

Medication Management Procedure

Cerebral Palsy Support Network Inc (CPSN) works in partnership with our members to share knowledge, create connections and provide support.

CPSN is committed to rights-based, person-centred, high-quality, effective, and safe services and supports.

CPSN is committed to supporting clients with medication administration, where necessary, and to maximising client choice, control and safety.

Record of procedure development		
Version	Date approved	Date for review
Version 4	April 2026	April 2028

Responsibilities and delegations	
This procedure applies to:	Clients who require medication administration and support All employees, volunteers, and contractors CEO
Procedure approval:	CEO
Review of Procedure Compliance	General Manager Service Delivery
Specific responsibilities:	CEO General Manager, Service Delivery Human Resources Manager Service Delivery Manager(s) Clinical Team Client Liaison Coordinators Employees with supervisory responsibilities Support Workers Clients requiring medication administration and support and where appropriate, their decision-makers

Policy statement

This procedure describes **how** CPSN implements its Medication Management Policy. The policy describes CPSN's intention and standard in relation to medication management to effectively and safely support clients who require medication administration and support.

CPSN will ensure that staff administer or supervise medication safely and correctly according to the NDIS Practice Standards and Quality Indicators and associated NDIS Practice Standards: Skills Descriptors.

CPSN is committed to safe and effective, storage, transportation, and administration of medication for clients that is consistent with legislation, regulation and best practice.

CPSN will ensure that staff administer or supervise medication safely and correctly according to the NDIS Practice Standards and Quality Indicators and associated NDIS Practice Standards: Skills Descriptors.

CPSN will:

- support clients to maximise control and independence in managing their own medicines in a safe and effective way
- regularly review all medications prescribed for each client in consultation with the client, and where appropriate, their decision maker
- seek written consent from the client, or where appropriate, their decision maker using CPSN's Client Medication Authorisation Form for any assistance that will be provided by a Support Worker in medication administration
- ensure that the Client Medication Authorisation Form identifies how risks, incidents, and emergencies will be managed, including required actions and escalation" to ensure safe medication practices and wellbeing
- provide appropriately qualified, trained, confident, skilled, assessed, committed, and supported staff to deliver supports which enable the client to maximise their independence and over which they exercise control. This includes the provision of complex health support where it is included within a Clients NDIS Plan, or where no such Plan is appropriate, the CPSN Service Agreement
- collect and record accurate information about the client's medication administration on CPSN's Medication Log
- store and transport medicines in keeping with the manufacturer's requirements and the Client Medication Authorisation Form
- only administer those medicines retained in the original manufacturers or other dispensed packaging unless a dose administration aid (DAA) (e.g. Dosette or webster pack) is in use
- with consent, ensure the health status of the individual along with prescription medication and use of non-prescription medication is reviewed regularly and in a timely fashion by an appropriately qualified Health Practitioner who is identified in the Client Support Plan
- audit Client Medication Authorisation Forms and Medication Logs and compliance with administration and storage plans regularly
- require staff to undertake training in relation to medication management which is provided by the CPSN's online education platform and competence assessed. Where additional training is required secondary to complex medication management additional training will be provided
- for subcutaneous or intra-muscular injection by way of pens or pumps to administer a pre-dosed medication further training will be provided. Employees cannot administer injectable medication where calculating and measuring the dose is required
- implement a process to ensure that all workers who assist in medication administration have knowledge and training of client specific medication risk and requirements
- where CPSN directly provides training, it will ensure appropriate qualifications of any person engaged for the purpose of worker training, and keeping records in relation to the training, presenter and attendees
- include in its risk management and incident management procedures and frameworks, an analysis of the types of risks, and incidents that relate to medication administration
- take actions to prevent, mitigate and address those risks
- ensure regular reviews of this policy and its associated procedure.

SUPPORTED INDEPENDENT LIVING (SIL)

In addition to all points above the following will also apply in a SIL environment

- in the Supported Independent Living environment medications will be stored in locked containers/cabinets and any high-risk medications will be stored separately in a locked container

- in the Supported Independent Living environment medication administration, compliance and documentation will be monitored and documentation regularly audited by the SIL Team Leader, service coordinator/manager and/or Clinical Team as applicable.

EQUIPMENT AND RESOURCES REQUIRED

Client Medication Authorisation Form

Client Medication Log

Client Medication Log (PRN)

SIL Medication Log

Medication Blister pack (this is CPSN's preference but is not mandatory) or dossett box or original packaging)

Medication related equipment (e.g., Pill cutter, measuring spoon or cup, peg equipment etc)

INTRODUCTION TO PERSON CENTRED MEDICATION

The 8 Rights (8Rs) of medication administration are the key principles that are required to be followed in all medication administration practices. These are

- 1 Right person
- 2 Right medication
- 3 Right time
- 4 Right dose
- 5 Right route
- 6 Right documentation
- 7 Right reason
- 8 Right response.

