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| **HS2** | Health and Safe Services | Medication Safety Policy |

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| **What this policy aims to do** | Make sure MASS staff act responsibly and take accountability for the correct handling and administration of medication to people who use MASS services, including medication that is self-administered. |
| **Who this policy applies to** | All people who use MASS services and all staff and volunteers involved in service delivery. |
| **Who is responsible for carrying out this policy** | The CEO or responsible team leaders and service delivery staff. |
| **What words used in this policy mean** | ‘*Medication*’ means any chemical substances used to treat pre-existing medical conditions, taken in a dose prescribed by a medical practitioner and dispensed by a pharmacist.  ‘*Treatment sheet’* is a document that has the person’s authorised medications, specific dose and monitoring requirements recorded and signed by the doctor.  ‘*Administration sheet’* is a form signed by staff confirming medication has been given.  ‘*Pro Re Nata (PRN)*’ is medication to be administered only when specific circumstances occur, for example, an epileptic seizure.  ‘*Webster pack’* is storage of medication in separate plastic cells that separates and enables a medication dose to be individually released. Webster packs must only be filled by a pharmacist. |
| **Legislation this policy is based on** | National Disability Service Standards  Department of Human Services Standards  Education and Training Reform Act 2006 (Vic)  Education and Training Reform Regulations (2017)  Worksafe Compliance Code – First Aid in the Workplace  Victorian Child Safe Standards  NDIS Practice Standards Nov 2021, Core Module |
| **Other relevant policies** | H13 Duty of Care  HS8 Positive Behaviour Support  HS5 Freedom from Abuse and Neglect  HS3 Health Promotion  HS1 Client Health Care Needs  HS15 First Aid  HS12 Client Incident Reporting  HS7 Information Privacy |

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| **Version** | **Date** | **Author/Editor** | **Approved by** | **Notes** |
| 1.0 | 26/8/2016 | Peter Lane |  |  |
| 1.1 | 31/5/2018 | D Stephenson |  | Update format |
| 1.2 | 28/3/2019 | D Stephenson | S.Reeves | Update VRQA |
| 1.3 | 01/05/2020 | C Trenfield | S.Reeves | Review edits |
| 1.4 | 3/12/2021 | D Stephenson, S Walker | S Reeves | Added NDIS Practice Standards Reference. |
| 1.5 | 06/06/2023 |  |  | Annual review |

Medication Policy

As part of the duty of care owed to clients, MASS staff are required to administer first aid, including assisting clients to take medication, within the limits of their skill, expertise and training. All MASS staff who administer medication are trained in how to do it safely and effectively.

Parents, carers, or guardians are required to provide all relevant medical information about a client that is receiving services from MASS and provide a list of medications that are prescribed for the client. For clients who are not in permanent care or accessing Specialist Disability Accommodation, the medications will be Webster packed and provided by the parent, carer or guardian to MASS with instructions on each medication on the time to be taken, dosage, the period for which the authorisation is valid, appropriate storage requirements and any special instructions. A treatment sheet will be created for each client requiring medication and it is part of each client’s Individual Health Support Plan.

Only medication on a person’s treatment sheet that has been completed and signed by their medical practitioner and dispensed by a pharmacist will be administered to a person. Staff will never prescribe any medication or other remedies (herbal or natural) or any over the counter medications (purchased at a pharmacy or other outlet).

MASS will ensure a log or record is retained for all medication administered. Such records should be retained within the client’s medical record on their file. It is good practice for medication to be administered and recorded in the presence of two staff members.

In the case of an emergency, authorisation to administer medication may be given verbally or, if parents, carers, or guardians cannot be contacted, by a registered medical practitioner. Medication may be administered to a client without authorization in case of an anaphylaxis or asthma emergency.

MASS will retain records of authorisations as part of the Individual Health Support Plan.

In the case of serious health conditions, (anaphylaxis, asthma, epilepsy, diabetes, etc) the authorization to administer medication (including self-administration where this is authorized) will be included as part of the client’s Individual Health Support Plan.

When considering whether it is appropriate for the self-administration of medication, MASS will consult with the parents, carers or guardians and the client’s health practitioner considering the age of the client and any other considerations. The self-administration of medication must be authorised in writing. MASS will put procedures in place to manage the self-administration of medication including arrangement for supervision and record keeping where required.

Where possible, MASS should store self-administered medications. Factors to take into consideration when permitting clients to carry their own medication should include:

* Whether the client requires immediate access to the medication, eg insulin
* Any special storage requirements e.g refrigeration
* The risk of unsafe access to medication by other clients.

MASS must store medication in its original container and according to the written instructions provided. MASS should ensure the quantity of medication is at a practical minimum, that the storage is secure and only accessible by authorized staff. It is recommended that medications are not kept in classrooms, first aid kits or Evacuation Packs.

Medication must only be administered to the client named in the written authorisation, except in a life-threatening emergency when for example a client is having an asthma attack and their puffer is not immediately available.

Staff will only administer over the counter medications or other remedies (natural, herbal) with the authority of the person’s treating doctor (where an adult) or the parent or guardian of a child.

In distributing medication, MASS must protect the client’s privacy and confidentiality to avoid any stigmatization.

MASS will have procedures to minimise risk in medication handling and administration.