



Acacium Group

Self Administration of Medications

Procedure Reference | SOP MEDS 19

Version | 4.0

Procedure Name	Self Administration of Medications
Purpose of Document	To ensure that the correct preparation, procedure and outcome are achieved by implementing a consistent, and systematic, approach to the client administering their own medication in the community setting.
Target Audience	All Healthcare Professionals
Version	V4.0
Author	Karen Matthews-Shard
Date of Approval	December 2012
Published Date	January 2013
Lead Director	Karen Matthews-Shard
Review Frequency	3 yearly
Last Reviewed	September 2022
Next Review Date	September 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	Mar 2018	Updated front sheet to include new review frequency date.	KMS/MS
V2	Sep 2019	3 yearly review and implementation of new template	Clinical Advisory Group
V2.1	Apr 2020	Updated to new Template	CC
V2.2	Oct 2020	Updated re rebrand	CC
V3	Sep 2022	3 Yearly Review	Clinical Advisory Group
V4	Jan 2024	Rebrand	Clinical Advisory Group

Table of Contents

1. Introduction	5
2. Aim	5
3. Who needs to be aware of this procedure	5
4. Hazards / complications	5
5. Consent	5
6. Client information	5
7. Equipment	6
8. Procedure	6
9. Associated Policies / SOPs	6
10. References	7
Appendix A: About Acacium Group	8

1. Introduction

Self-administration of medicines is believed to improve concordance with taking medicines and an increased knowledge of medication. It aims to preserve independence and gives the client greater control over his or her life.

2. Aim

To promote independence by allowing the client to take their own medication safely and effectively.

3. Who needs to be aware of this procedure

Any Acacium Group worker may support the client with taking their own medication when they have been trained and assessed as competent in the procedure, supporting the client as needed to undertake self administration of medicines.

4. Hazards / complications

There is a risk that the client may administer too much or too little medication or use the wrong technique, for instance, if it is an injection. Therefore, careful consideration must be given to supporting the client to undertake the procedure safely. Where possible, it may be beneficial for a member of the family to undertake medication administration. This will be especially helpful if the client is in reduced health but wants to continue with some degree of independence. Acacium Group workers must be aware of any allergies the client may have.

Where there are concerns about the self-administration of medications, these must be discussed with the clinical lead at the earliest opportunity. These concerns should also be documented in the record of events.

Acacium Group workers should be prepared to administer medications if trained to do so and where this is in the best interests of the client or provide additional support as required.

5. Consent

Please read the Acacium Group Consent Policy thoroughly and ensure that valid consent has been gained.

6. Client information

The client must fully understand the risks to undertaking the self-administration of medicines. To ensure that they are fully able to do this there may need to be a period of intense support for the client and their family. Any special techniques will need to be demonstrated by the appropriately trained healthcare professional and they will need to understand the need for regular administration at the prescribed times.

It should also be explained that if the Acacium Group worker considers there to be any risks to their wellbeing that they will need to bring this to the attention of their allocated Nurse and / or the GP.

The client and their family must be made aware that the responsibility for ensuring that the correct dosage and the time the medication is given now lies fully with themselves.

The client should also be advised that regular risk assessments will be undertaken twelve monthly, unless otherwise indicated i.e. the client's situation changes, their health deteriorates, or medications change and

their needs change as a result. If there are concerns that self-administration is no longer effective the Acacium Group worker will discuss this with the allocated Nurse who will escalate to the GP and community nurse as appropriate.

The Acacium Group worker will need to record in the care record that the client has self-administered their medications and the time that this was done.

7. Equipment

None – client self-administers.

8. Procedure

	Action	Rationale
1.	<p>Ensure a documented risk assessment has been completed. Discuss medication history with the client when carrying out the care plan and risk assessment. This should include an assessment of the client's ability to self-administer medication using the following criteria.</p> <ul style="list-style-type: none"> • willingness to participate in self-administration? • aware of any allergies • presence of confusion or forgetfulness • history of drug / alcohol abuse / self-harm • family support if required or need for special aids • ability to store safely away from children • understanding of his / her medicines, what they are for, their dosage, instructions for use and potential side effects. <p>Document this assessment in the client's care plan.</p>	To undertake risk assessment and ensure suitability for self-administration.
2.	<p>Regularly discuss with the client his / her medication and any problems they may be having.</p> <p>Document discussions in the care plan.</p>	To promote the informed commitment and the involvement of clients in their own care, where appropriate. To ensure that treatment is received as intended (Shepherd 2002b: E; NMC 2008a: C).
3.	<p>Check that drugs are taken as intended, and that the necessary records are kept if applicable.</p>	To maintain records.
4.	<p>Monitor changes in the client's prescription.</p>	To ensure that changes are put into effect promptly and any discontinued drugs are returned to their pharmacy for disposal (Shepherd 2002b: E; DH 2003d: C; NMC 2008a: C)

9. Associated Policies / SOPs

Policies

CLIN 03 Medicines Management Policy

CLIN 06 Consent Policy

CLIN 08 Safeguarding Children and Young People Policy

CLIN 09 Safeguarding Vulnerable Adults

SOPs

SOP Meds 01 Controlled Drugs

SOP Meds 02 Oral Administration

SOP Meds 03 Rectal Administration

SOP Meds 04 Subcutaneous Administration of Medicines

SOP Meds 05 Administration via Gastrostomy and Jejunostomy Tubes (PEG, PEJ and JEJ)

SOP Meds 06 Intramuscular Injection Administration

SOP Meds 07 Peripheral Intravenous Administration

SOP Meds 08 Administration via Central Line (Hickman, PIC and Porta Cath)

SOP Meds 09 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 20 Oxygen Therapy: Adult and Child

SOP Meds 21 Administration of Medication via NG Tube.

10. References

- NMC 2018 Guidelines for records and record keeping Procedure no 4
- The Royal Marsden 2015 Manual of Clinical Nursing procedures 9th Edition
- 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
- https://www.candi.nhs.uk/sites/default/files/Supporting%20the%20Self%20Administration%20of%20Medication_PHA15_Nov%202021.pdf

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:

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