

During the Coronavirus pandemic (COVID-19) information is changing very quickly as the government and other organisations try to adapt to different ways of working. The virus spread very quickly which has meant that care providers have changed some of the usual ways of working. It's important to make sure that you can carry on caring for service users safely in their own homes.

Medication Management is an area that often causes worry and mistakes sometimes happen. The Care Quality Commission have provided guidance on medication for providers on areas that are causing concerns during the pandemic. You need to know what your responsibilities are. This fact sheet will explain what you need to understand as home care workers. We will cover the following areas:

- Multi-compartment compliance aids (MCAs)
- Re-using named patient drugs as medicines supply
- Delegated tasks
- Access to medicines
- Medicines awaiting return to community pharmacy
- Handwritten medicine administration records (MARs)
- Using sedation to enforce social distancing guidelines

Making sure service users get the right medicines at the right time are part of the 6 Rights of Medication.

During the COVID-19 pandemic it's important service users can still get their correct medication.

You must make sure that;

- All prescriptions are ordered 7 DAYS before they run out.
- The service user doesn't order more than usual.
- If a service user is self-isolating at home and collecting medication is not part of the agreed care plan, ask check if the service user has arranged for family or friends to collect OR speak to the pharmacist about delivery.



Medication Administration Records (MAR)

Medication Administration Records often cause confusion. If you make a mistake, service users may get the wrong medication, the wrong dose or they may get the medication at the wrong time. When CQC carry out inspections they look at MARs to make sure service users are being cared for safely.

During COVID-19, you may have fewer staff or you may not have as many managers working. It's important however that the information on a MAR is up to date and accurate. Wherever possible, best practice is to have printed a MAR from the Pharmacist. If you are using paper MARs, CQC have said home care providers must make sure that ;



- If you have to write out a MAR, they must have been written and checked by a person trained and assessed as competent to do so.
- Medicines must be recorded each time medicines support is provided.
- The MAR chart must be filled out for each individual medicine on every occasion

Disposing of Medication

You must keep the following records if you dispose of medication.

- The date you disposed it
- The name of the Service User
- The name of the medication
- Whether it was a tablet, a liquid, an inhaler etc
- How many /much you disposed of
- The name of the member of staff disposing of the medication
- Its probably a good idea to say which pharmacy took the unwanted medication
- You must not flush it down the toilet or sink or sluice
- There are special procedures for controlled drugs that must be followed

Returning Unused Medication

Your medication policy will tell you that it's important to make sure that medication is disposed of safely and correctly. When you are working in someone's home, the medication prescribed for a service user, belongs to them.

If you need to support someone with their medication, the care plan will say what you need to do. It must also say what you must do with any unused or out of date medication.

You need to check who is responsible for returning medication to the pharmacy if it's not clear on the care plan.

During COVID-19, returning medication is more difficult. You will need to check with the local pharmacy if they will accept it back. It's also worth checking what will happen to the packaging that has service user information on.

Delegated Tasks

- During your Induction training you will have been told how important it is to only do things that you have been trained and assessed as competent to do. It's also important to only do things that it says in the care plan and if you aren't sure about something, to check with your manager first before you do anything.
- There are some activities that care workers may be asked to carry out. Examples might be medication through a PEG tube (percutaneous endoscopic gastrostomy tube) or giving insulin injections.
- CQC have reminded care providers that these are 'delegated tasks' and must only be carried out by staff who have had training to carry out the task, and they have been assessed as competent.
- Your manager will need to make sure that there are enough staff with these skills if your organisation agrees to take on these delegated tasks.
- It is the healthcare worker's (e.g. a nurse) responsibility to make sure that when they delegate a task, the care worker understands what they have to do, why they are doing it, what to do if something goes wrong and how to carry out the task.
- You must not agree to do something without first checking with your manager.