Clients may require one of the following levels of support:

- self-administration – no supervision or support is required
- prompting – reminding the person to take their medicine
- staff administered – staff administer medication.

Routes of administration are the different ways that a medication can be introduced to the body. This may be:

- oral – taken by mouth, e.g., tablets, capsules, syrups and suspensions
- enteral Feed- medication is administered via enteral feeding device. Further training required.
- sub-lingual – absorbed through the mucous of the mouth
- inhalant – inhaled into the body via the nose or mouth
- inserted – either rectal or vaginal. Further training required
- injectable – by needle and syringe, subcutaneous or intra- Muscular by way of pens or pumps to administer a pre-dosed medication. Further training required. Employees are not able to administer injectable medication where calculating and measuring the dose is required
- instilled – eye or ear drops. Further training required
- topical/external – applied to the body, e.g., creams or lotions.

Medications should only be crushed where a Client Medication Authorisation Form has been written and signed by the client's Doctor or the Clinical Coordinator or where appropriate, the client's decision maker.

Do not ever give medications to a client:

- who appears to be unconscious, is vomiting, having a seizure (unless it is medication for a seizure given in accordance with the seizure management plan), or unable to swallow (oral medications) for any reason. In this instance refer to the Client's Medication Authorisation Form for instructions as to how to proceed
- does not have a completed Client Medication Authorisation Form.

Support Workers cannot administer:

- injections other than those that use pens or pumps to administer a pre dosed medication
- If they have not completed the required medication training.

Complex medications - are higher risk medications that have an increased risk of causing significant client harm if they are misused or used in error. For CPSN these include injectable medication, PRN medication as well as antimicrobials (e.g., gentamicin, vancomycin), potassium and other electrolytes (e.g., injections of concentrated electrolytes), insulin (all insulins), narcotics (opioids and other sedatives e.g., oxycodone, fentanyl, diazepam, midazolam), chemotherapeutic agent (e.g., methotrexate, oral chemotherapy), and heparin and other anticoagulants (e.g., heparin, warfarin, rivaroxaban) and medications that increase dysphagia or swallowing problems.

****Important information**

Under Restrictive Practice Chemical restraint is listed. Chemical restraint is the use of medication or chemical substance for the primary purpose of influencing a person's behaviour. It does not include the use of medication prescribed by a medical practitioner for the treatment of, or to enable treatment of, a diagnosed mental disorder, a physical illness or a physical condition. If you are concerned about the use of such medications being administered as a restrictive practice, please contact CPSN's Clinical Coordinator or your line manager

PROCEDURE

Purpose of this Procedure

This procedure guides the administration of medications by informing all support workers and registered nurses **how** to carry out this task. It promotes consistency, good practice, and provides an accountability tool against which people's actions and compliance with the Procedure can be measured.

The Medication Management Policy outlines the roles and responsibilities for implementation of the policy. These roles and responsibilities are embedded within this Procedure.

Procedure

Role of the Support Worker in medication administration

A Support Worker may be asked to manage or administer a client's medication. When supporting clients with their medication, there are actions which you are reasonably expected to undertake and procedures that you are expected to follow to fulfil your duty of care to ensure that your clients' needs are met, and that their wellbeing is maintained while ensuring choice and control.

1. Prior to administration of medication the Support Worker will check the Client Medication Authorisation Form is valid and that the medication is recorded on the Client Medication Authorisation Form. The Support Worker should check that the Client Medication Authorisation Form has not changed on each shift.
2. The Support Worker will check that they are aware of the reason client is taking this medication as per the Client Medication Authorisation Form, how the medication is to be administered, the possible side effects and how to respond to these and how and where the medication administration is to be documented (Medication Log).
3. Prior to administration the Support Worker will ensure that the administration route does not involve injection where calculating and measuring the dose is required or is medication that's additional training (e.g., complex medication).
4. Prior to administration ensure hand hygiene is completed and any necessary Personal Protective Equipment (PPE) is donned.
5. Once the Support Worker is confident the previous steps have been completed, medications can be prepared. Locate the webster pack, dosette box or original packaging and prepare the medication in the designated clean environment.
6. The Support Worker must check that the right medications are present in the webster pack/dosette box including the right number of tablets, this should be cross referenced with the Client Medication Authorisation Form.
7. Check the 8Rs of medication administration have been met prior to giving any person any medication-
 - 1 Right person
 - 2 Right medication
 - 3 Right time
 - 4 Right dose

