



## MEDICATION MANAGEMENT POLICY

ID No: FBCNW-10-509

Version: 4.0

Applies to: All Staff

Applicable Standards:

- National Strategy for the Quality Use of Medicines
- National Standards for Disability Services
- Disability, Housing and Community Services – Disability and Community Services – Medication Management Framework 2017
- Recommendations for the Administration of Specified Medication by Aged Care Workers in a Community Setting June 2012

Applicable Legislation:

- Disability Services Act 2011
- Disability Services Regulations 2015
- Poisons Act 1971
- Poisons Regulations 2008
- Personal Information Protection Act 2004

Contractual Obligations: N/A

This Policy is designed to reflect current best practices in medication management with respect to all clients of Family Based Care Tasmania, particularly aged clients and clients with a disability.

### Interpretation

For the purposes of this Policy 'medication' is defined as a substance given with the intention of preventing, diagnosing, curing, controlling, or alleviating disease or otherwise enhancing the physical or mental wellbeing of individuals. Medications include prescription and non-prescription medications, including complementary health care products, irrespective of the administered route.

### Principles

All staff are to adhere to the following guiding principles of client medication management:

#### Medication Administration is Person Centred

Medication management practices places clients at the centre of planning and delivery and maximises, as much as possible, the capacity for people with disability or who are frail aged to take control of their lives.

#### Individual Outcomes

Medication management practices build on individual strengths and reflect individual needs, strengths, interests, goals, formal and informal support networks.

Medication management practices are informed by individualised support plans.

## Decision Making and Consent

Individuals are informed about the predicted risks and benefit of prescribed medication in a way that meets their communication needs and cognition. Individuals are encouraged and supported to be involved in decision making as far as possible according to their capacity.

Consent is required before an individual can receive medical or dental treatment, except in an emergency. If an individual does not have the capacity to consent to receiving medication, a legally appointed Guardian or Person Responsible must provide or withhold consent on the individual's behalf. Individuals who have capacity have the right to refuse or withdraw consent to the administration of medication.

## Support for Self-Management

Individuals are actively encouraged and supported to self-manage their own medications.

Where appropriate, individuals are given the opportunity to build capacity so that they can self-manage some or all of their medications. A clearly defined and documented assessment must be undertaken by a suitably qualified health professional if an individual does not wish to or does not appear to have the capacity to manage their medication.

## Minimal Restriction

Decisions relating to medication selection and administration should only result in the restriction of freedom of decision and action of the individual, if at all, to the smallest extent that is practicable in the circumstances.

Restrictive interventions involving the use of medication (chemical restraint) are supported by a transparent, easily understood, and evidence based Behaviour Management Plan developed in consultation with the individual or a person nominated by the individual, persons who have expertise in the carrying out of the proposed restrictive intervention, the prescriber, and the Senior Practitioner. This plan should indicate a process for review of restrictive practices. Restrictive practices may also be guided by a decision made by the Guardianship and Administration Board.

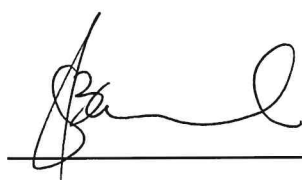
## Process For Reporting Medication Incidents And Errors

Staff identifying errors in medication administration are required to advise the client's Coordinator immediately. Errors include refusal to take medication, incorrect medication, incorrect dosage or route, and medication which is accidentally dropped, spilt, or spoilt. Once notified, the Coordinator will take immediate steps to lodge an Event Form noting a Medication Error has occurred. If the error is identified after office hours the staff member shall contact the On Call Coordinator and the On Call Coordinator shall follow the same procedure for registering the incident on the Events System.

## Detailed Procedures

Detailed procedures for medication administration are contained within the associated Medication Management Procedure which should be read and understood in conjunction with this Policy.

Authorised by:



A | President of the Board

Date:

16/11/2020