The Routes of Medication

There are many ways that medication can be administered;

- **Buccal** - held inside the cheek
- **Enteral** - delivered directly into the stomach or intestine (with a PEG tube or Jejunostomy Tube)
- **Inhalable** - breathed in through a tube or mask
- **Infused** - injected into a vein with an IV line and slowly dripped in over time
- **Intramuscular** - injected into a muscle with a syringe
- **Intrathecal** - injected into the spine
- **Intravenous** - injected into a vein or into an IV line
- **Nasal** - given into the nose by spray or pump
- **Ophthalmic** - given into the eye by drops, gel, or ointment
- **Oral** - swallowed by mouth as a tablet, capsule, lozenge, or liquid
- **Otic** - given by drops into the ear
- **Rectal** - inserted into the rectum
- **Subcutaneous** - injected just under the skin
- **Sublingual** - held under the tongue
- **Topical** - applied to the skin
- **Transdermal** - given through a patch placed on the skin

Multi Compartment Compliance Aids

- These are sometimes known as Blister Packs.
- Pharmacies are short staffed like every business during the COVID-19 pandemic.
- Supplying medication in blister packs takes a pharmacist a long time. During the COVID-19 pandemic, you may find that the pharmacist may not supply medication in multi compartment compliance aids. Your service user will be given medication in the original packaging.
- You can administer from original packaging.
- You must follow your policy and procedure.
- There will need to be a risk assessment in place if the service user previously had Blister packs and now has original packaging.
- The MAR will need to be up dated with all the medication, dosage and times clearly documented.
- Your training will have explained how to safely administer medication from original packaging.
- If the service user is self managing their medication and not have blister packs is going to reduce their independence, its important to discuss this with the GP.
- Do not leave medication in cups or pot, this is secondary dispensing and may lead to medication errors, and possible safeguarding issues.

The 6 Rights of Medication Administration

A mnemonic to remember this is
Patients Do Drugs Round The Day

- Right **P**atients
- Right **D**rugs
- Right **D**ose
- Right **R**oute
- Right **T**ime
- Right **D**ocumentation



Q: My service user has a headache, can they take paracetamol during COVID-19?

- Check what your 'over the counter medication' policy and procedure says
- Check with the service user's doctor or pharmacist to make sure it isn't going to cause a problem with any other medication they take
- Tell your manager if you have to support administration. It will need to go on a MAR chart
- Make sure the service users take the correct dose. And they do not take too many in 24 hours
- If the symptoms don't go away after a 48 hours contact the GP
- Remember that some people may not always have a cough or temperature with COVID-19, tell your manager asap

Mental Capacity Act Important points

- Every adult has the right to make his or her own decisions. You must assume they have capacity to do so unless it is proved otherwise.
- You must not assume someone lacks capacity because they have a particular medical condition or disability.
- A person is not to be treated as unable to make a decision unless all possible steps to help them do so have been taken without success.
- You should try very hard to encourage and support people to make the decision for themselves.
- If someone lacks capacity, it is important to involve the person as far as possible in making decisions.
- A person must not be treated as unable to make a decision just because he or she makes an unwise decision.
- People have the right to make decisions that others might think is unwise.
- Everyone has their own values, beliefs and preferences which may not be the same as those of other people.
- Anything you do or decide for or on behalf of a person who lacks mental capacity must be in their best interests.
- When making a decision or acting on behalf of a person who lacks capacity, you must consider if there is a way that you can give them as much freedom as possible and that it protects their rights and if you need to act on their behalf in the first place.

Using Sedation to enforce Social Distancing Rules

- The government has clear rules - 'You must stay at home' unless you need to travel for work. This is really difficult for every-one. For service users who don't have the capacity to understand, this it can be confusing.
- We have an Easy Read Fact Sheet in the QCS Resource Centre that you can use to explain to the Service User why they need to stay at home.
- If a service user is refusing to stay at home you must tell your manager.
- Using sedation to keep them at home is not good practice.
- Your manager can speak to the community mental health team for advice.

Hand washing techniques to stay healthy

Follow these five steps every time.

1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.



2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails. Make sure to also include your forearms when washing your hands.



3. Scrub your hands for at least 20 seconds. How long? Hum the "Happy Birthday" song from beginning to end twice.
4. Rinse your hands well under clean, running water.



5. Dry your hands using a clean towel or air dry them.

A hand washing guide by the NHS can also be found [here](#).

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