- 5 Right route
- 6 Right documentation
- 7 Right reason
- 8 Right response

8. Once the 8Rs have been checked the Support Worker can proceed to administer/support the client to take their medications. This needs to consider client preference and uphold dignity and respect at all times.
9. Once the medications have been given the Support Worker will check that the medication has been swallowed, check the 8 Rs of medication administration again, check the client for side effects, observe and report any change in the client's presentation (including cognitive state or physical health) and take action as per the Client Medication Authorisation Form.
10. All medications that have been administered must be recorded in the client's Medication Log and/ or progress note. Documentation that is required includes: Date, Time, Amount/Dose, Route, any adverse reactions or side effects observed, the Support Workers signature and full name.
11. If medication is refused this must be recorded in the Medication Log and the appropriate actions taken according to the client's individual Client Medication Authorisation Form. Refused medication is also classified as an incident and must be reported using the CPSN incident reporting process.
12. If any medications are missed or missing, this should be immediately recorded in the Medication Log and the appropriate actions taken according to the client's individual Client Medication Authorisation Form. Missed or missing medication is also classified as an incident and must be reported using the CPSN incident reporting process.
13. Any other medication errors are classified as an incident and must be reported using the CPSN incident reporting process.

Medication errors or missing medications

Support workers must follow instructions available and relevant to the client they are supporting as detailed on the client's Medication Authorisation Form and/or support plan. Items 11-13 above give further information about what support workers need to report if medication is refused, missed or there is another error.

Support workers must call their line manager immediately where a medication incident occurs and if in doubt can also contact Nurse On Call on 1300 60 60 24 for advice.

Use of PRN Medications

PRN or 'as needed' medications must be recorded on the Client Medication Authorisation Form. This must clearly indicate the scenarios in which this medication can be given, the dose, the route, the frequency and the daily maximum.

The decision to administer PRN medications should be made by the client, or where appropriate, their decision maker in consultation with the Support Worker and/or where required the prescribing practitioner, clinical coordinator, or appropriately qualified health professional.

Administration of PRN Medication must be documented on the PRN Medication Log.

Use of non-prescription, short-term/temporary, medications

Where the client or their representative identifies a short-term need to use non-prescription medication (i.e. cough medicine), the client or their representative should consult with the GP or an appropriately qualified health professional (including but not limited to a Pharmacist or Registered Nurse) managing health care.

Due to the nature of non-prescription medications having a possible impact on previously prescribed medications and/or the potential for overdosing (i.e. paracetamol in some cold medicines), CPSN staff cannot administer medications that are not authorised by the GP or an appropriately qualified health professional and included on the Medication Authorisation Form.

Storage of Medications

A Medication Blister pack is recommended for all clients where they choose this. Where a Blister pack is not suitable, the medication storage and administration procedure will be reviewed by the Clinical Coordinator or an appropriately qualified person, which may include the client's GP or pharmacist. The appropriately qualified person will work with the client, or where appropriate, their decision maker along with regular support workers to ensure medication administration and storage complies with safety requirements.

In the SIL environment medication will be kept in a locked storage container. Each client is to have their own locked container that is clearly labelled. Complex medications are to be stored separately in a locked, clearly labelled container. Where medication needs refrigeration, it is to be placed in an appropriate locked, clearly labelled container in the refrigerator.

TRAINING PLAN

All Support Workers must complete the online Medication Management module training during onboarding and as general refresher training periodically, at least every 2 years.

Clients, or where appropriate, their decision maker need to provide their Support Workers with on-the-job training in consultation with their CLC and/or Clinical Coordinator as outlined/directed by the Client's Support Plan, including supporting them to become familiar with safe administration of medication. Employees should never administer a medication that they have not been shown how to administer safely, or do not feel confident to administer correctly.

All complex medication administration will require competency assessment completion with the Clinical Coordinator. Complex medication administration or any associated practices should not be performed until this is completed.

Prerequisites

This procedure should be read in conjunction with the Medication Management Policy along with the Complex Health Support Policy.

FORMS THAT APPLY TO THIS PROCEDURE

Client Medication Authorisation Form
Medication Log

Document Revision History

This document is only valid on the day it was printed.

Who	Version	Date	Description of Review
GMSD	1, 2		
GMSD	3	April 2024	
GMSD	4	April 2026	Updates to general titles and naming conventions Updated instruction for providing medication during a seizure (by exception) Added procedure for non-prescription, temporary medications, making clear that staff cannot administer any medication that is not authorised by the GP. Updated information about appropriately qualified persons for storage of medication decisions – adding client GP or pharmacist
GMSD	4.1	July 2026	Updates to non-prescription / short-term medication to specify that an appropriate health professional (i.e. Pharmacist or Registered Nurse) can authorise these medications.