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Scope

This medicines management standard is applicable to all departments, schools and services and outlines the roles, responsibilities and arrangements for actions to be taken by managers and staff for the safe management of medication. All NAS staff have a collective responsibility to minimise medication risks.

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1 Introduction

This document sets out how medication risks are to be managed across all areas of NAS business. It is expected that managers will adopt this management standard and bring relevant sections to the attention of staff. A suite of medication guidance and procedural documents are all available on SharePoint. A list of guidance available for:

- Adult Services - Appendix A
- Children and Young People - Appendix B

Medication forms - Medication record templates are standardised and are listed in on page 2 of Appendix A and B. They are all available as separate documents on SharePoint.

2 Roles and responsibilities

2.1 Nominated Individual

- The development and continual review of medications management system in line with legislation, best practice
- Remain up to date with current UK legislation and notify key stakeholders of any changes and potential impact.
- To develop and monitor effectiveness of the quality monitoring system and make changes as appropriate
- To have oversight of medication errors and incidents where policy and procedures are not being followed and to alert the relevant stakeholders as required

2.2 Area Managers / Principals

Adult services - The Area Manager is responsible for the provision and maintenance of safe systems and environments for individuals, staff and visitors at adult services. Day-to-day medicines management arrangements are delegated to Service / Registered Managers.

Education - School principals are responsible for the provision and maintenance of safe systems and environments for pupils, staff and visitors accessing and working in schools and children's residential services. Day-to-day medicines management is the responsibility of the designated person in schools and the Registered Manager / Head of Care in Children's Services.

2.3 Service / Registered managers / Heads of Care are responsible for the following:

- Ensure that Medication competencies are included in job descriptions, personal development plans and appraisals
- Make arrangements to provide induction, refresher and specific case-by-case medication training to relevant staff, volunteers and agency workers (contractors) – refer to section 3 of this document
- Ensure that training records are documented and retained
- Empower staff to encourage individuals to understand and get involved in medication arrangements
- Ensure that staff have the time and resources to enable them to focus on medication tasks
- Ensure any instructions and advice provided by specialist advisors is acted upon (e.g. advice given by pharmacists, healthcare professionals involved in the care of a pupil/individual, Occupational Health and General Practitioners, etc.)
- Ensure that information confidentiality is maintained
- Retain medication documentation for at least 8 years after the person's care ended at the service. After 8 years, review the records. If they are no longer needed, destroy them in line

with local policies. Local arrangements may extend this retention period and managers must specify local archive and disposal arrangements

- Ensure that staff have access to competent advice at all times – promote and make available the Key Contact list at Appendix D
- Schedule resources to ensure that audits set out in section 4 of this document are completed and that any findings are acted upon
- Provide feedback to staff on their medication related practice

Registered managers will also ensure that resident individuals are registered with a local General Practitioner (GP)

Principals / Heads of Care / Registered Managers for Children’s Services will also ensure that home contact information for children and young people is up-to-date

2.4 Staff, volunteers and contractors (including agency staff) will:

- Attend medicines management training at induction and as advised by their line manager
- Know where to locate medication policies and guidelines – these can be located on SharePoint but may also be held locally. Ask your line manager where you can find these
- Notify your local manager if you have any concerns about your ability to carry out any medication related tasks or arrangements – you may need further training, information or equipment to help you
- Take responsibility for medication tasks allocated to you while you are on shift and report any concerns
- Monitor the effects of medication that they administer and report any changes
- Notify your line manager if you have any concerns about medication arrangements that might have an impact on you, the pupils and people you support, other staff, agency workers, visitors or others
- Use NAS reporting systems to report medication related events, incidents or accidents i.e. refused medication, spoiled medication (dropped, contaminated, etc.)
- Adopt a ‘see it – sort it – report it’ response. If you see something that needs attention, ask yourself if you have the competencies and equipment to sort it out – if you do have the right competencies and equipment to sort the problem then please do. If you do not think that you have the right skills or equipment then please report it to a senior person so that it can be sorted. Medication management is everyone’s business.

2.5 Medication Assessors will:

- Complete online training modules relevant to their workplace or the workplaces of the staff they will be assessing
- Attend the OPUS Medication training as per the Medication Assessor Specification at Appendix C
- Undertake refresher training every 2 years
- Carry out observations of medication practice
- Assess medication competencies of staff on an annual basis
- Notify line managers of any concerns

2.6 Health and Safety Team will:

- Manage the alerts process and notify key stakeholders of any medication related alerts
- Consider reset requests for online medication e-learning and provide a response within 5 working days

2.7 Quality Assurance Managers will:

- Carry out Quality Monitoring Visits (see section 4 - Monitoring)

- Escalate concerns and non-compliance through the line management system

2.8 Estates Management (NAS Facilities) will:

- Consider medication standards and requirements during design and refurbishment projects i.e. Refrigeration, freezing, security and other medication storage requirements
- Consult with managers and the health and safety team to ensure proposed plans will meet required standards

External specialist advisors and sources of support:

2.9 OPUS (our external specialist for medication advice and training) will:

- Provide medicines management advice and guidance
- Provide up-to-date training resources
- Provide medication specific guidelines in line with industry best practice

2.10 General Practitioners and other healthcare professionals involved in the support of individuals will:

- Provide medication advice in response to urgent situations
- Carry out medication reviews
- Provide advice and guidance about the clinical care of individuals
- Provide case-by-case training as identified in section 3.3

3 Training – including information, instruction and supervision

3.1 **Staff who carry out medication related activities:** There is a requirement to complete the relevant online training and have a competency assessment BEFORE you can carry out any medication activities. Additional information, instruction and training will be required and will depend on your job role:

3.2 **Training** – A programme of e-learning, instruction and classroom based face-to-face learning opportunities will provide staff with the competencies to follow medicines management arrangements. Online e-learning is available as listed below - staff must check with their manager to ensure they select the correct course for the service they work in:

- Residential Services
- Autism Centres
- Community / Supported Living Services
- Children's Services

Each course ensures staff will be able to:

- Use safe procedures for handling medicines and supporting people with their medicines
- Administer medicines safely and effectively
- Use and maintain medicines records
- Recognise and avoid potential problems with medicines

Please note: You will only be able to attempt the online course and assessment twice. If you have not successfully completed the learning and assessment after two attempts you will need to speak to your learning and development manager or line manager to request an additional attempt. The manager must complete a medication reset request form to be considered by the health and safety team - See form at Appendix E. The requesting manager will receive a response to a reset request within 7 calendar days.

- 3.3 **Specialist medication tasks:** Specialist training is required BEFORE staff undertake more complex medication tasks. Many specialist medication tasks are specific to the healthcare needs of the individual and you must not carry out these activities unless you have been assessed as competent to do so. Contact your learning and development manager or line manager if you require training and assessment to carry out the medication tasks in the table below:

The table indicates if training and competency assessment authorises the staff member to carry out the specified activity in general or where training is required on a case-by-case basis:

Activity	General training or case-by-case	Provider
Nasogastric Administration	Case-by-case	Healthcare professional involved in persons care
Enteral tube i.e. Administration through a Percutaneous Endoscopic Gastrostomy (PEG)	Case-by-case	Healthcare professional involved in persons care
Supporting individuals with diabetes and Insulin*	Case-by-case	Healthcare professional involved in persons care
Nebulisers	Case-by-case	Healthcare professional involved in persons care
Oxygen Management	Case-by-case	Healthcare professional involved in persons care
Rectal administration of diazepam (for epileptic seizure)	General	Accredited training provider
Buccal midazolam	General	Accredited training provider
Suppositories	General	Accredited training provider
<i>*General diabetes awareness can be achieved by general training but the Administration of insulin requires training and competence assessment by a healthcare professional</i>		

- 3.4 **Competency Assessment** - Must be carried out and documented for all staff involved in any medication tasks:
- BEFORE staff administer ANY medication and
 - On an annual basis
- 3.5 **Updated training:** Updated information, instruction and training will be provided if there are significant changes to NAS/NASAT medication processes or a change in the clinical condition of the person that requires additional input from a healthcare professional. The training delivery method will be determined by the complexity of the change, the needs of the individual and the learning style of the staff member.
- 3.6 **Refresher training:** All staff who undertake medication tasks must complete medication training every two years.
- More frequent training and/or competency assessments may be recommended at the discretion of the line manager for any staff member involved in a medication error. If this results in more than 2 attempts in two years the manager will need to complete a 'Medication Reset Request' – See appendix E.
- 3.7 **Documentation / medication records instruction and training:** Medication records are paper based and /or electronic. You will receive local site-based information, instruction and training to enable you to accurately complete any necessary medication records.
- 3.8 **Information** – The amount of medication related information is vast and it is essential that you can find information when you need it. This management standard, together with appendices and

associated guidance, can be found on SharePoint. Managers can print off local information if access to SharePoint is limited.

- 3.9 **Instruction** – Staff may receive instruction on how to follow the arrangements from a competent person or healthcare professional involved in the care of the person. It is important that staff ask the ‘instructor’ to explain further if they are not clear on how or why they need to follow the processes being explained.
- 3.10 **Supervision** - Supervision is required to be carried out by line managers to ensure that systems and arrangements are being followed. Supervision includes the following:
- Line managers will conduct walkabout supervisions to observe the practice of their staff. Walkabouts can include direct observations of practice or assessment of documentation
 - Line managers may conduct 1:1 observations of practice and this provides an opportunity for staff to discuss medication arrangements
 - Line managers and staff will actively participate in supervision, appraisal and reflective practice opportunities and discuss any development needs

4 Monitoring and audits

- 4.1 Active and reactive monitoring will take place to ensure that staff are following the safe arrangements as follows:
- 4.2 **Active Monitoring:**
- Supervision – see section above
 - Walkabout observations of practice – see section above
 - Local audit of systems and arrangements as set out in the following table:

Frequency	Audit	Additional Information
6-monthly	Quality Monitoring Visit (QMV) Managers Audit	Carried out by Quality Assurance Managers - See QMV template on SharePoint
Monthly	Managers audit	Self-audit by managers
Weekly	Gap monitoring of MAR	
Termly	Educational / residential Quality Framework Visits	

- 4.3 **Reactive Monitoring** will include:
- Investigation of medication errors and near-miss events
N.B. All medication errors need to be reported via the Notifications Safeguarding Medication Errors inbox at Notifications.Safeguarding.MedicationErrors@nas.org.uk
 - Audit of arrangements linked to any significant event i.e. missing medication
 - Investigation of any observations of poor practice notified by external auditors and enforcement authorities

Investigation and audit findings to be summarised and notified to the Service / Registered Manager / Head of Care / Principal.

5 Review of this policy

This policy will be reviewed every three years or sooner in line with changes to legislation, regulations and good practice standards and to reflect any significant changes in local arrangements or practice.

NAS – Adult Services - Index – Appendix A

Guidance documents summarised in the table below are available on SharePoint and are found in the Medicines Procedures – Adult Services document. The guidance was created by OPUS to coincide with training modules and application of training in practice. Managers are advised to contact their Area Manager if they require additional support or if guidance does not meet the needs of their service.

Action: Identify which guidance relates to the services you provide and act to ensure that systems and arrangements are in place to comply with the required standards.

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Action: Identify which guidance relates to the services you provide and act to ensure that systems and arrangements are in place to comply with the required standards.

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Appendix C

Medication Assessor Specification and Training

NAS employees who assess the competency of those who have been trained to administer medication must first complete:

- Opus Medication Training specific to their workplace, via the NAS eLearning Zone; and
- Opus Competency Assessor half day Workshop

When selecting individuals to carry out this role, Managers should use the following person specification as a guide in order to select suitable people: The person selected to carry out this role must:

- Be able to work across different shift patterns in order to observe all staff who are trained to administer medication;
- Be employed in a role that allows them to be released from usual duties in order to carry out the assessments;
- Be able and willing to travel between NAS sites to ensure that all locations have access to a competent assessor;
- Have a sound understanding of the steps to take when administering medication in an NAS workplace;
- Be aware of the best practice relevant to the different work settings;
- Be willing and able to ensure their knowledge remains up to date;
- Be able to lead by example;
- Ideally have experience of assessing competence in medication administration, or as a minimum have some relevant prior understanding of assessing skills in others;
- Have the organisation and administrative skills necessary to ensure competency assessments are documented and the results recorded and all relevant managers and sites have the correct information.

Meds Assessor training: Designed for managers, senior staff and those involved in assessing the competencies of care staff in medication handling in all care environments including care homes, domiciliary care organisations, day services, extra care housing schemes, supported living, schools and children’s services.

Course Duration Three hours

Target Group Staff identified as Medication Competency Assessors

This half day interactive workshop covers how to develop a competency assessment tool, how to use the guidelines for completion of a competency assessment, error reporting, monitoring of significant events and near-misses and all your questions answered on medication matters, procedures and guidelines:

Content includes:	Learning outcomes:
<ul style="list-style-type: none"> • Review of Competency Assessment • Guidance for completing a Competency Assessment • Case Studies and scenarios specific to care environment • Coaching Principles • Error and Incident Management • Action Planning 	<ul style="list-style-type: none"> • To review a competency assessment • To have an awareness of basic coaching principles • To understand how to complete an assessment of competence • To work through case studies • To understand the process of incident management

Medication Management - Key Contacts

Medication Management – Key Contacts

It is essential that staff can access advice and support in a timely manner. Please ensure that all sections below are completed to reflect local arrangements:

Your Address: (Fill in your site address here just in case it is needed to quote to specialist services)

Site Telephone Number			
Site Contacts (role):		Name	Contact Telephone Number
Principal / Manager			
Daytime hours contact			
Night shift contact			
NAS Contacts:			
Service lead			
Quality Assurance Manager (area)			
Health and Safety Team		National Lead for Health and Safety Health and Safety Manager	07780 671 253 07435 975 268
Others:			
Specialist Advisors:	Name (if known)	Address (including postcode)	Contact details
General Practitioner (GP)			
Pharmacy			
Urgent Care Centre			
Hospital			
A&E department			
OPUS – NAS specialist advisor for medicines management		Quatro House Lyon Way Camberley Surrey GU16 7ER	Telephone: 0333 939 0053 Email: info@opuspharmserve.com Website: https://opuspharmserve.com/enquiries/

Medication online e-learning Reset Request

Please fill in the following:

Person needing reset	
Location	
Manager's name	
Person requesting reset - name	
Person requesting reset – job title	
Person requesting reset - phone	
Which medication course – Please specify the course... Residential Day services Domiciliary care Supported living Children's services	
Reason for failure	

Health & Safety use only

Reset authorised (Y/N)	
Authorised by	
Date	
On spreadsheet	
Notes	

Return the completed form to healthandsafety@nas.org.uk