly taking medication which, they have previously refused when offered.

Covert administration of medicines only takes place in accordance with the requirements of the Mental Capacity Act 2005 and good practice frameworks (Mental Capacity Act 2005: Code of Practice) to protect both the individual and workers.

Please refer to the Acacium Group Medication management Policy for further guidance.

7. Procedure

In the event that Acacium Group are responsible for the assistance or administration of oral medication this is the procedure that must be followed:

| Action | | Rationale |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Wash hands with soap and water | To minimise the risk of cross-infection (DH 2007) |
| 2. | Before administering any prescribed drug, check that it is due and has not already been given. Check that the information contained in the MAR chart is complete, correct and legible | To protect the client from harm (DH 2003) |
| 3. | <p>Prior to administering any medications, it is important to consider the six rights of medication administration (NICE 2017)</p> <ul style="list-style-type: none"> • Right drug • Right time • Right dose • Right route • Right client • Right to decline <p>As well as the six rights it is also important to consider if the client has any allergies, the correct position of the client and the correct documentation.</p> | <p>To maintain safe practice and optimal client care</p> <p>In line with NICE guideline [NG67] Published: 30 March 2017, Six Rights for Medication Administration</p> <p>To comply with Acacium Group Medication Management Policy</p> |
| 4. | <p>Select the required medication and check the expiry date.</p> <p>Medication should be given directly from the original packaging they are dispensed in.</p> | <p>Treatment with medication outside the expiry date is dangerous. Drugs deteriorate with storage.</p> <p>To prevent misidentification of the correct medication and dose.</p> |
| 5. | Empty the required dose, a container should be used, avoid touching the medication wherever possible | To minimise the risk of cross-infection. To minimise the risk of harm to the carer |
| 6. | Check the client's identity by asking name and checking it against the MAR | To ensure the medication is given to the correct person (NICE 2017)) |
| 7. | Evaluate the client's knowledge of the medication being offered, if appropriate If the | A client has a right to information about treatment (NMC 2008) |

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| | knowledge appears faulty or incorrect offer an explanation of the use, action, dose and potential side effects of the drug(s) | Reference Acacium Group Consent Policy |
| 8. | Administer the drug as prescribed | To meet legal requirements and Acacium Group Medication Management Policy |
| 9. | Offer a glass of water/appropriate fluid | To facilitate swallowing |
| 10. | Record the dose given on the MAR or record that the client has refused the medication if this occurs | To meet legal requirements (DH 2003) and Acacium Group Medication Management Policy |
| 11. | Administer irritant drugs with meals or snacks. See the medicine container/MAR sheet for further advice. | To minimise their effect on the gastric mucosa |
| 12. | Administer drugs that interact with food, or that are destroyed in significant proportions by digestive enzymes, between meals or on an empty stomach. See the medicine container/MAR sheet for further advice. | To prevent interface with the absorption of the drug |
| 13. | Do not break a tablet unless it is scored and appropriate to do so. Refer to the summary of product characteristics for further advice. Break tablets with a clean knife or tablet cutter, wash after use. | Breaking may cause incorrect dosage. |
| 14. | Do not interfere with time – release capsules and enteric-coated tablets. Ask client to swallow these whole and not to chew them | The absorption rate of the drug will be altered |
| 15. | Sublingual tablets must be placed under the tongue and buccal tablets between the gum and cheek Gloves should be worn | To allow correct absorption |
| 16. | When administering liquids to babies, small children and where an accurately measured dose in multiples of 1ml for adults an oral syringe may be used in preference to a spoon | To enable accurate administration of exact doses. |
| 17. | When using an oral syringe, the tip of the syringe should be gently pushed into and towards the side of the mouth. The contents are then slowly discharged towards the inside of the cheek. Refer to child's care plan for individual requirements and preferred technique | To prevent injury to the mouth. To administer in the most efficient way for the child to swallow full dose. . |

8. Associated Policies / SOPs

Policies

CLIN 03 Medicines Management Policy
CLIN 06 Consent Policy

SOPs

SOP Meds 1 Controlled Drugs
SOP Meds 3 Rectal Administration
SOP Meds 4 Subcutaneous Administration of Medicines
SOP Meds 5 Administration via Gastrostomy and Jejunostomy Tubes (PEG, PEJ and JEJ)
SOP Meds 6 Intramuscular Injection Administration
SOP Meds 7 Peripheral Intravenous Administration

SOP Meds 8 Administration via Central Line (Hickman, PIC and Porta Cath)
SOP Meds 9 Removal of Medicines from Client's Home
SOP Meds 10 Vaginal Administration
SOP Meds 11 Topical & Transdermal Application of Medicines
SOP Meds 12 Administering ear drops
SOP Meds 13 Administration of Eye Drops or Ointments
SOP Meds 16 Buccal or Sublingual Administration of Medicines
SOP Meds 17 Administration of Medication via a Metered Dose Inhalers
SOP Meds 18 Administration of Epi-Pen, Anapen and Emerade
SOP Meds 19 Self Administration of Medicines
SOP Meds 20 Oxygen Therapy: Adult and Child

9. References

- NMC 2018 Guidelines for records and record keeping (this is updated version) Procedure no 4
- The Royal Marsden 2015 Manual of Clinical Nursing procedures 9th Edition (this is updated version)
- CQC Medicines training and competency in adult social care settings – this relates to appropriate training, support and competencies making care safe, high quality and consistent (Training is referred to in all SOP's)
- NICE Guidance NG67 Managing medicines for adults receiving social care in the community March 2017 – this relates to general medicines management and details all processes

Appendix A: About Acacium Group

Acacium Group consists of a number of trading companies, each providing services within core niche areas of the health and social care industries. Therefore, as this document is a Group Policy, the Policy herein applies to all trading companies detailed below:

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|  Part of Acacium Group |  Part of Acacium Group |
|  Part of Acacium Group |  Part of Acacium Group |